

PART B: AMOUNT OF LEAVE NEEDED: When answering these questions, keep in mind that your patient's need for care by the employee seeking leave may include assistance with basic medical, hygienic, nutritional, safety or transportation needs, or the provision of physical or psychological care

4. Will the patient be incapacitated for a single continuous period of time due to his/her medical condition? No Yes

If so, list the beginning end dates for the period of incapacity: from _____ to: _____

Explain the care that will be needed by the patient: _____

PART C: COMPLETE ONLY IF APPLYING FOR INTERMITTENT FMLA

For Completion by the HEALTH CARE PROVIDER

5. Will the patient require follow-up treatments or appointments, including any time for recovery? No Yes

If so, Estimate treatment schedule, including approximate dates of any scheduled appointments and the time required for each appointment, including any recovery period: _____

6. Will the patient require care on an intermittent or reduced schedule basis, including any time for recovery? No Yes

If so, estimate the hours the patient needs care on an intermittent basis: _____ hour(s) per day;

_____ days per week from _____ through _____

7. Will the condition cause episodic flare-ups periodically preventing the patient from participating in normal daily activities?

No Yes

Does the patient need care during these flare-ups? No Yes

Based upon the patient's medical history and your knowledge of the medical condition, estimate the frequency of flare-ups and the approximate duration of related incapacity that the patient may have over the next 6 months (e.g., 1 episode every 3 months lasting 1-2 days):

Frequency: _____ times per _____ week(s) month(s) _____ Duration: _____ hours or _____ day(s) per episode

Note: Conditions requiring intermittent leave requires recertification by Medical Practitioner every 30 days from previous approval date

(Printed Name of Medical Practitioner)

(Signature of Medical Practitioner)

(Type of Practice)

(Address)

(Date)

(Telephone Number)

(Fax Number)

Submit completed form & a print-out of your most recent leave balances to:

University of Maryland
Human Resource Services; ER/LR
620 West Lexington Street, 3rd Floor
Baltimore, MD 21201
Attn: FMLA
Phone: 410-706-7302 Fax: 410-706-0169



Employee Rights under the Family and Medical Act (FMLA) of 1993

The Family and Medical Leave Act (FMLA) requires the University to provide up to 12 weeks (480 hours) of leave to eligible employees. To be eligible an employee must have worked for the University or within the University System of Maryland for at least 12 months and have worked at least 1,040 hours in the 12 months preceding the leave. FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered service member.

QUALIFYING REASONS FOR FMLA LEAVE

FMLA leave may be granted for **any** of the following reasons:

- The birth of a child, or placement of a child for adoption or foster care
- For a serious health condition that renders an employee temporarily unable to perform his/her job
- To care for the employee's spouse, child, or parent who has a serious health condition
- Due to a qualifying exigency of a spouse, child, or parent on active duty or called to active duty status in support of a contingency operation as a member of the National Guard or Reserves
- For a serious injury or illness of a service member who is a spouse, child, parent, or next of kin

ADMINISTRATION:

The 12 weeks of FMLA leave may be paid, unpaid, or partially paid. **The University System of Maryland requires employees to use all accrued leave before going into an unpaid status.** Therefore, any paid leave taken for a qualifying reason under FMLA is applied towards accrued leave balances. The University defines the one-year period of eligibility on a calendar basis, January 1 through December 31. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for medical treatment so as not to unduly disrupt the University's operations. University forms are required. These forms may be obtained online at <http://hr.umaryland.edu/main/hrforms.htm>.

EMPLOYEE RESPONSIBILITY:

FML is subject to meeting the requirements below:

- Provide 30 days advance notice in writing to direct supervisor when the leave is scheduled and foreseeable or as soon as practical in an emergency situation, to include anticipated duration
- Submit FML Application to ER/LR within 30 days when leave is scheduled and foreseeable or as soon as possible
- Provide medical certification completed by a physician to support a serious health condition of the employee or that of an immediate family member within 15 calendar days from the date of request
- Provide periodic progress reports to direct supervisor as to the ability to return to work as indicated, providing additional medical certification to ER/LR if required
- Submit recertification every 30 days for conditions requiring intermittent leave
- Obtain leave balances to determine if sufficient pay is available, if not inquire about Advanced Sick Leave
- Submit return to work certification from physician to your supervisor on your first day back to work

EMPLOYER RESPONSIBILITY:

- Inform employee of eligibility under FMLA within 5 days of the employee's request
- Inform employee of rights and responsibilities
- Maintain the employee's health coverage under any group plan for the duration of FMLA designated leave
- Inform employee of leave designated as FMLA-protected and the amount counted against leave entitlement
- Restore employee to his/her original or equivalent position with equivalent pay and benefits upon return from FML
- Ensure the use of FML does not result in the loss of any employment benefit that accrued prior to the start of an employee's leave

FOR FURTHER INFORMATION:

USM POLICY #VII - 7.50 USM POLICY ON FAMILY AND MEDICAL LEAVE FOR EXEMPT AND NONEXEMPT STAFF EMPLOYEES can be found at: <http://www.usmd.edu/regents/bylaws/SectionVII/VII750.html>

UMB Policy #VII - 7.50(A) UMB POLICY ON FAMILY AND MEDICAL LEAVE FOR EXEMPT AND NONEXEMPT STAFF EMPLOYEES can be found at: <http://cf.umaryland.edu/hrpolicies/section7/t70750Asa.html>

Please contact Employee and Labor Relations at 410-706-7302 with any questions.

FMLA DEFINITIONS

Accrued Leave - Earned and unused annual leave, certain holiday leave, sick leave available for use under the sick leave policy, compensatory leave, and unused personal leave.

Alternative Position - A position to which an eligible employee may be temporarily reassigned during a period of intermittent Family and Medical (F&M) leave and/or working a reduced schedule. The alternative position shall have equivalent benefits and pay as the position from which the eligible employee was reassigned.

Care - "to take care of" or "to care for". The term care is intended to be read broadly to include both physical and psychological care. The language applies to the period of inpatient care and home care as well.

Child (except for military F&M leave requests) - A person who is the son or daughter of an eligible employee and who is under eighteen (18) years of age; or, eighteen (18) years of age or older and incapable of self-care because of a mental or physical disability during the period of the serious illness. The son(s) and/or daughter(s) may be the biological, adopted, step or foster child(ren) of the eligible employee. The term "child" shall also include someone who is the legal ward of the eligible employee or someone for whom the eligible employee has provided sufficient, notarized affidavit(s) and proof of financial dependence that he/she is standing *in loco parentis*.

Eligible Employee - An employee who has been employed for a total of at least twelve (12) months as a USM or a State of Maryland employee; and who has worked for at least one thousand and forty (1,040) hours during the twelve (12) month period immediately prior to the beginning date of the leave as a USM or State of Maryland employee. For part-time employees on at least a 50% basis, the minimum number of hours required for eligibility shall be prorated. For convenience, within the text of this policy the term "employee" instead of "eligible employee" shall be used.

Equivalent Position - A position at the institution to which an employee may be restored upon the completion of the F&M leave. The equivalent position shall have equivalent benefits, pay, and other terms and conditions of employment as the position from which the employee took leave.

Health Care Providers - Are Doctors of Medicine or Osteopathy, Podiatrists, Dentists, Clinical Psychologists, Optometrists, Chiropractors, nurse practitioners and nurse midwives, as authorized to practice by the State of Maryland, Christian Science Practitioners listed with the First Church of Christ Scientist in Boston; and Licensed Clinical Professional Counselor.

Immediate Family Member - Is the employee's parent(s), spouse, or child(ren), or legal dependent(s).

In Loco Parentis - "In the place of a parent; instead of a parent; charged, factitiously, with a parent's rights, duties and responsibilities." Any employee claiming an *in loco parentis* relationship with a child, or any employee claiming to be the child of an *in loco parentis* relationship may be requested to provide documentation of such relationship.

Next of Kin - Is the nearest blood relative other than the covered service member's spouse, parent or child in the following order of priority: **1.** A blood relative who the covered service member has specifically designated in writing as his or her nearest blood relative for purposes of military caregiver leave under the FMLA; **2.** Blood relatives who have been granted legal custody of the covered service member by court decree or statutory provision; **3.** Brothers and sisters; **4.** Grandparents; **5.** Aunts and uncles; **6.** First cousins.

Restoration - As used within the FMLA and used within this policy, restoration is an institutional guarantee that at the conclusion of the F&M leave the employee will be returned either to the same position from which he/she took leave, or to an equivalent position within the same job classification.

Serious Health Condition - Is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical facility or continuing treatment by a health care provider. A serious health condition is also intended to cover conditions or illnesses that affect the employee's health or the health of the employee's immediate family to the extent that the family member is in the hospital or other health care facility or at home and unable to care for his/her own basic hygienic or nutritional needs or safety such that the employee must be absent from work on a regular and recurring basis for more than a few days for treatment or recovery. F&M leave is not intended to cover minor illnesses that last less than four days and short term medical and/or surgical procedures that require only a brief recovery period of less than four days which are normally handled through sick leave. With respect to the employee, a serious health condition means that the employee must be incapacitated from performing the essential functions of his/her position.

Spouse - The person to whom the eligible employee is legally married -- a husband or a wife.