

**Kirlin Design Build Temporary Policy - Families First Coronavirus Response Act (FFCRA)
Effective October 5, 2020 – December 31, 2020**

- The FFCRA is a temporary act that requires employers with less than 500 employees to provide up to 80-hours emergency paid sick leave and 10-weeks paid expanded family and medical leave through December 31, 2020 to employees unable to work or telework due to a limited set of COVID-19 specific reasons outlined below:

Emergency Paid Sick Leave	Emergency Paid Family and Medical Expanded Leave
<ul style="list-style-type: none"> Up to 80-hours, regular pay (up to \$511/day) for a government or health care provider ordered quarantine or experiencing COVID-19 symptoms and seeking a medical diagnosis; or Up to 80-hours, 2/3 pay (up to \$200/day) for a bona fide need to care for an individual subject to Government or Health Care Provider ordered quarantine, or to care for a child (under 18 years of age) whose school or child care provider is closed or unavailable for reasons related to COVID-19 	<ul style="list-style-type: none"> Up to 10 weeks, 2/3 pay (up to \$200/day) where an employee, who has been employed for at least 30 calendar days, is unable to work due to a bona fide need for leave to care for a child whose school or child care provider is closed or unavailable for reasons related to COVID-19.

- The FFCRA went into effect April 1, 2020; Kirlin Design Build coverage started October 5, 2020 when company headcount fell below 500.
- The US Department of Labor (DOL), Wage and Hour Division and IRS provide guidance and enforce the FFCRA. Click this link to view the DOL’s FFCRA workplace poster: https://www.dol.gov/sites/dolgov/files/WHD/posters/FFCRA_Poster_WH1422_Non-Federal.pdf
- FFCRA emergency paid sick leave is in addition to pre-existing company provided paid leave programs and does not count toward company paid leave program balances.
- FFCRA expanded family and medical leave does apply to standard FMLA leave allowances.
- FFCRA emergency paid leave cannot be used simultaneously with other leave, however, employees whose regular pay rate exceeds the FFCRA daily cap may request to use accrued company paid leave to supplement the emergency pay, up to their regular daily rate of pay amount.
- FFCRA emergency paid sick leave must be used in full day increments according to the employee’s regular work schedule.
- Regular health insurance coverage and deductions will continue while out on approved FFCRA emergency paid leave.
- Employers are required to obtain and retain documentation describing the FFCRA leave request reason for 4-years. To meet this requirement, Kirlin Design Build created a FFCRA Emergency Paid Leave Request form that must be completed, signed and submitted for all requests. Approved FFCRA emergency leaves will commence the day the request form is received, not sooner (barring an extraordinary event preventing timely submission, such as hospitalization).
- The company reserves the right to deny requests that do not meet the definition of qualifying COVID-19 situations. Falsification of any information on the FFCRA emergency paid leave request form may lead to disciplinary action, up to and including termination.
- The process for requesting and using FFCRA emergency paid leave is:
 - Requesting employee complete, sign and submit the [KDB FFCRA Emergency Paid Leave Request form](#) to your supervisor and hr@jklc.com
 - HR will review and reply with approval or denial
 - If approved, a special earnings code will be provided for use on the timecard and leave will commence on the day the request form was received, barring an extraordinary event delaying the submission
 - Payment is processed during the regular payroll cycle
 - Unauthorized use of the special FFCRA emergency paid leave earnings codes will be rejected and not processed for payment.

- **What is the Families First Coronavirus Response Act (FFCRA)?** A temporary act that requires employers with less than 500 employees to provide up to 80-hours emergency paid sick leave and 10-weeks paid expanded family and medical leave through December 31, 2020 to employees unable to work or telework due to a limited set of COVID-19 specific reasons outlined below:

Emergency Paid Sick Leave	Emergency Paid Family and Medical Expanded Leave
<ul style="list-style-type: none"> • Up to 80-hours, regular pay (up to \$511/day) for a government or health care provider ordered quarantine or experiencing COVID-19 symptoms and seeking a medical diagnosis; or • Up to 80-hours, 2/3 pay (up to \$200/day) for a bona fide need to care for an individual subject to Government or Health Care Provider ordered quarantine, or to care for a child (under 18 years of age) whose school or child care provider is closed or unavailable for reasons related to COVID-19 	<ul style="list-style-type: none"> • Up to 10 weeks, 2/3 pay (up to \$200/day) where an employee, who has been employed for at least 30 calendar days, is unable to work due to a bona fide need for leave to care for a child whose school or child care provider is closed or unavailable for reasons related to COVID-19.

- **What is the effective date of the FFCRA?** The FFCRA is effective April 1, 2020 through December 31, 2020. Kirlin Design Build became covered on October 5, 2020 due to headcount falling below 500.
- **Who is eligible for FFCRA emergency leave?** All regular employees (union and non-union) of Kirlin Design build are eligible for FFCRA emergency paid sick leave when we are below 500 employees in total, and all regular employees (union and non-union) with at least 30-calendar days of employment are eligible for FFCRA enhanced family and medical leave when we are below 500 employees in total.
- **What happens if KDB’s headcount increases above 500 again?** FFCRA eligibility is determined based on actual headcount at the time of the leave request. If KDB headcount is 500 or more, no employees are eligible for FFCRA at that point in time.
- **Who is a “health care provider” who can order a quarantine that qualifies for emergency paid sick leave?** A licensed Doctor of Medicine, nurse practitioner, or other health care provider permitted to issue a certification for purposes of the FMLA.
- **Can I use FFCRA Emergency Paid Leave...**
 - **To offset company directed reduced work schedule or shutdown?** No
 - **For company directed quarantine due to being a close contact?** No
 - **To seek a test on my own, not per a healthcare provides advice?** No
 - **To self-quarantine due to an underlying health condition?** Not unless your healthcare provider has ordered you to quarantine.
- **Can I apply my 80-hours retroactively to a COVID-19 qualifying event that happened in the past?** No
- **Can I file for unemployment benefits while receiving FFCRA emergency paid leave?** No
- **If I leave the company and get rehired, does my FFCRA emergency leave balance replenish?** No; the balance you had at termination will be reinstated.
- **Are FFCRA hours paid out at time of termination?** No
- **Am I eligible for 80-hours FFCRA emergency sick leave per incident?** No, a total of 80-hours is allowed for all qualifying situations.
- **Does FFCRA paid leave count against my company paid absence balance?** FFCRA paid sick leave does not count against company paid leave balance; FFCRA expanded family and medical leave does count toward the standard FMLA 12-week allowance.
- **How do I use FFCRA paid leave?** You must submit the signed request form to your supervisor and hr@jklc.com. Approved leave will commence the day the request form is received.
- **Where is the KDB FFCRA Emergency Paid Leave Request Form located?** The form is attached to this policy, located on the [intranet](#) and can also be obtained from hr@jklc.com or your supervisor.
- **Must I sign the FFCRA request form?** Yes. If unable to print the document to sign, you can complete an online signature on the form or when submitting the form via email, include a statement that the email serves as your signature. We need this for required recordkeeping.
- **May I supplement the FFCRA paid leave amount with accrued company paid leave?** Yes, up to your regular daily pay rate amount. You may only use accrued company paid absence time and not borrow time in advance.
- **If I call out sick due to COVID-19 symptoms but don’t make a doctor’s appointment for 2 days, may I use emergency sick leave?** No, you must affirmatively seek medical diagnosis the day you call out sick (leverage telemedicine).
- **Can I be laid-off while on FFCRA emergency leave?** Yes, if through the normal course of business your position is eliminated, you can be laid off while out on leave. The leave period terminates on the layoff date and you are eligible for unemployment. An employee cannot be retaliated against or singled out as a result of using FFCRA emergency leave.

Paid Leave Eligibility Table

Scenario	Eligibility			
	FFCRA Emergency Paid Sick Leave	FFCRA Paid Family Medical Leave	Company Paid Absence	Unemployment
Employee is subject to a Federal, State, or local COVID-19 quarantine or isolation order (80 hours, regular pay up to \$511/day)	✓	✗	✗	✗
Employee has been advised by a health care provider to self-quarantine related to COVID-19 (80 hours, regular pay up to \$511/day)	✓	✗	✗	✗
Employee has COVID-19 symptoms and is seeking a medical diagnosis (80 hours, regular pay up to \$511/day)	✓	✗	✗	✗
Employee is caring for an individual subject to a federal, state, or local quarantine or isolation order related to COVID-19 or individual who has been advised to self-quarantine by a medical professional (80 hours, 2/3 pay up to \$200/day)	✓	✗	✗	✗
Employee is caring for a son or daughter whose school or place of care is closed (or childcare provider is unavailable) for reasons related to COVID-19 (12 weeks, 2/3 pay up to \$200/day)	✓	✓	✗	✗
Employee chooses not to work for fear of being exposed to COVID-19, despite job site remaining active	✗	✗	✗	✗
Employee is forced to quarantine due to being identified as a close contact to coworker who has COVID-19 or a pending test	✗	✗	✓*	✓*
Employee is laid off or furloughed due to jobsite closure	✗	✗	✗	✓
Employee is asymptomatic and chooses to get tested and quarantine; they have not been advised to test and quarantine by a health care provider	✗	✗	✓	✗
Employee is unable to work because the jobsite is shutdown	✗	✗	✗	✓

*Employees may choose to use company provided paid absence OR file for unemployment but not at the same time. For example, an employee may choose to use company paid absence for a partial week and then file for unemployment for the following full week that aligns with his/her medically directed quarantine period.

Families First Coronavirus Response Act (FFCRA) Emergency Paid Leave Request Form



Employee Name: _____ **Employee ID:** _____ **Dates for which leave is being requested:** _____

Phone #: _____ **Email:** _____ **Supervisor Name:** _____

Check the box for the leave request reason and answer the questions located to the right of the reason. Submit this signed form to your supervisor and hr@jklc.com. Approved leave commences on the day the request form was received.

Select the appropriate qualifying reason:	Document answers to the following:
<input type="checkbox"/> Local, State, Federal quarantine order Full regular pay, up to \$511/day (80-hour cap)	Issuing Authority: Effective Dates:
<input type="checkbox"/> Healthcare Provider directed quarantine Full regular pay, up to \$511/day (80-hour cap)	Healthcare Provider Name: Quarantine Dates:
<input type="checkbox"/> Seeking medical diagnosis for COVID-19 symptoms Full regular pay, up to \$511/day (80-hour cap)	Healthcare Provider Name: Appointment Date:
<input type="checkbox"/> Caring for a person under local, State, Federal or Healthcare Provider directed quarantine 2/3 regular pay, up to \$200/day (80-hour cap)	Name and relation of person you're caring for: Quarantine Dates:
<input type="checkbox"/> Providing childcare due to school or provider being closed due to COVID-19 and no other suitable option 2/3 regular pay, up to \$200/day (80-hour cap for employees with < 30 days of service; up to 12-weeks for employees with > 30 days service)	Name of School/Childcare Provider: Closure Dates (Start – Anticipated End): Name and Age of Child(ren) being cared for: If older than 14, provide reason for childcare need: Reason there is no other suitable childcare option:

I attest the information provided on this form is accurate and complete. I understand falsification of information may lead to disciplinary action, up to and including termination.

HR USE ONLY:

Date Received:	Hdct on DateReceived:
Hrly Rate:	Regular Workday Hrs:
Reg Daily Rate:	FFCRA Daily Rate Cap:
Mthly HealthRate:	Daily Health Pro-Rata:
Daily 1.45%Medicare:	Total FFCRA TaxCredit:
Company Paid Leave SupplementDaily \$:	HrsEquiv:

X

Employee Signature and Date

Approved Denied: