Leave Ends Smart Form

**PURPOSE:** This form should be used when an employee is returning from a paid FMLA or unpaid leave of absence.

**When Leave Ends**

Submitting the Leave Completion Smart Form, the leave event will update coverage(s) and start deductions as well as end the direct billing process. There are three returning from leave types:

- **Return from Unpaid Leave** – This event is used for Authorized Leave Without Pay or Family Medical Leave Act. Note: Submitting paid FMLA status does not change the employee’s benefits or result in any notices being sent to an employee. However, the employee is eligible for qualified status changes, within 30 calendar days, due to the FMLA leave.
- **Return from Military Service** – This event is used only for returning from Military Leave.
- **Return from Leave Across Plan Years** - This event is used only for employees returning from an unpaid leave of absence across plan years. Note: This event is not used for FMLA or Military leaves since they are able to elect plans during annual enrollment.

If a participant wants to change coverage when coming back from FMLA or Military Leave, (s)he should call the Benefits Center. Other leaves would have to experience a qualified status change outside of beginning an unpaid leave. The Benefits Center will process a Qualified Status Change to update elections in accordance with allowable mid-year changes.

**Leave End Date Rules**

The following rules apply when setting the Leave End Date:

- The Leave End Date should be the first day at work.
- The date may not be in the future (wait until on or after the date to submit the smart form).
- Agencies cannot change the Leave End Date once they have submitted the smart form. If the date needs to be corrected, agencies will need to contact the HRA team.
Return from Unpaid Leave Event

The Return from Unpaid Leave event is used to update coverages, stop deductions and initiate the direct billing process.

Coverage Effective Date Rules

- Active coverages are reinstated as of the first of the month following the change in status date.
  
  Example:
  
  - Return from Unpaid Leave status effective 9/20
  - Active coverage begins effective 10/1
  - Direct billing stops end of September

Deduction Effective Date Rules

- Active deductions are initiated as of the first of the month of the status effective date.
  
  Example:
  
  - Return from Unpaid Leave status effective 9/20
  - Deductions start effective 9/1
  - Direct billing stops end of September

Additional Rules

For participants on a regular unpaid leave who return to active status within the plan year, no enrollment or changes are permitted. This is true even if coverages dropped during the unpaid leave due to non-payment. The next enrollment opportunity for participants in this category will be the next annual enrollment period or a qualified status change.

For return from unpaid leave, coverages continued during the unpaid leave and the DCSA contribution prior to the unpaid leave is reinstated. Changes are not permitted unless the return from unpaid leave is a FMLA, or unless the participant experiences a separate qualifying event.

If the participant dropped coverage on leave or reached the coverage termination milestone while on leave, the participant will default to No Coverage.

If a participant has a premium waiver, it should end when active coverages begin.

Step 1: On GaBreeze Employer Web Site, click on Smart Form tab and enter employee SSN.
**Step 2: Choose Smart Form – Leave Completion**

![Smart Forms Image]

**Step 3: Enter Leave Completion data.**

![Enter Leave Completion Image]

**Return from FMLA/Military Service Leave Event**

The Return from FMLA/Military Service Leave event is used to update coverages, stop deductions and initiate the direct billing process.

**Coverage Effective Date Rules**

- Active coverages are reinstated as of the first of the month following the change in status date.
- Example:
  - Return from Unpaid Leave status effective 9/20
  - Active coverage begins effective 10/1
  - Direct billing stops end of September

**Deduction Effective Date Rules**

- Active deductions are initiated as of the first of the month of the status effective date.
- Example:
  - Return from Unpaid Leave status effective 9/20
  - Deductions start effective 9/1
  - Direct billing stops end of September

**Additional Rules for FMLA/Military Leave**

A participant returning from FMLA/Military Leave will continue coverage in place during the leave and will be reinstated into the same coverage in place prior to the beginning of the leave for STD, LTD, and AD&D. Additionally, the participant can contact the Benefits Center to make changes as defined in the Mid-Year Changes document. The Dental Waiting Period or EOI is not required for the options that are reinstated or elected (the same option in effect during leave of absence) even if that coverage was dropped during the leave period.

**Return from Unpaid Leave Across Plan Years Event**

This event is used to update coverage and deductions for participants returning from an Unpaid Leave of Absence across plan years and to offer an enrollment event since the participant was unable to enroll in plans or increase coverage during Annual Enrollment. (This does not apply to those returning from an Unpaid Leave-FMLA, or an Unpaid Leave-Military Leave because they are able to elect plans and increases during Annual Enrollment, whereas participants on a regular Unpaid Leave are not, and they also have 30 days following their return from leave to make changes).

**Coverage Effective Date Rules**

- Active coverages are effective as of the first of the month following the change in status date.
- Example:
  - Return from Unpaid Leave status effective 9/20
  - Active coverage begins effective 10/1
  - Direct billing stops end of September

**Deduction Effective Date Rules**

- Active deductions are initiated as of the first of the month of the status effective date.
- Example:
  - Return from Unpaid Leave status effective 9/20
  - Deductions start effective 9/1
  - Direct billing stops end of September
Additional Rules

For return from unpaid leave, coverages continued during the unpaid leave continue unless the employee contacts the Benefits Center to make changes. If the employee dropped coverage during the leave, he/she is subject to the dental waiting period and EOI as applicable for mid-year changes.

If the employee dropped coverage on leave or reached the coverage termination milestone while on leave, the employee will default to No Coverage.

Returning from Disability with Reduced Hours

Employees continuing to receive disability benefits and return to work with reduced hours are eligible to continue benefits with reduced hours for a 12-month period. To enable the 12-month continuation, the agency must enter the action reason code of Return from Disability-Change in Standard Hours (RFD-CSH). Note: Be sure to update the number of reduced hours the employee will be working until they return to full-time status. When the employee begins working at a full time status, their record should be updated again to reflect Return from Leave-Return from Leave (RFL-RFL).

For employees returning from disability with reduced hours to active full-time status within the plan year, changes are permitted in accordance with allowable mid-year changes. Employees should contact the GaBreeze Benefits Center within 30-calendar days of returning to full-time status.