Instructions:

1. Enter your leave request in Workday:
   - Go to Workday “Time Off and Leave Application”
   - Click on “Request Leave of Absence”
   - Enter the “First Day of Leave” and the “Estimated Last Day of Leave”
   - Click on Leave Type “FMLA” and scroll through to choose the type of FMLA leave being requested

2. After submitting your request, look for a notification email from Workday. Follow the link and download the appropriate packet for your type of leave.

3. If the leave is for your own serious health condition, have your physician complete the Certification of Health Care Provider form, and the Attending Physician Statement.
   - If requesting leave for pregnancy, or on an intermittent basis, the Attending Physician Statement isn’t required.
   - If your leave is for the care of a family member, the Certification of Health Care Provider form must be completed by that family member’s physician.
   - For Paid Parental Leaves, a medical certification is not required. Instead, please submit verification of birth.

4. Return all required documentation to the Leave Administrators via fax to (215) 405-2929 or email to FMLA@hr.upenn.edu.

5. Once your leave has been processed, you will be notified by email and postal mail.
Frequently Asked Questions:

1. **How do I submit my completed paperwork?**
   All leave paperwork must be faxed to (215) 405-2929 or emailed to FMLA@hr.upenn.edu. No paperwork will be accepted in person or by mail.

2. **How do I check the status of my leave?**
   To check the status of your leave, please send an email to FMLA@hr.upenn.edu.

3. **How long will it take to process my leave?**
   Processing times vary based upon current volume, but please be advised that we aim to process all leaves as quickly as possible.

4. **Who are considered eligible family members under FMLA?**
   An employee’s spouse, parent or child (under the age of 18) are considered eligible family members under the FMLA. Children age 18 and over may be eligible if incapable of self-care because of a mental or physical disability.

5. **What documentation is required to take FMLA for adoption?**
   Court issued placement documentation, or an adoption decree is required.

6. **Am I required to submit a delivery note after the birth of my child?**
   Yes. A verification of birth document must be submitted after the birth of a child. Failure to submit the note could affect STD and/or PPL payments.

7. **Am I eligible for Short Term Disability?**
   Full time employees taking leave for their own serious health condition or pregnancy may be eligible for STD. An Attending Physician Statement must be completed.

8. **Does STD run concurrently with FMLA?**
   Yes, if both leaves are approved for the same periods of time.

9. **Why do I need to submit an Attending Physician Statement?**
   The Attending Physician Statement is required when a leave is being reviewed for STD pay.

10. **How will I be paid STD?**
    You will be paid STD through your regular weekly or monthly direct deposit. An STD pay schedule will be attached to your approval notice.

11. **I’m not eligible for FMLA. Can I apply for Short Term Disability?**
    Yes, if you are a full-time benefits eligible employee.

12. **Am I required to submit a return to work note? Is there a specific form?**
    When returning from leave for your own serious health condition, you are required to submit a return to work note. No note is required when returning from Paid Parental Leave or a leave for the care of a family member. You are not required to use a specific form, but we do have one available.
EMPLOYEE RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT

THE UNITED STATES DEPARTMENT OF LABOR WAGE AND HOUR DIVISION

**LEAVE ENTITLEMENTS**

Eligible employees who work for a covered employer can take up to 12 weeks of unpaid, job-protected leave in a 12-month period for the following reasons:

- The birth of a child or placement of a child for adoption or foster care;
- To bond with a child (leave must be taken within one year of the child’s birth or placement);
- To care for the employee’s spouse, child, or parent who has a qualifying serious health condition;
- For the employee’s own qualifying serious health condition that makes the employee unable to perform the employee’s job;
- For qualifying exigencies related to the foreign deployment of a military member who is the employee’s spouse, child, or parent.

An eligible employee who is a covered servicemember’s spouse, child, parent, or next of kin may also take up to 26 weeks of FMLA leave in a single 12-month period to care for the servicemember with a serious injury or illness.

An employee does not need to use leave in one block. When it is medically necessary or otherwise permitted, employees may take leave intermittently or on a reduced schedule.

Employees may choose, or an employer may require, use of accrued paid leave while taking FMLA leave. If an employee substitutes accrued paid leave for FMLA leave, the employee must comply with the employer’s normal paid leave policies.

While employees are on FMLA leave, employers must continue health insurance coverage as if the employees were not on leave.

Upon return from FMLA leave, most employees must be restored to the same job or one nearly identical to it with equivalent pay, benefits, and other employment terms and conditions.

An employer may not interfere with an individual’s FMLA rights or retaliate against someone for using or trying to use FMLA leave, opposing any practice made unlawful by the FMLA, or being involved in any proceeding under or related to the FMLA.

An employee who works for a covered employer must meet three criteria in order to be eligible for FMLA leave. The employee must:

- Have worked for the employer for at least 12 months;
- Have at least 1,250 hours of service in the 12 months before taking leave;* and
- Work at a location where the employer has at least 50 employees within 75 miles of the employee’s worksite.

*Special “hours of service” requirements apply to airline flight crew employees.

Generally, employees must give 30-days’ advance notice of the need for FMLA leave. If it is not possible to give 30-days’ notice, an employee must notify the employer as soon as possible and, generally, follow the employer’s usual procedures.

Employees do not have to share a medical diagnosis, but must provide enough information to the employer so it can determine if the leave qualifies for FMLA protection. Sufficient information could include informing an employer that the employee is or will be unable to perform his or her job functions, that a family member cannot perform daily activities, or that hospitalization or continuing medical treatment is necessary. Employees must inform the employer if the need for leave is for a reason for which FMLA leave was previously taken or certified.

Employers can require a certification or periodic recertification supporting the need for leave. If the employer determines that the certification is incomplete, it must provide a written notice indicating what additional information is required.

Once an employer becomes aware that an employee’s need for leave is for a reason that may qualify under the FMLA, the employer must notify the employee if he or she is eligible for FMLA leave and, if eligible, must also provide a notice of rights and responsibilities under the FMLA. If the employee is not eligible, the employer must provide a reason for ineligibility.

Employers must notify its employees if leave will be designated as FMLA leave, and if so, how much leave will be designated as FMLA leave.

Employees may file a complaint with the U.S. Department of Labor, Wage and Hour Division, or may bring a private lawsuit against an employer.

The FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.

For additional information or to file a complaint:

1-866-4-USWAGE
(1-866-487-9243) TTY: 1-877-889-5627

www.dol.gov/whd

U.S. Department of Labor | Wage and Hour Division
REQUEST FOR PAID PARENTAL LEAVE

This request should be made at least 30 days in advance of the date on which you wish to start parental leave, when practical. If both parents are eligible for parental leave, they will need to complete a separate Paid Parental Leave Request Form. Paid Parental Leave will run concurrent with the University’s Family and Medical Leave (FML) Policy. Further information on Paid Parental Leave, including the terms and conditions, can be found at www.hr.upenn.edu/policies-and-procedures/policy-manual/time-off/paid-parental-leave-policy.

Complete and sign this form, attach all required documentation, and Fax to: 215-405-2929; or Email to: FMLA@hr.upenn.edu

A. Employee Information

Employee Name: ___________________________________ Penn ID: __________________________

Home Address: _____________________________________________________________________________

City, State and Zip: __________________________________________________________________________

Home Phone: __________________________ Cell Phone: __________________________

Department Name: __________________________________________________________________________

Business Administrator: __________________________

BA Location __________________________ BA Phone: __________________________

B. Leave Information

I hereby give notice of my intent to take paid parental leave. I certify that I meet the eligibility requirements on the back of this form.

I plan to take ____________ weeks (up to a maximum of four continuous weeks) of leave from ____________(first day of leave) to ____________ (last day of leave).

Reason for Requesting Leave:

☐ Birth of a child – Expected Date of Birth: _________________________________________________

☐ Adoption of a child – Expected Date of Placement: _________________________________________

I understand that I am required to use parental leave for the purpose of caring for or bonding with the newborn or newly adopted child.

Employee Signature: __________________________ Date: __________________________

Supervisor Approval: __________________________ Date: __________________________

Supervisor Name (please print): __________________________________________________________

C. Submission: Submit this form directly to the FMLA Administrator along with:

For Birth: A copy of your child’s birth certificate or hospital birth confirmation is required.

For Adoption: Official documentation from a Court, Agency, and/or Attorney is required.
ELIGIBILITY REQUIREMENTS:

Eligible employees must meet the following criteria:

- Have been employed with the University for at least 12 months (the 12 months do not need to be consecutive) and have worked at least 1,250 hours during the 12 consecutive months immediately preceding the date the leave would be begin.
- Be a full-time, regular employee (post-docs, part-time and temporary employees are not eligible for this benefit).
- If both parents are employees of the University at the time of the birth or adoption of the child, both parents are eligible for the leave.

In addition, employees must meet one of the following criteria within the last 12 months:

- Have given birth to a child;
- Be a spouse of a woman who has given birth to a child;
- Be the biological parent, or spouse of biological parent, of the child; or
- Have adopted a child who is 17 years old or younger. This provision does not apply to the adoption of a stepchild by a stepparent or the placement of a foster child.

Finally, eligible employees must use the paid parental leave for the purpose of caring for or bonding with the newborn or newly adopted child.

AMOUNT, TIMEFRAME AND DURATION OF PAID PARENTAL LEAVE

- Eligible employees will receive up to a maximum of four weeks (20 work days) of paid parental leave per birth or adoption of a child. In addition, in no case will an employee receive more than four weeks of paid parental leave in a rolling 12-month period, regardless of whether more than one birth or adoption event occurs within that 12-month time frame.
- The occurrence of a multiple birth or adoption (e.g., the birth of twins or adoption of siblings) does not increase the four-week total amount of paid parental leave granted for that event.
- Each week of paid parental leave is compensated at 100% of the employee’s regular, straight-time pay. Paid parental leave will be paid on regularly scheduled pay dates (e.g., weekly or monthly).
- Approved paid parental leave may be taken at any time during the 12-month period immediately following the birth or adoption of a child. Paid parental leave may not be used or extended beyond this 12-month time frame and must be completed by the child’s first birthday or the first anniversary of the finalization of the child’s adoption.
- Employees must take paid parental leave in one continuous period of leave and must use all paid parental leave during the 12-month time frame indicated above. Paid parental leave cannot be used on an intermittent basis.
- Upon termination of the individual’s employment at the University, he or she will not be paid for any unused paid parental leave for which he or she was eligible.
“I got the right support at a tough time.”

Don received a difficult diagnosis and dealing with it was affecting his work. Health Advocate helped clarify his diagnosis, lined up a specialist for a second opinion and provided short-term counseling to help him with coping strategies.
One number, complete support
Our Personal Health Advocates are familiar with your entire employee benefits package. They can explain your coverage, answer your questions, and if you need to reach a specific benefit, they can connect you right away.

Expert healthcare help
They are also experts at navigating the complicated healthcare and insurance systems. They’ll do the paperwork, make the calls and cut through the red tape to resolve a wide range of issues.

They can:
- Support medical issues, from common to complex
- Answer questions about diagnoses and treatments
- Research the latest treatment options
- Coordinate services related to all aspects of your care
- Find the right in-network doctors and make appointments
- Coordinate second opinions and transfer medical records
- Research and locate eldercare services

Confidential help with personal issues
Your Employee Assistance Program provides confidential access to a Licensed Professional Counselor for help with personal, family and work issues. If needed, we can refer you to qualified professionals for more long-term support. In a crisis, help is available 24/7.

- Relationship/family issues, parenting
- Job concerns, burnout, coworker conflicts
- Depression, anxiety, anger, grief, loss, addiction, substance abuse
- Find services for childcare and eldercare
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Who is covered?
Health Advocate is available to employees, spouses, dependents, parents and parents-in-law.

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Welcome to Health Advocate
This guide provides an overview of Health Advocate and its many services. If you need assistance or have questions, simply call the toll-free number for prompt support.

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