

# Augusta University

## Policy Library

### Family Medical Leave Act

Policy Owner: University HR Services

#### POLICY STATEMENT

In accordance with the Federal Family and Medical Leave Act (FMLA), as amended, an eligible employee may be entitled to up to 12 work weeks of leave during any 12-month period for one or more of the following reasons:

1. The birth and care of a newborn child of the employee;
2. The legal placement of a child with the employee for adoption or foster care;
3. The care of an immediate family member (defined as the employee's spouse, child, or parent) with a serious health condition;
4. A serious health condition of the employee himself/herself, which renders the employee unable to perform the duties of his/her job;
5. Any "qualifying exigency" arising out of a service member's current tour of active duty or because the service member is notified of an impending call to duty in support of a contingency operation; or
6. An employee that is a spouse, daughter, son, parent or nearest blood relative caring for a recovering service member may utilize up to 26 weeks to care for the service member provided the injury occurred while on active duty and renders the service member unable to perform the duties of their office, grade, rank or rating. This is an additional 14 weeks above the 12 weeks granted for all other qualifying events.

To be eligible for FMLA leave, the employee must have worked for Augusta University for at least 12 months total; and for at least 1,250 hours during the 12-month period immediately preceding the commencement of such leave.

The purpose of this policy is to ensure that the policy governing the granting and use of leave under the FMLA at Augusta University is consistent with the policies and procedures of the Board of Regents of the University System of Georgia, and applicable federal and state laws.

#### AFFECTED STAKEHOLDERS

Indicate all entities and persons within the Enterprise that are affected by this policy:

- |   |   |  |   |  |
|---|---|--|---|--|
| <input type="checkbox"/> Alumni           | <input checked="" type="checkbox"/> Faculty     | <input type="checkbox"/> Graduate Students   | <input type="checkbox"/> Health Professional Students |  |
| <input checked="" type="checkbox"/> Staff | <input type="checkbox"/> Undergraduate Students | <input type="checkbox"/> Vendors/Contractors | <input type="checkbox"/> Visitors                     |  |
| <input type="checkbox"/> Other:           |   |  |   |  |

#### DEFINITIONS

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**Office of Compliance and Enterprise Risk Management Use Only**

**Policy No.:** 641

**Policy Sponsor:** Type the title of the Executive Leader of the department.

**Originally Issued:** Not Set

**Last Revision:** 09/09/2016

**Last Review:** 06/13/2017

**Serious Health Condition.** A “serious health condition” under the law is a physical or mental illness or injury that requires either:

- Inpatient care, or
- Continuing treatment by a healthcare provider

**Qualifying Exigency.** A military member learning of a call of duty with seven or less days prior to deployment; to arrange for childcare or school attendance; attend childcare or school meetings; provide childcare on an urgent basis; update or make financial or legal arrangements; serve as the military member’s representative in arranging or appealing military service benefits; attend counseling for oneself, military member’s child or the military member. Any other events which the employer and employee agree are arising out of the military member’s call to duty qualify as an exigency. The employer and employee will agree as to the timing and duration of the leave.

**Impending Call to Duty.** An “impending call to duty” for the purpose of this policy refers to a military member that has been called to duty and the time for reporting to duty is approaching in a short span of time.

**Contingency Operation.** A military operation that is designated by the Secretary of Defense as an operation in which members of the armed forces are or may become involved in military actions, operations, or hostilities against an enemy of the United States or against an opposing military force.

**Rolling Year.** In accordance with the University System of Georgia FMLA policy, Augusta University uses a “rolling” 12-month period (rather than a fixed calendar, fiscal, or academic year) to determine eligibility for, and availability of, leave time under FMLA.

## **PROCESS & PROCEDURES**

**Advance Notice & Documentation of Need for Leave.** To be entitled to leave, employees must give at least 30 days’ advance notice, or as much notice as possible and practicable. To request leave, employees are expected to complete and submit to their supervisor the “Family & Medical Leave Request” form. The Supervisor will complete the form and forward to Human Resources. Documentation of the need for leave may be required by the institution by having the healthcare provider complete the “FMLA Certification of Health Care Provider.” provided in the University System of Georgia’s “Procedures Regarding Family & Medical Leave under FMLA.”

GRU has the right to designate as FMLA leave any time off that qualifies as such, even if the time is not specifically requested as FMLA leave by the eligible employee. GRU should review employee absences of 3 days or more to determine whether FMLA time should be designated.

**Unpaid Leave.** FMLA leave is unpaid (employers are not required to grant such leave as paid time off). However, employees may elect to utilize — or GRU may require that employees utilize — their accrued paid sick leave and/or annual leave, as appropriate, for such absences.

**Continuous & Intermittent Leave.** Leave for one’s own serious health condition, or for the care of a family member with a serious health condition, may be taken on a continuous basis — or on an intermittent basis in increments as small as one hour — if medically indicated. GRU has the discretion to determine whether to allow intermittent leaves for birth, adoption, or foster placement — or whether such leaves must be continuous.

**Benefits Continuation During Leave.** Whether utilizing paid or unpaid time, employees may continue their insurance benefits during FMLA leave by paying their portion of the premium.

**Job Reinstatement.** An employee generally has a right to return to the same position, or an equivalent position in terms of pay, benefits, and working conditions following a period of family and medical leave. Certain “key employees” may be denied job restoration if they are among the highest-paid 10% of employees and if such denial is necessary to prevent substantial and grievous economic injury to the operations of the employer.

**Returning To Work After FMLA Leave.** Employees may be required to present a fitness-for-duty clearance from their healthcare provider before being reinstated to active duty upon completion of FMLA leave for their own serious health condition. The “FMLA Return to Work Medical Evaluation” form is available for this purpose.

Employees are expected to return to work by the end of the approved FMLA leave. If the employee does not return — and if failure to return is not due to a continued or new documented qualifying serious health condition — the employee may be required to reimburse the institution for the employer portion of the health coverage premiums that it paid on the employee’s behalf during the leave.

**If An Employee Is Unable To Return To Work.** If an employee is not able to return to work by the end of the approved FMLA leave, he or she still may be eligible to request additional personal leave under other University System of Georgia policies. The granting of such additional leave is at the discretion of the institution. In no case may all leave combined exceed 12 months unless the qualifying event is to care for an injured military service member, provided the injury was obtained while the service member was on active duty. If an employee does not return and is not granted additional leave, employment ends on the last day of the approved FMLA leave.

## REFERENCES & SUPPORTING DOCUMENTS

All forms below can be found on the website at: [FMLA Forms](#)

- FMLA Leave Request – This is the form that the employee requesting the Family Medical Leave is expected to complete and submit to their supervisor.
- FMLA Certification of Health Care Provider – This form is to be presented to the physician treating the employee or qualifying family member for completion and then submitted to Human Resources.
- FMLA Return to Work Medical Evaluation- This form is to be presented to the treating physician for certification that the employee may return to work.

**RELATED POLICIES**

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**APPROVED BY:**

President, Augusta University and CEO, AU Health System    Date: 06/13/2017