

## BOX ELDER COUNTY PERSONNEL POLICIES AND PROCEDURES

<b>14.</b>	<b>FAMILY AND MEDICAL LEAVES OF ABSENCE</b>
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### **14-1. PURPOSE**

To outline the conditions under which an employee may request time off without pay for a limited period with job protection and no loss of accumulated service provided the employee returns to work.

### **14-2. DEFINITION**

A family and/or medical leave of absence shall be defined as an approved absence available to eligible employees for up to twelve weeks of unpaid leave per year under particular circumstances that are critical to the life of a family. Leave may be taken: upon the birth of the employee's child; upon the placement of a child with the employee for adoption or foster care; when the employee is needed to care for a child, spouse, or parent who has a serious health condition; or when the employee is unable to perform the functions of his or her position because of a serious health condition.

### **14-3. SCOPE**

The provisions of this policy shall apply to all family and medical leaves of absence except to the extent that such leaves are covered under other paid employment benefit plans or policies for any part of the twelve weeks of leave to which the employee may be entitled under this policy. In other words, if an employee is entitled to paid leave under another benefit plan or policy, the employee must take the paid leave first.

### **14-4. ELIGIBILITY**

To be eligible for leave under this policy an employee must have been employed for at least twelve months in total, and must have worked at least 1250 hours during the twelve month period preceding the commencement of the leave.

Exception: If the employee on leave is a salaried employee and is among the highest paid ten percent of county employees within seventy-five miles, and keeping the job open for the employee would result in substantial economic injury to the county, reinstatement to the employee on leave can be denied. In this situation, however, the employee will be given an opportunity to return to work.

#### **14-5. BASIC REGULATIONS AND CONDITIONS OF LEAVE**

1. The county will require medical certification to support a claim for leave for an employee's own serious health condition or to care for a seriously ill child, spouse or parent. For the employee's own medical leave, the certification must include a statement that the employee is unable to perform the functions of his or her position. For leave to care for a seriously ill child, spouse or parent, the certification must include an estimate of the amount of time the employee is needed to provide care. In its discretion, the county may require a second medical opinion and periodic recertification at its own expense. If the first and second opinions differ, the county, at its own expense, may require the binding opinion of a third health care provider, approved jointly by the county and the employee.
2. If medically necessary for a serious health condition of the employee or his or her spouse, child or parent, leave may be taken on an intermittent or reduced leave schedule. If leave is requested on this basis, however, the county may require the employee to transfer temporarily to an alternative position which better accommodates recurring periods of absence or a part-time schedule, provided that the position has equivalent pay and benefits.
3. Spouses who are both employed by the county are entitled to a total of twelve weeks of leave (rather than twelve weeks each) for the birth or adoption of a child or for the care of a sick parent.

#### **14-6. NOTIFICATION AND REPORTING REQUIREMENTS**

When the need for leave is foreseeable, such as the birth or adoption of a child, or planned medical treatment, the employee must provide reasonable prior notice, and make efforts to schedule leave so as not to disrupt county operations. In cases of illness, the employee will be required to report periodically on his or her leave status and intention to return to work.

#### **14-7. STATUS OF EMPLOYEE BENEFITS DURING LEAVES OF ABSENCE**

1. Any employee who is granted an approved leave of absence under this policy is advised to provide for the retention of his or her group insurance coverage by arranging to pay the premium contributions during the period of unpaid absence.
2. In the event that an employee elects not to return to work upon completion of an approved unpaid leave of absence, the county may recover from the employee the cost of any payments made to maintain the employee's coverage, unless the failure to return to work was for reasons beyond the

employee's control. Benefit entitlement based upon length of service will be calculated as of the last paid work day prior to the start of the unpaid leave of absence.

#### **14-8. PROCEDURES**

1. Completion of Request for Family and Medical Leave of Absence Form:
  - a. A Box Elder County Request for Leave of Absence must be originated in duplicate by the employee. This request form should be completed in detail, signed by the employee, submitted to the immediate supervisor for proper approvals, forwarded to the Personnel Department. (See Form 006 BEC:OPM 6-88). If possible, the form should be submitted thirty (30) days in advance of the effective date of the leave.
2. All requests for family and medical leaves of absence due to illness will include the following information attached to a completed Request for Leave of Absence: Sufficient medical certification stating 1) the date on which the serious health condition commenced; 2) the probable duration of the condition; and 3) the appropriate medical facts within the knowledge of the health care provider regarding the condition. In addition, for purposes of leave to care for a child, spouse, or parent, the certificate should give an estimate of the amount of time that the employee is needed to provide such care. For purposes of leave for an employee's illness, the certificate must state that the employee is unable to perform the functions of his or her position. In the case of certification for intermittent leave or leave on a reduced leave schedule for planned medical treatment, the dates on which such treatment is expected to be given and the duration of such treatment must be stated.