**Family First Coronavirus Response Act**

**OHS Summary of Emergency FMLA and Emergency Paid Sick Leave**

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|  | Emergency Paid Sick Leave (E-PSL) | Emergency FMLA (E-FMLA) |
| Name of Provision | Emergency Paid Sick Leave Act | Emergency Family and Medical Leave expansion Act |
| Effective Date | April 1, 2020 through December 31, 2020 | April 1, 2020 through December 31, 2020 |
| Eligible Employee | All employees regardless of length of service | Employee worked for OHS at least 30 calendar days |
| Purpose for Leave | To the extent an employee is unable to work or telework and needs leave due to:   1. Employee is ordered by government agency to quarantine or self-isolate related to CV19 2. Employee has been advised by health care provider to self-quarantine due to CV19 concerns 3. Employee is experiencing symptoms of CV19 and is seeking medical diagnosis 4. To care for an individual who is subject to an order or recommendation such as described in 1 or 2 above due to the coronavirus 5. Care for a child if the school or day care has been closed or the child care provider is unavailable due to coronavirus 6. Employee is experiencing any other substantially similar condition as determined by Human Health Services | Employee must be unable to work or telework due to the need to care for a child under 18 because school or child care provider was closed due to CV19 declared a public health emergency  Child care provider means a provider who receives compensation for providing child care services on a regular basis |
| Paid Leave | Full time employees: OHS pays up to 80 hours.  Part time employees: hours equal to average of prior 2 weeks work  For reasons 1, 2, and 3 above, paid leave is 100% of regular pay, capped at $511/day.  For reasons 4, 5, and 6 above, pay is 2/3rds of regular pay, capped at $200/day. Can not use PTO to supplement 2/3 pay days.  Intermittent leave available for full days only | First 10 days are unpaid -but may use emergency paid sick leave or accrued PTO during these 2 weeks  Part time or variable scheduled employees will be prorated based on avg. number of hours scheduled per day for prior 6 months  Up to 10 additional weeks of OHS leave paid at 2/3rds pay, capped at $200 per day. Can not use PTO to supplement 2/3 pay days.  Intermittent leave available for full days only  Total FMLA/EFMLA = 12 weeks annual maximum |
| Process to Request Leave | E-PSL Leave Request form and physician or school closure documentation is required. Complete timecard using the appropriate pay type (PSL-Self or/PSL-Family dependent) | E-FMLA Leave Request form and school/day care closure documentation is required. Complete timecard using the appropriate pay type (PFL- dependent) |