Recovering from surgery or other medical procedure should be spent doing just that, recovering.

In order to relieve the pain after surgery, or better assist in the care of a qualifying family member’s recovery, it is important to comply with the necessary steps to secure approval for leave prior to surgery.

The State of Indiana Employee Surgery Packet provides useful information that will assist you every step of the way!

**DISCLAIMER**

*The material contained in this handbook/packet is intended to be advisory in nature. It does not create any rights not otherwise conferred upon state employees by Indiana statute, executive order, or administrative rules. Similarly, it does not impose any obligation upon any state agency, supervisor, or any other state representative not otherwise mandated by applicable law.*

**Surgery checklist: Prior to surgery**

Did you…

- Review the State’s policies on various types of leaves to determine which might apply? [http://www.in.gov/spd/2396.htm](http://www.in.gov/spd/2396.htm)
- Submit your FML Request in your PeopleSoft® Self Service account?
- Print FML Certification forms? [http://www.in.gov/spd/2397.htm](http://www.in.gov/spd/2397.htm)
- Upload completed Certification form(s) to your Request?
- Submit required application forms for State’s Short/Long Term Disability Plan if absence for your own serious health condition might last more than 30 calendar days? [http://www.in.gov/spd/2397.htm](http://www.in.gov/spd/2397.htm)
- Review your insurance plans and get your questions answered? Benefits Hotline 317.232.1167 or toll-free at 1.877.248.0007
- Discuss with your supervisor plans for coverage during your absence?
HOW DO I DETERMINE IF I QUALIFY?
ELIGIBILITY REQUIREMENTS FOR FAMILY MEDICAL LEAVE

- Been employed in an agency under the executive authority of the Governor for at least 12 months*.
- Have worked at least 1,250 hours in the 12-month period immediately preceding the need for family-medical leave.
- Have not exhausted allotment of family-medical leave in the applicable time period.

*Note that the 12 months are not required to be consecutive*
Family Medical Leave (FML) is unpaid leave unless another available, appropriate paid leave is taken at the same time. FML is calculated on the fiscal year (July 1 – June 30) and the maximum leave available is a total of twelve weeks for all reasons, not for each reason.

Family-Medical Leave may be taken for the following qualifying events:

1. Birth of a child.
2. Placement of a child for adoption or foster care.
3. **For the care of your spouse, child or parent who has a serious health condition.**
4. The serious health condition of the employee which prevents the employee from performing the essential functions of his/her job.
5. Because of a qualifying exigency arising out of the fact that the employee’s spouse, child or parent is on covered active duty or call to covered active duty status.
6. **For the care of a covered service member with a serious injury or illness.**

The information in this packet focuses on reasons #3, #4, and #6 when the serious health condition requires surgery.

*It is important to note that not all surgeries or medical procedures will be covered by Family Medical Leave. Cosmetic surgery, for example, is not a serious health condition unless inpatient hospital care is required or complications develop or if the treatment is related to a medical condition that otherwise meets the definition of serious health condition under the FMLA, for example, restorative surgery after an injury or removal of cancerous growths. Additionally, short-term conditions for which treatment and recovery are brief, such as routine oral surgeries or out-patient surgical procedures with expected brief recuperating periods generally do not qualify for family medical leave coverage.*
Advance Notice Required

For a planned surgery, an FML request must be submitted at least 30 days prior to the start of the leave, or if the need for surgery is not determined 30 days in advance, then you must submit a Request for FML on the same or next business day of learning that surgery must be scheduled. Certification documenting the medical information supporting the need for you or your covered family member’s surgery must be submitted prior to the beginning of the leave, unless you had less than 15 days notice of the need for surgery. If you had less than 15 days notice of the need for surgery, then you must submit the supporting medical documentation no later than 15 calendar days after you learned of the need for the surgery.

Submitting FML request

Log in to PeopleSoft® Self Service, choose Leave of Absence and FMLA Request, then follow the instructions that appear on the screen for submitting the request and uploading your supporting documentation.

To assist you with this new process, the following links will provide step-by-step instructions on how to:

- Submit a request for FML - [http://www.in.gov/spd/files/Submitting_FML_Request_Jobaid.pdf](http://www.in.gov/spd/files/Submitting_FML_Request_Jobaid.pdf)
- Upload the medical documentation - [http://www.in.gov/spd/files/Attaching_Docs_to_saved_FML_Request_Jobaid.pdf](http://www.in.gov/spd/files/Attaching_Docs_to_saved_FML_Request_Jobaid.pdf)  
  *Please note that your supervisor, manager, HRD or physician will not be able to upload your medical documentation, nor will they be able to view the documentation once you have uploaded it.*

Supervisors, Managers, and HRDs will have access to complete and submit an electronic request for FML on your behalf if your condition or necessity to care for a family member renders you unavailable to submit your own request. **They will not be able to upload or view medical documentation.**

No e-mail account?

An e-mail address is needed to complete the application process. There are several sites on the internet that provide e-mail accounts at no charge. Such sites are [Yahoo](http://www.yahoo.com), [Hotmail](http://www.hotmail.com) and [Gmail](http://www.gmail.com) are several options!
Documentation

You will need to print the Certification that is applicable for your request, fill-in the identifying information, and submit the form to the Health Care Provider for completion.

To avoid delay in processing be sure to pick the correct certification for your request. There are unique Certification forms to be used depending on whether the person with the serious health condition is the employee or a covered family member; the Certification forms are not interchangeable.

Remember, it is your responsibility to retrieve the completed certification from the health care provider, and upload it into PeopleSoft® using the Job Aid for attaching FML Documentation at http://www.in.gov/spd/files/Attaching_Docs_to_saved_FML_Request_Jobaid.pdf

Forms for supporting documentation are linked below:

- Certification of Health Care Provider for Employee’s Serious Health Condition
- Certification of Health Care Provider for Family Member’s Serious Health Condition

Applying for Disability Plan Benefits

If the leave is for the your own serious health condition, and the absence may last longer than 30 full, consecutive calendar days, then you should apply for the state’s Short/Long Term Disability Plan by completing and submitting the required forms to JWF Specialty.

Instructions for Submission of a Disability Claim

You will need to complete the three forms below:

- Employee's Statement of Claim
- Employee’s Authorization for Release of Medical Information
- Options Statement
The following form must be completed by your Human Resources representative or Agency Payroll Office:

- **Employer’s Statement of Claim**

The following form must be completed by your Physician:

- **Attending Physician's Statement**

Once completed, submit the forms to JWF Specialty at the contact information located below. Failure to submit these forms in a timely manner, and/or to meet the requirements of the 30-day elimination period, may negatively affect any benefits available under that program.

JWF Specialty Company  
PO Box 40968  
Indianapolis, IN 46240-0968  
Telephone: (888) 818-7795 or (317) 574-7876  
Fax: 317-574-7865

---

**Call/Review your insurance plans**

Are you familiar with your insurance plans? If not, this is a great time to see what your current plans cover and what expenses are involved, such as deductibles and co-insurance.

---

**Benefits Homepage**
Discuss with your supervisor plans for coverage in your absence

Schedule meeting(s) with your supervisor well in advance of your anticipated leave to provide status reports and to plan the redistribution of your workload/projects during your absence.

Have questions or need more information:

Additional information on leaves can be found on the State Personnel website at Standardized Policies. You can also contact the Employee Relations division of the State Personnel Department at 855.773.4647 with any questions.
How much leave is available?

Approval for FML will be limited in accordance with the medical information provided by the health care provider stating the length of the absence anticipated for the surgery and recovery. FML is capped at 12 weeks in each fiscal year (which is July 1 – June 30) regardless of the number of qualifying events with one exception: additional FML is available under reason #6 to care for a covered servicemember.

FML runs concurrently with the elimination and benefits periods of the State’s Short/Long Term Disability Plan (S/LTD).

S/LTD benefits begin no earlier than the 31st calendar day after the beginning of the incapacity that made you unable to perform your job duties. During that 30-day elimination period, your absence may be authorized under FML and any use of accrued leave benefits. Failure to submit disability forms prior to the end of the 30-day elimination period will negatively affect any benefits available under the plan because benefits cannot be awarded retroactively before the S/LTD claim forms are submitted to the administrator, JWF Specialty.

Is any of that leave paid?

Payment during FML is dependent upon whether you have accrued sick, vacation, or personal leave or earned compensatory time. Use of comp time or leave benefits runs concurrently with FML during the elimination period or can be used to supplement the basic benefit of S/LTD by choosing Option 2 or Option 3 on the Options Statement.

- If you are in a position entitled to premium overtime for hours worked in excess of forty (40) hours in a calendar week, and you have earned compensatory time for working compensable overtime, such
compensatory time must first be used concurrently with family-Medical Leave prior to using any accrued benefit leave.

- Next, you must use all available sick leave concurrently with the Family-Medical Leave designation.
- After your sick leave has been exhausted, you may choose to use any accrued personal and/or vacation leave in order to be compensated.
- If you are in a position exempt from overtime, then you must use all available sick leave concurrently with the Family-Medical Leave designation. After your sick leave has been exhausted, you may choose to use any accrued personal and/or vacation leave in order to be compensated.
- Family-Medical Leave also runs concurrently with any disability designation.

**Continuation of Insurance Benefits**

If you have insurance under the state’s fringe benefit plan and you normally pay a portion of the premiums, you will be required to continue paying the employee’s portion of premiums in order to retain coverage.

If you are in out-of-pay status, you have a thirty (30) day grace period in which to make premium payments for health insurance. Your health insurance can only be cancelled if you are given at least fifteen (15) days’ written notice that payment has not been received. However, if you allow your health insurance to lapse, coverage will terminate retroactive to the first date for which premiums were not paid. If you allow your health insurance to lapse, coverage will be reinstated four (4) days after your first pay date with health contributions upon return to work.

---

**Related Concerns**

Recovery from a medical procedure takes time. If you have questions or concerns, contact the EASY Program (Employee Assistance Services for You). Telephone counseling, crisis assistance, legal and financial referrals and care resources are available 24 hours a day, 365 days a year. Should further assistance be required, the EASY Program staff can help you locate appropriate resources in your community. Please visit EASY for additional information.
Work Release

If you have been on leave due to your own serious health condition then you will be required to submit a statement from your health care provider identifying the date you are released to return to work and any restrictions as to duties you can perform.

- You must provide that on the **same day or next business day** on which you receive the release and it must be submitted to your HR representative **AND** to JWF Specialty if you have been on the disability program. Your return to work may be delayed if you fail to provide a release.
- If your release contains restrictions, then you will need to discuss those with your supervisor and HR representative to determine whether, and for how long, the restrictions can be accommodated.

Meeting with your supervisor

Schedule a meeting with your supervisor 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.

Benefits/Insurance

If you allowed your insurance coverage to lapse during unpaid FML time, contact the Benefits Hotline at (317) 232-1167 or toll-free at (877) 248-0007 about reinstatement of your benefits. Also, check your paystub to make sure your reinstatement is implemented.

Please contact the State Personnel Department at 1-855-773-4647 with additional questions.