

















FAMILY MEDICAL LEAVE ACT (FMLA) / CALIFORNIA FAMILY RIGHTS ACT (CFRA)

Eligibility

- Serious health condition of employee or family member, birth of child and care of newborn; placement of child for adoption or foster care
- Employed for 12 months with employer either part/full time
- Worked 1,250 hours in 12 months
- Works for an employer that has 50 employees w/in 75 mile radius

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PREGNANCY DISABILITY LEAVE (PDL)

Employer Coverage

 Eligible female employees receive up to 4 months of unpaid leave for disability related to pregnancy, childbirth, or related medical conditions



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PREGNANCY DISABILITY LEAVE (PDL)

Eligibility

- Worked one day on the job
- Works for an employer with 5 or more employees
- Intermittent leave or block of time
- Runs concurrently with FMLA
- Reinstatement to same position or comparable

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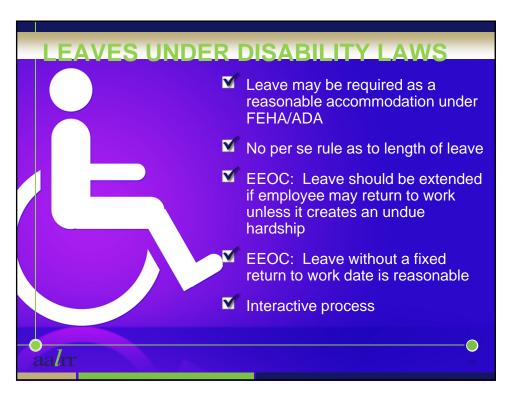
DIFFERENCES THAT MATTER CFRA FMLA PDL is not a disability PDL is a disability · Covers spouses and Covers spouses domestic partners Provides qualifying military Does not provide qualifying exigency leave military exigency leave Provides for 26 weeks of Does not provide 26 weeks military leave of military leave aalrr

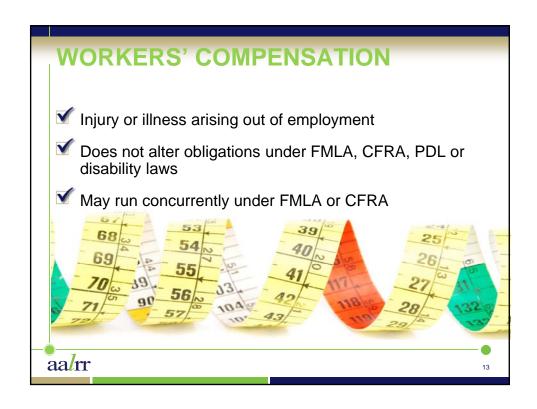




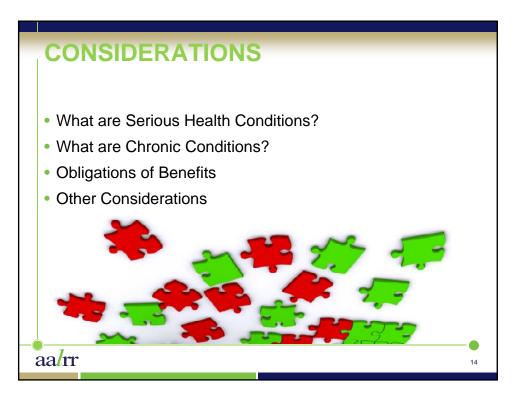


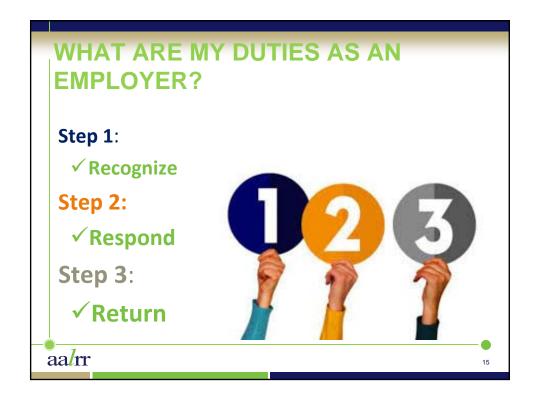














STEP 1: RECOGNIZE THE EMPLOYEE IS REQUESTING A LEAVE

- An employee directly asks for time off
- Employee states he is having a difficult time getting to work because of a health condition
- Employee provides you with a doctor's note stating that she is having pregnancy complications
- Employee is sick for four days
- Employee gets hurt on the job
- Employee cannot perform the essential functions of the job because he was in an accident

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16

STEP 2: RESPOND – PROVIDE NOTICE

Eligibility Notice

- Notice that the employee is either eligible or not
 - If eligible, designate the type of leave
 - If not eligible, provide one reason why ineligible
- Notice of employees' rights and responsibilities
 - Including medical certification requested with a 15 day turnaround
- Notice must be provided within 5 business days

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7



STEP 2: RESPOND – DESIGNATION NOTICE

- 1. Informs the employee that the leave was approved
- 2. Whether the leave will be designated as FMLA/CFRA leave
- Request for additional information to certify the leave (7 day turnaround)
- 4. Employee's responsibilities and consequences of failing to provide the requested information (medical)
- Employee's rights regarding health insurance, return to work and substitution of unpaid leave (e.g., PTO, sick, vacation)
- 6. Key Employee: Designation

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18

STEP 3: RETURN THE EMPLOYEE TO

WORK

- Take Affirmative Steps to Communicate with the Employee toward the end of the leave
 - Provides opportunity for the employee to communicate status of leave and prepares employer to reinstate employee
 - Return date
 - Additional time needed
 - Limitations
 - · Request for an accommodation
 - Recommend using a standard Notice (letter)
 - End date
 - Insurance ending/COBRA Notice
 - · Option to extend leave with medical certification

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19



STEP 3: RETURN THE EMPLOYEE TO WORK

- OBTAIN A MEDICAL RELEASE
- NO WORK LIMITATIONS, reinstate employee to same position unless no longer available then to an equivalent position
- WORK LIMITATIONS engage in the interactive process to determine whether the employee is disabled and qualifies for modified work, light duty, or a reasonable accommodation under the ADA – must accommodate unless an undue hardship.

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