

This checklist is provided for informational and discussion purposes only. It cannot modify or change District Policy, Collective Bargaining Agreements (CBA), Personnel Commission (PC) Rules, or Federal and/or state laws in any way.

The administrative provisions of the District's policy bulletins and status of benefits are subject to change if contracts, laws, and/or mandates change. Please check your CBA or the PC Rules that covers your job classification for further benefits and provisions available during your absence.

IDM would like to thank all of our partners for their commitment and invincible enthusiasm to this project including:

- Benefits Administration
- Employee Health Services
- Human Resources
- Office of General Counsel
- Payroll Administration
- Personnel Commission
- Staff Relations

# PREGNANCY DISABILITY LEAVE CHECKLIST



This checklist will guide you through the process of going on Pregnancy Disability Leave. As with any other job-protected absence, you should partner with your site administrator/supervisor to ensure a seamless Pregnancy Disability Leave.

Division of Risk Management and Insurance Services  
Integrated Disability Management (IDM) Branch  
February 2019

**CONGRATULATIONS ON YOUR PREGNANCY!!**



## CONTACT INFORMATION

For further assistance during your leave, please reference the following Resources and Contacts:



Information Related To:	Resource	Contact Phone	Contact Other
<b>Pregnancy Disability Leave (Job-Protected Absences)</b>	IDM – Absence Management	213-241-3954	<a href="mailto:fmla@lausd.net">fmla@lausd.net</a>
<b>District Leaves of Absence (Certificated Staff)</b>	Certificated HR	213-241-5100	<a href="#">Leaves of Absence</a>
<b>District Leaves of Absence (Classified Staff)</b>	Personnel Commission	213-241-7800	<a href="mailto:classifiedpersonnel@lausd.net">classifiedpersonnel@lausd.net</a>
<b>Pay While on Leave</b>	Payroll Administration	213-241-2570	<a href="mailto:payrollsupport@lausd.net">payrollsupport@lausd.net</a>
<b>Benefits: Coverage, Enrollment, Changes</b>	Benefits Administration	213-241-4262	<a href="mailto:benefits@lausd.net">benefits@lausd.net</a>
<b>Employee Health Services</b>	TB Screening and Compliance	213-241-6326	<a href="mailto:employeehealth@lausd.net">employeehealth@lausd.net</a>
<b>Collective Bargaining Agreement Information</b>	Labor Relations	213-241-8322	<a href="#">Office of Labor Relations</a>
<b>Pension Coverage and Benefits (Certificated Staff)</b>	CalSTRS	800-228-5453	<a href="http://www.calstrs.com">www.calstrs.com</a>
<b>Pension Coverage and Benefits (Classified Staff)</b>	CalPERS	888-225-7377	<a href="http://www.calpers.ca.gov">www.calpers.ca.gov</a>
<b>Deferred Compensation 403(b)</b>	TSA Consulting	888-796-3786	<a href="http://www.tsacg.com/lausd/">www.tsacg.com/lausd/</a>
<b>Deferred Compensation 457(b)</b>	Voya	844-525-2873	<a href="https://my.voya.com">https://my.voya.com</a>
<b>State Disability Insurance (SDI)</b>	California EDD	800-480-3287	<a href="http://www.edd.ca.gov">www.edd.ca.gov</a>
<b>Paid Family Leave (PFL)</b>	California EDD	877-238-4373	<a href="http://www.edd.ca.gov">www.edd.ca.gov</a>

## RESOURCE AND CONTACT INFORMATION

### RESOURCES

The District’s protected absence and pregnancy-related policy bulletins, Personnel Commission (PC) Rules, and Collective Bargaining Agreements (CBA) can be found on the IDM page of the District website under [District Protected Absence and Leaves of Absence Information](#)

District Leaves of Absence programs and administrative practices comply with Federal and state laws and District documents, including:

California Pregnancy Disability Leave (PDL) - [www.dfeh.ca.gov](http://www.dfeh.ca.gov)

Fair Employment and Housing Act (FEHA) - [www.dfeh.ca.gov](http://www.dfeh.ca.gov)

Family & Medical Leave Act (FMLA) - [www.dol.gov](http://www.dol.gov)

California Family Rights Act (CFRA) - [www.dfeh.ca.gov](http://www.dfeh.ca.gov)

California Labor Code - [www.dir.ca.gov](http://www.dir.ca.gov)

Americans with Disabilities Act (ADA) - [www.ada.gov](http://www.ada.gov)

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## BEFORE GOING ON LEAVE

### FAMILIARIZE YOURSELF WITH THE PDL KNOWLEDGE BANK

#### EDUCATE YOURSELF REGARDING PDL

Pregnancy Disability Leave (PDL) is a protected leave under the California Fair Employment and Housing Act (FEHA).

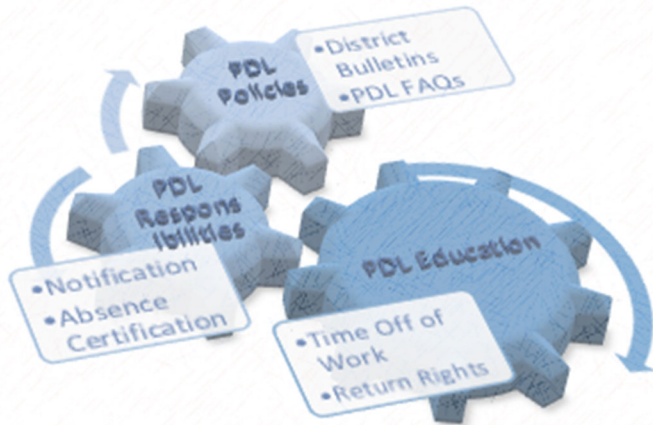
PDL provides employees up to four months of job-protected time off for disabilities related to pregnancy, childbirth, or related medical conditions. Continuous and intermittent absences, reduced work schedules, and/or time away for treatments and appointments for things such as prenatal care and severe morning sickness are included in the four months.

As an accommodation, and with advice of a physician, you can request transfer to a less strenuous or hazardous position or duties because of your pregnancy disability.

PDL also provides you return rights to your original position (unless the position has been closed due to a reduction in force) or a position that is comparable (same tasks, skills, benefits, and pay).

To be eligible for PDL, you simply need to be employed by the District and disabled by pregnancy. **Your health care provider will determine whether or not you have a pregnancy disability.**

Read more about PDL under FEHA on the Department of Fair Employment and Housing website. Look for [Pregnancy Disability Leave FAQs](#)



## RETURNING FROM LEAVE

### GETTING UP TO SPEED AND SETTLING IN

#### REQUEST LACTATION ACCOMMODATIONS

Requests to express breastmilk at work are to be directed to your administrator or supervisor. Your request can be either verbally or in writing.

Notify your administrator/designee or supervisor of any lactation accommodation needs and meet with him or her to identify mutually agreeable lactation accommodations. Your Lactation Accommodations must include:

A suitable space for expressing breastmilk that is private, functional, in close proximity to your work area, and is shielded from view. (Bathrooms and/or closets are not suitable or permissible spaces by law) A reasonable amount of time for you to express breastmilk as needed, unless doing so would seriously disrupt District operations. Permissibility to store your breastmilk in refrigerator and freezer units provided to all employees.

Additional information is available in the District policy bulletin: Lactation Accommodations Policy BUL-6689.0

#### TB COMPLIANCE

If your tuberculosis (TB) clearance expires during your leave, you will need to update it before returning to work. Contact Employee Health Services for questions related to TB screening and compliance at:

[employeehealth@lausd.net](mailto:employeehealth@lausd.net)

#### MEET WITH YOUR ADMINISTRATOR OR SUPERVISOR

Plan on meeting with your administrator or supervisor upon returning to work to catch up on what occurred during your absence such as the status of any workload/projects, changes in policies/procedures, and new or revised assignments.

#### MANDATORY TRAINING

Complete all mandatory training as soon as possible after returning to work, if applicable. Talk with your administrator or supervisor.

## PREPARE TO TRANSITION TO PARENTAL LEAVE OR RETURN TO WORK

### REQUEST, COMPLETE, & SUBMIT THE REQUEST TO RETURN FROM LEAVE FORMS

Whether returning to work immediately following the completion of your Pregnancy Disability Leave or transitioning to Parental Leave, a release to return to work form is required.

#### **Certificated Employees:**

Complete the Certificated Request to Return from Leave form 1038. Your personal Health Care Provider must complete section D of this form. If you are continuing onto Parental Leave, complete the Certificated Request for Leave of Absence form 1065, Section II, Option 7 and secure the signature of your administrator.

#### **Classified Employees:**

Complete the Classified Notice of Intent to Return to Work PC Form 5178. Your personal Health Care Provider must complete the Physician/Health Care Provider section of this form. If you are continuing onto Parental Leave, complete the Leave of Absence Request for Classified Employees Form PC 5006 #7 or #8 with appropriate verification and secure the signature of your administrator.

### STAY IN TOUCH

Keep your administrator/work location informed of any changes in your return to work date, extensions of leave, or parental leaves commencing immediately following the end of a pregnancy disability leave. If you are requesting additional leave, you must submit required supporting documentation to:

#### **Certificated Employees:**

Human Resources at: LAUSD Certificated Assignments and Support Services Section

#### **Classified Employees:**

Personnel Commission at: LAUSD Classified Employment Services Branch

### UNDERSTAND YOUR RESPONSIBILITIES UNDER PDL

You should provide advance notice if your need for leave is foreseeable or as soon as reasonably possible if your need for leave is unforeseeable.

You are required to comply with usual and customary call-in and reporting procedures in accordance with your work location and Collective Bargaining Agreement.

You must make a reasonable effort to schedule planned medical treatment so as to not unduly disrupt District operations.

You are required to complete the Certification of Absence (60-ILL) form when requesting any absence for illness or disability.

### REVIEW THE DISTRICT'S PROTECTED ABSENCE POLICIES AND RESOURCES

Review Pregnancy Disability Leave (PDL) program information on the Integrated Disability Management (IDM) Resources/Forms page of the District website. There you will find publications and tools to help you prepare for your Pregnancy Disability Leave, including:

Pregnancy Disability Leave-related FAQ's

Family and Medical Leave Act (FMLA)/California Family Rights Act (CRFRA) Policy BUL-1205.3

Reasonable Accommodation Policy BUL-4569.1 Paid Parental Leave Policy BUL-6861.0

Lactation Accommodations Policy BUL-6689.0



## EDUCATE YOURSELF ON DISTRICT LEAVES, BENEFITS, AND PAYROLL POLICIES

### THE DISTRICT REQUIRES A FORMAL LEAVES OF ABSENCE FOR ABSENCES OF 20 OR MORE CONSECUTIVE WORK DAYS

The term “formal leave” refers to any leave of more than 20 consecutive work days in duration. Formal leaves must be applied for in writing using District forms.

A formal Pregnancy Leave is a leave granted to an employee for absence covering a period of more than 20 consecutive working days because the employee is physically or mentally disabled and unable to work due to pregnancy, childbirth, end of pregnancy, and/or loss of pregnancy.

For Laws and Rules on Leaves of Absence, refer to Personnel Commission Rule 803: [Leaves of Absence](#)

For Pregnancy and Related Disability Policy Guide, refer to Certificated Human Resources Division Policy: [L13 - Leave of Absence - Pregnancy Related](#)

You can find information related to Leaves of Absence and Pregnancy Disability for your specific Collective Bargaining Agreement on the Office of Labor Relations website under [Union Contracts](#)

### EDUCATE YOURSELF ON DISTRICT BENEFITS ADMINISTRATION PROCEDURES

Get answers to your benefits questions regarding topics such as:

**Maintaining Health Care Benefits:** Your job-protected PDL entitles you to continue participation in District sponsored benefits regardless of whether or not your absence is paid or unpaid.

**Dependent Eligibility:** You must complete the "Change of Dependent Status" form to add a dependent for coverage under the District's health benefit plans. Forms submitted within 30 calendar days from delivery will have newborn coverage retroactive to the date of birth.

**Flexible Spending Accounts:** Enables you as an active employee to save money by using pre-taxed wages to pay for certain dependent care and/or health care expenses.

The District's Benefits Administration information can be found on the LAUSD website under [Benefits Administration](#)

## WHILE ON LEAVE

### REVIEW YOUR BENEFITS PACKAGE FOR COVERAGE & CHANGES

#### CONSIDER ENROLLING YOUR CHILD IN DISTRICT BENEFITS

Because the birth of your baby is a qualifying Major Life Event, you may enroll in a Health Benefits plan.

Your newborn must be enrolled within 30 days of birth for continuous coverage. If the required documents are received after 30 days, the newborn will be covered on the first of the month after the verification was received.

A copy of the child's birth certificate is required for coverage, however; the complimentary hospital certificate will be accepted in lieu of a birth certificate for newborns to five months of age only.

#### CONSIDER ENROLLING IN ANY FLEXIBLE SPENDING ACCOUNT (FSA)

Because the birth of your baby is a qualifying Major Life Event, you may enroll in a Health Care and/or Dependent Care FSA.

Eligible Health Care FSA expenses include prescription eyewear/contact lenses and deductibles/co-pays for medical, orthodontic, and prescription drugs.

Eligible Dependent Care FSA expenses include child/adult daycare services provided in your/any home and annual registration for licensed daycare centers.

#### REVIEW YOUR DISTRICT-PROVIDED AND OPTIONAL LIFE INSURANCE COVERAGES AND BENEFICIARIES

Optional life insurance is a voluntary benefit that allows you a greater level of life insurance than the \$20,000 basic life coverage provided by the District. It also allows insurance coverage for eligible dependents including children and spouses/domestic partners.

If you need to add or change beneficiaries, complete life insurance carrier's Beneficiary Designation Request Form.

If you would like to cancel or reduce beneficiary amounts, complete life insurance carrier's Change Request form.

The District's Benefits Administration information, including Change of Dependent Status forms, a complete list of eligible FSA expenses, and life insurance forms can be found on the LAUSD website under [Benefits Administration](#)

## REQUEST, COMPLETE, & SUBMIT THE LEAVES OF ABSENCE PACKET

The District requires you to request a formal Leave of Absence anytime you will be away from work for 20 or more consecutive work days.

### **Certificated Employees:**

Complete the Certificated Request for Leave of Absence (form 1065), have your treating physician complete the Certification of Health Care Provider (form 8239), and secure the signature of your administrator.

Submit ORIGINALS of forms 1065 and 8239 along with any attachments to Human Resources:

LAUSD Certificated Assignments and Support Services Section  
15th Floor of the Beaudry Bldg.  
PO Box 3307 (Dept. S)  
Los Angeles, CA 90051

### **IF THE REQUEST IS FOR AN ADMINISTRATOR:**

LAUSD Administrative Assignments Unit  
14th Floor of the Beaudry Bldg.  
PO Box 3307  
Los Angeles, CA 90051

### **IF THE REQUEST IS FOR DIVISION OF ADULT AND CAREER EDUCATION:**

DACE Personnel Unit  
15th Floor of the Beaudry Bldg.  
Los Angeles, CA 90017

### **Classified Employees:**

Complete the Leave of Absence Request for Classified Employees (form PC 5006), have your treating physician complete the Attending Physician's Statement (form 5166), and secure the signature of your administrator.

Submit ORIGINALS of forms PC 5006 and 5166 along with any attachments to Personnel Commission:

LAUSD Classified Employment Services Branch  
12th Floor of the Beaudry Building  
PO Box 513307  
Los Angeles, CA 90051-1307

## EDUCATE YOURSELF ON DISTRICT PAYROLL ADMINISTRATION PROCEDURES

You are allowed, but not required, to use any available paid illness time during your PDL absences and/or leaves. If you choose to use and exhaust full-pay illness, you can opt to use accrued vacation time in lieu of going into half-pay illness.

If you do not have or choose not to use accrued vacation time available, you can use half-pay illness once your full-pay illness has exhausted. You also have the option of taking PDL time unpaid.

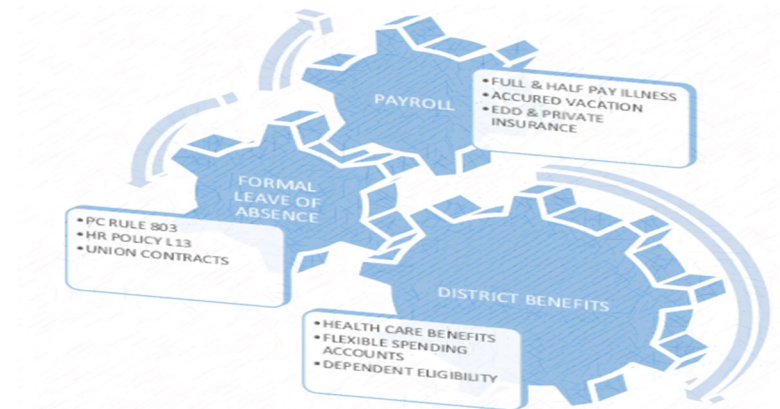
Whether paid or unpaid, your time away under PDL is job-protected; however, unpaid time is not treated as credited service for permanency, retirement, or benefit accrual, vesting, and eligibility.

Statutory Disability Insurance with the California EDD and/or AFLAC Employer's Statement forms are processed by payroll.

For pay-related questions, please contact the Payroll Correspondence Unit:

333 S Beaudry Ave, 1st Floor  
Los Angeles, CA 90017  
Phone: 213-241-2570  
Fax: 866-761-7413  
Email: [payrollsupport@lausd.net](mailto:payrollsupport@lausd.net)

Payroll Administrative service request forms can be downloaded from the Payroll Administrative Branch website.



## CREATE A MAP OF YOUR PERSONAL TIMELINE

### THINGS TO CONSIDER AS YOU PREPARE FOR THE BIRTH OF YOUR CHILD

How much time do you plan to take for the birth of your child?

Holidays, recesses, or breaks of seven (7) calendar days or more do not count towards your continuous Pregnancy Disability Leave. **Review your payroll calendar:** [2018-2019 Payroll Calendars](#)

All job-protected time in relationship to your pregnancy (continuous, intermittent, and reduced work) counts towards the 18 workweeks of PDL. **Review your My Time Statement on LAUSD MyPay Employee Self-Service (ESS)** and utilize the FMLA Tracking Worksheet: [FMLA Forms](#)

How much paid time (full and half pay illness, vacation) do you have for your leave? **Access the Employee Self-Service (ESS) LAUSD MyPay to review your paystubs:** [Employee Self-Service \(ESS\)](#)

Is your contact information up to date? **Access the Employee Self-Service (ESS) LAUSD MyProfile to review and make changes to your permanent and emergency contact information for District records:** [Employee Self-Service \(ESS\)](#)

Is your tuberculosis (TB) compliance up to date? There is no waiver of TB screening during pregnancy. You can discuss screening options with your physician. Contact Employee Health Services for questions related to TB screening and compliance at: [employeehealth@lausd.net](mailto:employeehealth@lausd.net)



## FORMALLY INITIATE YOUR LEAVE REQUEST

### SUBMIT A COMPLETE AND SUFFICIENT HEALTH CARE PROVIDER CERTIFICATION

Your site administrator will provide you with the Health Care Provider Certification Form (form FMLA-1) and the Notice of Employee Rights & Responsibilities (FMLA-2).

Health Care Provider Certification (form FMLA-1):

Section I of the Health Care Provider Certification form is completed by your administrator/designee.

Section II of the Health Care Provider Certification form is completed by you. Section III Health Care Provider Certification form is completed by your treatment provider.

The Health Care Provider Certification Form (FMLA-1) should be received by your site administrator or supervisor at least 30 calendar days prior to your anticipated last day worked or as soon as practicable. In all cases, your forms should be submitted no later than 15 calendar days from your first date of absence.

Additional information is available in the District policy bulletin: Family and Medical Leave Act (FMLA)/California Family Rights Act (CFRA) Policy BUL-1205.3

### SUBMIT THE CERTIFICATION OF ABSENCE (60-ILL) FORM

Pregnancy Disability Leave (PDL) can be taken on an intermittent, reduced work schedule, or continuous basis for reasons that include pre and postnatal care, severe morning sickness, doctor ordered bed rest, and childbirth, loss or end of pregnancy.

Certification/Request of Absence for Illness, Family Illness, New Child (form 60.ILL) is required to be completed for all absences, including those related to Pregnancy Disability.

**Check Option 3 C:** My Pregnancy-Related Illness/Disability and indicate whether or not you want your absence to be paid or unpaid.

FMLA/CFRA Information: Indicate your absence is due to a Serious Health Condition and confirm your request for your absence to be job-protected; which includes PDL.

Indicate whether or not the appropriate documentation has been submitted with your request. **Please note that a complete and sufficient Health Care Provider Certification form is required in order to have your absences reported as PDL and job-protected.**

Additional information is available in the District policy bulletin: Certification of Absence Forms Policy BUL-6307.5