

# Things you should know about Oregon Family Medical Leave Act (OFMLA)

OFMLA's regulation is under Oregon Administrative Rules (OAR's) 839-009

Here are some important definitions and information you should know:

**Family Members** are spouses, same-sex partners, custodial parents and non-custodial parents, parent in-laws, parents of same-sex partners, grandparents or grandchildren and children (to include stepchildren, adopted and foster) OAR 839-009-0210 (7)

**Serious Health Condition** is an illness, injury, impairment, physical or mental condition of you or your family member that:

- requires inpatient care
  - an imminent danger of death or a terminal prognosis where death is reasonable in the near future
  - require constant or continuing care
  - involves a period of incapacity, preventing you from doing one or more essential job duties for three consecutive calendar days (not working days) and covers subsequent treatment. However, the incapacity must involve: 2 or more treatments or a single treatment and continuing care
  - pregnancy and prenatal care
- OAR 839-009-0210 (20)

## Reasons for Leave

- parental* (to care for a newborn, newly adopted or newly placed foster child)
  - serious health condition*
  - sick child* to care for illness or injury requiring home care, but not a serious health condition
- OAR 839-009-0230

**Notice to GP** if you have a reason for OFMLA, call MetLife at 1-(877)-320-3173. For "foreseeable" leave, you can be required to give 30 days advance written notice. If you are unable to give 30 days notice, you must give as much notice as practicable. For an "unforeseen" situation, you or a designate must notify GP within 24 hours.

**GP's Timelines** start as soon as they are aware you have a qualifying reason for OFMLA. You should receive a written request for information to verify the leave within 5 business days after your call. Once GP receives the information, it has 5 business days to let you know if the leave is qualifying or not.

OAR 839-009-0250 (5)

**Cost of Verification not covered by insurance or any other benefit plan must be paid by GP!!!!**

OAR 839-009-0260 (2)

**Verification** must be given to GP upon written request, except for parental leave. If GP needs more information for verification, it must be in writing and state the additional information needed. GP cannot request subsequent verification within 30 days unless your medical condition changes or there doubt cast on your reason of absence. GP, AT THEIR EXPENSE, can require a 2<sup>nd</sup> opinion. As you return to work, GP can require a return to duty verification.

OAR 839-009-0260 (9)

**Verification for Sick Child** can be required only after the 4<sup>th</sup> day or subsequent occurrence. GP MUST PAY THE COST NOT COVERED BY INSURANCE OR OTHER BENEFIT PLAN.

OAR 839-009-260 (13)

**Leave for Victims of Domestic Violence, Harassment, Sexual Assault or Stalking** is also available to seek legal or law enforcement assistance including protective order proceedings, related criminal proceedings,

medical treatment recovering from injuries, counseling, relocation, transitioning and relocation. You should refer to the administrative rule for clarification or get with the Union Insurance Committee.

OAR 839-009-0345

Information provided by USW Local 1097 Worker's Compensation and Insurance Committee