



# Ohio Department of Administrative Services

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Payroll Letter 701  
Supersedes Payroll Letter 645

To: Payroll Officers, Personnel Officers, Labor Relations Officers and Fiscal Officers of all Departments, Institutions, Boards and Commissions

From: Robert L. Cruse, State Payroll Administrator

Subject: Family and Medical Leave Act of 1993- Payroll Reporting

The Family and Medical Leave Act of 1993 (FMLA) became effective for **exempt** employees on August 5, 1993. For employees covered by a collective bargaining agreement, FMLA will be effective upon expiration of the current collective bargaining agreement or on February 5, 1994, whichever is sooner. To be eligible, an employee must have been employed by the state for at least twelve months, and have worked at least 1250 hours within the twelve month period immediately preceding the start of the FMLA leave. The FMLA entitles state employees up to twelve weeks of leave and requires the employer to maintain group health insurance coverage for an employee on FMLA leave. For detailed information regarding the Family Medical Leave Act please refer to the memorandum from Director Conrad on this subject dated July 30, 1993. Listed below are the new procedures for reporting Family Medical Leave Benefits to the Payroll System for eligible employees.

Employees requesting FMLA leave are to use the standard leave form, ADM 4258, and must submit any documentation or certification as required. Once the leave has been approved, a personnel action code, "I15" with beginning and ending dates of the leave should be posted on the payroll disbursements journal to create an entry on the employee history file. Another "I15" personnel action code must be posted if the employee uses FMLA leave beyond the original ending date.

Additionally, a personnel action form with an "I02" personnel action code must be submitted if an employee is on unpaid leave for more than two weeks.

Employees may utilize paid and unpaid leave as FMLA leave as determined by agency policy. Regardless of which type of leave is used (paid or unpaid), post the following entry on the Payroll Disbursement Journal, **each pay period** that an employee utilizes FMLA:

"FMLA XXX.XX" - Family Medical Leave Act usage  
(XXX.XX is the number of hours used in hundredths).

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If there is to be an adjustment to FMLA hours that were posted to a pay period other than the current pay period, post the appropriate entry(s) on the Payroll Disbursement Journal based on the following formats:

“\*FMLXXXXXADDMMDDYY” - to add FMLA hours to the FMLA balance for the proper period ending month, day, year (MMDDYY).

or

“\*FMLXXXXXSUBMMDDYY” - to subtract FMLA hours from the FMLA balance for the proper pay period ending month, day, year (MMDDYY).

XXXXX in the previous two entries is the number of hours in hundredths of hours but with no decimal point. For example 80.00 hours would be 08000.

Payroll Systems will use the posting to account for the number of FMLA leave hours used. No cash value is generated by the above exceptions. Payroll Systems will prepare a report listing FMLA leave usage for each pay period so that agencies can monitor FMLA leave usage which will be distributed to agency Personnel Officers.

The Family and Medical Leave Act requires employers to maintain the employee's coverage for health insurance. Therefore, the state is required to continue to pay the employer's share of the health insurance premium while an employee is on FMLA leave. If an employee utilizes unpaid leave and no health care premium can be deducted, the employee should forward payment for the employee share of the premium to you by the fifteenth of the month prior to the month for which coverage is to be continued. The check should be made payable to the agency.

The Act also requires the employer to provide a 30-day grace period whenever the employee must make a direct payment for health insurance coverage and to maintain health care coverage for the employee during the grace period. The agency is required to pay the employee's share of the premium and request reimbursement from the employee. If the employee's direct payment is more than 30 days late, health care coverage for the employee will cease. .

Employees eligible for health insurance benefits are to be coded to the payroll disbursements journal as:

1. RP (return to pay)
  2. Less 80 (less 80 hours of pay)
  3. FMLA XXX.XX (number of FMLA hours used, if any)
  4. \*FMLA PAY HOSP (comment pay exception)
  5. DED 00
  6. Add an Employer Share Makeup Health Insurance Deduction code ('\_\_C' or '\_\_P'). The codes used to post a makeup deduction for the current benefit period are 'A\_C' or 'J\_C' codes. The codes used to post a makeup deduction for a previous benefit period are 'A\_P' or 'J\_P' codes. The rates to use will be determined by when the FMLA hours were used. The premium amount must be the combined employee and employer shares of health insurance.
- posted

Please contact the Payroll Processing Unit if you have any questions regarding information in this letter.

RLC/AJH/jh