

FMLA Introduction

This brochure was created to give a summary of the processes employees must go through to request, extend and return from Family and Medical Leave Act leaves of absence.

The Family and Medical Leave Act (FMLA) of 1993 is a federal law enacted to help employees balance their work and family life and to promote the stability and economic security of families. It allows eligible employees to take job-protected unpaid leave, or substitute appropriate paid leave if the employee has accrued balances, for up to a total of 12 workweeks during a 12-month period (July 1 - June 30) for a qualifying personal serious health condition or an eligible family member. Military service members and their families also are eligible for FMLA leaves under certain circumstances.

To be eligible for taking a leave under FMLA, you must have been employed at the University for a total of 12 months (may have been intermittent employment) and have worked at least 1,250 work hours during the 12-month period immediately preceding the commencement of FMLA leave. The law is complex and the above text is only intended to be a brief description. You can find more detailed information about FMLA leaves and eligibility requirements on the MSU Human Resources website at www.hr.msu.edu.

FMLA Forms

Form 1: Notice of Eligibility, Rights and Responsibilities and Designation Notice

In general, to be eligible you must have worked for MSU for at least 12 months, and have worked at least 1,250 hours in the 12 months preceding the leave. This form is required by the University and must be provided within five business days of you notifying MSU of the need for FMLA leave.

Form 2: Certification by Health Care Provider for Employee's Serious Health Condition

If you are seeking FMLA protections because of a need for leave due to your own serious health condition, MSU requires you to submit a medical certification issued by your health care provider.

Form 3: Certification of Health Care Provider for Family Member's Serious Health Condition

If you are seeking FMLA protections because you need to care for a covered family member with a serious health condition, MSU requires you to submit a medical certification issued by the health care provider of your family member.

Form 4: Certification of Qualifying Exigency for Military Family Leave

If you are seeking FMLA leave due to a qualifying exigency, MSU requires you to submit a certification.

Form 5: Certification for Serious Injury or Illness of Covered Service Member for Military Family Leave

If you are seeking FMLA protections because you need to care for a covered service member with a serious health condition, MSU requires you to submit a medical certification issued by the health care provider of your family member.

MICHIGAN STATE
UNIVERSITY

Family and Medical Leave Act (FMLA)

How to Use this Benefit

MSU Human Resources Benefits FMLA/Leave Team

1407 S. Harrison Road

Nisbet Building, Suite 140

East Lansing, MI 48823-5246

517-353-4434 or toll-free 800-353-4434

FMLAleave@hr.msu.edu

www.hr.msu.edu

FMLA Request Process

You believe you have a qualifying event under the Family and Medical Leave Act (FMLA), and you want to know how to request leave. Here's how:

1. Let your supervisor know you may have a qualifying FMLA event (i.e., your own serious health condition, family member's serious health condition, exigency leave or military family leave)
2. Contact the HR Benefits Office:
 - Call 517-353-4434, ask for FMLA/Leave team member
 - E-mail FMLAleave@hr.msu.edu
 - Schedule an appointment with a FMLA/Leave team member (appointments are strongly encouraged)
3. An FMLA/Leave team member will work with you to determine your eligibility, inform you of your rights and responsibilities under the act and help you begin completing the required forms. They will ask for the following required information:
 - Name;
 - Supervisor and contact information including e-mail address;
 - Reason for FMLA Leave (serious health condition, birth, adoption, exigency, etc.);
 - Type of FMLA (consecutive weeks, intermittent leave, or reduced leave). If leave is for consecutive weeks, you need to give your department the appropriate thirty (30) day notice if it's foreseeable;
 - Preferred way to be contacted, including scheduled in-person appointments, phone, e-mail or fax.
- If the FMLA is for your own serious health condition, your job description must be included with the form being provided to your health care provider (if your department does not have a specific job description, you will be directed to HR website for the classification description).
4. Once all the information is received, the FMLA/Leave team member will contact you regarding eligibility within five business days.
 - If you are **not eligible**, the FMLA/Leave team member will discuss what contractual options are available if you are union represented. If you are non-represented, they will discuss what University rights you have available, including sick leave, maternity leave, etc., and accruals you are required to use (i.e. family sick for a family member and sick leave for your own health condition).
 - If you are **eligible**, the FMLA/Leave team member will further discuss your rights and responsibilities, including accruals you are required to use and forms or documentation required. You have 15 calendar days to return any forms to the Benefits office. If they are not returned within the 15 days, your FMLA may be denied.
5. If you are approved after all the forms are completed, the final step is to sign a Designation Notice. The FMLA/Leave team member will give you copies of your forms and contact your department with necessary information regarding your leave.

Leave Extension

- You will need to notify the FMLA/Leave team at least one week prior to the end of the current leave that your leave needs to be extended.
- The FMLA/Leave team will determine what paperwork will be required for an extension of the leave to be approved (i.e., health care providers note or a new certification form).
- Once approved or denied, the FMLA/Leave team will notify your department of the leave extension or when to expect you to return to work.

Leave Return

- You will need to give the FMLA/Leave team a release to return to work as soon as you have a release from your health care provider.
- You may be delayed by two days if the FMLA/Leave team is questioning the return to work because of restrictions that may limit you from performing the essential functions of your position. They may request:
 - o a release through the University Physician's Office or
 - o you to take a Physical Demands Test.
- If you are delayed by more than two days, your department will place you back on pay until you are officially released.
- Once you are completely released, the FMLA/Leave team will contact your department and notify them of when you will be returning and provide them with a copy of your release.