



# North Carolina Department of Public Safety

## Facility Human Resources Rep LEAVE KIT

### Leave of Absence Requests

Leave of absence (LOA) is the official permission to be absent from work or duty with or without compensation for family and medical leave, parental leave, vacation, or any other reason deemed justified by the agency.

#### Employee Responsibilities:

It is the employee's responsibility to request and receive approval for a leave of absence (LOA).

Employees are required to:

1. Notify your Supervisor/Manager that you are going to need to take a Leave of Absence.
2. Provide your Manager, HR Rep or HR designee with a completed Leave of Absence Request form, with appropriate documentation to support your request, i.e., physician certification, etc.
3. Do not assume that your request has been approved; you will be formally notified when the approval process has been completed.
4. You may be required to report at reasonable intervals, your status and intent to return to duty and that leave will be granted based upon applicable policies and quota balances available. Please continue to follow division standard operating call in procedures.
5. You are expected to return to work on the date indicated.
6. If you are unable to return to work on that date, you must request in writing and receive approval for an extension of this LOA. A *revised* Leave of Absence Request form will be required when submitting an extension for leave of absence, along with updated supporting documentation.
7. Where leave was approved for a personal illness, provide your Supervisor/Manager with a Return to Duty certification from your health care provider.
8. Notify the agency immediately if there is a decision not to return.
9. It is the policy of the Department of Public Safety to consider for and provide reasonable accommodation(s) to qualified individuals with disabilities consistent with the Americans with Disabilities Act of 1990. It is your responsibility to inform your Supervisor/Manager of the disability and request the accommodation. This request shall be made in writing.

#### Facility Management/Supervisor/HR Designee Responsibilities:

The Manager/Supervisor/HR Designee has been delegated the authority to approve requests for LOA consistent with the needs of the respective work location. Manager/Supervisor/HR Designee is required to:

1. Provide employee with a Leave Kit advising the employee of their rights, responsibilities and benefit options while on LOA status.
2. Provide employee requesting a LOA with a LOA Request form for the employee to complete and return to Management/Supervisor/HR Designee for consideration.
3. Approve/Disapprove the LOA request based on unit needs, supporting documentation submitted and policy leave requirements.
4. Complete the management portion of the LOA Request form indicating approval or denial of LOA request.
  - Upon LOA approval, grant leave based upon applicable policies and quota balances available.
  - Upon LOA denial, provide reason for denial.
5. Provide the completed management approval/denial to employee.
6. Submit Personnel Action to Central HR Separations/LOA Section if the employee is expected to be absent for 15 or more days.



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### LOA Request Form Instructions

#### Employee LOA Request Form Instructions:

The top portion of the form is to be completed by the employee requesting LOA. This written request from the employee shall include:

- The specific dates for which the employee is requesting leave
- The date the employee intends to return to work
- The reason(s) for the request
- The employee's request for leave exhaustion
- The employee's signature and date

Documentation supporting the need for LOA, i.e., medical certification, may be required by the supervisor/manager/HR designee of the employee prior to approving a request for LOA.

#### Management/Supervisor/ HR Designee LOA Request Form Instructions:

Upon receipt of the completed portion of the LOA request form from the employee, the Manager/Supervisor/HR designee shall consider the request and render a decision by completing the bottom half of the form. Upon granting the LOA, management must indicate approved duration dates; a specific timeframe approved for the employee to be in LOA status. It is recommended to approve LOA in increments of thirty (30) calendar days. If the duration of the period of LOA is known at the time of the request, LOA may be requested and approved in increments of other than thirty (30) calendar days. *(This does not preclude the manager from approving a request for LOA of less than thirty (30) calendar days.)*

**NOTE:** The total period of leave shall not normally exceed six (6) months, unless individual circumstances warrant an extension and shall never be approved past twelve (12) months. The one exception is LOA for Workers' Compensation, in which governing Worker's Comp policies shall apply.

LOA shall be reevaluated if the manager is notified that the employee is permanently disabled. In addition, any other period of leave which extends beyond 12 months shall be agreed upon/approved by the Department's Human Resources Director and the State Personnel Director.

Once LOA has been approved and the duration has been established, the Manager/Supervisor/HR Designee shall indicate the approved beginning and ending dates on the LOA Request form:

**Approved**    **Beginning Date:** \_\_\_\_\_ **Expected Return to Work Date:** \_\_\_\_\_

**DO NOT STATE "UNKNOWN".**

**IMPORTANT NOTE:** The beginning and ending dates outline the approved LOA duration date. It is the first step in recognizing the importance of the employee's responsibility in the LOA process; which is to remain in contact with the work unit concerning their absence. The employee is expected to return to work on or before the indicated ending date or request an extension of LOA. Failure to do so may result in disciplinary action, a re-evaluation of their employment status, or may be considered a resignation.

Per policy, the employee shall be notified in writing of the decision concerning their request for LOA and inform them of their responsibilities and any consequences. When the Manager/Supervisor/HR Designee completes the approval section of the "LOA Request" form, forward a signed copy to the employee or the employee's authorized agent.



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### **LOA Extension Requests:**

The employee is obligated to return to work within or at the end of the time granted. If the employee is unable to return to work on the specified date, the employee (or authorized agent) is responsible for promptly notifying the Manager/Supervisor/HR Designee and requesting - in writing - approval for an extension of the initial LOA. The LOA Request Form is required for such extensions, along with updated supporting documentation (physician certification outlining the extended duration of absence).

### **Emergency Policy Exceptions - LOA Notification Memo:**

In cases where the employee failed to request LOA prior to their extended absence due to emergency conditions (where the need for LOA was not foreseeable and could not have been anticipated by the employee), the Manager/Supervisor/HR Designee may allow an exception to the outlined procedures. Such exceptions shall only be acceptable for emergency situations.

Therefore, the Manager/Supervisor/Designee may “tentatively” approve LOA, while they are waiting for the required documentation to be completed by the employee.

The Manager/Supervisor/Designee shall contact the employee, in writing, to give the employee the opportunity to request LOA and provide appropriate documentation. This notification should include the LOA Kit, LOA Request form and should advise the employee of the following:

- Their combined vacation/bonus/sick leave balance,
- The procedure for requesting LOA , and
- That failure to request LOA may result in the employee being placed on unapproved LOA and a re-evaluation of their employment status.

The Manager/Supervisor/HR Designee may choose to contact the employee by telephone; however a written follow up shall be required. This is to ensure that the employee is fully advised of their responsibilities and the consequences of their failure to fulfill those responsibilities.

Therefore, it is imperative that management indicates a “reasonable timeframe” in the memo for the employee’s response and indicate a specific date for the employee to respond.

In these situations where the Manager/Supervisor/HR Designee waives the employee’s responsibility of requesting LOA in advance, the employee shall still be required to complete the LOA Request Form and submit it for the regular approval process. Therefore, a LOA Request Form should be enclosed with this memorandum. Exceptions to this will be authorized on a case-by case basis.

### **Employee Leave Benefit Options:**

**Employees on LOA status exhausting leave may be eligible for other Agency benefits:**

#### **1. Family Medical Leave (FML)**

Family Medical Leave entitles eligible employees to take up to 12 weeks (480 hours) of leave (paid or unpaid) in a 12-month period for:

- (1) the birth of a child and/or to care for the newborn child;
- (2) the placement of a child with the employee for adoption or foster care;
- (3) the care of a child, spouse, or parent who has a serious health condition;



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- (4) the employee's own serious health condition;
- (5) a qualifying military exigency leave for families of covered service members.

Family Medical leave also entitles eligible employees to take a total of 26 work weeks of leave (paid or unpaid) during a 12-month period for:

- (6) Military Caregiver Leave (also known as Covered Service Member Leave) is used to care for a covered service member who has a serious injury or illness incurred in the line of duty while on active duty for which he or she is undergoing medical treatment, recuperation, or therapy; or otherwise in outpatient status; or on the temporary disability retired list.

It is the employer's responsibility to designate Family Medical Leave when an employee is out of work due to a Family Medical Leave qualifying event. However, the employee must provide sufficient medical documentation to include, but not limited to, a beginning and ending date of disability and appropriate medical facts regarding the condition and need for leave.

When the employee returns to work, the employer must provide the same or like position and shift assignment, pay, schedule, and benefits.

Employees can request FML, or managers shall designate if there is knowledge of a potentially qualifying event.

### **2. Family Illness Leave (FIL)**

Family Illness Leave is an extension of benefits provided under the Family Medical Leave Policy. Family Illness Leave entitles eligible employees to take up to 52 weeks of leave (paid or unpaid) during a 5 year period to care for the employee's seriously ill child, spouse or parent. Family Illness Leave is not provided for the employee's illness. Family Illness Leave may be taken all at one time or intermittently. FIL absences are accounted for in weekly increments. Any portion of time taken for an FIL absence that is less than a full week, will count as one full week of Family Illness Leave to be deducted from the 52 week entitlement.

Employees can request FIL, or managers shall designate if there is knowledge of a potential qualifying event.

### **3. Voluntary Shared Leave (VSL)**

The Voluntary Shared Leave Program provides an opportunity for employees to assist another employee affected by a medical condition that requires a prolonged absence from work. For example, as a result of a prolonged medical condition, an employee may exhaust all available leave that has been earned. It is recognized that such an employee may be without income at a critical time in his/her career and is further recognized that fellow employees may wish to assist the employee by voluntarily donating leave.

In cases of a prolonged medical condition (in excess of 20 days), an employee who exhausts all leave or anticipates exhausting all leave may apply or be nominated for participation in the VSL Program. Under this program employees may receive donations of vacation, bonus or sick leave from eligible fellow employees to be used for a prolonged absence from work.

An employee may be disqualified to participate in the VSL Program if there is documentation that an employee has abused his/her leave benefits and privileges or has unwisely used leave with the knowledge of an impending need for leave.



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### Procedures for Participating in the VSL Program:

1. The employee must complete a Voluntary Shared Leave application for submission, review & approval to the Central HR VSL Coordinator;
2. The employee must provide medical documentation with the beginning date of disability, ending date of disability and diagnosis along with the application.
3. Employees can request a VSL application from their division/facility manager or HR designee.

### **4. Disability Benefits**

The Disability Income Plan was established in 1988 to provide supplemental income for eligible State employees who become temporarily or permanently disabled for the further performance of their job prior to retirement. The Disability Plan is administered by the NC Department of State Treasurer and the Board of Trustees of the Teachers' and State Employees' Retirement System. Determination of disability and eligibility for benefits is made by the DPS Review Board and/or the Retirement System Medical Board. There are three types of disability benefits available to employees:

#### Short Term Disability

Short-Term Disability allows an employee to receive replacement income while temporarily or permanently disabled for the further performance of their duty prior to retirement. Short-Term disability also encourages disabled employees who are able to work to seek gainful employment after a reasonable period of rehabilitation. Eligible employees will receive 50% of their annual base salary (plus 50% of longevity, if applicable), accrual of retirement service credits, and other benefits. The duration of the Short-Term benefits are from the 61st day of disability continuing for a period of up to one year. The State will pay for the State sponsored portion of the employee's health insurance coverage (the employee will have to pay for health insurance coverage of dependents and any amount over the State sponsored portion) while the employee is on Short-Term Disability **IF** the employee has five (5) years of contributory service as of the date of the disability. Employees with less than five (5) years of service will have to pay for their health insurance coverage (the amount the state normally pays each month) as well as pay for coverage of any dependents while out on Short-Term Disability.

#### Extended Short Term Disability

Extended Short Term Disability benefits are payable to eligible employees after the conclusion of the Short Term benefit and may be approved by the Plan's Medical Board for up to a maximum period of one (1) year for as long as the employee remains temporarily disabled. The Disability Income Plan's Medical Board makes the determination of eligibility for these benefits. Extended Short Term Disability allows an eligible employee to continue to receive 50% of their annual base salary (plus 50% of longevity, if applicable).

#### Long Term Disability

Long Term Disability benefits are payable to eligible employees after the conclusion of the Short Term Disability benefit period for as long as an employee is permanently disabled but not after he/she becomes eligible for an unreduced service retirement. The Disability Income Plan's Medical Board makes the determination of eligibility for these benefits. Long-Term Disability allows an eligible employee to receive 65% of their annual base salary (plus 65% of longevity, if applicable), until such time as they are eligible for full service retirement. There are additional requirements for eligibility for Long Term Disability that are detailed in the booklet Your Retirement Benefits published by the Department of State Treasurer.



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**Instructions for Submitting a Disability Application:** Applications for disability can be found on the State Treasurer's website [www.nctreasurer.com](http://www.nctreasurer.com).

A completed Short Term Disability application, found on the website mentioned above, should include:

1) FORM 701- Requesting Short-term Benefits through the Disability Income Plan of North Carolina  
EMPLOYEE COMPLETES SECTIONS A, B AND C ONLY:

- SIGN AND DATE THE FORM

2) FORM 703 - Reporting Earnings for Short-Term Disability Benefits and Medical Report for Eligibility Review

EMPLOYEE COMPLETES SECTIONS A, B, C AND D ONLY:

- SIGN AND DATE THE FORM in BOTH Section C and D
- Section H should be completed by the benefit representative at your work location
- Take Form 703 to your doctor's office for completion of the Sections E, F and G
- Your MEDICAL DOCTOR/PSYCHIATRIST must be sure to include the month/day/year that you became disabled to perform regular job and a diagnosis
- Forms signed by anyone other than your MEDICAL DOCTOR or PSYCHIATRIST will be returned (Physician Assistants/Psychologist signatures are not acceptable)

3) FORM 7A - MEDICAL REPORT

EMPLOYEE COMPLETES SECTIONS A AND B ONLY

- Choose Teachers' and State Employees' Retirement System (TSERS)
- Take the form to your Medical Doctor for completion
- Do not have the doctor mail this form to the Retirement System (Include this form with the Form 701 & Form 703 and mail to the Agency DISABILITY OFFICE which agency?) Cross out or mark through the Retirement System address if necessary to avoid confusion
- Make sure doctor completes Section C, Number 1 and Section C, Number 4
- Make sure your medical doctor personally signs and dates this form in Section F before the form is mailed to the disability office
- Forms signed by anyone other than a MEDICAL DOCTOR or PSYCHIATRIST will be returned (Physician Assistants/Psychologist are not acceptable)

4) SUPPORTING MEDICAL DOCUMENTATION - *REQUIRED INFORMATION*

- Have doctor provide current medical documentation to support the disability
- Current medical may include information such as:
  - Office Notes
  - Hospital Admission & Discharge Summaries (if applicable)
  - X-Ray/Diagnostic Test Results
  - Treatment Rendered and Prognosis

### **5. Americans with Disabilities Act (ADA) Benefit Options**

The Americans with Disabilities Act was designed to protect and enhance the rights of all Americans with physical and mental disabilities. It is the policy of the Department of Public Safety to consider and provide reasonable accommodation(s) to qualified individuals with disabilities consistent with the Americans with Disabilities Act of 1990. Reasonable accommodation is defined as any modification or



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adjustment to a job or work environment that will enable a qualified applicant or employee with a disability to perform essential job functions. An accommodation may be made to a current employee who, due to a physical or mental condition, has become unable to perform the essential job functions of the current position. Employees have the responsibility to inform the supervisor or manager of the disability and request the accommodation in writing on the DPS-RRA form. Forms can be found on the [www.ncdps.gov](http://www.ncdps.gov) website.

**Leave of Absence Usage Options:**  
**LOA will be granted based upon applicable policies and quota balances available:**

Reason for LOA	Approved Leave Options	Sick Leave Options	Other Options
Personal Illness	May use approved leave & may choose to use approved leave in lieu of sick leave	Must use sick leave before going into a non pay status	LWOP (A/A 9400) will be used when all applicable leave has been exhausted.
Family Illness	May use approved leave	May use sick leave	May use LWOP (A/A 9400)
Maternity Leave	May use approved leave	May use sick leave, but only during the period of disability	May use LWOP (A/A 9400)
Personal Reasons	<ul style="list-style-type: none"> <li>• 10 workdays or less - Must use approved leave before LWOP (9400)</li> <li>• Greater than 10 workdays - May use approved leave</li> </ul>	Cannot use sick leave	Greater than 10 workdays – May use LWOP (A/A 9400)
Vacation	Must use approved leave before going into non pay status	Cannot use sick leave	LWOP (A/A 9400) will be used when all applicable leave has been exhausted.
Military Training	May use approved leave	Cannot use sick leave	<ul style="list-style-type: none"> <li>• May use A/A 9620 military training leave</li> <li>• May choose LWOP (A/A 9400)</li> </ul>
Military Reserve Active Duty	May use approved leave prior to A/A 9630 for the 30 calendar day benefit	Cannot use sick leave	Must use A/A 9630 only for the 30 calendar day benefit
Short Term Disability	May use approved leave	<ul style="list-style-type: none"> <li>• Must use sick leave during the 60 day waiting period</li> <li>• May retain sick leave after the 60 day waiting period</li> </ul>	May use LWOP (A/A 9400)
Family Medical Leave (FML)	Leave usage options fall under the category for Personal Illness or Family Illness depending on the reason for FML; Use of paid leave must be decided upon initial request of leave and used prior to going on LOA-FML status		
Family Illness Leave (FIL)	Leave usage options fall under the category for Family Illness; Use of paid leave must be decided upon initial request of leave and used prior to going on LOA-FIL status		
Voluntary Shared Leave (VSL)	<ul style="list-style-type: none"> <li>• VSL overrides other policies regarding leave retention options</li> <li>• Must exhaust all earned approved leave and sick leave prior to exhausting VSL</li> </ul>		



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LOA - Workers' Comp	<ul style="list-style-type: none"> <li>Employee may elect to take SL (A/A 9200) or approved leave (A/A 9000) during the required 7-day waiting period &amp; then go on workers comp leave &amp; begin drawing workers compensation weekly benefits</li> <li>Employee may elect to go on workers comp with no pay (A/A 9400) during the required 7-day waiting period &amp; then begin drawing workers compensation weekly benefits</li> <li>Employees may elect to supplement the workers compensation weekly benefit with the use of partial earned SL (A/A 9200) or approved leave (A/A 9000) in accordance with the schedule provided by OSP. Use of supplemental leave benefits apply only when drawing temporary total disability (TTD) compensation.</li> <li>All elections involving the use of earned SL (A/A 9200) or approved leave (A/A 9000) are subject to availability (quota balance) at the time of incident (injury).</li> <li>Employees injured on the job, in order to reach maximum medical improvement requiring medical or therapy visits during regular scheduled working hours, may be approved to use Injury Absence leave (A/A 9680). Approval must be received from the Central HR Workers' Comp office. Paid time should be limited to reasonable time for treatment and travel. Any excess time will be charged as SL (A/A 9200), Approved Leave (A/A 9000) or Leave Without Pay (A/A 9400)</li> </ul>		
LOA - Injury Leave/Salary Continuation	<ul style="list-style-type: none"> <li>Applicable employees may be eligible for Injury Leave/Salary Continuation (A/A 9685).</li> <li>Use of Injury Leave/Salary Continuation (A/A 9685) must be submitted and confirmed by Central HR WC office and Corvel.</li> <li>Injury leave/Salary Continuation (A/A 9685) must continually be submitted to Central HR Workers' Comp office on a weekly basis for confirmation by Corvel.</li> <li>If leave is denied, employee may choose to exhaust SL (A/A 9200), Approved leave (A/A 9000) or Leave Without Pay (A/A 9400) for the absence.</li> <li>NOTE: Sworn/Certified employees that require intermittent absences for medical or therapy visits during regular scheduled working hours, may be approved to use Injury Leave/Salary Continuation (A/A 9685) upon confirmation from the Central HR Workers' Comp office.</li> </ul>		
Unapproved Leave	<ul style="list-style-type: none"> <li>10 workdays or less – Management may charge approved leave or leave without pay (A/A 9400)</li> </ul>	Cannot use sick leave	<ul style="list-style-type: none"> <li>10 workdays or less – Management may charge approved leave or leave without pay (A/A 9400)</li> <li>Greater than 10 workdays – Paid leave should not be used as the absence is 'unapproved' (Exception: Unless prior paid leave usage was approved &amp; then the employee did not report back to duty)</li> </ul>
<p>NOTE: Due to system limitations, A/A 9400 cannot be coded if it results in excess hours above the employee's standard for the overtime period; as this would result in a Beacon Time Evaluation Error and the record would not process for payroll.</p>			

### How Insurance Elections are affected by Leave Benefits for LOA

- Insurance benefits will continue uninterrupted for employees exhausting leave during the LOA period.**
- Once an employee reaches a leave without pay (LWOP) status during their LOA period, an HR Rep or designee will mail the employee a Continuation of Benefits Notice Letter outlining payment options with mailing instructions.**
- Please see the below table for general information on how insurance benefits are impacted for employees who reach leave of absence without pay status (LOA-LWOP) (this is not an all inclusive list):**



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LOA Reason:	Impact:
Family Medical Leave (FML)	<ul style="list-style-type: none"> <li>• <u>State Health Plan (SHP):</u> During any period of designated FML that is LOA-LWOP, the State will continue to pay the State’s contribution to the employee’s SHP election. The employee, however, will be responsible for any premium payments not previously paid by the State, specifically additional premium coverage for dependents, and any cost above the amount paid by the State for personal coverage. The employee’s payment portion needs to be submitted to BEST Shared Services. If the employee continues on LOA-LWOP after the FMLA entitlement has expired, the employee will be responsible for the entire SHP premium, to be submitted to BEST for continued coverage.</li> <li>• <u>NC Flex &amp; Supplemental /Agency Specific Benefit elections:</u> It is the employee’s choice whether to continue or not continue these benefits during the FMLA LOA-LWOP period. It will be the employee’s responsibility to submit timely payments to the vendors in order to continue coverage during the period of LOA-LWOP.</li> </ul>
Family Illness Leave (FIL)	<ul style="list-style-type: none"> <li>• It is the employee’s choice whether to continue or not continue benefits during a FIL LOA-LWOP period. It will be the employee’s responsibility to submit timely payments to appropriate vendors in order to continue coverage during the period of FIL LOA-LWOP.</li> </ul>
Short Term Disability	<ul style="list-style-type: none"> <li>• <u>State Health Plan (SHP):</u> <ul style="list-style-type: none"> <li>• The State will continue to pay the State’s contribution to the employee’s SHP election for employee’s <i>in receipt</i> of short term disability benefits <u>with at least five (5) years</u> of contributing retirement service at the time of disability. The employee, however, will be responsible for any premium payments not previously paid by the State, specifically additional premium coverage for dependents, and any cost above the amount paid by the State for personal coverage. <b>(NOTE: Employees with at least 5 years of retirement service will be responsible for paying the full insurance premium if they are placed on LOA-LWOP status while awaiting Short Term Disability approval to prevent a lapse.)</b></li> <li>• Employees in receipt of benefits <u>with less than five years</u> of contributing service at the time of disability, may elect to continue under the State Health Plan by paying the full premium required. It will be the employee’s responsibility to submit timely payments to BEST in order to continue coverage during the period of LOA-LWOP.</li> </ul> </li> <li>• <u>NC Flex &amp; Supplemental /Agency Specific Benefit elections:</u> It is the employee’s choice whether to continue or not continue these benefits during the Short Term Disability LOA-LWOP period. It will be the employee’s responsibility to submit timely payments to the insurance vendors in order to continue coverage during the period of LOA-LWOP.</li> <li>• SHP deductions will be payroll deducted from the short term check. For any NC Flex elections, the premiums must be paid directly to the insurance vendor. For Supplemental/Agency Specific benefit elections, please contact DPS Payroll for continuation options.</li> </ul>
Voluntary Shared Leave (VSL)	<ul style="list-style-type: none"> <li>• <u>If participation in the VSL program &amp; donations are approved <b>PRIOR</b> to the employee being placed on LOA-LWOP status:</u> The employee is considered in ‘pay status’ while exhausting accrued leave and VSL donations. Therefore, insurance premiums should continue to be deducted from any VSL pay and coverage should continue while exhausting donated leave. Once VSL donations have been exhausted &amp; the employee is placed on LOA-LWOP status, it is the employee’s choice whether to continue or not continue benefits during the LOA-LWOP period. It will be the employee’s responsibility to submit timely payments in order to continue coverage during the period of LOA-LWOP.</li> <li>• <u>If participation in the VSL program &amp; donations are approved <b>AFTER</b> the employee has been placed on LOA-LWOP status:</u> The employee should consult with their facility HR rep to determine the status of the employee’s insurance records in the SAP system and follow regular guidelines to continue or discontinue the benefit elections.</li> </ul>



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<p><b>Military Leave</b></p>	<ul style="list-style-type: none"> <li>• <u>State Health Plan:</u> <ul style="list-style-type: none"> <li>• Reserve Active Duty: When on State duty, the State continues to pay the State’s contribution for members of the National Guard regardless of pay status. When on Federal active duty, the State continues to pay the State’s contribution for at least 30 days from the date of active service pursuant to the orders; After that, the employee may choose to continue coverage by paying the full premium to BEST.</li> <li>• Extended Active Duty &amp; Other applicable Military LOA-LWOP: The State continues to pay the State’s contribution for at least 30 days from the date of active service pursuant to the orders; After that, the employee may choose to continue coverage by paying the full premium to BEST.</li> </ul> </li> <li>• <u>NC Flex &amp; Supplemental /Agency Specific Benefit elections:</u> It is the employee’s choice to continue or not continue these benefits during any LOA-LWOP period. It will be the employee’s responsibility to submit timely payments directly to the vendors in order to continue coverage during the period of LOA-LWOP.</li> </ul>
<p><b>Workers’ Compensation</b></p>	<ul style="list-style-type: none"> <li>• <u>State Health Plan:</u> While on LOA-LWOP due to workers’ compensation, the employee will have continued coverage under the state’s health insurance plan. Employees will be responsible for any premium payments not previously paid by the State, specifically additional premium coverage for dependents, and any cost above the amount paid by the State for personal coverage. The employee’s payment portion needs to be submitted to BEST.</li> <li>• <u>NC Flex &amp; Supplemental /Agency Specific Benefit elections:</u> It is the employee’s choice whether to continue or not continue these benefits during the Workers’ Comp LOA-LWOP period. If the employee chooses to continue insurance plans, it will be the employee’s responsibility to submit timely payments directly to the vendors in order to continue coverage during the period of LOA-LWOP.</li> </ul>
<p><b>General Insurance Terminations</b></p>	<ul style="list-style-type: none"> <li>• <u>State Health Plan (SHP):</u> If an employee reaches LOA-LWOP status (or exhausts FML, WC, VSL or STD) between the 1<sup>st</sup> &amp; 15<sup>th</sup> of the month, health insurance will terminate at the end of the current month. If an employee reaches LOA-LWOP status between the 16<sup>th</sup> &amp; the end of the month, health insurance will terminate at the end of the following month.</li> <li>• <u>NC Flex:</u> Flex coverage will terminate the 1<sup>st</sup> of the month following the last payroll deduction taken in pay status.</li> <li>• <u>Supplemental /Agency Specific Benefit elections:</u> Coverage will terminate following the last payroll deduction taken.</li> </ul>

### Return to Work Process

1. Employees are expected to return to work on the date indicated. If the employee is unable to return to work on the date initially indicated, the employee must request in writing and receive approval for an extension of LOA.

***Note: Failure to return to work at the expiration of a leave, or failure to request and receive approval for LOA extension, may result in disciplinary action up to, and including, dismissal, a re-evaluation of employment status, or may be considered a resignation.***

2. If LOA is for medical reasons, medical certification from the treating healthcare provider, approving the return to work, is required.

- Reinstatement could be delayed if the employee fails to provide a return to duty certification.
- If the employee has been released by their physician with light duty restrictions, it will be up to work location management to determine if the work restrictions can be accommodated. If the restrictions cannot be accommodated, the employee must remain out on LOA status until such restrictions can be accommodated or the employee is released to full duty.

3. The employee will have 30 days from the reinstatement date to re-enroll in any Insurance benefits. Upon a return to work, employees will need to log onto the BEACON ESS portal to re-enroll.



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### LOA & Disciplinary Issues

Failure to return to work at the expiration of the approved leave, or failure to request and receive approval for a LOA extension, may result in a re-evaluation of employment status to include disciplinary action up to and including dismissal or may be considered a resignation.

#### Unapproved LOA Process:

Management may designate a leave of absence as Unapproved upon:

- 1) An employee's failure to request and receive approval for LOA and remains out of work, or
- 2) An employee's failure to request and receive approval for an extension of LOA and remains out of work, or
- 3) An employee's failure to return to work at the expiration of an approved LOA.

In designating Unapproved LOA, the employee shall be informed in writing explaining the circumstances surrounding the situation resulting in the employee being placed on unapproved leave.

If an employee returns to work from an Unapproved LOA, the Manager/Supervisor/HR Designee can deal with the employee performance or conduct issue through the Performance Management process (i.e., performance coaching, or disciplinary process of written warning).

#### Resignation Without Written Notice Process:

Once an employee has been placed on Unapproved LOA and remains absent for 3 consecutive scheduled work days, the Manager/Supervisor/HR Designee may consider that the employee has voluntarily resigned and separation procedures under the provisions of "Resignation without Written Notice" may be initiated through the Agency's Employee Relations section.

### LOA & Position Management Issues

The needs of the work unit should be considered when approving an employee's LOA, along with the submitted supporting documentation. Additionally, LOA approvals shall be reevaluated at any time that the Manager/Supervisor/HR Designee is put on notice that the employee is permanently disabled or medically unavailable to return to work.

#### Separation due to Unavailability Process:

An employee may be separated on the basis of unavailability when the employee becomes or remains unavailable for work after all authorized leave credits and benefits have been exhausted and management does not grant an extended LOA.

Separations under these provisions require prior approval of the Agency HR Director or designee through the Employee Relations Section.