



FMLA PAY CODING

FMLA is administered through Employee Health and Wellness (EH&W).

EXTENDED ILLNESS BENEFIT (EIB)

- Accrued Extended Illness Benefit (EIB) provides continuation of pay for **employees** who are unable to work due to hospitalization or extended illness and/or to care for immediate family (**spouse and children**) whose illness requires his/her assistance. See SAMC FMLA Policy for definition of child.
- EIB is NOT to be used to care for family members other than **current spouse and minor children with exceptions as outlined in the EIB Policy.**
- **EIB may not be used for a parent under any circumstance.**
- EIB is NOT provided for routine dental care; however it is applicable to cases of illness due to dental complications.
- Earned Time Off (ETO) must be used for the first 24 hours of scheduled work time for any absence including FMLA and LOA.
- EIB may be used for inpatient hospitalization for the **employee only**, effective the first day of absence. **However, ETO will be paid for the first 24 hours until the appropriate verification is received by the department director/supervisor/timekeeper. Verification will include notification by EH&W that the “Two Midnight Rule” has been met. The department and/or the employee must contact EH&W to request the verification.**
- Whenever an employee takes FMLA, he or she will use accrued ETO and EIB before the employee will take unpaid leave. (Note: EIB may only be used for self, spouse or children. Please refer to EIB Policy for definition of child.)

EIB Verification

- **ETO will be paid for the first 24 hours until the appropriate verification is received by the department director/supervisor/ timekeeper. The department and/or the employee must contact EH&W to request the verification.**
- Inpatient status will be verified by Employee Health & Wellness who will communicate the status to department director/supervisor/timekeeper and payroll.
- If hospitalization did not occur at SAMC, the employee will need to provide documentation to EH&W that indicates date and time of admission and discharge. It is the responsibility of the employee to obtain this verification.
- If inpatient verification is submitted to the timekeeper in the current pay period, the timekeeper can make the adjustments in Kronos.
- If inpatient verification is received after the current pay period, the timekeeper should ask the director to submit a written request to Payroll to reverse the 24 hours of ETO to EIB.

AT NO TIME IS ANYONE OTHER THAN EH&W OR THEIR DESIGNATED REPRESENTATIVE PERMITTED TO VERIFY THE EMPLOYER’S HOSPITALIZATION STATUS BY ACCESSING THE EMPLOYEE’S MEDICAL RECORD. THIS IS CONSIDERED A HIPAA VIOLATION AND THE TIMEKEEPER MAY BE SUBJECT TO DISCIPLINARY ACTION UP TO TERMINATION OF EMPLOYMENT.

PRELIMINARY DOCUMENTATION

Employee Notification

Scheduled FMLA Event: It is the responsibility of the employee to notify the department manager/supervisor at least 30 days prior to a scheduled FMLA event.

- The employee is responsible for obtaining an FMLA packet and presenting it to their director/supervisor for signature to initiate the FMLA process. This must be completed prior to taking the packet to the health care provider for completion. Forms with inadequate information will not be accepted by EH&W for processing.
- The employee must submit to EH&W the **Request for Medical Leave Form** and the **Certification of Health Care Provider Form** at least 15 days prior to the start date of the FMLA leave. **THESE FORMS MUST REMAIN ATTACHED AT ALL TIMES.**

➤ **THE NOTIFICATION DATE
AND**

- **THE DATE THE REQUEST FOR MEDICAL LEAVE FORM WAS SIGNED MUST BE KEYED INTO:**
Comment/Note Section of Kronos

PAY CODE	DESCRIPTION	AMOUNT	COMMENT	NOTES
Key in data on last day employee clocked or had a pay code documented.	1. FMLA Notification to Director Date 2. Date Request for Medical Leave Form Signed	NA	Miscellaneous Other	Place dates in note section.

This will enable the 15 day required time period to be accurately tracked.

Unscheduled/Emergent FMLA Event: The employee is allowed 15 days from the date that the departmental manager/supervisor signs the **Request for Medical Leave Form** to submit the **Certification of Health Care Provider Form** to EH&W.

- The employee or his/her representative is responsible for obtaining an FMLA packet and presenting it to their director/supervisor for signature to initiate the FMLA process. This must be completed prior to taking the packet to the health care provider for completion. Forms with inadequate information will not be accepted by EH&W for processing. **THESE FORMS MUST REMAIN ATTACHED AT ALL TIMES.**

➤ **THE SIGNATURE DATE ON THE REQUEST FOR MEDICAL LEAVE FORM MUST BE KEYED INTO:**
Comment/Note Section of Kronos

PAY CODE	DESCRIPTION	AMOUNT	COMMENT	NOTES
Key in data on last day employee clocked or had a pay code documented.	Signature Date on Request for Medical Leave Form	NA	Miscellaneous Other	Place date in note section.

This will enable the 15 day required time period to be accurately tracked. This will enable records to be maintained accurately even when FMLA paperwork is not completed by the health care provider within the pay period of its effective date.

PAYROLL DOCUMENTATION PROCESS

FMLA USAGE RECORDS ARE SUBJECT TO AUDIT BY DEPARTMENT OF LABOR

Tracking

Timekeepers must insure FMLA is recorded properly to maintain an accurate record of FMLA benefits used since the Department of Labor has the legal right to audit records without notice.

GOALS OF TRACKING

1. Accurately utilize ETO/EIB pertaining to FMLA
2. Accurately track FMLA Benefits

Tracking Excel Tool (located with FMLA documents)

TRACKING PROCEDURES

To Initiate Tracking/Start a New Tab

1. Right click on the "Template" Tab and select "Move or Copy".

The screenshot shows the 'FMLA Tracking Sheet Template 4.3-15' in Microsoft Excel. The spreadsheet is titled 'Family Medical Leave Act Tracking Form'. It contains fields for Name, Department, PTE Status, Hrs/Week, and Employee ID. Below these are sections for FMLA usage, including Start/End dates for FMLA #1, #2, and #3, and a table for Hours Used in Prior 12 months. A red arrow points to the 'Move or Copy' option in the right-click context menu for the 'Template' tab.

FMLA #	Dates of FMLA Days Used	# of FMLA Hours Used	# of FMLA Hours Remaining
10		0	0
11		0	0
12		0	0
13		0	0
14		0	0
15		0	0
16		0	0
17		0	0
18		0	0
19		0	0
20		0	0
21		0	0
22		0	0
23		0	0
24		0	0
25		0	0
26		0	0
27		0	0
28		0	0
29		0	0
30		0	0
31		0	0

2. Check the box for “Create a Copy” and click “OK”.

The screenshot shows the 'Move or Copy' dialog box in Microsoft Excel. The 'Move or copy' tab is selected. The 'To book' dropdown is set to 'FMLA Tracking Sheet Template 4-3-15.xlsx'. The 'Before sheet' dropdown is set to 'Sheet2'. The 'Create a copy' checkbox is checked. A large red arrow points to the 'Create a copy' checkbox.

To Move to a New Location in the Tab Order:

1. Click on the tab you want and drag it until the arrow is over the spot you want to move it to.

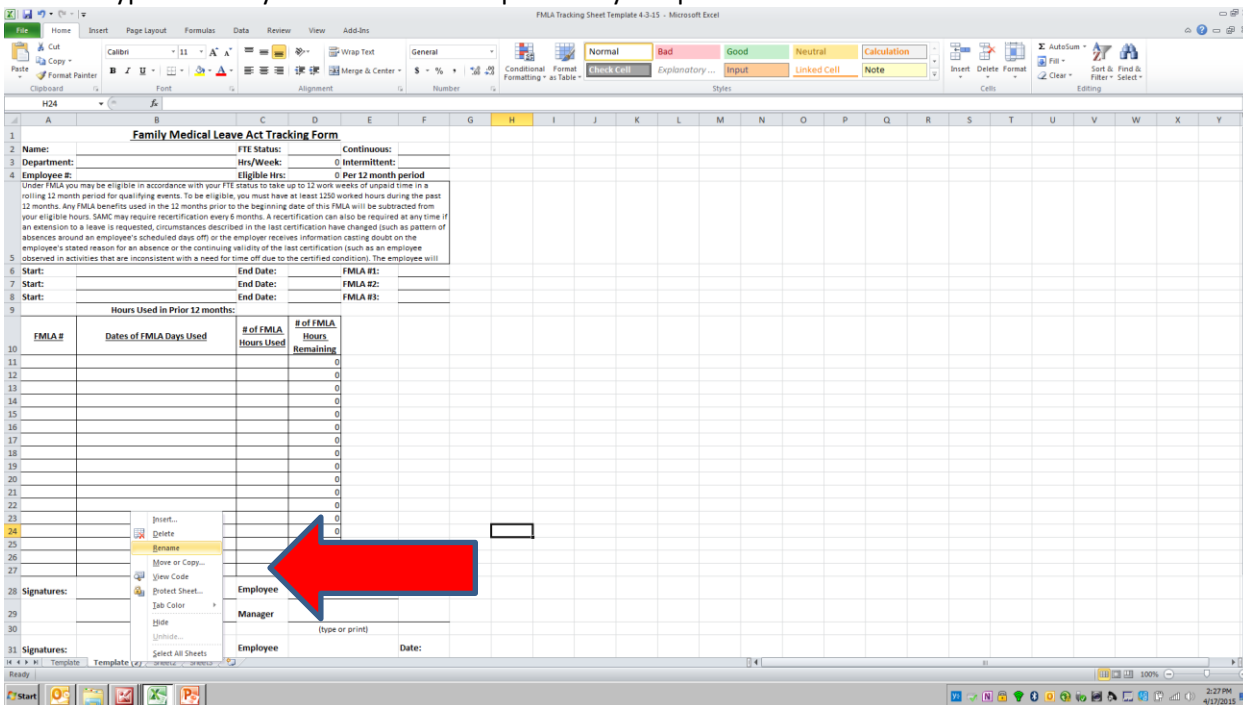
The screenshot shows the 'Move or Copy' dialog box in Microsoft Excel. The 'Move or copy' tab is selected. The 'To book' dropdown is set to 'FMLA Tracking Sheet Template 4-3-15.xlsx'. The 'Before sheet' dropdown is set to 'Sheet2'. The 'Create a copy' checkbox is checked. A large red arrow points to the 'Create a copy' checkbox.

2. Never copy from any other tab besides “Template”.

- This one is built with the correct equations for entering information.
- If you copy one that has been modified it may not work the same.
- Always save your original template as its own tab and do not modify it.

To Rename the Tab for the Person You Want to Track:

1. Right click on the tab and select “Rename”.
2. Type in what you want to call it – preferably the person’s name.



Family Medical Leave Act Tracking Form

1. Name: _____ FTE Status: _____ Continuous: _____

2. Department: _____ Hrs/Week: _____ 0 Intermittent: _____

3. Employee ID: _____ Eligible Hrs: _____ 0 Per 12 month period

4. Under FMLA you may be eligible in accordance with your FTE status to take up to 12 work weeks of unpaid time in a rolling 12 month period for qualifying events. To be eligible, you must have at least 1250 worked hours during the past 12 months. Any FMLA benefits used in the 12 months prior to the beginning date of this FMLA will be subtracted from your eligible hours. SACM may require recertification every 6 months. A recertification can also be required at any time if an extension to a leave is requested, circumstances described in the last certification have changed (such as pattern of absences around an employee's scheduled days off) or the employer receives information casting doubt on the employee's stated reason for an absence or the continuing validity of the last certification (such as an employee observed in activities that are inconsistent with a need for time off due to the certified condition). The employee will

5. Start: _____ End Date: _____ FMLA #1: _____

6. Start: _____ End Date: _____ FMLA #2: _____

7. Start: _____ End Date: _____ FMLA #3: _____

8. Hours Used in Prior 12 months: _____

FMLA #	Dates of FMLA Days Used	# of FMLA Hours Used	# of FMLA Hours Remaining
10		0	0
11		0	0
12		0	0
13		0	0
14		0	0
15		0	0
16		0	0
17		0	0
18		0	0
19		0	0
20		0	0
21		0	0
22		0	0
23		0	0
24		0	0
25		0	0
26		0	0
27		0	0

28. Signatures: _____ Employee _____

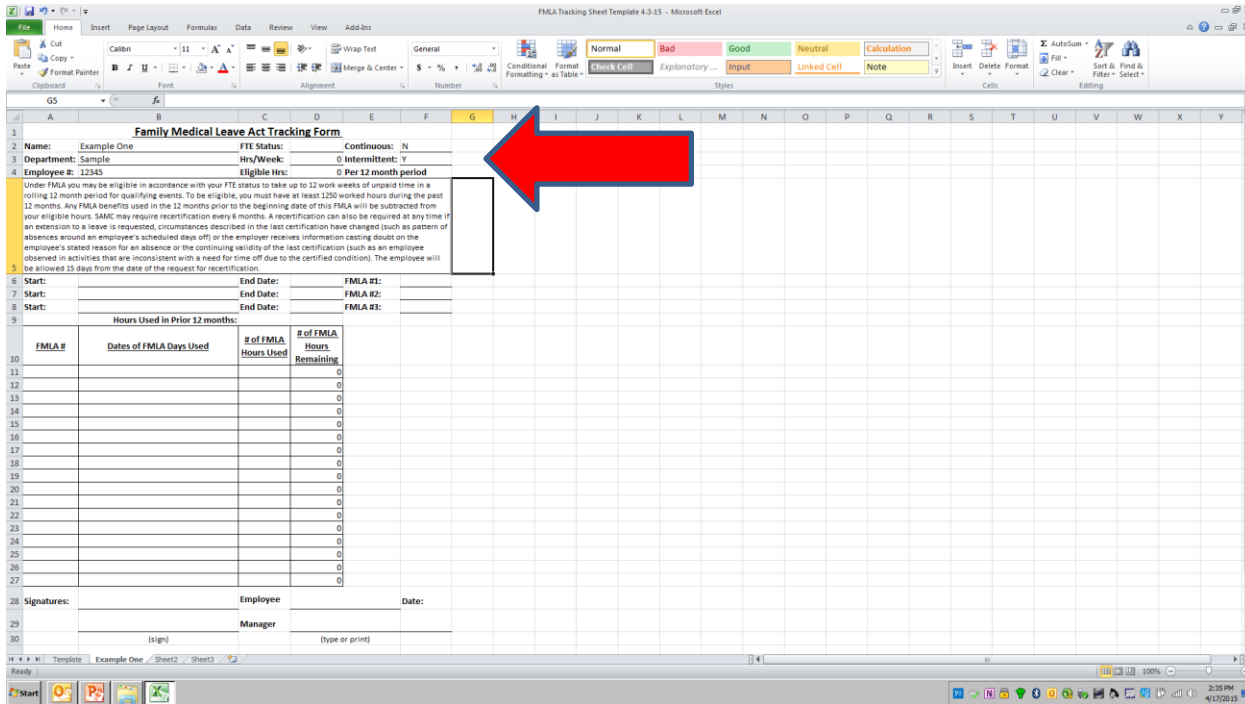
29. _____ Manager _____

30. _____ (type or print)

31. Signatures: _____ Employee _____ Date: _____

To Enter Individual Information:

1. Fill in the name, department and employee number.
2. Indicate if it is Continuous or Intermittent.



Family Medical Leave Act Tracking Form

1 Name: Example One FTE Status: Continuous: N

2 Department: Sample Intermittent: Y

3 Employee ID: 12345 Eligible Hrs: 0 Per 12 month period

4 Under FMLA you may be eligible in accordance with your FTE status to take up to 12 work weeks of unpaid time in a rolling 12 month period for qualifying events. To be eligible, you must have at least 1250 worked hours during the past 12 months. Any FMLA benefits used in the 12 months prior to the beginning date of this FMLA will be subtracted from your eligible hours. SAMC may require recertification every 6 months. A recertification can also be required at any time if an extension to a leave is requested, circumstances described in the last certification have changed (such as pattern of absences around an employee's scheduled days off) or the employer receives information casting doubt on the employee's stated reason for an absence or the continuing validity of the last certification (such as an employee observed in activities that are inconsistent with a need for time off due to the certified condition). The employee will be allowed 30 days from the date of the request for recertification.

5

6 Start: End Date: FMLA #1:

7 Start: End Date: FMLA #2:

8 Start: End Date: FMLA #3:

9 Hours Used in Prior 12 months:

FMLA #	Dates of FMLA Days Used	# of FMLA Hours Used	# of FMLA Hours Remaining
10		0	0
11		0	0
12		0	0
13		0	0
14		0	0
15		0	0
16		0	0
17		0	0
18		0	0
19		0	0
20		0	0
21		0	0
22		0	0
23		0	0
24		0	0
25		0	0
26		0	0
27		0	0

28 Signatures: Employee Date:

29 (Sign) Manager (type or print)

30

IMPORTANT:

- **Never enter anything into a cell with a 0 in it. This means there is a formula in that box.**
- The formulas are there to make the calculations for you so do not modify the cells.

To Enter the FTE Status as a Number:

1. Full Time = 1
36 hrs/week = 0.9
32 hrs/week = 0.8
20 hrs/week = 0.5
Etc.
2. It will automatically fill out the rest of the numbers for you.

FMLA Tracking Sheet

File Home Insert Page Layout Formulas Data Review View Add-Ins

Clipboard Font Alignment Number Conditional Formatting

G10

Family Medical Leave Act Tracking Form

1 **Name:** Example One **FTE Status:**

2 **Department:** Sample **Hrs/Week:** 40

3 **Employee #:** 12345 **Eligible Hrs:** 480 Per month period

4 Under FMLA you may be eligible in accordance with your FTE status to take up to 12 work weeks of unpaid time in a rolling 12 month period for qualifying events. To be eligible, you must have at least 1250 worked hours during the past 12 months. Any FMLA benefits used in the 12 months prior to the beginning date of this FMLA will be subtracted from your eligible hours. SAMC may require recertification every 6 months. A recertification can also be required at any time if an extension to a leave is requested, circumstances described in the last certification have changed (such as pattern of absences around an employee's scheduled days off) or the employer receives information casting doubt on the employee's stated reason for an absence or the continuing validity of the last certification (such as an employee observed in activities that are inconsistent with a need for time off due to the certified condition). The employee will be allowed 15 days from the date of the request for recertification.

5

6 **Start:** **End Date:** **FMLA #1:**

7 **Start:** **End Date:** **FMLA #2:**

8 **Start:** **End Date:** **FMLA #3:**

9 **Hours Used in Prior 12 months:**

FMLA #	Dates of FMLA Days Used	# of FMLA Hours Used	# of FMLA Hours Remaining
10			480
11			480
12			480
13			480
14			480
15			480
16			480
17			480
18			480
19			480
20			480
21			480
22			480
23			480
24			480
25			480
26			480
27			480

28 **Signatures:** **Employee** **Date:**

29 **Manager**

30 (sign) (type or print)

Template Example One Sheet2 Sheet3

Ready

Start

If Employee Has Already Used FMLA in the Previous 12 Months:

1. Add up the total hours they used in the previous 12 months and put in the cell.
2. This will automatically subtract the amount from the total.

The screenshot shows the 'Family Medical Leave Act Tracking Form' in Microsoft Excel. The form includes fields for Name, Department, Employee ID, FTE Status, and FMLA status. A red arrow points to the 'Hours Used in Prior 12 months' field in row 9, column D. Below this, there is a table with columns for 'FMLA #', 'Dates of FMLA Days Used', 'H of FMLA Hours Used', and 'H of FMLA Hours Remaining'. The table has 27 rows, with the first row (row 10) showing '480' in the 'H of FMLA Hours Remaining' column.

To Track Different FMLAs for One Person:

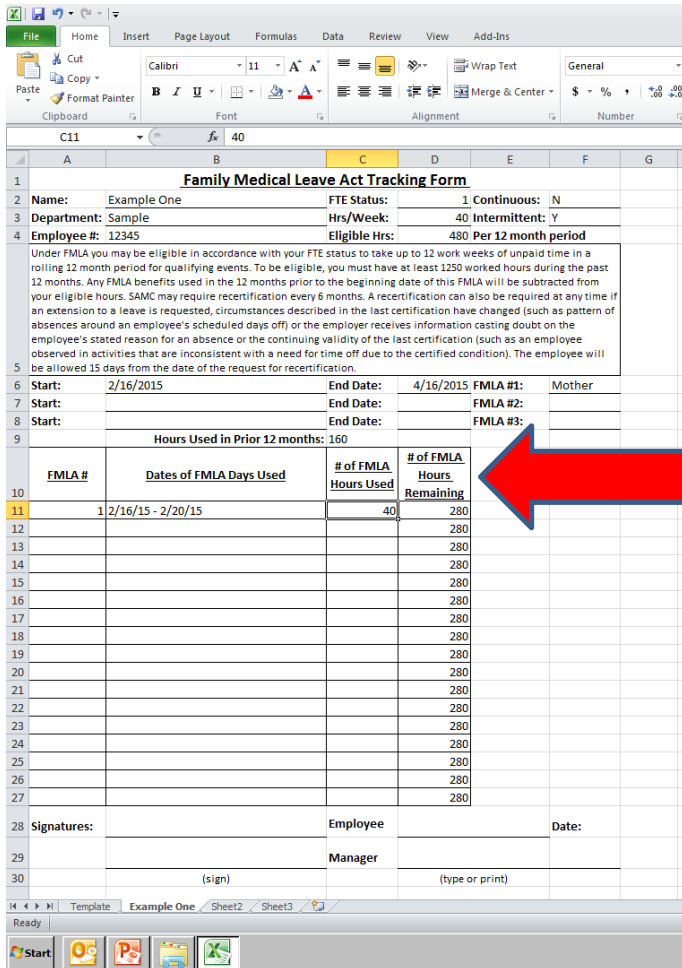
Enter the information for the start and end dates and indicate the source.

EX: Mother, child, self, etc.

The screenshot shows the 'Family Medical Leave Act Tracking Form' in Microsoft Excel. A red arrow points to the 'End Date' field in row 7, column E. The form includes fields for Name, Department, Employee ID, FTE Status, and FMLA status. Below this, there is a table with columns for 'FMLA #', 'Dates of FMLA Days Used', 'H of FMLA Hours Used', and 'H of FMLA Hours Remaining'. The table has 27 rows, with the first row (row 10) showing '480' in the 'H of FMLA Hours Remaining' column.

To Add FMLA Days:

1. Enter the number to reference what the FMLA was for.
2. Enter the dates it was used.
3. Enter the number of hours used in that date range.
4. It will automatically calculate the number remaining.



Family Medical Leave Act Tracking Form

Name: Example One **FTE Status:** 1 **Continuous:** N
Department: Sample **Hrs/Week:** 40 **Intermittent:** Y
Employee #: 12345 **Eligible Hrs:** 480 **Per 12 month period**

Under FMLA you may be eligible in accordance with your FTE status to take up to 12 work weeks of unpaid time in a rolling 12 month period for qualifying events. To be eligible, you must have at least 1250 worked hours during the past 12 months. Any FMLA benefits used in the 12 months prior to the beginning date of this FMLA will be subtracted from your eligible hours. SAMC may require recertification every 6 months. A recertification can also be required at any time if an extension to a leave is requested, circumstances described in the last certification have changed (such as pattern of absences around an employee's scheduled days off) or the employer receives information casting doubt on the employee's stated reason for an absence or the continuing validity of the last certification (such as an employee observed in activities that are inconsistent with a need for time off due to the certified condition). The employee will be allowed 15 days from the date of the request for recertification.

Start: 2/16/2015 **End Date:** 4/16/2015 **FMLA #1:** Mother
Start: **End Date:** **FMLA #2:**
Start: **End Date:** **FMLA #3:**

Hours Used in Prior 12 months: 160

FMLA #	Dates of FMLA Days Used	# of FMLA Hours Used	# of FMLA Hours Remaining
11	12/16/15 - 2/20/15	40	280
12			280
13			280
14			280
15			280
16			280
17			280
18			280
19			280
20			280
21			280
22			280
23			280
24			280
25			280
26			280
27			280

Signatures: **Employee** **Date:**
Manager
 (sign) (type or print)

The Total Line:

- The TOTALS line at the bottom of the chart will automatically calculate:
 - Total hours used
 - Total hours remaining
- Do NOT type in this line ever. Doing so will cause it to no longer calculate totals.

The screenshot shows the bottom portion of the FMLA Tracking Sheet Template. The 'TOTALS' row (row 28) is highlighted in purple and contains the following data: A28: (blank), B28: (blank), C28: (blank), D28: 0, E28: 0. Below this is a signature section with three rows (rows 29-37) for Employee and Manager signatures and dates. The signature lines are labeled 'Signatures:' and the date lines are labeled 'Date:'. The signature lines are followed by '(sign)' and the date lines are followed by '(type or print)'.

To Add On:

It will continue to calculate the number remaining each time you enter one.

The screenshot shows the 'Family Medical Leave Act Tracking Form' in Microsoft Excel. The form includes fields for Name, Department, Employee #, FTE status, Intermittent status, and Eligible Hrs. It also includes a section for FMLA certification with dates and reasons. The bottom section is a table for tracking FMLA usage. A red arrow points to the 'Hours Remaining' column in the table. The table has the following columns: FMLA #, Dates of FMLA Days Used, # of FMLA Hours Used, and # of FMLA Hours Remaining. The table contains data for three FMLA events, with the 'Hours Remaining' column showing values of 280, 256, and 224.

Getting to the Last Few Lines:

- When you fill out the SECOND to LAST line, STOP!
- You will want to add lines by copying a blank line.
- Copy the LAST line before you type in it.

	A	B	C	D	E	F
13				O		
14				O		
15				O		
16				O		
17				O		
18				O		
19				O		
20				O		
21				O		
22				O		
23				O		
24				O		
25				O		
26			TOTALS	O		
27				O		
28				O		
29	Signatures:		Employee		Date:	
30		(sign)	Manager	(type or print)		
31						
32	Signatures:		Employee		Date:	
33		(sign)	Manager	(type or print)		
34						
35	Signatures:		Employee		Date:	
36		(sign)	Manager	(type or print)		
37						

To Add A New Line:

- Right click on the last line of the spreadsheet.
- The drop down will appear.
- Select "Insert".
 - Click "Entire Row".
 - It is a copy of the line you selected.

	A	B	C	D	E	F	G
16				O			
17				O			
18				O			
19				O			
20				O			
21				O			
22				O			
23				O			
24				O			
25				O			
26				O			
27			TOTALS	O			
28				O			
29			Employee		Date:		
30		(sign)	Manager	(type or print)			
31							
32			Employee		Date:		
33		(sign)	Manager	(type or print)			
34							
35	Signatures:		Employee		Date:		
36		(sign)	Manager	(type or print)			
37							
38							
39							
40							

To Add A New Line:

- NOTICE: The new line does not have a 0 in the last column.
 - This means there is NO formula in it.
 - This means it needs to be added.

FMLA Tracking Sheet Template 06-03-2015 Rev

	A	B	C	D	E	F
16				0		
17				0		
18				0		
19				0		
20				0		
21				0		
22				0		
23				0		
24				0		
25				0		
26				0		
27						
28				0		
29		TOTALS	0	0		
30	Signatures:		Employee		Date:	
31			Manager			
32		(sign)		(type or print)		
33	Signatures:		Employee		Date:	
34			Manager			
35		(sign)		(type or print)		
36	Signatures:		Employee		Date:	
37			Manager			
38		(sign)		(type or print)		
39						
40						

To Copy the Formula:

- Click on the cell above the empty cell.
 - Hover over the bottom right corner of that cell.
 - Your pointer will turn into a + when you are in the right spot (not with arrows – an actual +).
- Click and drag into the empty cell (it will create a dotted outline around both of them).
- When you let go, there should be a 0 in that cell and the equation copied.

23				0		
24				0		
25				0		
26				0		
27						
28				0		
29		TOTALS	0	0		
30	Signatures:		Employee		Date:	

24				0		
25				0		
26				0		
27						
28				0		
29		TOTALS	0	0		
30	Signatures:		Employee		Date:	



INITIAL DOCUMENTATION

- **First Day of FMLA Leave:** The timekeeper must record the FMLA usage on the first day designated by the employee on the **Request for Medical Leave Form** (signed by department director/supervisor).
- **Pay Codes:** Use as if FMLA has been approved. Sometimes the FMLA paperwork has not been completed within the same pay period of its effective date.

PAY CODE	DESCRIPTION	AMOUNT	COMMENT	NOTES
Use the pay code as if FMLA has been approved.	Record the FMLA usage on the first day designated by the employee on the Request for Medical Leave Form.		FMLA Pending Final Approval for first 3 days.	

THIS DATE MUST BE KEYED INTO:

1. Kronos using Pay Code – code as if FMLA has been approved
2. Comment Section – Key “FMLA Pending Final Approval” for the first three days
3. Excel Tracker – Note first date of FMLA leave

On the occasion where FMLA is not approved EH&W will send notification to departmental director and payroll to correct the pay code to accurately reflect the absence.



DESIGNATED PAY CODES FOR CONTINUOUS FMLA

PAY CODE	DESCRIPTION	AMOUNT	COMMENT	NOTES
ETO EMP FMLA	Employee only paid ETO during the first 24 hours of scheduled absence. If no ETO is available then the employee will receive no pay.	Place amount of ETO to use or 0 if no ETO is available.	FMLA – Self	Note amount of FMLA Benefits used for that day
ETO FAMILY FMLA	Spouse and children only paid ETO during the first 24 hours of scheduled absence. If no ETO is available then the employee will receive no pay.	Place amount of ETO to use or 0 if no ETO is available.	FMLA Spouse or FMLA Child	Note amount of FMLA Benefits used for that day
ETO PARENT FMLA	Parents may only be paid ETO throughout the entire FMLA occurrence. If no ETO is available then the employee will receive no pay.	Place amount of ETO to use or 0 if no ETO is available.	FMLA Parent	Note amount of FMLA Benefits used for that day.
EIB EMP FMLA	Employee may be paid EIB after the first 24 hours of scheduled absence. If no EIB is available then the employee will receive no pay or they may use ETO is available.	Place amount of EIB/ETO to use or 0 if no EIB/ETO is available.	FMLA Self	Note the amount of FMLA Benefits used for that day.
EIB FAMILY FMLA	Spouse and children may only be paid EIB after the first 24 hours of scheduled absence. If no EIB is available then the employee will receive no pay or they may use ETO if available.	Place amount of EIB/ETO to use or 0 if no EIB/ETO is available.	FMLA Spouse or FMLA Child	Note the amount of FMLA Benefits used for that day.
ETO EMP or ETO FAMILY FMLA	May be used when the employee has exhausted all accrued EIB time. ETO may be used in less than full day increments, as available. Note the remainder of the FMLA Benefits for the day: EIB EMP FMLA or EIB FAMILY FMLA	Place amount of ETO Place 0	FMLA Child FMLA Spouse FMLA Self	Note the amount of FMLA Benefits used for that day. Two entries



DESIGNATED PAY CODES FOR INTERMITTENT FMLA

PAY CODE	DESCRIPTION	AMOUNT	COMMENT	NOTES
1. NA 2. FMLA XPT	1. Don't adjust regularly scheduled hours. 2. Document FMLA benefit hours in a separate entry. See # 2 below.	1. Scheduled Hours 2. Place 0 hours	1. NA 2. FMLA Self/Child/Spouse/Parent	1. NA 2. Note the amount of FMLA Benefits used for the day.
ETO EMP INTFMLA	Employee only paid ETO during the first 24 hours of scheduled absence. If no ETO is available then the employee will receive no pay.	Place amount of ETO to use or 0 if no ETO is available.	FMLA -Self	Note amount of FMLA Benefits used for that day.
ETO FAMILY INTFMLA	Spouse and children only paid ETO during the first 24 hours of scheduled absence. If no ETO is available then the employee will receive no pay.	Place amount of ETO to use or 0 if no ETO is available.	FMLA Spouse or FMLA Child	Note amount of FMLA Benefits used for that day.
ETO PARENT INTFMLA	Parents may only be paid ETO throughout the entire FMLA occurrence. If no ETO is available then the employee will receive no pay.	Place amount of ETO to use or 0 if no ETO is available.	FMLA Parent	Note amount of FMLA Benefits used for that day.
EIB EMP INTFMLA	Employee may be paid EIB after the first 24 hours of scheduled absence. If no EIB is available then the employee will receive no pay or they may use ETO if available.	Place amount of EIB to use or 0 if no EIB/ETO is available.	FMLA Self	Note amount of FMLA Benefits used for that day.
EIB FAMILY INTFMLA	Spouse and children may only be paid EIB after the first 24 hours of scheduled absence. If no EIB is available then the employee will receive no pay or they may use ETO if available.	Place amount of EIB to use or 0 if no EIB/ETO is available.	FMLA Spouse or FMLA Child	Note amount of FMLA Benefits used for that day.
EIB EMP INTFMLA EIB FAMILY INFMLA	Continue to record when the employee has exhausted all paid benefits.	Place 0.	FMLA Child FMLA Spouse FMLA Self	Note the amount of FMLA Benefits used for the day.



DESIGNATED PAY CODES FOR MEDICAL LEAVE OF ABSENCE

PAY CODE	DESCRIPTION	AMOUNT	COMMENT	NOTES
ETO or EIB EMP SICK			LOA	All FMLA Benefits have been exhausted and MLOA has been applied for or approved.

- If MLOA follows the exhaustion of FMLA benefits, a note should be placed in Kronos on the first day to indicate that FMLA benefits are exhausted and the employee has been approved for MLOA.
- MLOA is always continuous and may not be used intermittently. Please see the Leave of Absence Policy in the Housewide Manual under Human Resources for further information regarding other types of leave.

NOTES:

- All FMLA time used by the employee must be tracked for the date it was used and in the smallest increments. Ex: 1/1/15 Employee used (.10) hour.
- Usage must be tracked even if the employee has no accrued paid benefits (ETO/EIB). The timekeeper will key a "0" in the amount column and the amount of FMLA benefit time used in the comments/notes section for the day of usage.
- Exempt employees may not have a reduction in salary except for FULL DAY absences from work. Reduction from regular hours can only be made in full day increments. Accrued ETO/EIB must be applied in full day increments only.
- If an exempt employee does NOT have accrued ETO to cover requested unpaid time, contact HR at ext. 8002.
- If an employee does not have any paid benefits remaining but is still on FMLA, pay coding must continue in order to maintain appropriate documentation.