



City of Oak Harbor **Family and Medical Leave** **Additional Information**

Please sign and retain a copy for your files and send original to Human Resources.

Employee Signature

Date

Employee Printed Name

For items (a – d) please contact Amy for further information.

- a) If you receive medical benefits, you will continue to be responsible for the employee portion of family premiums contribution for medical benefits while on FMLA. While in a paid leave status, this amount will be deducted from your paycheck. Once you go on unpaid leave, you must submit payment by the first of the month for that month's premium.
- b) You have a minimum 30-day grace period in which to make premium payments. If payment is not made timely, we will pay your share of the premiums during FMLA leave, and recover these payments from you through payroll deduction upon your return to work.
- c) Disability and life insurance premiums that you are currently receiving will continue to be provided while you are on FMLA.
- d) If you receive dental coverage, you will be responsible for the employee portion of dependent premiums while on FMLA leave. While on a paid leave status this will be deducted from your paycheck. Once you go on unpaid leave, you must submit family payment by the first of the month for that month's premiums. If you choose to discontinue dependent coverage, the incentive level dependents were at prior to dropping coverage will be lost upon re-enrollment. Upon re-enrollment the dependent's level will be 70%.

Use of vacation during unpaid FMLA leave is at the employee's option. *Policy 504 Extended Leave of Absence #2a*

If an employee has sick leave available, the employee must use his/her sick leave in conjunction with his/her FMLA leave, you have the option of using available vacation leave in lieu of your sick leave (Police Department staff, sick leave usage is not required per CBA). *Policy 703 Absences #3*

However, the employee must use any accrued paid sick leave during an unpaid FMLA leave taken because of the employee's own serious health condition or the serious health condition of a family member. *Appendix B Family and Medical Leave Act (FMLA)*