CAMERON UNIVERSITY
Family and Medical Leave Act Policy

Policy Statement

The University’s Family and Medical Leave Act (FMLA) Policy incorporates provisions of existing University policies and the federal Family and Medical Leave Act (FMLA) of 1993. It provides eligible employees up to 12 workweeks of paid and/or unpaid protected leave for qualified family and medical related reasons.

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Who Should Know This Policy

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Responsibilities

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STATEMENT OF PURPOSE: This policy sets forth the provisions of Cameron University’s FMLA protected leave benefit. In the event that additional clarification is needed, the actual Act and regulations issued by the federal government will be provided.

1.0 Definitions

1.1 Eligible employee: an employee that has been employed by the University a minimum of 12 months, which need not be consecutive, and has worked at least 1,250 hours within the previous 12 months as of the date the FMLA protected leave commences.

1.2 Serious health condition: an illness, injury, impairment, or physical or mental condition that involves:

1.2.1 any period of incapacity or treatment connected with inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical care facility; or

1.2.2 a period of incapacity requiring absence of more than three calendar days from work, school, or other regular daily activities that also involves continuing treatment by (or under the supervision of) a health care provider; or

1.2.3 any period of incapacity due to pregnancy, or for prenatal care; or

1.2.4 any period of incapacity (or treatment therefrom) due to a chronic serious health condition (e.g., asthma, diabetes, epilepsy, etc.); or

1.2.5 a period of incapacity that is permanent or long-term due to a condition for which treatment may not be effective (e.g., Alzheimer’s, stroke, terminal diseases, etc.); or

1.2.6 any absences to receive multiple treatments (including any period of recovery therefrom) by, or on referral by, a health care provider for a condition that likely would result in incapacity of more than three consecutive days if left untreated (e.g., chemotherapy, physical therapy, dialysis, etc.)

1.3 Family members defined under the Family and Medical Leave Act as follows:

1.3.1 Son or daughter: a biological, adopted, or foster child, a stepchild, legal ward, or a child of a person standing in loco parentis, (1) who is under age 18, or (2) older and incapable of self-care because of a mental or physical disability. In loco parentis are persons with day-to-day responsibilities to care for and financially support a child. A legal or biological relationship is not necessary. Physical or mental disability is defined by the United States Department of Labor regulations issued pursuant to the Americans with Disabilities Act.

1.3.2 Spouse: a husband or wife as defined or recognized under State law for purposes of marriage.

1.3.3 Parent: a biological parent or a person who stood in loco parentis to an employee when the employee was a son or daughter. This term does not include parents "in law."
2.0 Qualifying Events

2.1 The birth and care of a newborn child

2.2 The placement of a child for adoption or foster care and to care for the newly placed child

2.3 To care for the employee’s spouse, son, daughter, or parent with a serious health condition

2.4 The employee’s own serious health condition

2.5 Absence from work for Workers’ Compensation injuries or illnesses which qualify as serious health conditions will be counted as part of an employee’s FMLA protected leave benefit.

2.6 Circumstances during pregnancy that result in a serious health condition which continue over an extended period of time, require periodic visits to a health care provider, and may involve occasional episodes of incapacity, will be considered FMLA qualifying events. A visit to a health care provider is not necessary for each absence.

3.0 Leave Entitlement

3.1 Any employee who has been employed at Cameron for at least one year, and has worked for at least 1,250 hours in the previous year and has a qualifying event is eligible for FMLA leave. No employee shall be allowed to take more than 12 weeks of FMLA leave during a calendar year (January 1–December 31).

3.2 To be eligible for a FMLA protected leave, a qualifying event must fall within the employee’s term of employment. FMLA protected leave for the birth, adoption, or placement of a foster child is to be taken consecutively without interruption and must end no later than twelve months after the day of birth or placement of the child/children.

3.3 When two eligible employees are spouses employed by the University, the combined number of workweeks of FMLA protected leave to which both are entitled may be limited to 12 workweeks during any 12 month period, if FMLA protected leave is taken:

3.3.1 Because of the birth, adoption or foster care placement of a son or daughter, to care for such son or daughter; or

3.3.2 To care for a sick parent.

3.4 Pregnancy is to be treated as any other sick leave, with the duration of the disability to be medically determined. An employee may continue normal duties through pregnancy or use available leave while unable to perform regular duties.

3.5 FMLA protected leave may be taken intermittently or on a reduced-time basis (e.g. by working fewer days in a week or by fewer hours in a day) when medically necessary to care for a seriously ill family member, or because the employee is seriously ill and unable to work.
4.0 Employee Notice and Certification Procedures

4.1 Requests for FMLA protected leave must be in writing and must include the reason for the request and the anticipated time period for the leave.

4.1.1 Under unusual circumstances, a preliminary request of FMLA protected leave can be made based on verbal notification by either the supervisor or employee.

4.2 Employees seeking to use FMLA protected leave are required to provide 30 day advance notice of the need to take FMLA protected leave when the need is foreseeable and such notice is practical.

4.3 If an employee’s health condition or a family member’s health condition causes a period of incapacity greater than three consecutive work days, the supervisor or employee should contact the Human Resources Office for possible FMLA protected leave action. Incapacity is defined as the inability to work, attend school or perform other regular daily activities due to a health condition.

4.4 Medical certification will be documented on the Department of Labor Certification of Health Care Provider Form (WH-380) which will be forwarded to the employee by the Human Resources Office. Return of the completed form will be required for the preliminary designation of FMLA protected leave to become final. This certification ordinarily must be returned to the university Human Resources Office within 15 days from the date received.

4.5 Continued doctor certification will be required if the situation warrants, but not more frequently than every 30 days unless the university has reason to believe the employee is able to return to work.

4.6 In any case in which the employer has reason to doubt the validity of the certification provided, the employer may require, at the expense of employer, the eligible employee obtain the opinion of a second health care provider designated or approved by the employer concerning any information certified.

4.7 FMLA protected leave will be denied if the employee fails to provide the required medical certification on a timely basis.

5.0 Substitution of Paid Leave for Unpaid Leave

5.1 Employees are required to use any authorized accrued annual or sick leave during an approved FMLA leave due to a qualifying event as described above.

5.2 Employees are required to report the use of accrued annual or sick leave used during approved FMLA leave on the appropriate timesheet(s) and/or Leave Report in accordance with Cameron University’s leave policies.

6.0 Benefit Plan Continuation

6.1 The University will continue to pay the cost of employer provided insurance coverage for employees on FMLA protected leave.
6.2 The employee will continue to be responsible for payment of premiums for any additional coverage or elected dependent coverage.

6.3 The employee will be responsible for contacting the Human Resources Office as soon as possible to determine premium payment requirements.

6.4 Employees on FMLA protected leave will be eligible to change insurance coverage during the Annual Enrollment Period.

6.5 Employees on FMLA protected leave not returning to work are eligible for continued insurance coverage as provided by the Federal Consolidated Omnibus Budget Reconciliation Act (COBRA) health benefit provision.

7.0 Job Restoration

7.1 Upon return from FMLA protected leave, an employee will be restored to his/her same or equivalent position with equivalent pay, benefits, and other employment terms.

7.2 In the event of budgetary or organizational changes during the period of absence, the employee shall be treated as if he/she were occupying the same position at the time of the change.

7.3 Under specified and limited circumstances where restoration to employment will cause substantial and grievous economic injury to its operations, the University may refuse to reinstate certain highly-paid “key” employees after using FMLA protected leave during which health coverage was maintained.

7.4 If the reason for FMLA protected leave is personal illness or injury of the employee, prior to returning to work, medical proof of fitness to return to work will be required indicating the employee is able to perform the essential functions of the job.

7.5 Time on leave of absence without pay may not count toward credited service for Oklahoma Teachers Retirement (OTRS) purposes. The rules of the Oklahoma Teachers’ Retirement System (OTRS) will prevail.

7.6 If an employee does not return to work as agreed upon after an FMLA protected leave, unless other arrangements are made, he/she shall be considered to have resigned from the university, effective the last day they were paid.

7.7 An employee returning from an FMLA protected leave is required to contact their supervisor and the Human Resources Office at least two working days prior to the date the employee intends to report for work.

8.0 Notices to Employees

8.1 A complete copy of the Family and Medical Leave Act is available for review in the Human Resources Office.
8.2 When notified by the supervisor or employee, the Human Resources Office will send the employee certified correspondence designating preliminary FMLA leave in addition to the FMLA Fact Sheet and the Department of Labor Certification of Health Care Provider Form (WH-380).

9.0 Recordkeeping

9.1 The Human Resources Office will maintain adequate up-to-date records for each staff member that accurately reflects the amount of FMLA protected leave taken.

9.2 The Human Resources Office will maintain annual and sick leave taken and remaining balances. FMLA protected leave used will be reported by the employee on the appropriate timesheet(s) and/or Leave Report.

9.3 Documentation relating to the use of FMLA protected leave will be maintained by the Human Resources Office for three years.

Contacts

Policy Questions: Human Resources Office, 580-581-2245

Forms

In support of this policy, the following forms are included:
Department of Labor Certification of Health Care Provider (Form WH-380)
U.S. Department of Labor Information Form

Policy History

Policy
Issue Date: January 25, 2005
Reviewed, no revision: February 2016
Revised: June 23, 2014
Revised: April 6, 2017