



FAMILY MEDICAL LEAVE ACT (FMLA), EXTENDED MEDICAL LEAVE (EML) AND AMERICANS WITH DISABILITY (ADA) WORKPLACE ACCOMMODATIONS GUIDE FOR DEPARTMENTS AND EMPLOYEES

JEFFERSON COUNTY COMMISSION | HUMAN RESOURCES



Family Medical Leave Act (FMLA), Extended Medical Leave (EML), and Americans with Disability (ADA) Workplace Accommodations Guide for Departments and Employees

Jefferson County Commission Human Resources Department

The County Manager's expectation is that Jefferson County Commission employees and departments adhere to federal (FMLA) and county (EML) leaves of absence, and workplace accommodations that may qualify for Americans with Disability Act (ADA).

Instructions and Responsibilities of the Employee and Department:

The Department Head is responsible for ensuring the department adheres to applicable leaves of absence, and workplace accommodations requirements in compliance with applicable rules and regulations. The Employee is responsible for following procedures contained in this guide, communicating with FMLASource, information their supervisor/manager of leaves of absence, and following their department call-in procedures. Employees are also responsible for completing documents received from FMLASource promptly and ensuring requested information and/or packets are submitted back to FMLASource by the required timeframe. For FMLA requests, employees should submit the completed Leave Request package complete with their physician's medical certification within 15 days of receiving the packet.

Supervisors/Managers, Payroll Coordinators and Department Heads will receive weekly reports for their employees as applicable. Examples of reports include but are not limited to Leave Request and Status Reports, Leave Usage Reports, and Return to Work Reports. Departments should update the employee leave record in UKG upon receiving leave of absence decisions/updates and reports from FMLASource and reconcile to ensure the UKG leave record is accurate.

Human Resources will confer with Supervisors/Managers and Department Heads regarding workplace accommodation requests following notification from FMLASource. Human Resources will contact the Legal Department as needed. In the event of discrepancies or if it appears an employee may be abusing one or more of the leave types administered by FMLASource, please contact Human Resources.

This guide covers the tasks and responsibilities of the Employee, Department and Human Resources with regards to FMLA, EML and ADA workplace accommodation.

Procedure Overview

Task	Task Description	Responsible Party
Verify	Verify the following: a) You or an immediate family member have a medical condition that will warrant a consecutive absence of three (3) days or greater, or intermittent absences on a consistent frequency not exceeding three (3) consecutive days for each absence. If you have a qualifying FMLA situation, please file for FMLA even if you have Sick or Vacation time available. To check if your situation is FMLA qualifying, please click the link below: https://www.dol.gov/general/topic/benefits-leave/fmla . b) You have a medical condition and are not eligible for Family Medical Leave (FMLA) or have exhausted all available sick or vacation time. Initiate a Leave of absence claim. FMLASource will determine the appropriate leave which may include but not limited to Extended Medical Leave (EML) or ADA Accommodation/Leave. c) You need to request a Workplace Accommodation under the Americans with Disability Act (ADA).	Employee

Task	Task Description	Responsible Party
Contact & Initiate	Effective January 1, 2024, contact FMLASource at (888) 789-3994, or go online to www.fmlasource.com , or Mobile App download 'FMLASource Now', or email FMLACenter@fmlasource.com , to initiate a new FMLA, Extended Medical Leave (EML) or ADA Workplace Accommodation request/claim.	Employee
Contact	Contact your immediate supervisor/manager to inform him or her of your need to request leave of absence and the dates you anticipate you will be absent as soon as possible or at the earliest date after becoming aware of the need.	Employee
Obtain	FMLASource will send employee a Leave Request Packet or Workplace Accommodation Request information following initiation of a request/claim.	FMLASource
Complete	Complete the Leave Request Packet or Workplace Accommodation Request information following receipt of the packet from FMLASource, employee completes their portion of the packet and has their health care provider complete their portion.	Employee
Verify	Upon receipt of the health care provider's certification, verify the employee and health care provider portions.	Employee
Submit	Employee submits to FMLASource the completed Leave Request Packet/information within 15 days of initial receipt of the packet, to include medical certification.	Employee
Obtains	FMLASource obtains and reviews completed packet/information from employee.	FMLASource
Verify	For EML requests, HR verifies employee eligibility for leave type.	HR
Submit	For EML requests, the Department Head submits a memo to HR detailing how the employee's duties will be covered during the absence. The memo should state that no overtime or temporary agency personnel will be utilized to cover the employee's duties.	Department Head
Verify	For EML requests, HR verifies receipt of department head memo as indicated in Administrative Order 07-2.	HR
Update	HR updates FMLASource on employee eligibility and receipt of departmental memo.	HR
Submit	FMLASource submits decision letter indicating approval, denial, or partial approval and sends employee "Your Next Steps" document.	FMLASource
Update	Department updates employee time record in UKG following receipt of decision letter from FMLASource.	Department Representative/ Payroll Coordinator
Contact	Contact FMLASource regarding extensions or changes in your leave of absence(s) and return to work dates.	Employee
Contact	Contact your immediate supervisor/manager regarding extensions or changes in your consecutive leave of absence(s) and return to work dates.	Employee
Submit	FMLASource submits updated decision letter if extension or change is approved.	FMLASource
Update	Department updates employee time record in UKG following receipt of updated decision letter from FMLASource.	Department Representative/ Payroll Coordinator
Contact	Contact FMLASource regarding absence(s) related to any intermittent FMLA.	Employee
Contact	Contact your immediate supervisor/manager regarding absence(s) related to any intermittent FMLA and follow department's call-in procedures.	Employee
Submit	FMLASource submits leave usage and/or leave usage report.	FMLASource
Update	Department updates and reconciles employee time record in UKG following receipt of FMLASource leave usage and/or leave usage report.	Department Representative/ Payroll Coordinator

Task	Task Description	Responsible Party
Submit	Submit Return to Work form signed by your physician to FMLASource prior to returning to work with no restrictions if FMLA is related to your own medical condition.	Employee
Submit	FMLASource submits Return to Work form and Return to Work Report.	FMLASource
Update	Department updates and reconciles employee time record in UKG following receipt of FMLASource Return to Work form and Return to Work Report.	Department Representative/ Payroll Coordinator
Contact	For Workplace Accommodation requests, HR contacts employee supervisor regarding requested accommodation that may qualify under ADA following notification by FMLASource.	HR
Submit	For Workplace Accommodation requests, supervisor/manager submits documentation confirming action(s) completed regarding the requested workplace accommodation.	Supervisor/ Manager/ Department Head
Update	HR updates FMLASource on department documentation confirming completed action(s) regarding workplace accommodation.	HR
Submit	FMLASource submits workplace accommodation decision.	FMLASource
Document	Ensure Return to Work form, Workplace Accommodation, and other applicable FMLA, EML documents received from FMLASource are documented in the applicable employee's UKG Leave file and on the shared T-Drive.	HRIS Division and Benefits Division

NOTE:

Please note the following related to APPROVED Consecutive and Intermittent FMLA:

- Leave rights are limited to twelve (12) weeks in a rolling twelve (12) month period.
- Following confirmation of approval of FMLA from FMLASource, Payroll Coordinator should ensure FMLA time will first be subtracted from sick time, then from vacation time, if employee has accrued sick and vacation time.
- Once sick time and vacation time is exhausted, **unpaid** FMLA time is related to the approved FMLA request.
- As required by Federal Regulations, it is an employee's responsibility to make every reasonable attempt to arrange planned medical treatments as to not unnecessarily disrupt department operations.

Please note the following related to APPROVED Intermittent FMLA:

- Employee must follow your department's call-in procedures.
- **If absences related to an intermittent request exceed three (3) consecutive days, refer to and follow the above steps to apply for consecutive FMLA.**

For assistance, please contact Human Resources:
716 Richard Arrington, Jr. Blvd., N. | Suite Annex 600 | Birmingham, AL 35203 | 205-325-5249