

UNIVERSITY OF WASHINGTON, BOTHELL POLICIES AND PROCEDURES MANUAL

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Family and Medical Leave

19.3

REV 03-07

Human Resources

352.3637

Benefits

OVERVIEW

The federal Family and Medical Leave Act (FMLA) entitles eligible staff members to take up to 12 weeks per calendar year of job protected leave from work because of their own serious health condition, their child's or spouse's serious health condition, or to care for a newborn or newly adopted or placed child. This leave is unpaid unless there is accrued leave or compensatory time that the staff member is eligible to use.

This information pertains to leaves for staff members. For faculty medical leaves, please visit the Academic Human Resources web site at:

www.washington.edu/admin/acadpers/procedures/leaves/leaves_med_fam.html

POLICY

Reasons to Use FMLA

FMLA covered leave may be used for the following reasons:

- When becoming a parent;
- Because of a personal serious health condition; or,
- To care for a family member who has a serious health condition; or,
- To care for the staff member's child who has a health condition requiring treatment or supervision.

Eligibility

Staff are eligible for FMLA covered leave if they:

- Have worked for the State of Washington for a total of 12 months;
- Have worked for at least 1250 hours (average of 24 hours per week) during the 12 months prior to the effective date of the leave.

Benefits During FMLA Leave

While on approved FMLA leave (up to 12 weeks per 12 month period when eligible), medical benefits are the same as during active employment, but staff members are still responsible for their portion of premiums.

PROCEDURES

Staff Member's Responsibilities

Time off should be requested at least 30 days in advance of the date of the start of the leave, or when not possible due to emergencies, should be as soon as the staff member is aware of the need for time off. Follow the regular departmental procedures for requesting time off, or discuss with the supervisor. At a minimum, a staff member who is requesting leave because of a personal health condition, a family member's serious health condition, or to care for a child with a health condition that requires treatment or supervision should specify the reason for the leave request and, if to care for a family member with a health condition, the relationship of the family member.

Medical information is confidential and staff are not required to disclose the nature of their own or a family member's medical condition to their supervisor. Under FMLA the UW may obtain health care provider certification of the need for leave. Once UWB Human Resources is notified of a staff member's need for leave (either by the staff member or supervisor), a letter will be sent to the staff member addressing eligibility and requesting certification when required.

Requests for leave because of a personal health condition may also involve issues related to disability leave, disability accommodation, and shared leave. Staff may wish to discuss their situation with UWB Human Resources at 425 352-3637 or with a Human Resources Consultant at (206) 543-2354.

Supervisor's Responsibilities

Please notify UWB Human Resources 425 352-3637 as soon as you have been made aware of a staff member's need for leave. You must also notify UWB Human Resources when a staff member has been absent from work due to an illness for more than three consecutive complete work shifts. This is so the staff member can be informed of his/her rights under FMLA. UWB Human Resources will follow up with a letter to the staff member addressing eligibility and the need (when necessary) for health care provider certification.

UWB departments may have their own leave request and approval process and forms. If that is the case, staff should follow the normal leave request procedures. If there is not a designated leave request procedure the supervisor may wish to consider asking the staff member to use the "Request for Leave of Absence or Modified Work Schedule" form. This form allows for an explanation of the reason for the leave request without revealing confidential medical information and allows for specification of the types and amounts of leave use being requested.

Medical information is confidential and staff are not required to disclose the nature of their own or a family member's medical condition to their supervisor. The UW may obtain health care provider certification of the need for leave. The

FMLA letter will give the staff member the option of submitting completed forms to UWB Human Resources or to a Human Resources Consultant on the Seattle campus. The staff member can not be required to submit the health care provider certification forms to the supervisor.

FORMS

Request for Leave of Absence or Modified Work Schedule form:

http://www.washington.edu/admin/hr/forms/leave/leavereq/med_seriouslth.doc

The “Family and Medical Leave Certification of Health Care Provider” form is available at: www.washington.edu/admin/hr/polproc/leave/fmla.html

ADDITIONAL INFORMATION

Additional information on FMLA is available at:

www.washington.edu/admin/hr/polproc/leave/fmla.html

Questions related to benefits during FMLA leave should be directed to the UW Benefits Office: (206) 543-2800 or send an email request to benefits@u.washington.edu.