

MEDICAL LEAVE OF ABSENCE

To standardize the communication of incidents/accidents and standardize the tracking of on/off duty injuries on the Division the following process will apply:

If an employee will be off work due to illness or injury they must request a leave of absence to cover their time away from work from their immediate supervisor.

To obtain an Authorized Leave of Absence, the employee must provide documentation from his / her medical provider stating that employee is unable to work and the estimated period of time. Form HUM00001 07-04 'BNSF Authorized Leave of Absence' must be completed and given to their supervisor.

The Supervisor will complete Recommending Officer's portion, forward copies of all documents to appropriate Superintendent and Director Administration.

If approved, employee will receive documentation via certified mail approving the Leave of Absence. Medical Status Form for Non Work Related Medical Conditions, (Form MED03010 05-05) will be provided when Leave of Absence is due to off duty injury or illness.

The Medical Status Form (MED03010 05-05) for Non Work Related Medical Conditions must be completed and faxed to CareSys at 1-877-286-2673 at least 5 business days prior to returning to full duty.

REQUESTING AN FMLA LEAVE

Family Leave:

The Family and Medical Leave Act of 1993 (FMLA) was enacted to assist employees in the balancing of workplace demands and family needs. FMLA requires private employers of 50 or more employees to provide eligible employees with up to 12 workweeks of paid/unpaid leave in any 12-month period for:

- a) the birth, adoption, or placement of a foster child with the employee,
- b) care of a family member with a serious health condition, or
- c) a serious health condition that makes the employee unable to perform his or her job.

REQUESTING FMLA MEDICAL LEAVE FOR SELF OR IMMEDIATE FAMILY

MEDICAL LEAVE

Medical leave is up to 12 workweeks of paid/unpaid leave during a 12-month period to care for yourself, your spouse, son, daughter, or parent *due to a serious health condition.* (SEE NEXT PAGE FOR DEFINITION OF A SERIOUS HEALTH CONDITION.

Definitions of spouse, son or daughter and parent under the FMLA provision:

Spouse A legal spouse, including common law spouse where recognized by state law.

Son/Daughter A biological child, adopted child, foster child, stepchild, legal ward, or a child **or** a person standing in *loco parentis*, under the age of 18, or over age 18 if the child is incapable of self-care because of a mental or physical disability.

Parent The biological parent of an employee or an individual who stood in *loco parentis* to an employee when the employee was a child. This does not include a parent "in law."

What is a Serious Health Condition?

FMLA Defines a "Serious Health Condition" as:

An illness, injury, impairment, or physical or mental condition that involves: (1) inpatient care in a hospital, hospice, or residential health care facility, or (2) lasts longer than three (3) days and requires continuing treatment by a health care provider. Certification of a serious health condition is required.

Medical leave is also available for EMPLOYEE SERIOUS HEALTH ISSUES. If employee is going to be off for medical reasons they should secure a Medical Leave of Absence through their supervisor.

ON-DUTY INJURY LEAVE OF ABSENCE

When an employee sustains a personal injury and cannot work, the supervisor should notify Crew to mark employee off DUE TO AN ON DUTY INJURY **AND** submit the information to the Director of Administration office to handle. Include employee name, number, date of injury, first day lost.

Leave will be managed in the same manner as regular medical leave of absence, except:

1. No medical status form will be sent to the employee.
2. Extension information will be submitted to Susan Carriere at Caresys – 1-866-870-0923.
3. Leave will be extended upon receipt of Fitness for Duty Recommendation from Caresys.

On-duty injuries will be tracked in the OPUS system.

MEDICAL STATUS FORM

The Director of Administration will issue an Authorized Leave of Absence Letter and the Medical Status Form, granting the Leave.

Medical Status Forms are NOT to be given to an employee by the supervisor.

IMPORTANT – PLEASE NOTE

If an employee has been on leave of absence, he/she cannot return to work without a medical release. Supervisors are not permitted to allow an employee to return to full duty, light duty or restricted duty without authorization from the Medical Team.

WHEN IS MEDICAL STATUS FORM NEEDED? Off Duty Injury / Illness

If an employee is off for any of the following reasons, they **CANNOT** return to work without a **Medical Status Form** – that means that they should be on an **Authorized Leave of Absence**.

- **Diabetes with insulin injection**
- **Fractures**
- **Hospitalization**
- **Heart disease**
- **Loss of consciousness**
- **Major surgery**
- **Seizure**
- **Sleep Apnea**
- **Stroke**
- **Absence greater than 30 days**
- **Temporary or permanent restrictions**
- **As deemed necessary by the Medical & Environmental Health department or their designees**

EXTENDING LEAVE OF ABSENCE

Prior to the expiration date of the current leave of absence, the employee is required to provide information to the Director of Administration securing an extension of his/her current leave. This is to be on the treating physician's letterhead, stating employee name and approximate length of time the employee is to remain off duty. This information can be faxed to your DOA's office.

If approved, employee will receive certified letter approving Leave of Absence and Medical Status Form for Non Work Related Medical Conditions (Form MED03010 05-05).

The Medical Status Form for Non Work Related Medical Conditions must be completed and faxed to CareSys at 1-877-286-2673 at least 5 business days prior to your return to full duty.

PLEASE NOTE

**MEDICAL STATUS FORM IS NOT TO BE USED TO EXTEND THE LEAVE.
IT IS TO BE USED FOR RETURN TO WORK ONLY.**

RETURN TO WORK PROCESS DOCTOR'S RELEASE

OFF DUTY INJURY / ILLNESS

1. Employee completes Section 2 of the Medical Status Form.
2. Employee has his/her physician complete Section 3 of the Medical Status Form
3. Medical Status Form **MUST** be faxed to Caresys at 1-866-254-6486.
4. Medical Care Manager will review the form and determine fitness for duty.
5. Medical Care Manager will issue a Fitness For Duty, indicating a return to work date and will contact the employee, advising them when they may return.
6. Director of Administration will notify crew to mark up the employee.

ON DUTY INJURY

1. Employee's physician faxes return to work information to Caresys 1-866-870-0923.
2. Medical Care Manager will review the information and determine fitness for duty.
3. Medical Care Manager will issue a Fitness for Duty, indicating a return to work date and will contact the employee, advising them when they may return.
4. Director of Administration will notify crew to mark up the employee.