

**THE COUNTY OF MONMOUTH
FAMILY and MEDICAL LEAVE POLICY**

The Federal Family and Medical Leave Act and the New Jersey Family Leave Law provide up to 12 workweeks of unpaid leave to eligible employees to take time off from work due to their own serious health condition or to fulfill certain family obligations.

Eligible Employees means those employees who have been employed by the County of Monmouth for 12 months and worked 1000 hours during the 12-month period immediately before the commencement of the leave. Time not worked such as vacation, sick or personal leave is not counted in calculating the 1000 hours worked requirement.

Under Federal Law Leave Entitlement means eligible employees are entitled to a total of 12 workweeks of unpaid leave in a 12-month period for one or more of the following reasons:

- birth of an employee's son or daughter;
- care for the employee's newborn son or daughter;
- placement with the employee of a son or daughter for adoption or foster care;
- care for a newly placed son or daughter;
- care for the employee's spouse, child, or parent with a "serious health condition"; or
- the employee's own "serious health condition" that makes the employee unable to perform any essential function of the employee's job.

Under State Law Leave Entitlement means eligible employees are entitled to a total of 12 workweeks of unpaid leave in a 12-month period for one or more of the following reasons:

- to care for or bond with a child within 1 year of the child's birth or placement for adoption or foster care, or
- to care for a family member (child, parent, parent-in-law, sibling, grandparent, grandchild, spouse, domestic partner, civil union partner, and any other person related by blood), or
- someone who is the "equivalent" of family, who has a serious health condition, or
- care for a victim of domestic violence or a sexually violent offense or for a victim's family member.

**Note that the New Jersey Family Leave Act does not provide
leave for the employee's own serious health condition.**

**LEAVE TAKEN FOR INTERMITTENT BABY BONDING REQUIRES 15 DAYS PRIOR
NOTICE FROM THE EMPLOYEE or the REQUEST MAY BE DENIED**

Leave for the birth, placement for adoption or foster care, to care for the employee's newborn child or care for the employee's newly placed child must conclude within 12 months of the date of the child's birth or placement.

The 12-month period in which the 12 weeks of leave entitlement occurs will be measured forward from the date an employee's first Family and Medical Leave begins.

Intermittent or Reduced Schedule Leave is permitted under the following circumstances:

- to care for a child, spouse or parent who has a serious health condition or for the employee's own serious health condition and **only** when the leave is **medically necessary** which means there exists an urgent reason for visiting the health care provider on a particular date and time or where the employee is only needed to provide care intermittently;
- is clearly supported by a fully completed Certification of Health Care Provider form; **and**
- Thirty (30) days advance notice of the leave has been provided (*15 days prior notice for baby bonding*) or, if the leave is unforeseeable, at the first opportunity.

When intermittent or reduced schedule leave is medically necessary, employees must first make a reasonable effort to schedule the leave during non-work hours or rearrange their schedule to be off from work so not to disrupt the work of the department. In addition, employees must advise their Supervisor of the reason(s) why the intermittent/reduced schedule leave is necessary and of the schedule for treatment, if applicable. Employees who need to take intermittent or reduced schedule leave may be temporarily transferred to an alternate job with equivalent pay and benefits that better accommodates recurring periods of leave.

Serious Health Condition means an illness, injury, impairment, or physical or mental condition that involves inpatient care or continuing treatment by a health care provider, as follows:

- Inpatient care (i.e. an overnight stay) in a hospital, hospice or residential medical care facility, including any period of incapacity or any subsequent treatment in connection with such inpatient care;
- A period of incapacity of more than three (3) consecutive calendar days and any subsequent treatment or period of incapacity relating to the same condition that also involves treatment two (2) or more times by or under the direct supervision of a health care provider or treatment by a health care provider on at least one (1) occasion which results in a regimen of continuing treatment under the supervision of the health care provider;
- Any period of absence to receive multiple treatments, including any period of recovery therefrom, by a health care provider or provider of health care services under orders of or referral by a health care provider for restorative surgery after an accident or other injury, or for a condition that if not treated it would likely result in a period of incapacity of more than three (3) consecutive calendar days if left untreated such as cancer (chemotherapy, radiation), severe arthritis (physical therapy), kidney disease (dialysis);
- Any period of incapacity due to pregnancy, or for prenatal care;
- Any period of incapacity or treatment for such incapacity due to a chronic serious health condition which requires periodic visits for treatment by or under the direct supervision of a health care provider, continues over an extended period of time and

may cause episodic rather than a continuing period of incapacity (e.g. asthma, diabetes, epilepsy, etc.); or

- 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, severe stroke, the terminal stages of a disease, etc.).

"Incapacity" means inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment therefor or recovery therefrom. The term "treatment" does not include routine examinations.

Employee Notice Eligible employees whose absence qualifies for Family and Medical Leave are required to:

- provide 30-days advance notice of the need to take Family and Medical Leave when the leave is foreseeable or the first available opportunity if the leave is unforeseeable (15 days' notice required for baby bonding).
- provide sufficient information which clearly communicates to your Supervisor that your need for leave of absence from work is for a Family and Medical Leave-qualifying reason; and
- keep your Supervisor apprised of your status and intent to return to work while on Family and Medical Leave by calling and personally speaking with your Supervisor or, in his or her absence, your Department Head on the first and third Thursday of each month. Notification by family members or friends is not acceptable, unless there is an emergency. Failure to adhere to these requirements may result in disciplinary action, up to and including termination of employment.

Substitution of Paid Leave

Family and Medical Leave is generally unpaid. Employees who have available sick and personal time will be required to first use their available sick and personal time as part of their Family and Medical Leave for a serious health condition; thus, this part of the leave will be paid. However, if the leave is for the birth of the employee's son or daughter, to care for the employee's newborn child, for the placement of a son or daughter for adoption or foster care or to care for the newly placed child, only personal time will be charged. All remaining Family and Medical Leave time will be unpaid.

Employees have the option of using available vacation as part of their Family and Medical Leave; thus, making this portion of the leave paid. Employees who elect to use their available vacation time as part of their Family and Medical Leave must notify their Supervisor at the commencement of their leave. The substitution of paid leave for unpaid leave does not extend the 12 workweek leave period.

Family and Medical Leave Certification of Health Care Provider Form

Employees requesting Family and Medical Leave are required to submit, within 15 days of the leave request, a fully completed Certification of Health Care Provider Form to the county's third party FMLA administrator. The Certification must verify the need for Family and Medical Leave and provide the reason(s) why the leave is needed, and indicate its beginning date and expected

ending date. Failure to submit the Form within the required time or have it completed in full may delay commencement of the leave. The Certification of Health Care Provider Form is available in all departments, the Department of Human Resources, Benefits Division and on the employee intranet.

Maintenance of Health Benefits will continue while the employee is on Family and Medical Leave at the same level and under the same conditions as if the employee had continued to work.

While on **paid** Family and Medical Leave the employee's contributory payment of the health insurance premium, if any, will continue to be deducted.

While on **unpaid** Family and Medical Leave the employee must continue to make his or her contributory payment of the health insurance premium, if any. The payment must be received in the Finance Department or the county's third party FMLA administrator by the 1st day of each month. If payment is not received, the employee's health coverage may be terminated.

If the employee chooses not to return to work at the end of the leave for reasons other than a continuation, recurrence or onset of a serious health condition of the employee or the employee's spouse, child or parent, or a circumstance beyond the employee's control, the employee is responsible for reimbursing the County the amount it paid for the employee's health insurance premium during the leave period.

Life Insurance, Pension and Other Employee Contributory Benefit Programs

While on **paid** Family and Medical Leave the employee's contributory payments will continue to be deducted for life insurance, pension and other employee contributory benefit programs.

While on **unpaid** Family and Medical Leave: Non-Contributory Life Insurance will continue at the same level and under the same conditions as if the employee had continued to work.

Contributory Life Insurance where the unpaid Family and Medical Leave is for a reason other than the employee's own serious health condition will only continue if the employee pays his or her contributory share. The payment must be received in the State Division of Pensions and Benefits by the 1st of each month. If payment is not received, the employee's contributory life insurance will lapse.

Pension Contributions will not be made while an employee is on unpaid Family and Medical Leave. However, upon return from leave an employee may contact the State Division of Pensions and Benefits to purchase his or her leave time and to make pension contributions.

Contributions for other employee contributory benefit programs, such as dental insurance, will not be deducted while an employee is on unpaid Family and Medical Leave. Employees must contact the Benefits Division if they wish to continue one or more benefit plans in which they are currently participating.

Other Employment Benefits such as sick, personal and vacation time do not accrue during an unpaid leave and will resume upon return to active employment.

Job Restoration

The returning employee will be reinstated to the same position, if it is available, or to an equivalent position with equivalent pay and benefits and other terms and conditions of employment. All employees returning to work following a leave due to their own serious health condition must be able and qualified to perform the essential functions of their job. An employee must present to his or her Supervisor, or the county's FMLA third party administrator, upon his or her return from a leave due to his or her own serious health condition, a health care provider's written release certifying that the employee is able to perform the essential functions of the position. No employee will be allowed to return to his or her position without this Certification.

Other Provisions

If special circumstances warrant and the employee has requested to use all of his or her Family and Medical Leave time, an employee may request, in writing, an extension of the leave of absence, up to a maximum of four (4) weeks, depending upon the medical necessity of the extension. This request for an extension must be made at least two (2) weeks before the employee's expected return to work date where foreseeable, otherwise, at the first opportunity. Family and Medical Leave extensions are not automatic. Approval or disapproval of the request is within the County of Monmouth's sole discretion.

Resignation Not In Good Standing If an employee fails to return to work on the agreed upon return date, or within five (5) consecutive business days following the end of an approved leave of absence, the employee shall be considered to have abandoned his or her position. Such a resignation shall be recorded as a resignation not in good standing.