Leaves of Absence

Applies to: All regular, benefits-eligible employees*

Policy Statement:
Employees who require time off from work, either in addition to accrued vacation and/or personal time, may be eligible to take a leave of absence. The table below details the different types of leave, duration, and the pay and benefits applicable during the leave.

Leave Overview:

<table>
<thead>
<tr>
<th>Leave Type</th>
<th>Pay Status</th>
<th>Maximum Duration</th>
<th>Benefits</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Leave of Absence</td>
<td>Unpaid</td>
<td>1 year, granted in 3-month increments</td>
<td>Benefits continue at full cost to employee. Disability discontinued for duration of leave</td>
<td>Available after 1 continuous year of employment</td>
</tr>
<tr>
<td>Family Medical Leave (FML)</td>
<td>Unpaid</td>
<td>12 weeks in any 12-month period</td>
<td>Some benefits continue as if actively employed</td>
<td>Available after employee has worked for 12 months with 1250 hours worked in the previous 12 months</td>
</tr>
<tr>
<td>Short-Term Disability (STD)</td>
<td>Paid—up to the first 8 weeks at 100% 9–26 weeks at 60% base pay</td>
<td>26 weeks</td>
<td>All benefits continue as if actively employed</td>
<td>Available from date of hire</td>
</tr>
<tr>
<td>Long-Term Disability (LTD)</td>
<td>Paid % of income replaced dependent on election</td>
<td>The maximum duration for LTD varies based on the age of employee when LTD begins. See summary plan description for details</td>
<td>All benefits continue as if actively employed (after 6 months of STD benefits have expired)</td>
<td>Available only after STD benefits expire</td>
</tr>
</tbody>
</table>

*Employees covered by a collective bargaining agreement should refer to their specific
Individual Leave Policies:

Personal Leave of Absence

Policy Statement
Reasons for a personal leave of absence include, employee health, education, or other personal reasons.

Procedure
An unpaid leave of absence is normally requested by the employee 30 days in advance using an Application for Unpaid Leave Form available at http://www.dartmouth.edu/~hrs/pdfs/unpaid_loa_2014.pdf. The form is signed and approved by the immediate supervisor and/or the department head before being forwarded to the Office of Human Resources for its approval.

Family Medical Leave

Policy Statement
Eligible employees may be entitled to up to 12 weeks of paid or unpaid leave during any 12-month period. The 12-month period is measured backward from the date an employee uses any family medical leave (FML). Leave is granted based on the employee’s or a family member’s current medical condition. Each time an employee takes FML, the leave entitlement equals the balance of the 12 weeks that the employee has not used during the immediately preceding 12 months.

Under the Family Medical Leave Act (FMLA), an employee may take intermittent leave or leave on a reduced work schedule if he or she has a serious health condition or if he or she needs an altered schedule to provide a family member with medical care. The FMLA does not provide for intermittent leave or work on a reduced schedule for the birth and care, or placement and care, of a child for adoption or foster care. Intermittent leave or work on a reduced schedule due to the placement of a child may be allowed if the College deems it appropriate to do so.

Reasons for Leave: FML leave will be granted to an eligible employee for the following reasons:
1. The employee’s serious health condition
2. Placement of a child for adoption or foster care
3. Care of the employee’s spouse, domestic partner, child, or parent with a serious health condition
4. Birth of a child
Leave for the birth and care, or placement and care, of a child must conclude within 12 months of the child’s birth or placement. The leave available under the FMLA applies equally to male and female employees.

**Exception:** where both parents are employed by Dartmouth

If the married parents of a newly born or newly placed child are both employed by Dartmouth, they are entitled to a combined total of 12 weeks of FML leave in order to care for their child.

**Procedure for Requesting FML**

**Request for Leave:** If the FML leave is for a planned absence, an employee seeking FML leave shall provide at least 30 days prior written notice of the proposed leave. Where advance notice is not possible, such as a FML due to a medical emergency, the employee should notify his or her supervisor as soon as possible. Failure by the employee to give advance notice where foreseeable may delay or postpone the commencement of his or her leave. Notice from the employee shall be provided on the Employee FML Request Form available at:

http://www.dartmouth.edu/~hrs/pdfs/fml_application.pdf

**Request for Intermittent Leave or Modified Schedule:** As set forth above, under the FML, an employee may use intermittent leave under some circumstances. The employee’s request to use intermittent leave must be supported by medical certification from a health care provider. A request for intermittent leave shall be made on the Employee FML Request Form.

**Request to Return to Work:** When an employee on a leave under the FML is able to return to work, the employee should provide notice of his or her availability to return to work to the disability coordinator in the Office of Human Resources.

**Notice to Supervisor:** If an employee is absent from work due to his or her own illness, or due to the illness of a family member that meets the definition of a “serious health condition” as defined by FMLA, the employee’s supervisor shall give notice to the Office of Human Resources so it can determine if the absence is a leave covered under the FML. The supervisor shall submit the Notice of Employee Absence Form.

**Notice to Employee:** If an employee’s absence from work is covered by the FML, Dartmouth will provide him or her written notice that his or her absence from work is designated as a leave under the FML policy. Such notice shall provide the employee with the information required by the FML policy, including information regarding the continuation of his or her benefits and return to work.

If an employee applies for a leave under the FML policy and Dartmouth determines that an absence from work is not covered by the FML policy, Dartmouth will provide written notice
which identifies the basis for the decision that the employee is not eligible for leave under the FML policy.

**Documentation**

**Medical Certification:** If an employee’s FML is based on his or her serious health condition or that of a family member (parent, spouse, domestic partner, or child), he or she is required to have medical certification from a health care provider. If an employee fails to provide such certification, it may delay his or her leave. The employee must provide the certification within 20 calendar days of the College’s request. Dartmouth may, under certain circumstances, require recertification of a medical condition. The certification shall be provided on the Health Care Provider Medical Certification Form.

- Family Medical Leave Certification Form (Employee)
- Family Medical Leave Certification Form (Family Member)


**Second Opinion:** Under the FMLA, an employer may require an employee to submit to an examination by a health care provider selected by the employer. Thus, in some cases, as a condition of continuation of FMLA leave, a Dartmouth employee may be required to submit to an examination by a health care provider selected by the College. If the opinion of the care provider selected by Dartmouth and the employee’s health care provider conflict, the employee may be required to submit to an examination by a third health care provider whose opinion shall control. The third provider will be selected by the employee’s provider and the provider selected by Dartmouth.

**Employee Privacy:** Dartmouth will use reasonable measures to protect the privacy of medical information received under this policy. To protect the privacy of the employee, his or her medical information or that of his or her family member will only be requested by the Office of Human Resources, not the employee’s supervisor. Supervisors who receive medical information from employees should transmit that information to the Office of Human Resources using a “confidential” envelope. In the event an employee is returning to work with a limitation due to a medical condition, human resources will advise the supervisor of the limitations on the employee’s ability to work, but not the diagnosis for the limitation.

**Short-Term Disability**

**Policy Statement**

Short-term disability (STD) benefits replace salary for absence due to: physical or mental illness, injury, pregnancy, or childbearing. Salaried, benefits-eligible employees are eligible for STD
beginning on their first workday of absence due to a disability. The maximum duration of STD for any one disability is 26 weeks.

**Hourly Employees:** Hourly employees are eligible for STD benefits beginning on their sixth consecutive workday of absence or after one normal workweek due to a disability. Employees are expected to use personal time or vacation time to cover the first five days of absence due to disability. The remaining STD benefits are paid through a central fund administered by the Benefits Office. [Short-Term Disability Procedures for Hourly Employees](#)

**Salaried Employees:** The first two weeks of STD benefits are paid by the employee’s department funds, and the remaining STD benefits are paid through a central fund administered by the Benefits Office. Paid holidays that fall within the STD period are reimbursed through STD at the pay replacement level then in effect (either 100 percent or 60 percent of pay). [Short-Term Disability Procedures for Salaried Employees](#)

**All Employees:** For purposes of determining the benefit period, successive disabilities are considered a single disability unless they are:

- due to entirely unrelated causes and separated by return to active work of at least one full day at the regular schedule, or
- due to related causes but separated by return to active work for a period of at least one year.

**Maternity Leave Due to Childbirth:** An employee’s leave of absence due to pregnancy is covered by a combination of her personal leave, FML, and STD. Disabilities resulting from pregnancy or child bearing (maternity) are treated the same as any other disability. Normal leave time for the disability associated with a delivery is eight weeks. Medical certification is required. New parents can use any accrued paid time off to extend leave to care for their newborn. Unpaid FML will run concurrently with STD or other types of leave. Leave for the birth and care of a child must conclude within 12 months of the child’s birth. The leave available under the FML applies equally to male and female employees.

For more information about maternity leave and meeting the needs of your family, please contact a benefits assistant in the Office of Human Resources.

**Short-Term Disability and Workers’ Compensation**

Employees who have a work-related illness or injury causing them to lose time from work are paid wages by workers’ compensation according to the state of New Hampshire regulations. If an employee is eligible for short-term disability (STD) and is receiving wages from workers’ compensation, STD can be used in coordination to supplement the workers’ compensation.
payments. In no case will the use of these benefits exceed 100 percent of the employee’s basic pay.

The length of time an employee uses STD and workers’ compensation in coordination cannot exceed the number of weeks the employee could use STD at the 100% pay replacement level (between one and eight weeks), or the date the employee returns to full or part-time work, whichever is sooner. The application procedure for using STD with workers’ compensation is the same as for STD alone.

If an employee using STD in coordination with workers’ compensation returns to work on a part-time basis (less than the normal workweek), STD ends. The hours worked are paid at the normal rate of pay then in effect. The hours not worked are paid by workers’ compensation according to the state of New Hampshire regulations, and the remaining 40 percent of unworked hours are paid by STD for a period of not longer than eight weeks.

**Procedure**

**Job Protection:** In addition to salary continuation, employees who are eligible for STD may be entitled to the job protection provided for under the Family Medical Leave Act. Requests for job protection beyond 12 weeks will be considered based on the best interests of the College.

**Return to Work Part Time:** In some situations, a licensed health care provider may recommend that the employee return to work on a part-time basis (less than the normal workweek) in anticipation of his or her returning to work full-time. When the department is able to accommodate this arrangement, the employee’s hours worked will be paid at the rate of pay then in effect and hours he or she does not work will be paid by STD at the replacement level then in effect (either 100 percent or 60 percent of the employee’s pay).

A day in which an employee’s partial hours are paid as STD is considered as one full day of STD benefits. This may continue until the medical statement expires, unless the department is unable to accommodate the part-time work schedule, or the employee either returns to his or her normal work schedule with a medical note, or until STD benefits are exhausted, whichever happens first.

When the employee returns to work part time, the department must notify the Benefits Office to coordinate the employee’s pay. In the case of hourly employees, the department must complete a time sheet for hours worked and forward it to the Benefits Office before the payroll deadline. The Benefits Office will add STD hours to the time sheet and forward it to the Payroll Office.

**Note:** For information on STD and workers’ compensation, please see the Workers’ Compensation section.
Long-Term Disability

Policy Statement
The College’s long-term disability (LTD) program provides regular monthly income to participating benefits-eligible employees who become “totally disabled” while covered by the LTD program. Through this plan, disabled employees are assured of having a portion of their income replaced.

Definitions and Regulations
Total Disability: An employee is considered to be totally disabled under this program when he or she is unable to perform his or her job duties and responsibilities in a satisfactory manner because of an impairment that can be medically determined. If the disability continues beyond 30 months, the definition of total disability is modified to mean the employee’s inability, due to the medically determinable impairment, to engage in any substantial, gainful activity that other individuals of similar age and with similar education, training, and work experience regularly engage in as a means of support.

Procedure
To apply for benefits under the LTD plan, the employee must notify the Benefits Office within the Office of Human Resources, in writing, of his or her total disability within one year after the total disability begins. He or she must also complete an application form provided by the Benefits Office. The employee is required to apply for a Social Security Disability Award as part of the application procedure and provide names of two treating physicians who can certify the disability.

If the application is denied, the plan administrator will notify the employee in writing within a reasonable period of time after his or her application has been received. The denial letter will state the reasons for denial and will reference the relevant provisions of the plan document on which the denial was based.

Documentation
All forms pertaining to leaves of absence can be found on the Office of Human Resources Web site:

http://www.dartmouth.edu/~hrs/forms/index.html