



LEAVE OF ABSENCE INFORMATION

LEAVE OF ABSENCE (LOA) — If you need to take time off from work and you do not qualify for state and federal leave options (see FMLA/CFRA) you can request a Leave of Absence (LOA). You may use any accrued unused vacation or sick hours towards your LOA. To request a LOA contact [Human Resources](#) to request the LOA absence request form.

RETURN FROM LEAVE — If you are unable to return from LOA on your original date, you must request an extension from your supervisor and notify [Human Resources](#). If you fail to return to work after three days at the end of your leave, without notifying your supervisor, a termination of your LOA and of your employment status may occur.

LOA AND MEDICAL BENEFITS — If you have medical benefits and request an unpaid LOA that is not covered under a state or federal leave plan (such as FMLA/CFRA) the following conditions will apply to your benefits' coverage:

- Benefits coverage may continue as if you were an active employee for 30 days
- After 30 days, coverage continues until the end of the month in which the 30th day occurs
- Coverage under the [Consolidated Omnibus Budget Reconciliation Act of 1985 \(COBRA\)](#), which provides for continuation of health coverage protection to you and your dependents when there is an employment change effecting eligibility for employer health coverage, must be elected as of the first of the following month, if benefits are to be continued during the unpaid LOA
- At that time, you will be offered the right to continue medical, dental, vision, flexible spending (FSA) and life insurance plans
- It is your responsibility to make the necessary arrangements for COBRA payments with [TriNet](#)

PAID FAMILY LEAVE

PAID FAMILY LEAVE (PFL) — [Paid Family Leave](#) insurance is compensation paid to you when you suffer a wage loss due to taking time off work to care for a seriously ill family member or bond with your new child. This insurance program is designed to make it easier for you to balance the demands at work with your family care needs at home. *Note that unless you are eligible for leave benefits under the Family & Medical Leave Act (FMLA) or California Family Rights Act (CFRA), your supervisor is not obligated to grant time off nor hold your job based on PFL only.*

ELIGIBILITY FOR PFL — As a component of the [State Disability Insurance](#) (SDI) program, PFL is funded entirely by employee contributions. PFL insurance program extends benefits when you must take time off from work to care for your family members under certain circumstances. Since this program is fully funded from employees' wages, all

employees living and working in California are eligible to receive unemployment disability compensation to cover time off of work for one of the following reasons:

- to care for your seriously ill child, spouse, parent, or registered domestic partner;
- to bond with your new child or the new child of your spouse or registered domestic partner; or
- to bond with a child in connection with the adoption or foster care placement of the child with you, your spouse or registered domestic partner.

MEDICAL CERTIFICATION FOR PFL — A medical certification is required from a health care provider that your child, parent, spouse, or registered domestic partner in fact has a serious health condition, the condition's expected duration, and the need for you to attend to the family member. A document confirming the claim for baby bonding is required. The forms to file a claim can be obtained from any [EDD office](#).

LENGTH OF PFL — Similar to SDI, there is a 7 calendar day non-payable waiting period after filing for PFL. After the waiting period, you are offered up to 6 weeks of paid benefits in a 12-month period.

USE OF OTHER LEAVE WITH PFL — The first week of absence is the period of time you must wait before PFL benefits are paid. You may use any unused accrued vacation or sick leave during this 7-day waiting period. While on PFL the use of accrued sick hours may be integrated with the PFL benefits at your request. Sick leave is treated as wages, so PFL benefits may be reduced by the amount of sick leave wages received.

MEDICAL COVERAGE AND PFL — If you have medical benefits and are off work due to a non-work related disability, and you are not covered under a state or federal leave plan (such as FML/CFRA), the following conditions will apply to your benefits coverage:

- benefit coverage continues as if you were an active employee for 30 days;
- after 30 days, coverage continues until the end of the month in which the 30th day occurs;
- at that time you will be offered coverage under the [Consolidated Omnibus Budget Reconciliation Act of 1985 \(COBRA\)](#), which provides for continuation of health coverage protection to you and your dependents when there is an employment change effecting eligibility for employer health coverage;
- benefits must be elected as of the first of the following month, if benefits are to be continued during the unpaid LOA;
- COBRA offers you the right to continue medical, dental, vision, flexible spending (FSA) and life insurance plans; and
- it is your responsibility to make the necessary arrangements for COBRA payments with [TriNet](#).

REINSTATEMENT RIGHTS OF PFL — PFL does not provide you job protection or return rights. You may have your job projected under other leave programs, such as the FMLA/CFRA. For further assistance, contact [Human Resources](#).

STATE DISABILITY INFORMATION

LEAVE OF ABSENCE (LOA) — If you need to take time off from work and you do not qualify for state and federal leave options (see FMLA/CFRA) you can request a Leave of Absence (LOA). You may use any accrued unused vacation or sick hours towards your LOA. To request a LOA, logon to [TriNet's website](#) where you will find the LOA form. Complete the form and, after obtaining your supervisor's approval, send it to [Human Resources](#).

RETURN FROM LEAVE — If you are unable to return from LOA on your original date, you must request an extension from your supervisor and notify [Human Resources](#). If you fail to return to work after three days at the end of your leave, without notifying your supervisor, a termination of your LOA and of your employment status may occur.

LOA AND MEDICAL BENEFITS — If you have medical benefits and request an unpaid LOA that is not covered under a state or federal leave plan (such as FMLA/CFRA) the following conditions will apply to your benefits' coverage:

- Benefits coverage may continue as if you were an active employee for 30 days
- After 30 days, coverage continues until the end of the month in which the 30th day occurs
- Coverage under the [Consolidated Omnibus Budget Reconciliation Act of 1985 \(COBRA\)](#), which provides for continuation of health coverage protection to you and your dependents when there is an employment change effecting eligibility for employer health coverage, must be elected as of the first of the following month, if benefits are to be continued during the unpaid LOA
- At that time, you will be offered the right to continue medical, dental, vision, flexible spending (FSA) and life insurance plans
- It is your responsibility to make the necessary arrangements for COBRA payments with [TriNet](#)

State Disability Insurance (SDI) — You are covered by [State Disability Insurance](#) and may file a claim with the [Employment Development Department \(EDD\)](#) for benefits relating to a non-work related illness. SDI is a partial wage-replacement insurance plan for California workers. The SDI program is state-mandated and funded through payroll deductions. This insurance is administered through California's Employment Development Department (EDD). SDI provides short-term benefits when you suffer a loss of wages when you are unable to work due to a non-work related illness or injury, or when medically disabled due to pregnancy or childbirth.

SDI: Disability Defined — For SDI purposes, disability is defined as any mental or physical illness or injury which prevents you from performing regular or customary work, per [California Unemployment](#) Insurance Code, Section 2626. For purposes of this section, "disability" or "disabled" includes:

- An illness or injury, whether physical or mental, including any illness or injury resulting from pregnancy, childbirth, or related medical condition.

- An inability to work because of a written order from a state or local health officer to an individual infected with, or suspected of being infected with, a communicable disease.
- Acute alcoholism being medically treated or, to the extent specified in [Section 2626.1](#), you have resident status in an alcoholic recovery home.
- Acute drug-induced illness being medically treated or, to the extent specified in [Section 2626.2](#), you have resident status in a drug-free residential facility.

Medical Certification for SDI — The forms to file a claim can be obtained from any [EDD office](#) or with your medical provider. A doctor's note is required to process the leave request. This note should state the date the disability leave begins. Certification is also required if an extension of leave is requested. A medical release to return to work is required.

Use of Other Leave with SDI — Employees may elect to use available accrued sick or vacation hours for the first seven days waiting period. While on SDI the use of accrued sick hours may be integrated with the SDI benefits at the request of the employee. Sick leave wages are treated as wages, so SDI benefits may be reduced by the amount of sick leave wages received.

SDI may run concurrently with federal and state Family and Medical Leave plans. For further details regarding State Disability Insurance, contact the [Human Resources Department](#).

Length of SDI — The first seven (7) days of the claim is a waiting period for which no benefits are payable. Benefits begin with the eighth (8) day of disability. As with any medical condition, the disability period begins with the first day the employee is unable to do his/her regular or customary work. SDI benefits will be paid for the period of time supported by the doctor's certification.

FAMILY AND MEDICAL LEAVE

Federal and state regulations provide leave options in order for you to care for yourself or a family member. The federal government's [Family and Medical Leave](#) (FML) and [California's Family Rights Act](#) (CFRA) plans are non-paid leave options. California employees are covered by [State Disability Insurance](#) (SDI) and [Paid Family Leave](#) (PFL) through payroll deductions. These insurance plans provide unemployment compensation in order for you to take care of your own illness/disability; to care for a sick family member or to bond with your newborn. NOTE: For new regulations regarding military and reservists personnel in regards to FML, email [Human Resources](#).

To request a Leave of Absence for any of these circumstances you must complete the Leave of Absence request form and meet with your supervisor to review the form and obtain approval. The form is sent to Human Resources for further review. You will be notified once the leave of absence form is processed.

FAMILY AND MEDICAL LEAVE (FML) — This federal [law](#) allows you up to a total of 12 workweeks of unpaid leave during any 12-month period for one or more of the following reasons:

- the birth and care of your newborn child
- the care for a child placed with you for adoption or foster care
- to care for an immediate family member (spouse, child, or parent) with a serious health condition
- to take medical leave when you are unable to work because of a serious health condition

FMLA has been amended to include situations related to military members and their families. For details contact [Human Resources](#).

ELIGIBILITY FOR FML — To be eligible for FML, you must meet all of the following conditions:

- you must have worked for our organization for at least one year
- you must have worked for 1,250 hours (not including vacation, sick, holiday hours or LOA) over the previous 12 months and
- you work at a location where there are at least 50 PAIRE employees within a 75-mile radius

DEFINITION OF SERIOUS HEALTH CONDITION — For purposes of FML requirements, a serious health condition is an illness, injury, impairment, or physical or mental condition that involves:

- inpatient care in a hospital, hospice, or residential care facility
- a period of incapacity of greater than 3 calendar days that also involves treatment two or more times by a health care provider
- treatment on at least one occasion and a regimen of continuing treatment by a health care provider
- continuing treatment or supervision by a health care provider

MEDICAL CERTIFICATION — A medical certification is required from a health care provider that you or your child, parent, spouse, in fact, has a serious health condition, the condition's expected duration, and the need for you to attend to the family member. Certification is also required if an extension of leave is requested. A medical release to return to work is required.

USE OF OTHER LEAVE WITH FML — Employees may elect to use any accrued and unused sick or vacation hours while on FML.

FML AND MEDICAL BENEFITS — To maintain current medical benefits coverage during a FML leave; we continue paying our share of your benefits. You will continue paying your regular benefits contribution while in a paid leave status under FML. If you are on an unpaid status, we will pay your benefits costs until the end of the FML benefit period

(12 weeks) or your return to paid status, whichever is earlier. A completed repayment agreement for reimbursement for your share of the benefit costs is required prior to going on FML.

LENGTH OF FML — Leave under FML may total up to 12 workweeks in a 12-month period. It does not need to be taken in one continuous period of time. FML may run concurrently with other leave.

NOTIFICATION — A 30-day advance notice is expected when the need for leave is foreseeable, i.e., anticipated date of birth, adoption or planned medical treatment. When 30-days' advance notice is not possible, you should give as much notice as possible. You are required to give a minimum of 3-days notice if the return to work is to be later or earlier than the expected return date.

REINSTATEMENT RIGHTS AFTER FML — Upon return from FML leave, you are guaranteed reinstatement to the same or comparable position. If you give notice that you do not intend to return to work, you lose your entitlement to FML leave. Contact [Human Resources](#) for additional details regarding reinstatement.

CALIFORNIA FAMILY RIGHTS ACT (CFRA) — California enacted this [statute](#) to allow for unpaid leave based on the following situations:

- after the birth of a child for purposes of bonding
- placement of a child in your family for adoption or foster care
- for the serious health condition of your child, child of registered domestic partner, parent or spouse
- for your own serious health condition or that of your registered domestic partner

ELIGIBILITY FOR CFRA — To be eligible for CFRA leave, you must meet all of the following criteria:

- you must be either a full-time or part-time employee working in California
- you must have more than 12 months (52 weeks) of service with our organization
- you must have worked at least 1,250 hours in the 12 month period before the date the leave begins (not including vacation, sick , holiday hours or LOA)
- you must work at a location in which we have at least 50 employees within 75 miles of the worksite

DEFINITION OF A SERIOUS HEALTH CONDITION — For purposes of CFRA leave, a serious health condition means illness, injury (including on-the-job injuries) or impairment. CFRA also includes physical or mental conditions of your child, parent or spouse and yourself that involves either inpatient care, i.e., an overnight stay, in a hospital, hospice, residential health care facility or continuing treatment or supervision by a health care provider.

MEDICAL CERTIFICATION — A medical certification is required from a health care provider that you or your child, parent, spouse, in fact, has a serious health condition, the

condition's expected duration, and the need for you to attend to your family member. Certification is also required if an extension of leave is requested. A medical release to return to work is required.

USE OF OTHER LEAVE WITH CFRA — You may elect to use any accrued and unused sick or vacation hours while on CFRA.

CFRA AND MEDICAL BENEFITS — To maintain current medical benefit coverage during a CFRA leave, we continue paying our share of your benefits. You will continue paying your regular benefit contribution while in a paid leave status under CFRA. If you are on an unpaid status, we will pay your benefits' cost until the end of CFRA leave (12 weeks) or until you return to paid status, whichever is earlier. A completed repayment agreement for reimbursement for your share of the benefit costs is required prior to CFRA leave.

LENGTH OF CFRA LEAVE — Leave under CFRA may total up to 12 workweeks in a 12-month period. It does not need to be taken in one continuous period of time. CFRA may run concurrently with other leave.

REINSTATEMENT RIGHTS AFTER CFRA — You are guaranteed reinstatement to the same or comparable position at the end of your CFRA leave. Contact [Human Resources](#) for additional details regarding reinstatement.