Benefits while on Leave of Absence

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How a leave of absence affects your benefits

Re-enrollment rules when you return

When you should initiate a leave of absence request

When Should You Apply for a Leave of Absence

To protect your benefits you should apply for a leave of absence whenever you will be in an unpaid status. While you are using sick and/or vacation time, you do not need to apply for a leave of absence since you are still receiving pay from the district. However, if you miss work as a result of a work-related injury/illness, you should apply for a leave of absence even if you receive workers' compensation. Keep in mind that your benefits eligibility requires that you work the majority of your duty days. Therefore, anytime you are in an unpaid status, applying for a leave preserves your access to benefits. It's important for you to notify and keep your supervisor informed of all absences. Failure to report to work for the majority of your duty days could lead to a loss of benefits as well as job abandonment processing.

Employees on leave

Your period of active coverage will end the last day of the month in which:

A. you are physically at work.

B. you are in a paid status using sick or annual days.

C. your approved FMLA leave expires.

D. payments are applied.

However, in most cases, your term life insurance ceases at the end of the month in which you stop being actively at work. Refer to your policy for detailed coverage rules, conversion rights and application deadlines. If you do not pay required contributions while on leave, your coverage will end and you will be required to re-satisfy eligibility requirements when you return to active status, except as otherwise provided by law. If you are on leave for other than your personal illness or maternity, you may not continue income protection.

Approved medical leave (FMLA) – You may continue your benefits while on approved FMLA status. The district will make its contribution on your behalf for district paid benefits. You will be responsible for your regular contributions. Contact us at 561-434-7478 or 561-434-8668 if you do not receive a monthly billing statement. Coverage will be terminated for non-payment if premium payments are not received within 30 days of the due date.



Non-FMLA leave - In order for your benefits to continue uninterrupted, you must physically return to work in a benefited position and have paid all required contributions prior to the last work day of the month in which your FMLA leave ends.

COBRA continuation would be extended once your FMLA status has been exhausted or once your benefits have been terminated due to being in an unpaid status for any reason including unpaid leave or in an unpaid status for more than 10 working days. You would be eligible to continue your medical, dental and/or vision benefits by electing and paying COBRA premiums. In some cases, you may also be eligible to continue your flexible spending health account through COBRA as well. Please contact WageWorks directly for more information if your FSA is terminated.

Non-CTA part-time employees will not be eligible for benefits upon return from leave.

Please also refer to the special rules concerning continuation of term life and/or income protection plans as it relates to leave status. Please refer to page 26 for more information.

You should contact human resources when you need to take time sporadically. You may be eligible for an intermittent FMLA leave.

Benefits while on Leave of Absence

Life/income protection for personal illness – Employees who are enrolled in short-term and/or long-term disability plans and are on a leave of absence due to their own personal illness or maternity will be billed for those plans from the first day of the leave through the date that the disability benefits are expected to begin. The elimination period for these plans are outlined in the disability section of this guide. Failure to pay premiums may result in disability claims being denied. Employees on leave of absence other than for their own illness or maternity are not eligible to continue the short-term or long-term disability plans once they are no longer receiving an income from the district. Premiums for these plans should not appear on any billing statements received.

The reason for your leave also impacts your life insurance coverage. If you were actively at work immediately before your leave of absence, your life benefits will continue through the last day of your approved FMLA leave as long as required premium payments are made.

If you are totally and permanently disabled, you may continue paying premiums for a maximum of 12 weeks from the date you were in a paid status. After 12 weeks, you must either convert to an individual policy or apply for Continued Protection (waiver of premium) directly with the life insurance provider. You must apply for a Continued Protection (waiver of premium) within nine months of the date of disability. During the waiver premium process, no premium payments will be due. You will be given the right to convert your policy if your Continued Protection (waiver of premium) request is denied. You will have 31 days from the waiver of premium denial date to convert to an individual policy.

Other leaves – ineligible to continue life and income protection plans – Unfortunately, employees on leave for reasons other than personal illness or maternity are not eligible to continue group life plans beyond an approved FMLA leave. Coverage for these types of plans will end the later of the last day of the month you are actively at work or the last day of the month of an approved FMLA. Charges for life insurance, short-term and/or long-term disability should not be paid or appear or your billing statements.

Approved non-paid leave – You can continue to receive coverage for certain benefits for the duration of your leave if you choose to elect COBRA continuation. Certain benefits, including short-term and long-term disability, life products and dependent care FSAs cannot be continued while you are on an unpaid leave of absence. Life and disability benefits may only continue if the reason for your unpaid leave is due to your own illness/injury/maternity. You may contact Risk & Benefits Management representatives regarding premiums due for these benefits.

Other benefits impacted by an unpaid leave – We encourage you to contact the insurance providers/administrators if you are enrolled in any group life plans: MetLife plans, Trustmark plans, and/or a flexible spending health account. They will be able to assist you with understanding how your leave of absence will impact your coverage in these plans. Please contact:

- Trustmark directly at 866-636-5525 for information regarding payment of premiums if you had a Trustmark Universal Life, Accident, Cancer Protector or Critical Illness policy.
- FMBC's on-site representative at 561-434-7442 for information on continuation of your Healthcare FSA on an after-tax basis.
- MetLife at 800-638-6420 for information about Continued Protection (waiver of premium) and/or 877-ASK-MET7 for discussions with a MetLife agent around converting your policy

Flexible Spending Accounts (FSAs) while on leave

Reimbursement for FSAs are only considered if expenses are incurred during the period you have made contributions. No reimbursement will be made for expenses during an unpaid leave if you fail to continue to make contributions. You may contact FBMC's Customer Care team at 1-800-342-8017 to arrange for the continuation of payment for your Healthcare FSA. You should continue your monthly contribution if you wish to request reimbursement for the period that you are on leave.

Dependent FSA contributions cannot be made while on an unpaid leave of absence.

Steps to continue your Healthcare FSA while on leave:

- Mail your check or money order to: FBMC Benefits Management Company ATTN: Benefits Continuation Department P.O. Box 1878 Tallahassee, FL 32302-1878
 - A. Make your check payable to "The School District of Palm Beach County." (FBMC is unable to accept online payments.)
 - B. Write your 16-digit FBMC Member number on your check or money order.
- Include a note that indicates you are a School District of Palm Beach County employee on leave and you wish to continue contributing to your Healthcare FSA.
- 3. If you have any questions about continuing your Healthcare FSA while on leave, please contact FBMC's Customer Care team at 1-800-342-8017.

Benefits while on Leave of Absence

District-paid benefits while you are in an unpaid status – You should apply for an approved leave of absence in order to continue your benefits. Once you are unpaid for the majority of your duty days in any given month (even if you are not on leave) you are no longer eligible for benefits. If you do not make sufficient payments to continue benefits, coverage will terminate at the end of the month in which you were eligible. District-paid benefits will begin again the first of the month after 30 calendar days of eligible paid employment.

Unpaid status, no approved leave – If you are not in a paid status, your benefits will end at the end of the month in which the unpaid status began. Should you fail to have payroll deductions taken for any period, coverage would be retroactively terminated at the end of the month for which premium payments were last received.

Re-Enrollment Upon Return from Leave

Employees on approved leave during our Open Enrollment period may make changes to their medical, dental or vision plans and flexible spending accounts when they return to active duty. Remember, 401(a) Dollars are not available until the first day of the month after you return to a paid status plus any applicable waiting periods if you did not continue your benefits while on leave. Changes to any other benefits or continuation or reinstatement of any benefits may be made within 30 calendar days of your return to work. If you do not contact Risk & Benefits Management to complete a benefits change form within 30 calendar days of your return to work, you will be enrolled in the default medical plan and other voluntary benefits may be dropped. Benefits that were canceled while on leave (shortterm disability, long term disability) will not automatically be reinstated. Please complete a benefits change form within 30 calendar days of your return to re-elect these types of plans.

If you fail to contact Risk & Benefits Management upon your return from leave, you will be limited to the Low Option HMO employee-only medical plan and basic life insurance.



Open Enrollment will only be processed for actively working employees. If you completed enrollment but are not actively at work on the first working day of 2015, your election will not be processed. Contact Risk & Benefits Management at 561-434-7478 or 561-434-8668 within 30 calendar days of your return to work.

Non-CTA part-time employees who have a break in coverage are not eligible to re-enroll in benefits upon return to active status.

Did you read about:

When to apply for leave of absence?

The different types of leave and their requirements?

Frequently Asked Questions

Q.Can I continue my Healthcare FSA while on leave of absence (LOA)?

A. You may keep your account active or you may revoke your election while you are on leave. If you choose to keep your account active you may continue to pay into your



Healthcare FSA (HFSA) on a post-tax basis while on LOA. Although you lose the benefit of tax savings, this approach will keep your HFSA period of coverage active and any eligible expenses you incur while on leave may be submitted and reimbursed while you are still on leave.

You may also keep your account active by making arrangements with the School District of Palm Beach County to adjust your contribution upon your return. Payroll will take the balance of your FSA pledge for the calendar year and divide it by your remaining pay dates, spreading the balance over the rest of your paychecks for the year. Again any eligible expenses you incur while on leave will be paid. This approach gives you full tax advantage, but you must wait until you return from leave and the School District of Palm Beach County notifies Fringe Benefits Management Company, a division of WageWorks, that you are active again before you can be reimbursed for expenses incurred.

Q.What happens to my Healthcare FSA while on leave?

A. Your payroll contribution will be discontinued. You may contact FBMC to continue contributions on a post-tax basis. Otherwise, you will have a break in coverage. Expenses incurred while on leave will not be eligible for reimbursement. If you return during the plan year, your FSA pledge will resume and the outstanding contribution balance will be deducted from the remaining paychecks.

Q. How do I continue my Healthcare FSA while on LOA?

A. Once you go on leave, make your Healthcare FSA

contribution payments payable to "The School District of Palm Beach County" and mail your check or money order to:

FBMC Benefits Management Company ATTN: Benefits Continuation Department P.O. Box 1878

Tallahassee, FL 32302-1878
Toll Free Fax: 1-800-342-8017
(Please do not send cash.)

Q.What if I don't want to continue my Healthcare FSA when I return from LOA?

A. Because your FSA election is for the entire year, the district will resume taking payroll reductions until the end of the calendar year, **unless** you have a valid Change in Status event. However, you can always opt out of re-enrolling in a FSA during the next Open Enrollment period.

Q.Can I continue my Dependent Care FSA while on LOA?

A. No. The Dependent Care FSA is used to reimburse participants for work-related child and elder care expenses that enable them to work, look for work or attend school. While you are on leave you are considered "not actively at work," and are thus ineligible to participate.

Q.When will my Dependent Care FSA terminate if I go on LOA?

A. It will terminate on the last day of the month in which your leave begins. Employees may re-enroll in the Dependent Care FSA within 30 days of returning from leave.

Leave of Absence Summer Benefits

In This Section:

Duty Day codes and required workdays

All employees, other than 12-month employees or 216(R), must be in a paid status or on approved FMLA leave for the majority of their duty days in May and June to be eligible for the normal school district contributions toward their June and July insurance benefits. Therefore, if your contract's last workday is **June 3, 2016**, you must be in a paid or FMLA status through **May 17, 2016** (14 work days).

If you are not in an FMLA and/or paid status for the majority of your duty days in May and June, you will receive district-paid insurance benefits the first of the month following 30 days of active employment.

Twelve month employees are required to pay the full premium for any month in which they are not in a paid or FMLA status on the first of that month. If you have any questions, please feel free to contact Risk & Benefits Management at 561-434-8668 (PX 48668) or 561-434-7478 (PX 47478).

It is your responsibility to notify Risk & Benefits Management within one week of your return to work.

Your return from leave date may impact our ability to make deductions from your summer paychecks. If we are unable to take the deductions because of summer payroll processing deadlines, you will receive a billing statement.

Duty Day codes and the required workdays:				
Duty Day Groups	Be in a Paid Status through	Return to Work by or FMLA Status by		Combined May/June Duty Days
180, 182(NT) 188(T)	6/02/2016	5/16/2016	5/17/2016	13
187NT	6/03/2016	5/17/2016	5/18/2016	13
190, 193, 196, 206(TI)	6/03/2016	5/17/2016	5/18/2016	13
193	6/03/2016	5/17/2016	5/18/2016	13
206(NT), 216(TI)	6/09/2016	5/19/2016	5/20/2016	15
226(T&I, 216(NT)	6/16/2016	5/23/2016	5/24/2016	17
226(E) NT	6/23/2016	5/25/2016	5/26/2016	19

In order for benefits to continue in the summer when reinstated as of June 1, you must be in a paid status as of June 1.

Did you read about:

The required workdays to continue benefits during the summer?