

aLEAVEiate® How to File a Leave of Absence

Simple, easy, convenient: Starting your absence from work

Your employer has contracted with Reliance Matrix to administer its Family Medical Leave Act (FMLA) program. This document explains how to file a request for a leave of absence.

Leave of absence

You may qualify for a leave of absence* for the following reasons:

- Your own serious health condition
- Care of a family member
- Needs due to a family member's military service
- Bonding with a newborn, adopted child, or a newly placed foster child
- Other leaves provided by company policy or state or federal law

When you request a leave of absence, we will provide you with a certification form that must be completed to support your leave request. It is your responsibility to ensure we receive the completed form.

Information you'll need to report a leave of absence

Depending on the type of leave, you will be asked to provide some basic information. Having the following information readily available when you report your absence to Reliance Matrix will speed up the process:

- Personal Information: Name, address, telephone number, and the last four digits of your Social Security Number
- Job Information: Job title, job description, workplace location and address, work schedule, supervisor's name and telephone number, date of hire and last day worked
- **Provider Information:** Name, address, telephone number, and fax number for each treating health care provider

How to report a leave of absence

Timely reporting of your leave is critical for approval of your claim for leave and/or benefits. It's easy to file a claim 24/7/365 via mobile app, web, or by phone (see Step 2 below).

If you expect to be out of work for more than three days*, you must take the following steps:

Step 1:	Notify your supervisor and/or your local human resources department. You do not need to discuss private health issues when providing this information.
Step 2:	To file your claim directly on the web, just go to matrixabsence.com . If you're accessing our web portal for the first time, you will need to set up an account.
	If you don't have internet access, you can call (855) 469-3652 between the hours of 6:30 AM and 10:00 PM EST. Be ready to provide your personal, job, illness/injury and provider information (see below for specifics).
	You can download the Matrix eServices Mobile App by scanning the QR code, or by searching Matrix eServices Mobile in your smartphone or tablet's app store (iOS or Android).
	Within 24 hours of requesting leave, you will receive an absence packet explaining what (if any) additional documentation is needed.
Step 3:	Submit the requested documentation for claim processing.



NOTE: You may also be required to file a claim for state disability or family leave benefits depending on location. If that applies, specific state information will be in your claim packet.

*NOTE: Some absences of fewer than 3 days may qualify you for leave, such as recurrences of your own or a family member's chronic or long term conditions or family military needs. Ordinary short-term illnesses such as a cold or the flu generally will be covered by regular sick pay or other time off programs, if available from your employer, and do not need to be reported as outlined in this document.

Authorizing the release of your medical information for benefits

The release of medical information is critical for the evaluation of your leave. To facilitate this, Reliance Matrix will provide you with a "Medical Authorization" form within 24 hours of the filing of your leave.

- Your provider may also ask you to sign their specific authorization form. If they do, please sign it. This release authorization will expedite the processing and payment, if applicable, of your claim.
- If proper written medical documentation is not received from your provider within 15 days of your request for leave, your leave may not be approved. Adequate supporting medical information is required.
- Therefore, it's important that you follow up with your provider and Reliance Matrix to make sure your healthcare provider has sent the proper documentation within the deadline.
- It's also helpful to ask your provider to be as specific as possible when certifying the amount of time that you will have to miss work.

What to expect next

Benefit or leave eligibility is confirmed

Within five business days of filing your leave, you will be notified in writing, whether you are eligible for the requested leave of absence benefits (based on hours, service and disability enrollment, if applicable).

Medical information, if applicable, is obtained

Your physician (or that of your immediate family member) will be contacted to discuss your (or your family member's) medical information, treatment plan, prognosis, and functional abilities. Your Absence Management Specialist may also contact you to discuss the following:

- The information you initially reported
- Your medical condition, including the impact it has on your ability to do your job, and your treatment plan
- The evaluation procedures used under this program

The frequency with which your Absence Management Specialist contacts you will depend on your individual circumstances and the expected duration of your absence from work. Periodically, your provider may be contacted to discuss your current medical condition. Additional medical information may be needed in order to continue benefits.

Initial decision is made

Once all the pertinent information has been obtained, we will make an initial determination regarding your request.

 For Medical and Family Care claims, a decision will be made within three business days of receipt of all the information and will be based on the objective medical information provided by the physician.

Additionally, the decision may be based on other factors such as:

- Activities you can and cannot perform
- The circumstances of your condition, treatment plan, and prognosis
- The requirements of your job and your ability to perform the job

For Leave of Absence claims, a decision will be made within three business days of receipt of complete information.

Follow-up

Occasionally Reliance Matrix may need more information to continue or extend your leave of absence. If that is the case, your Absence Management Specialist will contact you with directions and appropriate forms.

How to report intermittent absences

If your leave is intermittent (taken in segments of time rather than one continuous block), you will need to report your missed time. To submit your intermittent time for an approved/ open intermittent leave, you can use any one of the easy reporting options listed earlier.

If the specific intermittent time requested is not approved for leave, you will receive a letter explaining the reason(s). If the time is approved you will not receive a letter stating the approved time. If you want to request a letter outlining the amount of intermittent time that has been applied toward your leave of absence entitlement, contact your Reliance Matrix Absence Management Specialist via the app, online or by calling (877) 202-0055.

FMLA recertification

Depending on your diagnosis, we will generally ask you to recertify your leave every six months unless the frequency of the leave is changing periodically. We will ask for recertification based on the medical documentation provided by your provider and our guidelines.

Returning to work

Your Absence Management Specialist (and when appropriate, a Nurse Case Manager) will work with you, your provider in some cases, and your employer to determine a return to work plan specific to your needs and abilities. We will contact you five days prior to your expected return to work date to verify your intent on returning. Reliance Matrix will then notify your employer.

Effective communication is a two-way process. You are encouraged to respond to the Matrix text message regarding your intent to return to work.

Consult your Human Resources Department for more information on your leave of absence policy, job protection, and rights while on leave.

Earnings and eligibility are defined per the policy and/or the summary plan description filed with and/or by your employer. This document is only a guide. All claim decisions will be made in accordance with the applicable policy or plan provisions.

For more information, contact your Reliance Matrix sales or account manager or visit reliancematrix.com.

