

POLICY AND PROCEDURE	
SUBJECT/TITLE:	Appendix A.15 Family and Medical Leave Act Administration
SCOPE:	This policy will apply to all employees of Columbus Public Health
CONTACT PERSON & DIVISION:	Kevin Williams, Human Resources Officer
ORIGINAL DATE ADOPTED:	5/28/2015
LATEST EFFECTIVE DATE:	12/24/2018
REVIEW/REVISION DATE(S):	5/28/2015, XX/XX/2018
REVIEW FREQUENCY:	Every 5 years
TOTAL # OF PAGES:	3
BOH APPROVAL DATE:	N/A
REFERENCE NUMBER:	N/A

PURPOSE

The intent of this document is to provide consistent application of Family and Medical Leave Act (FMLA) entitlements and benefits.

POLICY

The Family and Medical Leave Act requires employers to provide notice to employees of their rights and responsibilities under the FMLA. Columbus Public Health uses the Department of Labor, Wage and Hours Division (WHD), Publication 1420 to accomplish this notice (attached by link and as Appendix A). Columbus Public Health will implement the FMLA in accordance with the FMLA and Department of Labor FMLA regulations which may be revised from time to time. Columbus Public Health specifically reserves all its rights to rely upon and apply the FMLA and the Department of Labor FMLA regulations in its administration of FMLA leave regardless of the fact that the statute and regulations are not duplicated in this article.

BACKGROUND

The Family and Medical Leave Act (FMLA) of 1993 and the National Defense Authorization Act for Fiscal Year 2010 (2010 NDAA) that amends the FMLA, entitles eligible employees to take up to 12 workweeks of unpaid, job-protected leave in a 12-month period for specified family and medical reasons, or for any “qualifying exigency” arising out of the fact that a covered military member is on active duty, or has been notified of an impending call or order to active duty, in support of a contingency operation. The FMLA also allows eligible employees to take up to 26 workweeks of job-protected leave in a “single 12-month period” to care for a covered servicemember with a serious injury or illness.

GLOSSARY OF TERMS

NA

PROCEDURES

I. Employee Rights and Responsibilities under the Family and Medical Leave Act

Columbus Public Health provides as an addendum and incorporates [WHD Publication 1420](#), as amended, as if rewritten within.

II. Requirements and Determinations

A. Calculation of the Twelve-Month Period

Columbus Public Health calculates the twelve-month period under FMLA using a “rolling” twelve (12) month period measured backward from the date of any FMLA usage.

B. Use of FMLA Following the Birth or Placement of a Healthy Child

1. Employees taking FMLA leave after the birth of a healthy child or after the placement of a healthy child for adoption or foster care are required to take FMLA leave as a continuous block only (not intermittent leave) unless otherwise approved by the Health Commissioner, or designee.
2. Leave for birth and care, or placement for adoption or foster care, must conclude within 12 months of the birth or placement.

C. Employee Requirements

1. Employees, with his/her own serious health condition or the serious health condition of a family member, are required to provide notice to the employer as described in WHD Publication 1420 and, additionally, provide medical certification as permitted by the FMLA and the regulations pertaining to FMLA. (Use Forms WH-380-E or WH-380-F for medical certification purposes.)
 - a. An employee’s failure to provide a timely medical certification may result in the delay or denial of leave.
2. At the discretion of Columbus Public Health, employees may be required to provide written documentation of a family relationship when applicable.
3. Employees taking FMLA leave for their own serious health condition are required to provide a medical certification of their fitness to report back to work prior to returning to work.
 - a. Columbus Public Health may delay an employee’s return to work until the certification is provided.
4. Employees are required to follow all applicable customary notice and procedural requirements for requesting other types of leave.
5. Employees taking FMLA are required to report periodically on his/her status and intent to return to work.
6. An employee is required to continue making his/her monthly insurance benefits contributions for the period of time he/she is on family and medical leave.

D. Miscellaneous Provisions

1. An employee is not permitted to work for another employer or be self-employed while on FMLA leave from Columbus Public Health.
2. Leaves granted under any other provision, policy, or collective bargaining contract, or by State law, whether paid or unpaid, including vacation leave, sick leave, disability leave, injury leave, or leave without pay for purposes that are covered under the FMLA, shall be charged as FMLA leave and shall be subject to the twelve (12) week per year limitation for the length of FMLA leave.
 - a. Employees are required to substitute accrued paid leave for FMLA unpaid leave in the following order: sick leave, disability leave if applicable, and vacation.
 - b. In addition, after an employee has exhausted all sick leave and vacation, an employee may request to use compensatory time for any FMLA-qualifying reason.
3. Except for insurance benefits, an employee shall not accrue seniority and shall not accrue any employment benefits for the period during absence on unpaid FMLA leave.
4. Spouses employed by the same employer are limited in the amount of family leave they may take for the birth and care of a newborn child, placement of a child for adoption or foster care, or to care for a parent who has a serious health condition to a combined total of 12 workweeks (or 26 workweeks if leave to care for a covered servicemember with a serious injury or illness is also used).

CITATIONS

N/A

CONTRIBUTORS

The following staff contributed to the authorship of this document:

1. Kevin Williams, Human Resources Officer, Primary Author
2. Jim Reynolds, Labor Relations Specialist, City of Columbus Human Resources Department
3. Wendy Kane, Assistant City Attorney, City of Columbus City Attorney's Office

APPENDICES

[Appendix A: Department of Labor, Wage and Hour Division, Publication 1420.](#)

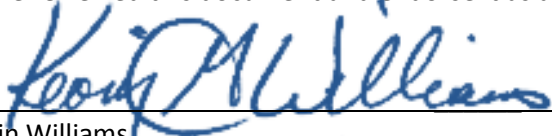
REFERENCE FORMS

[WH-380-E – Certification of Health Care Provider for Employee's Serious Health Condition](#)

[WH-380-F – Certification of Health Care Provider for Family Member's Serious Health Condition](#)


SIGNATURES

I have reviewed this document and endorse it as an official CPH Policy and Procedure:



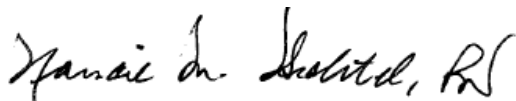
Kevin Williams
Human Resources Officer

11 / 30 / 2018
Date



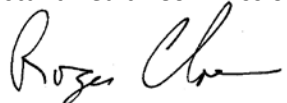
Mysheika Williams Roberts, MD, MPH
Health Commissioner

12 / 10 / 2018
Date



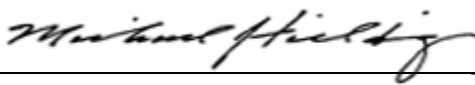
Nancie Bechtel, MPH, BSN, RN
Assistant Health Commissioner/Chief Nursing Officer

12 / 6 / 2018
Date



Roger Cloern
Assistant Health Commissioner/Chief Operations Officer

12 / 6 / 2018
Date



Mike Fielding RS, MS
Assistant Health Commissioner/External Affairs

12 / 6 / 2018
Date