

Catoosa County Public Schools

Family and Medical Leave Act (FMLA)



Please read carefully

The Family and Medical Leave Act of 1993 requires Catoosa County Schools to provide up to sixty (60) days of unpaid, job-protected leave during a 12-month period for certain family and medical reasons. All employees of Catoosa County Schools that are classified in their position as full or part time employees are eligible for FMLA leave. FMLA provides that if the employee returns to work prior to or on the first scheduled day following the 60th approved FMLA day, the employee will be reinstated to the same job or an equivalent job with the same pay, benefits, and terms and conditions of employment. Approved FMLA also provides attendance protection. The FMLA attendance, job, and benefit protection is exhausted with the 60 FMLA day maximum.

There are two types of FMLA:

- **Block FMLA** – Consecutive days of leave.
- **Intermittent FMLA** – Leave taken on a sporadic basis (partial days, one day at a time, etc.).

The following reasons qualify for Family and Medical Leave:

- For the employee's own qualifying serious health condition* that makes the employee unable to perform the functions of the employee's job, including incapacity due to pregnancy and for prenatal medical care.
- To care for the employee's qualified family member** with a serious health condition* including incapacity due to pregnancy and for prenatal medical care.
 - Note: FMLA approval ends when the family member's condition no longer requires the employee to provide care. It is the employee's responsibility to notify Human Resources and the employee's supervisor when such change occurs.
- The birth of a child or placement of a child for adoption or foster care to the employee:
 - The first year care of an employee's child and/or within one year of placement of child with employee.
 - To bond with a child (Block FMLA leave must be taken within one year of the child's birth or placement).
- Any period of incapacity or treatment for a chronic serious health condition* of an employee (or qualified family member that requires the employee's care) which continues over an extended period of time, requires periodic visits (at least twice a year) to a health care provider, and may involve occasional episodes of incapacity (Intermittent FMLA).

***SERIOUS HEALTH CONDITION:**

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either:

- Any period of incapacity or treatment connected with inpatient care (an overnight stay) in a hospital, hospice, or residential medical care facility; or
- A period of incapacity lasting more than three consecutive, full calendar days, and requiring ongoing medical treatment (either multiple appointments with a health care provider, or a single appointment and follow-up care such as prescription medication); or
- Any period of incapacity related to a pregnancy or prenatal care; or
- Any period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective, but which requires the continuing supervision of a health care provider (Alzheimer's Syndrome, stroke, terminal diseases); or
- Any period of incapacity or treatment for a chronic serious health condition; or
- Any absences to receive multiple treatments for, by, or on referral from a health care provider for a condition that would likely result in incapacity for three or more days if left untreated (chemotherapy, physical therapy, dialysis).
 - NOTE: FMLA does not apply to routine medical examinations, such as a physical, or common medical conditions, such as an upset stomach, unless complications develop.

A Chronic Serious Health Condition is defined as one that (1) requires "periodic visits" (at least twice a year) for treatment by a health care provider or nurse under the supervision of a health care provider, (2) recurs over an extended period of time, and (3) may cause episodic rather than continuing periods of incapacity.

NOTE: If your leave is due to something other than the previously listed condition/reasons, your request must be processed through Human Resource.

**** QUALIFYING FAMILY MEMBER:**

The form “Employee Statement of Family Relationship for FMLA Leave” must be completed by the employee and included in the FMLA application submitted to the FMLA Office. The term “qualifying family member” means:

- Employee’s spouse.
- Child (biological, adopted, stepchild, foster child, a legal ward, or a child of a person standing in loco parentis) of the employee.
 - Child must be under the age of 18. If age 18 and older the adult son or daughter must:
 - **Have a disability as defined by the ADA;**
 - **Be incapable of self-care due to that disability;**
 - **Have a serious health condition; and,**
 - **Be in need of care due to the serious health condition.**
- Parent (biological, adoptive, step or foster father or mother, or any other individual who stood in loco parentis to the employee when the employee was a child). This term does not include parents “in law.”

√ Note: In-laws, grandparents, siblings and other extended family members are NOT covered by FMLA.

WHEN DO I NEED TO REQUEST FMLA? If you meet one of the aforementioned qualifications, you may apply for FMLA. If you expect to be out of work for 10 days or longer, you **must** apply for FMLA. If you incur 10 days of leave (consecutive), you **must** apply for FMLA. A 30-day notice of pending leave is required when the leave is foreseeable. In any event, written notice in the form of the Leave Request Form should be submitted by you as soon as possible. Failure to submit a completed FMLA request (including supporting documentation such as medical certification) within 15 days of absence could result in automatic denial of FMLA and possible employment action.

NOTE: Excessive absences (consecutive and/or cumulative) not covered by FMLA can result in an attendance/performance issue and possible employment action.

WHAT ARE THE STEPS TO BE TAKEN?

- 1) Consult with your health care provider about the number of days you must be absent. A signed statement from the health care provider is required for illness or birth of a child.
- 2) Discuss the leave with your principal/supervisor. The department/school protocol concerning and including reporting out must always be followed.
- 3) Complete the FMLA leave request. The form “Family and Medical Leave Request Form” (completed by employee) **must** include anticipated beginning and ending date (or anticipated duration) of FMLA Leave.
- 4) Include medical certification and/or other required documents supporting your reason for FMLA.
- 5) All completed forms must be submitted to the Human Resource.
- 6) Provide (upon request from the HR Office) certification updates and anticipated return to work date and supporting documentation.
- 7) It is the employee’s responsibility to ensure the supervisor/principal and time entry person are aware of leave dates, details, and return to work date.
- 8) Prior to returning to active employment, you must provide written certification from your physician regarding your release to return to work. Your return to work is dependent upon receipt of this documentation. You should provide notification of at least two workdays prior to the date you intend to report for work.

It is the employee’s responsibility to ensure the FMLA application guidelines are followed.

HOW MUCH LEAVE CAN BE TAKEN? Under FMLA, the maximum is 60 days in a 12-month period. The 60 days in a 12-month period will be measured from the first date FMLA leave is used. An employee can apply and be approved for FMLA due to multiple reasons; however, the combination for all reasons cannot exceed 60 FMLA days per FMLA year.

- If the FMLA leave is for a serious health condition, the dates provided by the health care provider will be used to approve FMLA leave (up to 60 FMLA days per FMLA Year). You cannot request additional time unless ordered by your health care provider. However, for the birth of a child, you may request additional time for the care of your child during his/her first year (or bonding time). Recovery plus bonding time cannot exceed 60 FMLA days per FMLA Year.
- **Please remember that 60 days per FMLA Year is the maximum allowed.**

If the employee and the employee's spouse work for the school system, each is entitled to 60 days for their own illness or the illness of a child.

DO I TAKE PAID LEAVE OR UNPAID LEAVE? The employee is required (during FMLA) to use all paid leave, (sick/personal and/or vacation) available to him/her. At the time paid leave is exhausted, Leave-Without-Pay (LWOP) will be entered. Please keep in mind the cut off dates for payroll. As an example, it is possible that an employee will begin LWOP on February 10th but will not see the effects of it until the March paycheck. For each day that you do not have paid leave, your pay will be reduced by your daily rate of pay. For maternity leave, please see the last page.

INTERMITTENT FMLA IS APPROVED...WHAT MUST I DO NEXT? Upon approval of Intermittent FMLA:

- You must always follow your school/department's protocol concerning reporting your absence from work.
- When possible, you should provide to your principal/supervisor advance notice of any absences (partial days, etc.) and coordinate your return to work date (in advance) with your principal/supervisor.
- In order for your intermittent leave to be covered by FMLA, you must notify Human Resources of leave dates that are related to the FMLA approved reason. Notification can be done via email to kmcculloch@catoosa.k12.ga.us & cmcgee@catoosa.k12.ga.us or via note faxed to the HR office 706-965-8930 or via note sent through interoffice mail addressed to Human Resources. Please provide your name and the date leave is taken due to the FMLA approved reason. Notification should be made within 15 days of the leave/absence. Failure to provide notification within the designated time will result in automatic denial of FMLA coverage for that specific leave/absence.

DO MY BENEFITS CONTINUE UNDER FMLA LEAVE? When you are receiving a paycheck with sufficient funds, benefit deductions continue. When paid leave is exhausted and the funds are not sufficient, you are required to pay your benefit premiums to avoid loss of coverage. You will be contacted by Amy Perry, Benefits Coordinator with instructions, the amount owed, and the payment due date. If you have not received notification, please contact the Amy Perry at 706-935-0654 for guidance. **Note: Failure to remit timely premiums will result in immediate loss of coverage. It is the employee's responsibility to ensure payments are received timely.**

WHAT IF I NEED TO EXTEND MY FMLA? If the period of leave needs to be extended beyond the original approved period (within the 60 FMLA day maximum), the employee should notify their principal/supervisor as soon as possible and request said extension in writing prior to the last day of approved leave. Employees should direct the request to Human Resources. A medical update from the treating physician/healthcare provider must be provided if leave is for a serious health condition. Medical documentation must be kept current during leave.

WHAT IF MY LEAVE LASTS BEYOND THE 60 FMLA DAY MAXIMUM? The FMLA provided attendance, job and benefit protection are exhausted with the 60 FMLA day maximum. If you are not able to return to work prior to or on the first scheduled day immediately following the 60th approved FMLA day, you will need to contact Human Resources.

If your leave extends beyond the 60-day FMLA maximum, you do not have return-to-work rights under FMLA. If an absence extends beyond the 60 FMLA day maximum for each FMLA 12-month period, the position may be posted and you may be replaced by a permanent employee. Upon release to return to work by your treating physician, you are eligible to apply for an open position to start the applicant process. This does not guarantee you a position.

Certified employees who are unable to return to work prior to or on the first scheduled workday following the 60th FMLA day may or may not be recommended for a contract for the next school year.

WHAT DO I NEED TO DO TO RETURN FROM FMLA? If the leave was due to a serious health condition of the employee, written certification from the treating health care provider addressing release to return to work (listing any specific restrictions and/or request for accommodations described in detail) must be submitted to Human Resources. The employee's return to work is dependent upon receipt of this documentation. This must be submitted at least two workdays prior to the return to work.

The medical documentation listing the specific restrictions/request for accommodations described in detail must be submitted to Human Resources for review to determine if work is available to reasonably accommodate.

The employee must always coordinate/confirm return to work (in advance) with their principal/supervisor.

RESTRICTIONS AND/OR REQUEST FOR ACCOMMODATIONS: Employees are expected to perform the full duties of their job until medical documentation signed by a health care provider is submitted to the employee's principal/supervisor or FMLA Office.

Leave Request for FMLA and certifications (along with certification updates) should be provided to Human Resources via fax to 706-965-8930 or a scanned copy sent via email to kmcculloch@catoosa.k12.ga.us and cmcgee@catoosa.k12.ga.us or postal mail to the address listed below.

Catoosa County Public School
Human Resources
PO Box 130
Ringgold, GA 30736

Upon receipt of the FMLA request, a FMLA Notice of Eligibility will be sent to the employee.

NOTE: To avoid pay discrepancies, please ensure the appropriate leave forms are completed and submitted to your leave entry person at your work location as soon as possible. Upon return to work, the employee should notify Human Resources of the return to work date. This can be done by telephone 706-965-8563 or email - kmcculloch@catoosa.k12.ga.us and cmcgee@catoosa.k12.ga.us or a note sent via school mail to Human Resources.

Additional FMLA application packages can be obtained from the Catoosa County Public Schools website at www.catoosa.k12.ga.us select Departments>Human Resources>Forms; or, an application can be obtained from Human Resources.

If you have any questions regarding FMLA, please contact Human Resources at 706-965-8563.

PAID PARENTAL LEAVE

As of July 1, 2021, CCPS has approved Georgia House Bill 146, to make paid parental leave equally available to all eligible employees. The employee needs to be classified as full-time and is eligible to participate in TRS or PSERS, and has six continuous months of employment with CCPS. Hourly paid employees must have worked a minimum of 700 hours over the six month period immediately preceding the requested paid parental leave date.

Paid parental leave covers:

- the birth of a child of an eligible employee
 - the placement of a minor child for adoption with an eligible employee; or
 - the placement of a minor child for foster care with an eligible employee.
1. Maximum amount of paid parental leave that may be taken during a rolling 12-month period is 120 hours.
 2. The leave may be taken as needed increments of less than eight hours with 4 hours being the smallest increment.
 3. Any unused paid parental leave that remains 12 months after the qualifying event shall not carry over for future use.
 4. Unused paid parental leave shall have no cash value at any time of the employee's separation from employment with CCPS.
 5. Paid parental leave shall run concurrently with any leave provided under FMLA.
 6. Paid parental leave request must be submitted with appropriate FMLA forms at least 10 days in advance of the requested leave start date.