University of Pennsylvania
Faculty and Staff: Applying for Family & Medical Leave & Short-Term Disability
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FMLA: Overview

What is FMLA?
The Family and Medical Leave Act (FMLA) is a federal regulation that entitles eligible faculty/staff members (employees) to up to 12 weeks of job-protected leave and benefits continuation for certain qualifying events including:

- Your own serious health condition
- Your family member’s serious health condition (your spouse, parent, or child under the age of 18)
- The birth or care of your newborn child
- The adoption or foster care of your child
- Qualifying military exigencies
- Military caregiver leave (up to 26 weeks)

Types of FMLA Leave
There are two types of FMLA leave:

- Continuous: leave is for a consecutive number of days
- Intermittent: leave is taken in separate blocks of time or you work a reduced schedule

Who is Eligible for FMLA?
In order to be eligible for FMLA leave, you must:

- Be employed at Penn for at least 12 months
- Have worked at least 1,250 hours during the 12-month period immediately preceding the start of your leave

How Does FMLA Work?
If you’re taking FMLA leave for your own serious health condition or pregnancy:

When you expect to be unable to work due to serious illness, injury, or pregnancy, you must submit an application for FMLA that will require information from your physician.

If FMLA is approved and you are a grade 28 or below full-time staff member you will be required to use your sick time followed by PTO for the first 10 days (the “waiting period”). After the 10 day waiting period, your leave will be paid as follows:

- 100% of base pay for up to 6 weeks.
- 75% of base pay for up to an additional 18 weeks.
- The maximum amount of time that you will be paid is the lesser of 26 weeks or the length of time that your physician certifies you as disabled. Employees on leave for pregnancy will be deemed to be disabled for 8 weeks after delivery unless the physician states otherwise. Employees who elect to remain out of work longer than 8 weeks after delivery will use their remaining PTO unless they notify their business administrator that they want to retain it. The remaining FMLA leave will be unpaid.
- If you have an STD balance as of 6/30/2016, you may elect to substitute these STD days during weeks 9 through 26 so that you will receive 100% of pay. Note that all frozen STD balances will expire on 6/30/18.
- Faculty and staff grades 29 and above are still covered under Policy #613.
- University staff members who are covered by collective bargaining agreements should refer to the appropriate contract article.

If you’re taking FMLA leave for reasons other than your own serious health condition or pregnancy:
You may use up to 5 sick days in a calendar year for approved leaves for reasons other than your own serious health condition or pregnancy (paternity, adoption, foster care and care of a family member with a serious health condition). You must substitute unused PTO for the leave unless you notify your business administrator that you want to retain 50% of your PTO balance.

**Payroll Deductions**

While you are on paid leave, these deductions continue:

- Medical
- Dental
- Life insurance
- Retirement contributions
- Other deductions you may have (e.g., parking, fitness, credit union, etc.)

Should any portion of your leave be unpaid:

- Insurance premiums and other deductions will build up in suspense and will be taken from your paycheck when you return to work.
- Retirement plan contributions will cease during unpaid leave.

**FMLA: Employee Checklist**

**Applying for FMLA Leave**

- Notify your supervisor or business administrator (BA) of your request for FMLA.
- You should receive a provisional letter and the application form(s) from your supervisor or BA within five days of your request.
- Complete the STD/FMLA Request Form (Sections A-C). It must include your time balances, if you’re monthly paid, your signature, and your supervisor or BA’s signature (Section D).
- Send the STD/FMLA Request Form via mail, fax, or email to the FMLA Administrator at least 30 days prior to your proposed leave date (or, in the event of unforeseen leave, as soon as you can) to:
  
  FMLA Administrator  
  600 Franklin Building  
  3451 Walnut Street  
  Philadelphia, PA 19104-6205  
  Fax: 215-573-7385  
  E-mail: fmla@hr.upenn.edu

- If you’re taking FMLA leave for your own serious health condition or pregnancy:
  
  - Have your health care provider complete the Certification of Health Care Provider for Employee’s Serious Health Condition Form (you complete Sections I and II; your health care provider completes Section III). If you’re taking leave for care of a newborn not associated with a pregnancy (father of the child or same-sex spouse) or are adopting or fostering a child, you need to submit the child’s birth certificate in lieu of a certification form.
  
- Print your name on the form. **Be sure your health care provider fills out the entire form.** Any missing information may cause a delay in the processing of your leave request.

**When will I receive short-term disability (STD) pay?**

You will receive STD pay only when you have a continuous, incapacitating health condition or pregnancy that is expected to last 10 days or more which has been certified by a physician and approved by the FMLA Administrator. STD pay cannot be used for intermittent leave or for a leave associated with the care of a family member. While on STD, you are not eligible for paid holidays; additional sick and PTO days don’t accrue.

The maximum amount of time you can be out on leave is six months or 132 consecutive work days. The time is counted from your last day worked. If you have a disability which is expected to exceed six months, you are eligible to apply for long-term disability.
Your health care provider must send (via mail, fax, or email) the completed form to the FMLA Administrator within 20 days of your request.

If you're taking FMLA leave to care for a family member with a serious health condition:

- Have your family member’s health care provider complete the Certification of Health Care Provider for Family Member’s Serious Health Condition Form (you complete Sections I and II; the health care provider completes Section III).
- Describe the type of care you'll provide your family member. **Be sure the health care provider fills out the entire form.** Any missing information may cause a delay in the processing of your leave request.
- The health care provider must send (via mail, fax, or email) the completed form to the FMLA Administrator within 20 days of your request.

If you're taking FMLA leave for a Qualifying Exigency or Military Caregiver Leave:

- Complete Section II of the Certification of Qualifying Exigency for Military Family Leave Form or Section I of the Certification for Serious Injury or Illness of a Current Service member or Section I of the Certification for Serious Injury or Illness of a Veteran or Military Caregiver Leave. A Department of Defense or Veteran’s Administration health care provider must complete Section II of the Certification for Serious Injury or Illness of a Current Service member or the Certification for Serious Injury or Illness of a Veteran or Military Caregiver Leave form.
- Send the completed form to the FMLA Administrator (via mail, fax, or email) within 20 days of your proposed leave date.

**Getting Approval**

- The FMLA Administrator will send a letter to your home address (and an email to your supervisor or BA) indicating whether your leave is approved, denied, or incomplete.
- Contact the FMLA Administrator by email at fmla@hr.upenn.edu or by phone at 215-898-1333 or 215-898-0914 if:
  - Your leave request is approved, but the dates are different than what you expected.
  - Your leave request is denied and you are unsure why.
  - Your leave request is incomplete and you are unsure what is missing. You have an additional 7 days to submit the missing documentation.

Employees approved for short-term disability are prohibited from working at the workplace or at any other location, including the employee’s home, either for the University or otherwise. (Policy 404)

You can find Short-Term Disability and FMLA forms on the Human Resources website at www.hr.upenn.edu/policies-and-procedures/forms/benefits-forms.
While on Leave
Provide the following documentation to the FMLA Administrator (via mail, fax, or email):

- **Pregnancy:** A note from your health care provider with the date of delivery. Your leave dates will be adjusted based on the actual delivery date.
- **Care of newborn (father of the child or same-sex spouse):** A copy of your child’s birth certificate.
- **Adoption or foster care:** Court documentation.
- **Intermittent leave:** Complete the Intermittent Leave Tracking Form (which lists the dates/hours you take leave) and submit updates on a monthly basis (if applicable).

Returning to Work

- If you were out for your own serious health condition or pregnancy, your health care provider must submit a return-to-work note (via mail, email, or fax) to the FMLA Administrator and your supervisor or BA. The note must include:
  - The date you’re eligible to return to work
  - The health care provider’s signature
  - Any medical restrictions
- If your return-to-work note contains restrictions that last more than one week, a copy of the note must be sent to Patrice Miller at the Office of Affirmative Action.

Patrice Miller, Office of Affirmative Action and Equal Opportunity Programs
421 Franklin Building
3451 Walnut Street
Philadelphia, PA 19104
215-898-1744 (phone)
215-746-7088 (fax)
pdmiller@upenn.edu

If You Don’t Expect to Return to Work on Time

- Notify your supervisor or BA and the FMLA Administrator (via mail, email, or fax) immediately.
- To extend your leave, request one of the following from the health care provider:
  - A new, completed Certification of Health Care Provider Form
  - An amendment of the original certification form
  - A signed doctor’s note on letterhead requesting an extension of the leave
- If your serious medical condition becomes long-term in nature, consider contacting Melissa A. Smith, Human Resources Benefits Specialist at smithma@upenn.edu or 215-898-1326; or Geri Zima, Manager, Benefits Administration at zima@exchange.upenn.edu or 215-898-1331. They can discuss the application process for Long-Term Disability should that become necessary.

Normally, employees returning from leave will be reinstated to the same or an equivalent position, with equivalent pay, benefits and other terms and conditions of employment.
# FMLA: Forms Checklist

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<th>Form</th>
<th>Provider to</th>
<th>Form</th>
<th>Provider to</th>
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<tr>
<td>Short-Term Disability and Medical Leave</td>
<td>Supervisor (CBA)</td>
<td>Certification of Health Care Provider for Family Caregiver Leave (Section I)</td>
<td>Health Care Provider</td>
</tr>
<tr>
<td>Requested Form (Sections A, B, C)</td>
<td></td>
<td>Certification of Health Care Provider for Family Caregiver Leave (Section II)</td>
<td>Health Care Provider</td>
</tr>
<tr>
<td>Certification of Health Care Provider for Family Caregiver Leave (Section I and II)</td>
<td></td>
<td>Written documentation confirming service member's covered active duty status</td>
<td>FMLA Administrator</td>
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<tr>
<td>Certified for Serious Injury or Illness of a Current Service Member or a Veteran</td>
<td></td>
<td>Certification for Serious Injury or Illness of a Family Caregiver Leave (Section I)</td>
<td>FMLA Administrator</td>
</tr>
<tr>
<td>FMLA Request Form</td>
<td></td>
<td>Certification for Serious Injury or Illness of a Family Caregiver Leave (Section II)</td>
<td>FMLA Administrator</td>
</tr>
<tr>
<td>Certification of Health Care Provider for Family Caregiver Leave (Section III)</td>
<td></td>
<td>Birth Certificate of Child</td>
<td>FMLA Administrator</td>
</tr>
<tr>
<td>Note from Health Care Provider dated and method of delivery</td>
<td></td>
<td>Intent to adopt or foster documentation</td>
<td>FMLA Administrator</td>
</tr>
<tr>
<td>Note from Health Care Provider: Return to Work (MDF for daily case files)</td>
<td></td>
<td>Note from Health Care Provider: Intermittent Leave Tracking Form (MDF for daily case files)</td>
<td>FMLA Administrator</td>
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</table>
Applying for Family & Medical Leave: Your Own Serious Health Condition, Pregnancy, Care of Newborn, or Adoption/Foster Care

1. Notify Supervisor or BA of your FMLA leave request.
   - Once you notify your supervisor or BA, you should receive a provisional letter within 5 days of your request.

2. Complete the Short-Term Disability/Family & Medical Leave Request Form [Penn Form].
   - Complete Sections A, B, and C.
   - It must include your and your supervisor’s or BA’s signatures and time balances if you are monthly paid (Section D).
   - Submit the completed form to the FMLA Administrator at least 30 days prior to your proposed leave date.

3. Have your treating physician complete the appropriate Certification of Health Care Provider Form [DOL form].
   - Complete Sections 1 and 2, then give the form to your treating physician to complete Section 3.
   - The treating physician must send the completed form to the FMLA Administrator within 20 days of your proposed leave date.

4. The FMLA Administrator will send you a letter stating whether your FMLA leave request is approved, denied, or incomplete.
   - If approved, you will receive the letter at your home address within 2 weeks of submitting your paperwork.

5. Verify whether your letter is correct.
   - Contact the FMLA Administrator at [phone number] or [email] if your leave request is:
     - Approved but the dates are different than what you expected.
     - Denied and you are unsure why.
     - Incomplete and you are unsure what is missing, you have 7 days to submit the missing documentation.

6. While you are on leave: Submit the appropriate paperwork to the FMLA Administrator. If your leave is for:
   - Pregnancy: A physician’s note with the date of delivery. Your leave dates will be adjusted based on the delivery date.
   - Care of Newborn: A copy of your child’s birth certificate.
   - Adoption/Foster Care Placement: Copies of your court documentation.

9. If you don’t expect to return to work on your scheduled date:
   - Notify your supervisor or BA and the FMLA Administrator.
   - Complete and submit one of the following:
     - A new, completed Certification of Health Care Provider form.
     - An amendment of the original certification form.
     - A signed doctor’s note on letterhead extending the leave.
For More Information

<table>
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<th>For questions about:</th>
<th>Contact:</th>
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<tr>
<td><strong>Family &amp; Medical Leave, Short-Term Disability &amp; Sick Leave at Penn</strong></td>
<td><strong>Aysha Horshaw</strong>&lt;br&gt;FMLA Administrator&lt;br&gt;<a href="mailto:ahorshaw@upenn.edu">ahorshaw@upenn.edu</a>&lt;br&gt;215-898-0914 (phone)&lt;br&gt;215-573-7385 (fax)</td>
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<tr>
<td><strong>Kate Kelly</strong>&lt;br&gt;FMLA Administrator&lt;br&gt;<a href="mailto:kkelly@upenn.edu">kkelly@upenn.edu</a>&lt;br&gt;215-573-2483 (phone)&lt;br&gt;215-405-2929 (fax)</td>
<td><strong>Penn Human Resources</strong>&lt;br&gt;600 Franklin Building 3451&lt;br&gt;Walnut Street&lt;br&gt;Philadelphia, PA 19104-6205&lt;br&gt;<a href="mailto:fmla@hr.upenn.edu">fmla@hr.upenn.edu</a></td>
</tr>
<tr>
<td><strong>The Family &amp; Medical Leave Act</strong></td>
<td><strong>Department of Labor FMLA guide:</strong>&lt;br&gt;<a href="http://www.dol.gov/whd/fmla/employeeguide.pdf">http://www.dol.gov/whd/fmla/employeeguide.pdf</a></td>
</tr>
<tr>
<td><strong>Workers’ Compensation</strong>&lt;br&gt;Employees who suffer an injury on the job or illness sustained in the course of employment with the University are covered by Worker’s Compensation Act.</td>
<td><strong>Monica Dagger</strong>&lt;br&gt;Workers’ Compensation Manager&lt;br/mdagger@upenn.edu&lt;br&gt;215-898-1338 (phone)&lt;br&gt;215-898-9802 (fax)</td>
</tr>
<tr>
<td><strong>Melissa A. Smith</strong>&lt;br&gt;Penn Human Resources&lt;br&gt;3410 Walnut St., Suite 527A&lt;br&gt;Philadelphia, PA 19104-6228&lt;br&gt;<a href="mailto:smithma@upenn.edu">smithma@upenn.edu</a>&lt;br&gt;215-898-1326 (phone)&lt;br&gt;215-573-7385 (fax)</td>
<td><strong>Office of Risk Management</strong>&lt;br&gt;421 Franklin Building&lt;br&gt;3451 Walnut Street&lt;br&gt;Philadelphia, PA 19104</td>
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<td><strong>Geri Zima</strong>&lt;br&gt;<a href="mailto:zima@exchange.upenn.edu">zima@exchange.upenn.edu</a>&lt;br&gt;215-898-1331 (phone)</td>
<td><strong>Aetna Life Insurance Company</strong>&lt;br&gt;P.O. Box 14560&lt;br&gt;Lexington, KY 40512-4560&lt;br&gt;888-322-3862 (phone)&lt;br&gt;866-667-1987 (fax)</td>
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<tr>
<td><strong>Long-Term Disability at Penn</strong>&lt;br&gt;Disabilities beyond six months or 132 consecutive days are covered under LTD.</td>
<td><strong>Patrice Miller</strong>&lt;br&gt;<a href="mailto:pdmiller@pobox.upenn.edu">pdmiller@pobox.upenn.edu</a>&lt;br&gt;215-898-1744 (phone)&lt;br&gt;215-746-7088 (fax)</td>
</tr>
<tr>
<td><strong>Americans with Disability Act (ADA)</strong>&lt;br&gt;Employees who return to work with restrictions for longer than one week must apply for an accommodation under this Act.</td>
<td><strong>Office of Affirmative Action and Equal Opportunity Programs</strong>&lt;br&gt;421 Franklin Building&lt;br&gt;3451 Walnut Street&lt;br&gt;Philadelphia, PA 19104-6205</td>
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Non-Discrimination Policy Statement

The University of Pennsylvania values diversity and seeks talented students, faculty and staff from diverse backgrounds. The University of Pennsylvania does not discriminate on the basis of race, sex, sexual orientation, gender identity, religion, color, national or ethnic origin, age disability, or status as a Vietnam Era Veteran or disabled veteran in the administration of educational policies, programs, or activities; admissions policies; scholarship and loan awards; athletic, or other University administered programs or employment. Questions or complaints regarding this policy should be directed to: Executive Director, Office of Affirmative Action and Equal Opportunity Programs, 421 Franklin Building, 3451 Walnut Street, Philadelphia, PA 19104-6205 or (215) 898-6993 (voice) or (215) 898-7803 (TDD).

Statement on Collective Bargaining Agreements

The provisions of applicable collective bargaining agreements govern the Health & Welfare benefits of employees in collective bargaining units.

This guide is intended to address the process of applying for leave at the University of Pennsylvania. It is not intended to restate the FMLA regulations or the University’s policies. For more information, see www.hr.upenn.edu/policy-manual or www.dol.gov/compliance/laws/comp-fmla.htm.