

	INTEROFFICE PROCEDURE	INTEROFFICE PROCEDURE APPLICATION: Non-Union Employees		
TITLE: Family Medical Leave	EFFECTIVE DATE 12/05/2017	SUPERCEDE	POLICY NUMBER IO-62	

DIRECTIVE

In accordance with the Family Medical Leave (FML) policy (HR-17), eligible employees are entitled to take up to 12 workweeks (or up to 26 workweeks of military caregiver leave to care for a covered service member with a serious injury or illness) of unpaid job-protected leave during any 12 month period for an FMLA qualifying event. Below are the procedures for requesting and using FML.

EMPLOYEE REQUEST/NOTICE REQUIREMENTS

- A. When the need for FML is foreseeable, an employee shall provide Human Resources with a verbal/written notice at least thirty (30) calendar days prior to the need for leave.
- B. If the need for FML is unforeseeable, then an employee must provide a verbal/written notice as soon as they become aware of the need for FML.

ELIGIBILITY NOTICE

- A. Within five (5) business days following the employee's request for FML, Human Resources will notify the employee in writing of their eligibility for FML using the *Notice of Eligibility and Rights & Responsibilities* (WH-381) form.

CERTIFICATION

- A. If the employee is eligible for FML, Human Resources will provide the employee with a certification form that must be completed by the employee and their attending physician or health care provider and returned to Human Resources within fifteen (15) calendar days of receiving the eligibility notice.
- B. If the employee fails to submit the certification form to Human Resources within fifteen (15) calendar days, Human Resources will send the *Designation Notice* (WH-382) form to the employee notifying the employee that due to failure to return the certification form their FML is denied.
- C. If the certification form is incomplete or insufficient, Human Resources will return the certification form to the employee and provide the *Designation Notice* (WH-382) form, giving the employee notice of the need for additional information. The employee has seven (7) calendar days to remedy any deficiencies.
- D. If an employee needs to renew or change their leave request or Human Resources requests a recertification, Human Resources will provide the

employee with a certification form that must be completed and returned to Human Resources within fifteen (15) calendar days.

INTERMITTENT LEAVE

- A. An employee on intermittent leave must follow departmental call-in procedures when taking FML.

DESIGNATION NOTICE

- A. Within five (5) business days of receiving the completed certification form, Human Resources will notify the employee in writing if their request for FML qualifies under the FMLA using the *Designation Notice* (WH-382) form.
- B. Upon receipt of the designation notice, it is the employee's responsibility to notify the Payroll Clerk if they want to use annual leave while on FML and how they want to pay for their mandatory and voluntary deductions.
- C. Employees may choose to use their accrued annual leave to cover their deductions while on FML leave or write a check to either the WCRC or their third party vendors directly as determined by the Finance department.

DURING FAMILY MEDICAL LEAVE

- A. During FML an employee shall provide Human Resources with periodic reports of their status and intent to return to work every thirty (30) calendar days.
- B. An employee must provide payments for mandatory and voluntary deductions which must be received prior to each bi-weekly check date.

RETURN TO WORK

- A. If the employee is out on a leave for their own serious health condition a fitness for duty test must be completed on or before the date the employee is scheduled to return to work.
- B. An employee must return to work on the first scheduled workday after the last day of approved FML or request additional leave on or before the last day of approved FML.
- C. Once the employee has returned from FML, Human Resources will notify them of their new review date and the amount of annual leave they will receive on their next anniversary.

WASHTENAW COUNTY ROAD COMMISSION

FMLA PROCESS FLOWCHART

