

# Serious Illness Checklist for Employees

\_\_\_\_\_ For FMLA eligibility, have you been employed with the Commission for at least 12 months?

\_\_\_\_\_ Have you worked at least 1,250 during the past 12 months of employment? Note that only actual hours worked count toward the 1,250 hour requirement. Vacation time, sick time, personal time or time spent in leave no pay status do not count toward the calculation of hours worked.

\_\_\_\_\_ Is the reason qualifying under the Act? In other words, is it a “serious health condition as defined by the Family and Medical Leave Act?”

\_\_\_\_\_ Have you contacted the Human Resources Office for the appropriate forms, including FMLA and Sickness and Accident (S&A) at least 30 days prior to scheduled surgery or foreseeable conditions? The Employer has the right under the FMLA to postpone your approval until 30 days have expired in foreseeable conditions.

\_\_\_\_\_ Have you provided the Human Resources Office with the Medical Certification Form no later than 15 days after the need for leave?

\_\_\_\_\_ Have you exhausted all or a portion of your 12 weeks (or 480 hours) during the previous 12 months?

\_\_\_\_\_ Have you made health insurance payment arrangements for when you’re off work? If you have exhausted all paid leave, then arrangements will need to be paid for payment of your share of the monthly health insurance premium and/or any supplemental insurance deductions you would normally have.

\_\_\_\_\_ If the request is for Intermittent Leave, have you made arrangements to schedule your medical visits outside of your normal working hours, which can be required by the FMLA?

## **Employer Rights Under the FMLA:**

1. The Employer has the right to seek a second opinion.
2. The Employer may seek the assistance of another medical professional to correspond on the employer’s behalf with the employee’s doctor to gain additional information or to question information given on the Medical Certification Form.
3. The Employer can require that, in cases of intermittent leave, medical appointments be scheduled outside normal working hours or not interfere with the work schedule.
4. In situations of suspected abuse (i.e., pattern absenteeism), the Employer can request Recertification to occur every 30 days.
5. Leave under Workers’ Compensation is designated as FMLA leave.
6. The Employer has the right to designate leave as FMLA, even if the employee requests otherwise.