

**GRADUATE MEDICAL EDUCATION
POLICIES AND PROCEDURES**

Subject:	FAMILY MEDICAL LEAVE OF ABSENCE (FMLA)
Effective Date:	July 1, 2020
Distribution:	All ACGME-accredited, ABMS-accredited and GMEC-approved programs
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Introduction:

Bridgeport Hospital provide leaves of absence to Residents and fellows (collectively referred to throughout this document as “Residents”) in an accredited GMEC approved program who are unable to work due to a medical condition or illness, the serious illness of a family member, to fulfill parental needs for a newborn, newly-adopted child, or to foster a child, to address certain qualifying exigencies related to military service, or to care for a covered military service member.

The Hospital complies with the Federal and State Family and Medical Leave Acts, as well as applicable Federal or State regulations. In some cases, this policy will exceed statutory benefits.

I. POLICY

- A. All Residents in an accredited or GMEC approved program are entitled to family/medical leave of absence not to exceed 12 weeks in a 12-month period (with an additional two (2) weeks of leave available for a serious health condition that results in incapacitation during pregnancy). Eligibility begins on the first day of employment.
- B. Residents may be granted up to 12 weeks during each 12-month training period for qualifying family and medical leave.
- C. For birth mothers, the date of incapacitation is considered the commencement of the family/medical leave period. Birthing mothers are entitled to four (4) weeks paid maternity leave. This is in addition to Parental Leave – see II.B. below.
- D. The family/medical leave may be used consecutively or intermittently, or under certain circumstances may be used to reduce the workweek or workday. Trainees cannot participate in clinical activities while on continuous family/medical leave, or outside of the parameters of their intermittent leave.

II. TYPE OF LEAVE COVERED

- A. In order to qualify as FMLA leave under this policy, the Resident must be taking the leave as

defined by one of the following circumstances:

- within one year of birth of a child and to care for that child
- within one year of placement of a child for adoption or foster care
- to care for a spouse, child, parent, or parent-in-law with a serious health condition
- the serious health condition of the Resident, whether considered work-related or not
- any qualifying exigency arising due to the active military duty of the spouse, son, daughter or parent of the Resident, or has been notified of an impending call or order to active-duty status, in support of a contingency operation
- to care for a service member who is recovering from a serious illness or injury sustained in the line of duty on active duty

B. PARENTAL LEAVE

This leave must be taken within 12 months of the birth, adoption, or fostering of a baby. All qualifying Residents taking parental leave will receive 8 weeks paid leave. Generally, parental leave is concurrent with the 12 weeks leave maximum. Birthing mothers who are required for medical reasons to take leave before the birth of their child, are eligible for 8 weeks paid parental leave starting when the child is born. If both parents are Residents, each is eligible for this parental leave.

C. DEFINITIONS

- **“Child”** means a natural, adopted, or foster child, stepchild, or legal ward, or a child of a person standing *in loco parentis*, provided such child is under the age of 18 or, if over 18 years, unable to care for self because of a serious mental or physical disability.
- **“Continuous leave”** is a leave over an ongoing period of consecutive days necessitated by the Resident’s own serious medical condition, or the Resident’s need to be absent to care for a family member with a qualifying condition.
- **“Intermittent/reduced schedule leave”** may be taken when the Resident must be absent from work in separate blocks of time or must work a reduced schedule due to his/her own serious health condition, or to care for a family member with a single qualifying condition.
- **“Parent”** means a natural parent, foster parent, adoptive parent, stepparent, legal guardian of an eligible employee, an individual who stood *in loco parentis* to a Resident when the Resident was a son or daughter, “parent-in-law” means the parent of current spouse
- **“Serious health condition”** for Residents means that the Resident is unable to perform the essential functions of the Resident’s position. The origin of this condition may or may not be a work-related incident. As it applies to both Residents and family members, a serious health condition is defined as a condition which requires inpatient care at a hospital, hospice, or Residential medical care facility, or a condition which requires continuing care by a licensed, health care provider. The serious health condition also includes illness of a long-term nature, resulting in recurring or lengthy absences. Generally, a chronic or long-term health condition which, if left untreated, would result in a period of incapacity of more than three days, would be considered a serious health condition. If leave for personal illness progresses into a serious health condition, a portion

or all the leave may be applied to the period of family/medical leave.

III. ADMINISTRATIVE PROCEDURES

A. Except where a leave is not foreseeable, all Residents requesting leave under this policy must give the Hospital (notify the DIO) and the Department (notify the Program Director) 30 days' notice. If it is not possible to give 30 days' notice, the Resident must give as much notice as is practical and reasonable. A Resident undergoing planned medical treatment is required to make a reasonable effort to schedule the treatment to minimize disruptions to the program's operations.

B. If a Resident fails to provide 30 days' notice for foreseeable leave with no reasonable explanation for the delay, the leave request may be denied until at least 30 days from the date the Hospital (DIO)/Department (Program Director) receives notice. It is the responsibility of the Resident to notify the DIO/Program Director in writing of such leave and the applicable dates. Failure to notify the DIO/Program may result in lost pay or benefits to the Resident/clinical fellow.

A request for Family and/or Medical Leave Physician Certification form must be completed and returned to the DIO/Program Office within 15 days of the request.

It is the responsibility of the Program to ensure that the family/medical leave dates are noted in MedHub within 15 days of receipt of the notification.

C. The Hospital (DIO)/Department (Program Director) requires certification of the serious health condition when the reason for the leave is either the Resident's health or that of an eligible family member. The Resident must respond to such a request within fifteen (15) days or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of the continuation of the leave. Certification of the serious health condition shall include:

- The date when the condition began
- The expected duration
- Brief statement of treatment

If the certification is for the Resident's own medical condition, it must include a statement that the Resident is unable to perform any work or unable to perform the essential functions of the Resident's position. The medical certification should be reviewed by the Program Director and the DIO.

For a seriously ill family member, the certification must include a statement that the patient requires assistance and that the Resident's presence would provide psychological comfort or assist in the patient's recovery. Proof of family relationship will be required by submission of the Statement of Family Relationship for Family/Medical Leave of Absence form.

If the Resident plans to take intermittent leave or work a reduced schedule, the medical certification must also include dates and the duration of treatment, and a statement of medical

necessity for taking intermittent leave or working a reduced schedule.

D. The Hospital (DIO)/Department (Program Director) has a right to ask for a second opinion. If this occurs, the Hospital (DIO)/Department (Program Director) will pay for a certification from a second doctor, who will be selected by the Hospital (DIO)/Department (Program Director). If necessary to resolve a conflict between the original certification and the second opinion, the Hospital (DIO)/Department (Program Director) will require the opinion of a third doctor. The Hospital (DIO)/Department (Program Director) and the Resident will jointly select the third doctor and the Hospital (DIO)/Department (Program Director) will pay for the opinion. This third opinion will be considered final.

E. While on FMLA, Residents are requested to report periodically to the Hospital (DIO)/Department (Program Director) regarding the status of the medical condition and their intent to return to work. Documentation should be sent to the Program Director and the DIO whenever a substantial change occurs.

IV. STATUS OF COMPENSATION AND BENEFITS WHILE ON LEAVE

A. Salary Continuation

Leave under this policy is unpaid except as follows:

- Parental leave eight (8) weeks paid (including birth parent, adoptive or fostering parents) in addition to the period of disability for the birth mother.
- Medical leave up to 26 weeks paid for a Resident who is unable to work due to their own health condition or disability.

B. Medical/Dental Benefits

While the Resident is on leave, the Hospital will continue during the approved leave period, generally not to exceed six (6) months, the Resident's health care benefits at the same level and under the same conditions as if the Resident had continued to work. If the Resident is paying a portion of the health care premium, the Hospital will continue to make payroll deductions while the Resident is on paid leave.

If the Resident contributes to a life insurance plan, the Hospital will continue making payroll deductions while the Resident is on paid leave.

While the Resident is on unpaid leave, the Resident must continue to make health insurance and life insurance payments. If the Resident does not continue these payments, the Hospital may discontinue coverage during the leave.

C. If the Resident chooses not to return to work for reasons other than a continued serious health condition, the Resident may continue health care coverage after notification of the intent not to return under the COBRA extension option, which entails the Resident paying the full premium plus an administration fee.

V. RETURN FROM LEAVE

- A 1. Residents on leave under this policy will be able to return to the same position or an equivalent position as long as they return to work prior to exhausting their family and medical leave entitlements.
2. If the reason for the leave is due to Resident's own serious health condition, the Resident must provide documentation of medical clearance to return to work. This documentation should be presented to Occupational Health Services and the DIO, which will confirm clearance to return to work.
- B. When a leave exceeds 12 weeks due to a personal, serious health condition, the Resident's job may be filled or held, based on the operational and staffing requirements as determined by the Program Director. If it were not feasible to hold the Resident's position, the Resident would receive consideration for job vacancies if the Resident were fit to return to work within the additional ten (10) weeks.
- C. Departmental/Program Requirements to Extend Training Time

Residents taking any leave of absence including those covered by this policy may be required to extend their time of training by an amount of time equal to that missed during such leave to satisfy Board eligibility or ACGME or other certifying organization certification eligibility requirements. In some situations, the Program Director may suggest a longer absence (to cover a complete rotation) to simplify subsequent rescheduling of duties. During such a requested absence and extended training time, all salary and non-salary benefits will be continued at the same level, with the exception that malpractice coverage may be suspended during absence from duties at the Hospital. A Resident should not be required to make up substantially more training time than was missed for this leave.

VI. EXCEPTIONS

- A. Any exceptions to the policy above must be appealed, in writing, to the DIO. This appeal should include the reasons or special circumstances that should be considered as the basis for exception.

Residents on J-1 visas must receive prior approval from the Educational Commission for Foreign Medical School Graduates (ECFMG) for any requests for leave of absence and for any extension of training.

VI. REGARDING STATE OF CONNECTICUT PAID LEAVE PROGRAM

The Connecticut Paid Family Leave program went into effect on January 1, 2022. This program provides opportunity for all employees to receive benefits from a State-run program during qualified leaves of absence from work. This program allows for financial support up to State dollar limits for a maximum of 12 weeks per 12-month period of time. This program is available

Page 5 of 6

P:\BH - GME Confidential\Policies\1-GME Policies\1-GME-New Format 2022-23\FMLA Policy 7-1-2022; GMEC approved 8-5-2022.docx

to Residents who have taken the 8-weeks of employer paid parental leave and wish to avail themselves of the 12-week maximum allowed by State of Connecticut law to receive financial support for weeks 9 – 12.

It is the responsibility of the Resident to apply directly for these benefits and to meet all reporting deadlines as found on this website: https://ctpaidleave.org/s/?language=en_US

Note that the maximum benefit January 1 – June 30, 2022 is \$780 per week, increasing to \$840 on July 1, 2022 and \$900 on June 1, 2023. Residents should review the state website for updates ahead of anticipating applying for this benefit.