

BENEFITS

FAMILY MEDICAL LEAVE (FMLA) RIGHTS & RESPONSIBILITIES

In general, to be eligible for FMLA, an employee must have worked for Northern Arizona University (NAU) for at least 12 months, have worked at least 1,250 hours in the 12 months preceding the leave, and worked at a site with at least 50 employees within 75 miles. For eligible employees, FMLA provides up to 12 weeks of unpaid and protected time away from work.

If your leave qualifies as FMLA you have the following rights:

DURATION

Under the FMLA, eligible employees have the right of up to 12 weeks of unpaid leave in a 12-month period calculated as a “rolling” 12-month period measured backward from the date of any FMLA leave usage.

USE OF PAID TIME OFF

FMLA is an unpaid leave. NAU’s policy requires you to substitute accumulated paid time off (sick, vacation or paid parental leave) for any part of the 12-week Family Medical Leave of Absence period. If you are a non-exempt employee you may also use accumulated compensatory time balances. If you do not meet the requirements for taking paid leave or exhaust your accrued paid time off, you remain entitled to take unpaid FMLA leave. Both paid and unpaid leave count against your total FMLA entitlement.

HEALTH BENEFITS

Your health benefits must be maintained during any period of unpaid leave under the same conditions as if you continued to work, provided you pay the associated premiums. You may pay your premiums in the following manner:

- Your benefits premiums will be paid through **payroll deduction**, if you have enough pay to cover the employee cost of your benefits, deductions will be taken from your paychecks to cover the employee cost associated with your benefits.
- You will need to make **personal payments** for your benefit premiums if you do not have enough pay to cover the employee costs associated with your benefits, or if you are in an unpaid status you will need to make personal payments to cover the cost of your benefits. You will have a 30-day grace period in which to make premium payments.

If payment is not made timely, your benefits may be cancelled, provided we notify you in writing at least 15 days before the date that your health coverage will lapse, or at our option, we may pay your share of the premiums during FMLA leave, and recover these payments from you upon your return to work.

REINSTATEMENT

You must be reinstated to the same or an equivalent job with the same pay, benefits, and terms and conditions of employment on your return from FMLA-protected leave. If your leave extends beyond the end of your FMLA entitlement, you do not have return rights under FMLA.

- If you are determined to be a **“key employee”** as defined in the FMLA you will receive a separate notification. As a “key employee,” restoration to employment may be denied following FMLA leave on the grounds that such restoration will cause substantial and grievous economic injury to us.
- **If you do not return FMLA** for a reason other than those listed below you may be required to reimburse NAU for its share of health insurance premiums paid on your behalf during your FMLA leave:
 - 1) the continuation, recurrence, or onset of a serious health condition which would entitle you to FMLA leave;
 - 2) the continuation, recurrence, or onset of a covered servicemember's serious injury or illness which would entitle you to FMLA leave; or
 - 3) other circumstances beyond your control,

ACCOMMODATIONS

If you have a medical or psychological condition that may impede your ability to perform the essential functions of your job, you might qualify for reasonable accommodations that could include additional approved time away from work. For more information or to request accommodation, please contact Todd Steen with the Disability Resources Office at (928) 523-1775. Visit [Disability Accommodation and Access webpage](#) to submit a request for an accommodation.

You are responsible for reading and understanding all policies, notifications, documents, letters and emails provided to you about your leave. It is your responsibility to ask questions of your Benefit Advisor in order to clarify any material you do not understand. Visit the [Leave of Absence webpage](#) for more information.

If your leave qualifies as FMLA you have the following responsibilities:

STAY IN CONTACT

There may be times when you are not at work and Human Resources and/or your department will need to contact you. You are required to provide up to date contact information (email, phone number and address) to both Human Resources and your department. You are also required to respond to any inquiries from Human Resources and/or your department while on leave.

You need to keep both your supervisor and Human Resources current on the details of your leave. In particular, you are responsible for communicating to with both your supervisor and Human Resources when you will be at work and **when you will not be at work**. You should follow all of your department's normal call in procedures for any unexpected absences.

MEDICAL DOCUMENTATION

You are required to provide the requested medical information to support your leave request within the deadlines communicated. If you need additional time, you should contact your leave advisor.

REPORTING TIME AWAY FROM WORK

FMLA is an unpaid leave. You are required to report all time away from work timely and correctly. You are required to use all paid time off (paid parental leave, sick, vacation, and comp time) available to you before reporting any time as leave without pay. You will need to submit a timesheet for any pay period in which you have time away from work during your leave. If you cannot submit a timesheet your supervisor may submit it for you.

ADDITIONAL LEAVE

After you are on an approved leave you may find out you need more leave than what was initial approved.

- If you are approved for a **continuous leave** you will be given an expected return date. If you are unable to return to work on that expected return date you need to contact both your supervisor and Human Resources as soon as possible. Updated medical information will be required in order to extend your leave.
- If you are approved for **intermittent and reduced schedule leave** Absences consistently in excess of the amount of leave approved will not be covered under your approved FMLA even if these absences are for your leave reason. If you need additional leave, it is your responsibility to contact your Benefit Advisor to request additional leave. You will be required to provide updated medical documentation in order to be approved for any additional leave.

RETURNING TO WORK

If your leave is for your own illness you will be required to provide a return to work authorization from your attending physician prior to returning to work that includes any restrictions or accommodations needed to perform the essential functions of your job. If such authorization is not received, your return to work may be delayed. The return to work authorization must include any restrictions.

- You will need to apply for **Light Duty** if your return to work authorization from your physician included restrictions. To apply you will need to must complete a light duty request. Your request will be submitted to your department for approval. The department reserves the right to deny that request.

QUESTIONS

If you have questions, contact your benefits advisor.

Faculty & Appointed Staff

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