



# CAREGIVER HANDBOOK

Updated as of March 2026

## **Welcome!**

This caregiver employee handbook includes important information you need to get started on the job. This handbook includes FreedomCare's policies, procedures, and guidelines to which you will be expected to adhere. Please contact the Caregiver Benefits department at FreedomCare for questions about a policy or the information in this handbook.

This caregiver employee handbook replaces and supersedes all previous handbooks issued by FreedomCare. The information in this handbook and human resources policies may be updated as needed. FreedomCare will communicate changes as appropriate. Statutory requirements, human resources policies, and any applicable collective bargaining agreements may supersede some of the contents of this handbook.

For the purposes of this handbook, the Caregiver **and personal assistant** refers to you, the caregiver. The **consumer and patient** refer to the person you are providing care to.

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## **Introduction**

### **OVERVIEW AND EXPECTATIONS**

Congratulations and welcome to FreedomCare. Consumer and Caregiver satisfaction is woven into the very fabric of our company. We are grateful that you have chosen to work with a Consumer who has selected FreedomCare as his or her Fiscal Intermediary. We will work hard to earn your trust through teamwork, mutual respect, and dignity. We provide fiscal intermediary services to Consumers in the Consumer Directed Personal Assistance Program. We promote by enabling Consumers to choose their own Personal Assistant and take charge of their own Personal Assistants' hiring, firing, training, and scheduling.

### **OUR PHILOSOPHY**

We believe the work that we do is a privilege. Every day, we help people become healthier, feel stronger, and maintain their ability to enjoy their families, friends, and favorite activities. This is why you are so valued, and your success is important to us. Therefore, FreedomCare has a desire to:

- Treat you with dignity and respect
- Help you to be successful in your job
- Provide a safe work environment
- Recognize and reward contributions you make to the company
- Acknowledge that you are a critical resource for the Consumer(s) you service
- Encourage you to bring ideas, concerns, and problems to your Consumer
- Offer opportunities for career growth through education and promotion

### **EQUAL EMPLOYMENT OPPORTUNITY**

FreedomCare is an equal opportunity employer, providing equal employment opportunity to all applicants and Caregivers without regard to race, color, creed, religion, gender, marital status, sexual preference or orientation, gender identity, national origin, age, protected veteran status, disability or any other protected status, in accordance with applicable federal, state and local laws.

Qualified individuals with disabilities under the American Disabilities Act, or similar State Laws, will be afforded reasonable accommodations that allow them to perform the essential functions of their job.

Equal opportunity has been and continues to be both policy and practice at and applies to every aspect of the employment relationship. If you ever feel that this policy is not being followed, you should immediately discuss it with the Consumer.

### **CUSTOMER SERVICE STANDARDS**

As a service organization, FreedomCare's standards of service focus on all Consumers, their Designated Representative, Personal Assistants, and their families. We expect that these standards will become an integral part of your daily work for the Consumer.

**Our Mission:** We are driven to return disabled and elderly people's independence to them and give family members of disabled people their peace of mind back. We strive to empower people to take charge of their own lives. How? By inspiring every Caregiver to treat everyone with warmth and respect.

We aim to earn the trust of the people we serve by being the most systematized, reliable, genuine, compassionate, and professional agency.

**Belief:** People have a fundamental human right to be taken care of by those they are familiar with, trust, and who genuinely care about them.

**Our Goals:** Elderly & disabled people are not merely children to be babysat by aides, but masters of their own destiny; Middle-aged children do not have to worry about leaving their elderly parents because they can retire early to care for them; Parents of adult disabled children are not forced to work outside the home where they would worry about the aides with whom they left their children; There is a new normal in which, for the rest of their lives, elderly and disabled people are cared for by family, friends, or loved ones; Traditional homecare will become merely a backup option for people who have no one else to care for them.

## **CONSUMER RIGHTS**

Each Consumer has the right to be free from verbal, sexual, physical, and mental abuse, corporal punishment, and involuntary seclusion. Each Consumer must be treated with consideration and respect in full recognition of his or her dignity.

Your behavior must reflect your belief in these Consumer rights. Failure to observe these rights will result in disciplinary action, up to and including termination.

You are required to immediately report all alleged violations involving mistreatment, neglect or abuse, including misappropriation of Consumer property and injuries of unknown source, to the Consumer's Coordinator or other management representative in accordance with federal and state laws.

## **Getting Started on the Job**

### **EMPLOYMENT CLASSIFICATION**

You are a non-exempt Caregiver, which means you are paid on an hourly basis and are subject to the overtime provisions of the Fair Labor Standards Act and similar state laws.

### **EMPLOYMENT DOCUMENTS**

The company complies with the Immigration Reform and Control Act of 1986 by completing the I-9 form (in conjunction with the new Caregiver) and hires only individuals authorized to work in the United States.

During your employment, you will need to update your I-9 form if the following event applies to you:

- Expiration of work authorization

Please contact the Care Department if you have any questions.

**Please note** that this Caregiver Employee Handbook is subject in all respects to the Personal Assistant Application, Personal Assistant Compliance Acknowledgements, and Personal Assistant Agreement and Acknowledgements which you have signed.

## **DRESS AND APPEARANCE**

It is important that you present a neat and proper appearance to the Consumer you service. A well-groomed Caregiver immediately creates a favorable impression of the services we perform. Clothing should be clean, neat, and safe to wear in the workplace and up to the Consumer's discretion.

The dress code should be adhered to at all times for all Caregivers. Caregivers engaged in care may be required to wear specific uniforms at the election of the Consumer. Your Consumer will speak with you regarding any special dress requirements.

**Tattoos** — Tattoos or body markings that are visible and considered offensive, immoral, or unprofessional according to your Consumer must be covered.

**Personal Hygiene** — It is important that you attend to your personal hygiene, cleanliness, and odor. The use of cosmetics and perfume should be moderate.

## **WORK SCHEDULES**

Work schedules are determined by the Consumer you service. Accordingly, your Consumer will inform you of your schedule as well as your meal and break periods.

If there is a business necessity to change your schedule, your Consumer will give you as much notice as possible.

## **REST AND MEAL PERIODS**

It is important for you to take a break from work so you can approach your job refreshed. During any rest or meal periods, you are completely relieved of all work responsibilities. Therefore, rest breaks may be scheduled for you.

Your Consumer is responsible for scheduling your rest and meal breaks; therefore, be sure to receive approval before taking any breaks.

## **ATTENDANCE**

Your Consumer counts on you and your regular attendance during work hours. Unsatisfactory attendance, reporting late, and/or leaving work early may result in disciplinary action, up to and including termination.

An absence is defined as the failure to work one or more scheduled shifts as defined by the Consumer. Each scheduled shift counts as one (1) absence, regardless if they are consecutive.

The following situations will not be considered absences:

- Inpatient/outpatient hospitalization with licensed doctor documentation of the need to be off work.
- Emergency Room visits resulting in hospitalizations.
- Bereavement Leave (for immediate family member defined by *HR-803*).
- Approved Leaves of Absence (personal, medical, military, FML, and any other leaves required by state or federal law).
- Jury Duty (summons presented in advance).

- Time off requested in advance and pre-approved in writing by the Consumer.

It is your responsibility to arrive on time, be ready for work when you are scheduled, and perform your job duties for your entire shift. We recognize that it may be necessary to be absent from work occasionally. If you are going to arrive late, be absent, or leave early, you must:

- Personally notify your Consumer, at least two hours prior to the start of your shift, if you are sick, and at least two (2) weeks in advance if you need to take time off, whether or not it is paid time off, for personal reasons. You must speak to a Consumer directly. Voicemail messages are not acceptable. Failure to speak directly to the Consumer will result in the Caregiver who attempted the “call off” being considered a No-Call-No-Show.
- Promptly and fully inform the Consumer of the reason for, and expected length of, the absence and follow the appropriate guidelines for use of paid time off.

Excessive tardiness is generally defined as five or more late entry to shifts per anniversary year. Violations of time and attendance standards will lead to discipline up to and including termination.

## **LOST AND FOUND**

FreedomCare cannot be responsible for your personal property that is lost, damaged, or stolen on the Consumer’s premises.

## **Benefits**

### **HEALTH PLAN ELIGIBILITY AND ENROLLMENT**

FreedomCare is committed to providing affordable benefits for Caregivers and their families. The Patient Protection and Affordable Care Act (ACA), also known as healthcare reform law, requires individuals to have medical coverage or pay a penalty, and employers to offer reasonable “minimum essential coverage” to full-time Caregivers working 30 or more hours per week and their biological children. For detailed information on our benefits, please go to the FreedomCare App, click on the **Benefits & Training** button, and select **My Benefits** or email the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

Health Plan eligibility is determined by wage parity and non-wage parity (where you work and how many hours you are paid for working). For more details, email [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### **Mid-Year Changes in Benefits Eligibility**

Enrollment elections and changes are allowed after the enrollment period only if you have a qualifying life event or special enrollment event.

Eligibility for Caregiver benefits can change due to the reclassification. If you would like to maintain your current classification and eligibility for benefits, you can talk with your Consumer about your work schedule.

### **ENROLLMENT DEADLINE AND DEPENDENT VERIFICATION**

The health benefit plan is provided to eligible Caregivers by FreedomCare in lieu of New York City Homecare Workers Wage Parity Additional Wages and Supplemental Wages, as part of its responsibility

as a fiscal intermediary. All Caregivers with wage parity accruals during a given month will be automatically enrolled in a health benefit plan for that month. The benefit plan consists of several benefit tiers. The benefit tier that you receive will depend on the amount of net wage parity accruals during each month. We will reassess your enrollment each month.

If you do not have enough wage parity accruals during a given month, you may opt into the health plan if you work at least 130 hours or more per month. If you do not have wage parity accruals and you want to sign up for health insurance, you need to complete the Group Benefit Enrollment form within 90 days of your first day of work. You may also add your dependents during this time. You will start receiving health insurance 90 days after your first day of work.

If you miss your initial enrollment opportunity, your next enrollment opportunity will be during the next annual open enrollment unless you have a qualifying life event (loss of health coverage, change in household, change in residence, or become a US citizen). Contact the Caregiver Benefits Department immediately when you experience a qualifying life event. For more information on qualifying life events, go to: <https://www.healthcare.gov/glossary/qualifying-life-event/>.

### **LEAVES OF ABSENCE**

If you have worked for at least three months, you may request a leave of absence without pay for personal or medical reasons.

If you wish to continue your insurance benefits during a leave of absence, you may do so only if you elect COBRA and adhere to the plan's requirements. Total Plan Concepts, available at 800-507-1433, will advise you of the cost of continuing each benefit plan. As long as you return to work within 12 weeks after your last day worked, your coverage will be reinstated on the first day of the month following return to work date. The plan will meet FMLA guidelines, as described later in this document.

### **Family and Medical Leave (FML)**

You may request family and medical leave (FML) of up to 12 weeks per 12-month rolling period (or potentially more in certain states) for any of these reasons:

- For incapacity due to pregnancy, prenatal medical care or childbirth
- To care for your child after birth, or placement for adoption or foster care
- To care for your spouse, son or daughter, or parent, who has a serious health condition
- For a serious health condition that makes you unable to perform your job; or any qualifying exigency arising out of the fact that your spouse, or your child, or parent is on active duty (or has been notified of an impending call or order to active duty) in the Armed Forces in support of a contingency operation
- To care for a covered service member who has a serious injury or illness incurred in the line of duty on active duty

FML is unpaid leave; however, you will be required to use any available paid sick time that you have accrued while on leave of absence to the maximum extent permitted by law.

To be able to use FML, you must have been employed for at least 12 months and worked at least 1,250 hours during the preceding 12-month period, unless state law requires otherwise. Foreseeable requests for FML should be made 30 days in advance or if unforeseeable, as soon as practicable.

You may continue health, dental and vision coverage while on FML if you elect in COBRA.

You must provide proper notification of your intent to return from FML to your Consumer at least one week prior to your planned return to work from FML. You will be placed in the same position prior to your leave with equivalent duties, shift, pay, benefits, and other terms and conditions of employment. You must provide a licensed doctor's note to FreedomCare saying that you are medically cleared to work again.

If you are on FMLA, you should not be asked or permitted to do work unless requested or performed on a brief, occasional basis for institutional information or is needed as a professional courtesy around a customer or client relationship. You should immediately report any issues regarding being asked to work while on FMLA.

### **Military Family Leave Entitlements Under FMLA**

Eligible Caregivers with a spouse, son, daughter, or parent on active duty or call to active duty status in the National Guard or Reserves in support of a contingency operation may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible Caregivers to take up to 26 weeks of leave to care for a covered service member during a single 12-month period. A covered service member is a current member of the Armed Forces, including a member of the National Guard or Reserves, who has a serious injury or illness incurred in the line of duty on active duty that may render the service member medically unfit to perform his or her duties for which the service member is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list.

### **Non-FML Medical Leave**

You may be granted a medical leave if you are unable to work due to illness or injury, whether work-related or not.

You must notify your Consumer in writing as soon as you are aware that a non-FML medical leave will be necessary. You must also provide a doctor's statement and information as to when you will begin your leave and the approximate total length of the leave.

You must notify your Consumer at least 1 week prior to your expected date to return to work. An attempt will be made to place you in the position you held prior to going on leave. If not available, you may be offered an available position similar to the one you held before going on leave for which you are qualified, or you may be separated with eligibility for re-hire.

### **Personal Leave**

An unpaid personal leave may be granted for compelling personal reasons, and you must have the written approval of your Consumer. A personal leave cannot exceed 30 days.

Upon your return, your Consumer may attempt to place you in the same position held prior to your leave. If not feasible, you may be separated with eligibility for re-hire.

## **Military Leave**

Military leave is available on the first day of employment. A military leave will be granted in accordance with federal law for related duty. When you return to work, you may be placed in an escalated position, the same position, or one comparable to the one you held prior to your leave as provided by federal and state law.

## **Americans with Disabilities Act (ADA) Leave**

A leave may be available without a waiting period and before or after other leaves in accordance with the company's policies as an accommodation pursuant to the Americans with Disabilities Act (ADA) or State disability laws.

## **Other Leaves of Absence**

FreedomCare will provide any and all other leaves of absences as are required by state and local law. For more information on whether an absence may be covered by a particular leave, please see the state-specific leave supplements attached to this handbook or contact the Caregiver Benefits Department.

## **Code of Conduct and Business Ethics**

### **NYS UNEMPLOYMENT BENEFITS**

If your case is On Hold or if you are no longer working as a caregiver for FreedomCare, you may be eligible for unemployment benefits. You should contact the Department of Labor or similar agency in the State in which you are employed to explore your eligibility for these benefits.

### **STANDARDS OF CONDUCT**

FreedomCare is committed to providing a work environment that is free of harassment and other unlawful discrimination. Therefore, we maintain very strict policies covering ethics, equal employment opportunity, behavioral standards, harassment, dating relationships, employment of relatives, the Corporate Integrity Agreement, confidential information and the use of the computer, Internet, e-mail and voicemail.

### **THREE-STEP COMMUNICATION PROCESS**

The "Three-Step Communication Process" is your guide to handling compliance issues. If you have a compliance concern or want guidance regarding a compliance issue, you should use the Three-Step Process. You should also use the Three-Step Process to report suspected violations of federal or state laws, rules, or regulations and to report suspected violations of the Code of Conduct.

Most questions or issues can be, and should be, handled by your consumer. Thus, the Three-Step Process has been designed to give those closest to you the opportunity to address matters as they arise. The process then allows for matters to be advanced as appropriate.

### **The Three-Step Communication Process**

1. First, talk to your Consumer. He or she will be able to handle most matters.

2. If you are not comfortable talking with your Consumer (for example, if you are questioning your Consumer's conduct), talk to your Consumer's Coordinator at FreedomCare.
3. If you do not want to be identified, you can bring any compliance concerns to FreedomCare's attention anonymously via their website: [www.freedomcareny.com/report](http://www.freedomcareny.com/report).

### **Federal False Claims Laws**

Under the federal False Claims Act, any person or entity that knowingly submits a false or fraudulent claim for payment of United States Government funds, or knowingly retains an overpayment of such funds more than 60 days, is liable for significant penalties and fines. The fines include a penalty of up to three times the Government's damages, civil penalties ranging from \$10,957 to \$21,916 per false claim, as adjusted by the Federal Civil Penalties Inflation Adjustment Act of 1990, plus the costs of the civil action against the entity that submitted the false claims. Generally, the federal False Claims Act applies to any federally funded program. The federal False Claims Act applies, for example, to claims submitted by healthcare providers to Medicare or Medicaid.

One of the unique aspects of the federal False Claims Act is the "qui tam" provision, commonly referred to as the "whistleblower" provision. This provision allows a private person with knowledge of a false claim to bring a civil action on behalf of the United States Government to recover the funds paid by the Government as a result of the false claim. If the suit is ultimately successful, the whistleblower who initially brought the suit may be awarded a percentage of the funds recovered. In addition, the United States Government may elect to join the qui tam suit. In this case, if the suit is successful, the percentage of the funds awarded to the whistleblower is lower because the Government will take over the expenses of the suit.

However, regardless of whether the Government participates in the lawsuit, the court may reduce the whistleblower's share of the proceeds if the court finds that the whistleblower planned and initiated the false claim violation. Further, if the whistleblower is convicted of criminal conduct related to his or her role in the false claim, the whistleblower will be dismissed from the civil action without receiving any portion of the proceeds.

The federal False Claims Act also contains a provision that protects a whistleblower from retaliation by his or her employer. This applies to any employee who is discharged, demoted, suspended, threatened, harassed, or discriminated against in his or her employment as a result of the employee's lawful acts in furtherance of a false claims action. The whistleblower may bring an action in the appropriate federal district court and is entitled to reinstatement with the same seniority status, two times the amount of back pay, interest on the back pay, and compensation for any special damages as a result of the discrimination, such as litigation costs and reasonable attorney's fees.

### **DEFICIT REDUCTION ACT OF 2005**

#### **What You Need to Know**

In 2005, the Deficit Reduction Act (DRA) was signed to reduce annual government spending. One way the government hoped to do that was through stronger enforcement of the False Claims Act. As part of the Deficit Reduction Act (DRA), the government encourages states to enact a False Claims Act. The state Act must mirror the federal False Claims Act. Providing it meets certain requirements, the state may be eligible to receive additional money for claims settled against a company or individual. The DRA requires

companies like FreedomCare to educate our Caregivers about federal and state qui tam (whistle blowing) laws. Those laws protect Caregivers who know of and want to report other Caregivers and even their employers who submit a false claim.

Some states already have state False Claims Acts to prohibit and penalize companies that knowingly submit a false claim. Each state law has or will have different specific guidelines or laws. For more information about details of the law in a particular state, please contact the law department in your state of employment.

### **Company and Caregiver Responsibility**

FreedomCare believes that the claims we submit for payment will be just and accurate when we follow our policies and procedures and use the systems we have in place. If you have a concern regarding claims that are submitted for payment, you have many options to appropriately share your concern. The qui tam provisions of the False Claims Act do not require an individual to report concerns to their company before they file a suit. However, if you have a legitimate concern regarding the submission of claims for payment, our company needs to know promptly. Knowing about a potential problem allows us to review the information, investigate, and clarify or correct the situation quickly and as appropriate. Our Code of Conduct requires all of us to share any concerns we have about how our company does business with a Consumer. Use the Three-Step Communication Process to ensure that any concerns you have are heard and acted upon. Just as our Code of Conduct has always protected you from any sort of retaliation or retribution for sharing your concerns, the Civil False Claims Act also provides protection from retaliation for any Caregiver who reports a legitimate concern.

### **ETHICS**

As a Caregiver, you are expected to adhere to ethical and professional standards of conduct in the performance of your duties.

- Act honestly and in good faith.
- Strive for excellence in the performance of your duties.
- Observe all laws and regulations governing the company's business.
- Use company property only for legitimate and ethical business purposes.

## **Protocols for Behavior**

### **BEHAVIORAL STANDARDS**

The following protocols for behavior are not to regulate personal morality, but rather are to ensure that the work environment is free from unlawful harassment, conflicts of interest, hostility or unlawful discrimination. While it is difficult to develop clear, practical rules and policies to cover every conceivable situation, those mentioned here are minimum standards for every Caregiver. Breaking the code can result in disciplinary action, including possible termination.

While each Consumer may implement differing expectations of conduct, generally speaking, the following activities should always be avoided:

- Pressure on anyone to engage in the consumption of alcoholic beverages
- Pressure on anyone to engage in gambling activities

- Comments made of a sexual nature
- Sexually explicit language, gestures, or related comments
- Sexual advances
- Vulgar and/or crude language
- Any unwanted or otherwise inappropriate physical conduct (such as suggestive gestures, uninvited touching, or sexual advances)
- Derogatory references made to or about any individuals, especially relating to gender, religion, race, or national origin
- Any other conduct that creates an unprofessional, intimidating, and/or hostile environment or the impression of such an environment

These protocols for behavior are in addition to the established company policies dealing with the avoidance of sexual and other unlawful harassment and discrimination.

**FreedomCare requires:**

- Every effort must be made to maintain the professional, orderly, efficient, and effective operation of FreedomCare. Caregivers must fully, faithfully, and conscientiously perform all duties assigned and must promptly carry out all instructions given by a supervisor.
- All administrative policies, as described in this Handbook, must be adhered to by all of our Caregivers.
- Caregivers shall not act beyond the authority given to them in the ordinary performance of their duties without prior specific instructions from management.
- No Caregiver may accept or offer money, goods, or any other form of benefit in connection with any business transaction.
- Caregivers are not to provide financial management for the Consumer. This includes all banking functions such as ATM functions, withdrawals, deposits and check cashing, etc.
- Consumer food stamps and public assistance funds are not to be picked up or signed for by Caregivers. Consumer credit card purchases are not to be signed by the Caregivers. Caregivers are prohibited from using the Consumer's credit cards. Benefit cards may be used on behalf of the Consumer only, not for personal use, and the Caregiver must notify their supervisor before using the card.
- The utilization of any property for non-business purposes is strictly prohibited.
- All Caregivers must comply with FreedomCare's Corporate Compliance Program policy and sign an acknowledgment of receipt and review of that policy. A copy of the Corporate Compliance Program Policy is attached to this Handbook.

FreedomCare Caregivers may be disciplined for just cause, including and up to suspension and termination. Causes for immediate discharge include, but are not limited to:

- Failure to report to work (no call, no show)
- Reporting to work late without prior notification of five (5) hours notifying the office
- Failure to submit electronic timesheets/records requested by the office
- intentionally falsifying time sheets or any other statements
- Failure to submit to medical exams and testing as requested

- Failure to report changes in a client’s condition or status, hazardous situations or any circumstance that could impact the safety or care of any client
- Failure to follow Infection Control Standards and process and Universal Precautions

Violations of the stated standards or protocols for behavior should be reported to the Compliance Department by emailing [ComplianceTeam@freedomcare.com](mailto:ComplianceTeam@freedomcare.com) or anonymously at <https://freedomcare.com/compliance-reporting-web-form/>.

### **GIFTS, TIPS AND LOANS**

You are prohibited from accepting tips, gifts, or loans from unrelated Consumers and vendors or from anyone with whom the company does business.

Gifts are to be returned with an explanation that company policy does not permit their acceptance. Similarly, you may not offer or give anything of value to anyone with whom the company does or proposes to do business.

### **HARASSMENT**

We are committed to providing a work environment that is free of harassment and other unlawful discrimination. In keeping with this commitment, we maintain a strict policy prohibiting harassment based on an individual’s gender, race, religion, national origin or citizenship, age, marital status, physical or mental disability, sexual orientation or preference, gender identity, protected veteran status or any other protected status.

Harassment includes, but is not limited to:

- Threatening, intimidation, disparate treatment, or otherwise improperly interfering with other Caregivers, whether on or off duty
- Racial epithets, derogatory remarks relating to one of the categories protected by federal, state, or local law (e.g., race, color, gender, religion, national origin, ancestry, physical or mental disability, age, veteran status, and sexual orientation), and unwanted sexual advances, invitations or comments
- Displaying derogatory or lewd posters, photographs, cartoons, or drawings or making sexual gestures
- Unwanted touching, blocking normal movement, or interfering with work because of the Caregiver’s gender or status in one of the protected categories
- Threats or demands to submit to sexual requests in order for the Caregiver to keep his or her job or avoid some other adverse action, loss, and offers of job benefits in return for sexual favors
- Any discriminatory conduct that is so severe or pervasive that it creates a work environment abusive to Caregivers because of their race, color, gender, religion, national origin, ancestry, physical or mental disability, age, veteran status, sexual preference, or orientation
- Retaliation for having reported or threatened to report harassment.

If you believe you have been subjected to harassment by a Caregiver, Consumer, or any other individual in connection with FreedomCare, you should immediately report the conduct using the “Three-Step Communication Process” outlined in this handbook.

All allegations of harassment will be promptly and thoroughly investigated as confidentially as possible, and appropriate action will be taken. No Caregiver will be retaliated against for bringing any “good faith” claim to the company’s attention.

## **SEXUAL HARASSMENT**

### **Introduction**

FreedomCare is committed to maintaining a workplace free from sexual harassment. Sexual harassment is a form of workplace discrimination. FreedomCare has a zero-tolerance policy for any form of sexual harassment, and all Caregivers are required to work in a manner that prevents sexual harassment in the workplace. This Policy is one component of FreedomCare’s commitment to a discrimination-free work environment.

### **Policy:**

1. FreedomCare Policy applies to all Caregivers, applicants for employment, interns, whether paid or unpaid, contractors, and persons conducting business with FreedomCare.
2. Sexual harassment will not be tolerated. Any Caregiver or individual covered by this policy who engages in sexual harassment or retaliation will be subject to remedial and/or disciplinary action, up to and including termination.
3. Retaliation Prohibition: No person covered by this Policy shall be subject to adverse employment action, including being discharged, disciplined, discriminated against, or otherwise subject to adverse employment action because the Caregiver reports an incident of sexual harassment, provides information, or otherwise assists in any investigation of a sexual harassment complaint. FreedomCare has a zero-tolerance policy for such retaliation against anyone who, in good faith, complains or provides information about suspected sexual harassment. Any Caregiver of FreedomCare who retaliates against anyone involved in a sexual harassment investigation will be subjected to disciplinary action, up to and including termination. Any Caregiver, unpaid intern, or non-caregiver<sup>1</sup> working in the workplace who believes they have been subject to such retaliation should inform a supervisor or manager. Any Caregiver, unpaid intern, or non-caregiver who believes they have been a victim of such retaliation may also seek compensation in other available forums, as explained below in the section on Legal Protections.
4. Sexual harassment is offensive, is a violation of our policies, is unlawful, and subjects FreedomCare to liability for harm to victims of sexual harassment. Harassers may also be individually subject to liability. Caregivers of every level who engage in sexual harassment, including managers and supervisors who engage in sexual harassment or who knowingly allow such behavior to continue, will be penalized for such misconduct.
5. FreedomCare will conduct a prompt, thorough and confidential investigation that ensures due process for all parties, whenever management receives a complaint about sexual harassment, or otherwise knows of possible sexual harassment occurring. Effective corrective action will be

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<sup>1</sup> A non-Caregiver is someone who is (or is employed by) a contractor, subcontractor, vendor, consultant, or anyone providing services in the workplace. Protected non-Caregivers include persons commonly referred to as independent contractors, “gig” workers and temporary workers. Also included are persons providing equipment repair, cleaning services or any other services provided pursuant to a contract with the employer.

taken whenever sexual harassment is found to have occurred. All Caregivers, including managers and supervisors, are required to cooperate with any internal investigation of sexual harassment.

6. All Caregivers are encouraged to report any harassment or behaviors that violate this policy. FreedomCare will provide all Caregivers a complaint form to report harassment and file complaints.
7. Managers and supervisors are required to report any complaint that they receive or any harassment that they observe to the Compliance Department.
8. This policy applies to all Caregivers, unpaid interns, and non-caregivers and all must follow and uphold this policy. This policy must be posted prominently in all work locations and be provided to Caregivers upon hiring.

### **What Is “Sexual Harassment”?**

Sexual harassment is a form of sex discrimination and is unlawful under federal, state, and (where applicable) local law. Sexual harassment includes unwelcome conduct which is either of a sexual nature or which is directed at an individual because of that individual’s sex<sup>2</sup> when:

- Such conduct has the purpose or effect of unreasonably interfering with an individual’s work performance or creating an intimidating, hostile, or offensive work environment, even if the complaining individual is not the intended target of the sexual harassment
- Such conduct is made either explicitly or implicitly a term or condition of employment or
- Submission to or rejection of such conduct is used as the basis for employment decisions affecting an individual’s employment

A sexually harassing hostile work environment consists of words, signs, jokes, pranks, intimidation or physical violence which are of a sexual nature, or which are directed at an individual because of that individual’s sex. Sexual harassment also consists of any unwanted verbal or physical advances, sexually explicit derogatory statements, or sexually discriminatory remarks made by someone which are offensive or objectionable to the recipient, which cause the recipient discomfort or humiliation, which interfere with the recipient’s job performance.

Sexual harassment also occurs when a person in authority tries to trade job benefits for sexual favors. This can include hiring, promotion, continued employment, or any other terms, conditions, or privileges of employment. This is also called “quid pro quo” harassment.

### **Examples of sexual harassment**

The following describes some of the types of acts that may be unlawful sexual harassment and that are strictly prohibited:

- Physical assaults of a sexual nature, such as:
  - Touching, pinching, patting, grabbing, brushing against another Caregiver’s body or poking another Caregivers’ body
  - Rape, sexual battery, molestation, or attempts to commit these assaults

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<sup>2</sup> The term “sex” also includes sexual orientation, gender identity and the status of being transgender.

- Unwanted sexual advances or propositions, such as:
  - Requests for sexual favors accompanied by implied or overt threats concerning the victim’s job performance evaluation, a promotion, or other job benefits or detriments
  - Subtle or obvious pressure for unwelcome sexual activities
  - Sexually oriented gestures, noises, remarks, jokes, or comments about a person’s sexuality or sexual experience, which create a hostile work environment
- Sexual or discriminatory displays or publications anywhere in the workplace, such as:
  - Displaying pictures, posters, calendars, graffiti, objects, promotional material, reading materials, or other materials that are sexually demeaning or pornographic. This includes such sexual displays on workplace computers or cell phones and sharing such displays while in the workplace
- Hostile actions taken against an individual because of that individual’s sex, such as:
  - Interfering with, destroying, or damaging a person’s workstation, tools, or equipment, or otherwise interfering with the individual’s ability to perform the job
  - Sabotaging an individual’s work
  - Bullying, yelling, name-calling

**Who can be a target of sexual harassment?**

Sexual harassment can occur between any individuals, regardless of their sex or gender. The Law protects Caregivers, unpaid interns, and non-Caregivers, including independent contractors, and those employed by companies contracting to provide services in the workplace. A perpetrator of sexual harassment can be a superior, a subordinate, a coworker or anyone in the workplace including an independent contractor, contract worker, vendor, client, customer or visitor.

**Where can sexual harassment occur?**

Unlawful sexual harassment is not limited to the physical workplace itself. It can occur while Caregivers are traveling for business or at employer-sponsored events or parties. Calls, texts, emails, and social media usage by Caregivers can constitute unlawful workplace harassment, even if they occur away from the workplace premises or not during work hours.

**What is “Retaliation”?**

Unlawful retaliation can be any action, more than trivial, that keeps a worker from coming forward to make or support a sexual harassment claim. Adverse action need not be job-related or occur in the workplace to constitute unlawful retaliation. Such retaliation is unlawful under federal, state, and (where applicable) local law.

State Human Rights Law protects any individual who has engaged in “protected activity.” Protected activity occurs when a person has:

- Filed a complaint of sexual harassment, either internally or with any anti-discrimination agency
- Testified or assisted in a proceeding involving sexual harassment under the Human Rights Law or other anti-discrimination law
- Opposed sexual harassment by making a verbal or informal complaint to management or by simply informing a supervisor or manager of harassment
- Complained that another Caregiver has been sexually harassed or

- Encouraged a fellow Caregiver to report harassment

### **Reporting Sexual Harassment**

Preventing sexual harassment is everyone's responsibility. FreedomCare cannot prevent or remedy sexual harassment unless it knows about it. Any Caregiver, unpaid intern, or non-caregiver who has been subjected to behavior that may constitute sexual harassment is encouraged to report such behavior to a supervisor, manager, or the Chief Compliance Officer. Anyone who witnesses or becomes aware of potential instances of sexual harassment should report such behavior to a supervisor, manager, or the Chief Compliance Officer. A written Sexual Harassment Complaint Form can be found at the end of this Caregiver Handbook.

Reports of sexual harassment may be made verbally or in writing. A form for submission of a written complaint is attached to this Policy, and all Caregivers are encouraged to use this complaint form.

Caregivers who are reporting sexual harassment on behalf of other Caregivers should use the complaint form and note that it is on another Caregiver's behalf. Any Caregivers, paid or unpaid interns, or non-caregivers who believe they have been a victim of sexual harassment may also seek compensation in other available forums, as explained below in the section on Legal Protections.

### **Supervisory Responsibilities**

All supervisors and managers who receive a complaint or information about suspected sexual harassment, observe what may be sexually harassing behavior or for any reason suspect that sexual harassment is occurring, are required to report such suspected sexual harassment to the Chief Compliance Officer.

In addition to being subject to discipline if they engaged in sexually harassing conduct themselves, supervisors and managers will be subject to discipline for failing to report suspected sexual harassment or otherwise knowingly allowing sexual harassment to continue.

Supervisors and managers will also be subject to discipline for engaging in any retaliation.

### **Complaint and Investigation of Sexual Harassment**

All complaints or information about suspected sexual harassment will be investigated, whether that information was reported in verbal or written form. Investigations will be conducted in a timely manner, and will be confidential to the extent possible.

Any complaint, information, or knowledge of suspected sexual harassment will be investigated promptly and thoroughly and should be completed within 30 days. The investigation will be confidential to the extent possible. All persons involved, including victims, witnesses, and alleged perpetrators, will be accorded due process to protect their rights to a fair and impartial investigation.

Any Caregiver may be required to cooperate as needed in an investigation of suspected sexual harassment. Caregivers who participate in any investigation will not be retaliated against.

**Investigations will be done in accordance with the following steps:**

- Upon receipt of the complaint, the Compliance Department will immediately review the allegations and take any interim actions as appropriate. If the complaint is oral, encourage the individual to complete the “Complaint Form” in writing. If he or she refuses, prepare a Complaint Form based on the oral reporting.
- If documents, emails, or phone records are relevant to the allegations, take steps to obtain and preserve them.
- Request and review all relevant documents, including all electronic communications.
- Interview all parties involved, including any relevant witnesses.
- Create a written documentation of the investigation (such as a letter, memo or email), which contains the following:
  - A list of all documents reviewed, along with a detailed summary of relevant documents
  - A list of names of those interviewed, along with a detailed summary of their statements
  - A timeline of events
  - A summary of prior relevant incidents, reported or unreported
  - The final resolution of the complaint, together with any corrective actions action(s)
  - Keep the written documentation and associated documents in the employer’s records
  - Promptly notify the individual who complained and the individual(s) who responded of the final determination and implement any corrective actions identified in the written document
  - Inform the individual who complained of their right to file a complaint or charge externally as outlined below

### **Legal Protections and External Remedies**

Sexual harassment is not only prohibited by FreedomCare but is also prohibited by state, federal, and, where applicable, local law. Aside from the internal process at FreedomCare, you may also choose to pursue legal remedies with the following governmental entities at any time.

#### **United States Equal Employment Opportunity Commission (EEOC) <tel:971-245-3844>**

The EEOC enforces federal anti-discrimination laws, including Title VII of the 1964 federal Civil Rights Act (codified as 42 U.S.C. § 2000e et seq.). An individual can file a complaint with the EEOC anytime within 300 days of the harassment. The EEOC will investigate the complaint and determine adoption of this policy does not constitute a conclusive defense to charges of unlawful sexual harassment. Each claim of sexual harassment will be determined in accordance with existing legal standards, with due consideration of the particular facts and circumstances of the claim, including but not limited to the existence of an effective anti-harassment policy and procedure, whether there is reasonable cause to believe that discrimination has occurred, at which point the EEOC will issue a Right to Sue letter permitting the individual to file a complaint in federal court.

The EEOC does not hold hearings or award relief but may take other action, including pursuing cases in federal court on behalf of complaining parties. Federal courts may award remedies if discrimination is found to have occurred. If a Caregiver believes that he/she has been discriminated against at work, he/she can file a “Charge of Discrimination.” The EEOC has district, area, and field offices where complaints can be filed. Contact the EEOC by calling 1-800-669-4000 (1-800-669-6820 (TTY)), visiting their website at [www.eeoc.gov](http://www.eeoc.gov) or via email at [info@eeoc.gov](mailto:info@eeoc.gov).

If an individual files an administrative complaint with DHR, DHR automatically files the complaint with the EEOC to preserve the right to proceed in federal court.

### **Contact the Local Police Department**

If the harassment involves physical touching, coerced physical confinement, or coerced sex acts, the conduct may constitute a crime. Contact the local police department.

### **CONFLICTS OF INTEREST**

This Caregiver Employee Handbook requires you to discuss any potential conflict with your Consumer immediately. An unfair advantage may be gained by not disclosing a potential conflict of interest. In situations where a conflict is not disclosed, all parties may believe their interests are being equally promoted when, in fact, they may not be.

Should you find yourself in a potential conflict of interest, please disclose it to the Consumer and the Care Department at FreedomCare. Depending on the circumstances, some conflicts may be resolved if they are handled properly. Two steps necessary to help resolve a conflict include disclosing the conflict or perceived conflict and then removing yourself from participating in any decisions regarding the competing interest. This practice will ensure all interests are represented and promoted fairly.

You should review your own activities and those of any relatives upon hire, annually, and if your situation changes in a way that may be viewed as a potential conflict of interest so that the proper disclosures can be made. Disclosures should be made to the Consumer's Coordinator.

Employers must avoid any situation involving a conflict between their personal interests (including those of relatives) and the interests of the Consumer and the company.

Caregiver should not contract with relatives or incur any financial or personal obligation that might affect, or appear to affect, their judgment in dealing with the Consumer.

**NOTE:** A "relative" includes a parent, child, spouse, significant other, sister, brother, or any person related by blood or marriage.

### **Potential Conflicts:**

To better understand a possible conflict of interest, we have provided some examples of conflicts between personal interests and the interests of the company:

- Simultaneously serving as a Consumer's SSI Payee with rights to make financial decisions for the Consumer and choosing to hire yourself as Personal Assistant
- Serving as Designated Representative, responsible for hiring the Consumer's Personal Assistant(s) and deciding to hire yourself as Personal Assistant

### **Caregiver Responsibility**

Determining whether you have a conflict of interest, and if so what to do about it, may be difficult. If you have questions, you should discuss them with your Consumer so that together you can deal properly with the situation.

## **Consumer Responsibility**

Consumers must refer each potential conflict of interest situation to the Care Department (see Three-Step Communication Process), which will work with the Compliance Department to determine whether it poses a potential for harm to the company's business interests or creates an appearance of improper influence:

- If either problem exists, the Care and Compliance Departments will work with the Consumer and the Caregiver to determine a course of action to remove the conflict situation as soon as possible.
- If no problem exists, the Compliance Department will approve the situation in writing, with the process documented.

In either case, the Compliance Department will document the particular facts disclosed to him or her and the basis for his or her decision in each case. A copy of the documentation will be submitted to the Compliance Department.

## **CONFIDENTIAL INFORMATION**

Certain information is protected by state and federal privacy laws and must be kept confidential (unless disclosure is required or protected by law).

In addition, information concerning the management and operation of our business is generally not known to the public or our competitors and should be kept confidential.

Examples of confidential information include Consumer medical and insurance information.

None of these materials are to be copied other than for official company use, nor may originals or copies be removed from the company. Doing so subjects Caregivers to discipline up to and including discharge.

**Important notes!** Every Caregiver is expected to comply with HIPAA requirements when handling Consumer—and caregiver-protected health information.

Company policies prohibit the unprotected disclosure of certain confidential information by Caregivers. However, this does not prohibit Caregivers from disclosing or discussing Caregiver wage information and terms and conditions of employment with each other or third parties so long as the Caregiver did not come into possession of such information through access that the Caregiver had as part of their formal job duties.

Violations of HIPPA will involve disciplinary action, including possible termination.

## **Payroll Information**

### **PAYSTUBS/PAYCHECKS/W-2'S**

A day is a twenty-four (24) hour period beginning and ending as stated below.

There are 52 weekly pay periods, each of which begin on Sunday at 12:00 am and end on Saturday at 11:59 pm, with paid date being the following Friday.

## TIME RECORDS

You are paid on an hourly basis and are required to submit time records so that we can accurately calculate your pay. Your time record serves as your invoice to FreedomCare for the time you have worked. Make sure your record of time worked is accurate.

- Follow these guidelines to ensure your work time is recorded accurately:
  - Record your starting and ending times accurately by clocking in and out on the FreedomCare App. This is essential to meet FreedomCare's 90% accuracy standard.
    - Accurate timekeeping also ensures compliance with the Department of Health and Federal regulations.
  - **NEVER** work off the clock; it is **strictly prohibited**. Working off the clock will not benefit you or FreedomCare, and cannot be approved by your Consumer.
  - **NEVER** record time for any other Caregiver, and **NEVER** ask someone else to record time for you.
  - Sign your app or time sheet daily and weekly to certify its accuracy and acknowledge that Medicaid fraud is a crime.
  - Have your Consumer sign your app or time sheet daily and weekly.

**Important note!** Time will only be included in payroll if it is correctly submitted no later than 5 pm on the Monday following a workweek for the upcoming Friday's payroll.

## OVERTIME

You will receive time and a half for all overtime hours worked over 40 hours in a work week in accordance with state and federal laws. You must get prior written approval from your Consumer to work overtime, but must report the time, whether approved or not.

## Health and Safety

### SAFETY IN THE WORKPLACE

FreedomCare is committed to promoting safety and providing a safe place for you to work. You must "think safety" at all times to minimize accidents and injuries to yourself, other Caregivers, and visitors. If you see something that is unsafe and could cause an accident, attempt to correct it, if possible, notify your Consumer **AND** notify the Caregiver Benefits Department immediately. If an accident or injury occurs, even a minor one, you **MUST** report this to the Caregiver Benefits Department.

Observe the safety rules in every phase of your work and use proper lifting techniques.

If your job requires you to use your own vehicle while on company business, **you must fasten your seat belt at all times.**

If an accident occurs at work, you **MUST** notify your Consumer of the accident as soon as it occurs, no matter how minor it may seem to you. Failure to immediately notify your Consumer and file a report of the accident may jeopardize your work-related injury benefits and subject you to disciplinary action.

Post-accident, Caregivers may be tested for controlled substances and/or alcohol.

By accepting responsibility for your own welfare, as well as that of your fellow Caregivers, you can prevent accidents.

### **INFECTION CONTROL AND CAREGIVER HEALTH**

It is your responsibility to be fully aware of FreedomCare's infection control policy and to follow infection control procedures to protect everyone involved.

You are required to provide complete, accurate and updated health information anytime your health changes and/or when a communicable disease could spread to others.

### **VIOLENCE IN THE WORKPLACE**

FreedomCare's policy is to maintain a safe, healthy, and productive workplace for all Caregivers. Threats and violent acts threaten the quality of our work and the safety of our Caregivers and customers.

FreedomCare will not tolerate:

- Threatening or violent behavior
- Verbal or physical abuse
- Verbal threats of physical violence
- Weapon use or possession on company property (even if you are licensed to carry a concealed weapon)
- Vandalism or arson
- Any other coercive act against a person or property while on company property or on working time that management believes is inappropriate in the workplace
- Joking about, making light of, or offensive comments regarding violent acts or situations.

Threats or acts of violence outside work but related to your employment may also be a violation of this policy.

## **Policies and Procedures**

### **DRUG AND ALCOHOL-FREE WORKPLACE**

It is the intent and obligation of the company to provide a drug- and alcohol-free, healthy, safe and secure workplace. You are expected and required to report to work on time and in an appropriate mental and physical condition for work.

In addition, FreedomCare will not tolerate the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance or alcohol on company premises.

Violations of this policy will result in disciplinary action, up to and including termination of employment.

Under certain circumstances, caregivers may be tested for controlled substances and/or alcohol in accordance with company policy. This may include "post-accident," "post-rehabilitation," and "reasonable suspicion" drug or alcohol testing.

Refusal to submit to testing will result in disciplinary action, up to and including termination of employment.

When you are using prescription or over-the-counter drugs, or other medicine that may affect your ability to safely and/or effectively perform their duties, you are required to advise your Consumer before beginning work.

### **PROGRESSIVE DISCIPLINE AND DISCHARGE**

We feel that it is very important for you to know what is expected of you. We believe that you should be made aware of the rules that are to be followed, and that these rules should be applied in a uniform and impartial manner to all Caregivers.

Our progressive discipline system is intended to give you advance notice, whenever possible, of concerns with your conduct or performance and provides you with an opportunity to change your behavior.

**Important notes:** Employment is at the mutual consent of you and your Consumer. Either can terminate the employment relationship at will, at any time and with or without notice.

FreedomCare believes that Caregivers should be treated fairly and be informed about the policies that must be followed. Failure to adhere to company policies and to meet performance expectations subject Caregivers to discipline, up to and including termination, in accordance with the disciplinary policy.

Company policies and handbooks are designed to protect the Company, its Caregivers, and Consumers rather than to restrict the flow of useful, appropriate, or protected information. Nothing in this, or any other policy, is intended to restrict activity protected by Federal or State law, including the National Labor Relations Act's protections concerning Section 7 rights and concerted activity.

Violations of different rules are cumulative, as they indicate that the Caregiver is not performing his/her job duties or following Consumers' instructions and Company policy.

Neither Consumers, nor FreedomCare, discriminates or bases personnel actions to prevent the Caregiver from being eligible for company benefits. FreedomCare does not discriminate against any individual, based on any unlawful basis, regarding the provision of any benefit or the eligibility of any person for company benefits. FreedomCare does not condone nor support any adverse employment action taken for the sole purpose of unlawfully terminating benefits or impeding Caregivers from properly becoming eligible for such benefits.

**Important Note:** While your employment is at-will and the Consumer may terminate your employment for any reason and at any time, please also note that failure to comply with the Consumer's directions or FreedomCare's policies and procedures constitutes misconduct, and, accordingly, is grounds for the Consumer to terminate your employment based on misconduct. Misconduct includes, but is not limited to, the following examples:

- Failure to clock-in and clock-out at the beginning and end of each shift
- Confirming visits although services were not actually provided to the Consumer throughout the entire confirmed visit
- Engaging in anti-social behavior such as threatening, vulgar language, or rudeness to anyone in the Consumer's household or to FreedomCare Caregivers
- Failure to follow Consumer or Designated Representative instructions
- Persistent failure to communicate with FreedomCare or the Consumer
- Tardiness or absenteeism

- Persistent exhibition of suspicious behavior such as not being with Consumer during spot-checks, forging Consumer signatures, forging live pictures of Consumer, or clocking-in/out far from Consumer's residence without Consumer approval or without explanation.

### **PROBLEM-SOLVING PROCEDURES**

We are very committed to ensuring that all Caregivers are treated properly. Occasionally, misunderstandings or poor communication may result in the perception of improper treatment. We believe that problems between Caregivers and the company can be resolved through an honest, open discussion in an atmosphere of trust, respect, and cooperation. You may sometimes be concerned about your work schedule, personnel policies, and treatment or written disciplinary action that seems improper.

If that occurs, and you feel you have not been treated properly, please follow the Three-Step Communication Process to resolve the problem.

And remember, if you feel you have been treated improperly, we expect you to step forward to resolve the issue. You have the right to use these problem-solving procedures without fear of retaliation. We can only achieve our goals as a company if you are comfortable in your work environment.

### **PERSONAL CALLS, CELL PHONES AND CAMERAS**

Personal cell phones and electronic devices are permitted only in patient care areas for authorized business purposes and in compliance with HIPAA.

Personal cellular phones should not be used during work time. All cell phones must be on silent ringer or vibrating mode. Caregivers should not make or receive any personal calls or texts during work time.

Caregivers must ensure that friends and family members are aware of this policy. However, flexibility will be allowed for urgent personal matters.

Use of cameras or audio recordings in the workplace, including camera phones, is prohibited without the prior written approval of the Consumer.

### **LEAVING THE COMPANY**

Caregivers leaving the company are required to provide appropriate written notice to the Consumer and the Care Department as soon as possible, but preferably at least two weeks in advance.

PTO will not be paid out upon resignation or termination unless state or federal law requires otherwise.

Prior to departing, you should return any keys or other consumer property to your consumer.

The final payment of wages and other compensation due will be made on the following regular payday or in accordance with state regulations and company policy.

### **What Happens to Benefits Eligibility and Continuation of Coverage?**

When you terminate employment, your benefits will end at 11:59 p.m. on the last day of the pay period, which includes the termination date. When you change to a non-benefit eligible status, your benefits will end at 11:59 p.m. on the last day of the pay period in which the job status changed. For information

about your options to continue or convert coverage after termination or change to a non-benefit eligible status, please reach out to Total Plan Concepts, available at 877-435-2063.

**SUMMARY**

The information presented in this handbook is a brief overview of personnel policies, guidelines, and operating principles established to help you in your job. If you have any questions not answered by this handbook, please contact the Caregiver Benefits Department at FreedomCare. We want to help you succeed in your job and make your work pleasant and productive.

If you have any suggestions for improvement in FreedomCare, please pass them along to the Caregiver Benefits Department at FreedomCare.

# **STATE SPECIFIC APPENDIX**

The following appendix contains additional policies specifically applicable to Caregivers located in various states. To the extent there is overlap between a policy found in the Handbook and this appendix, Caregivers should follow the policy in this appendix for his/her/their applicable state and/or ask the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com) for further information. FreedomCare strives to follow all applicable laws for Caregivers and to the extent a protection/policy is required under the law greater than what is included in the Handbook or this appendix, applicable law shall control.

## **Arizona Policies**

### **Earned Paid Sick Time**

#### ***Accrual***

Arizona Caregivers will accrue one (1) hour of earned paid sick time for every 30 hours worked, up to a maximum accrual of 40 hours each calendar year. For purposes of this policy, the calendar year is the consecutive 12- month period beginning January 1 and ending on December 31.

#### ***Usage***

Caregivers may use earned paid sick time on the 90th calendar day of employment. Earned paid sick time must be used in full day increments. The caregiver may not use more than 24 hours of earned paid sick time in any calendar year.

Arizona caregiver may use accrued paid sick time, for absences due to:

1. the caregiver's mental or physical illness, injury, or health condition; the caregiver's need for medical diagnosis, care, or treatment of a mental or physical illness, injury or health condition; the Caregiver's need for preventive medical care;
2. care of a family member with a mental or physical illness, injury, or health condition; care of a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury or health condition; care of a family member who needs preventive medical care;
3. closure of the caregiver's place of business by order of a public official due to a public health emergency or the Caregiver's need to care for a child whose school or place of care has been closed by order of a public official due to a public health emergency, or care for oneself or a family member when it has been determined by the health authorities having jurisdiction or by a health care provider that the Caregiver's or family member's presence in the community may jeopardize the health of others because of their exposure to a communicable disease, whether or not the caregiver or family member has actually contracted the communicable disease; or

4. a covered purpose relating to domestic violence, sexual violence, abuse or stalking to allow the caregiver to obtain (for himself or herself or for a family member) medical attention, services from a victims' organization, counseling, relocation and/or legal services.

For purposes of this policy, family member includes (regardless of age): a biological, adopted or foster child, stepchild or legal ward, a child of a domestic partner, a child to whom the caregiver stands in-loco-parentis or an individual to whom the Caregiver stood in loco parentis when the individual was a minor; a biological, foster, stepparent or adoptive parent or legal guardian of the Caregiver or the Caregiver's spouse or domestic partner or a person who stood in loco parentis when the Caregiver or Caregiver's spouse or domestic partner was a minor child; spouse or domestic partner; a grandparent, grandchild, or sibling (whether of a biological, foster, adoptive, or step- parent/step-child/step-sibling relationship) of the caregiver or the caregiver's spouse or domestic partner; or any other individual related by blood or affinity whose close association with the caregiver is the equivalent of a family relationship.

The caregiver's use of earned paid sick time will not be conditioned upon searching for or finding a replacement worker.

FreedomCare will assume, subject to applicable law, that caregivers want to use available earned paid sick time for absences for reasons set forth above and caregivers will be paid for such absences to the extent they have earned paid sick time available.

Caregivers will be advised of their earned paid sick time balance information on their itemized wage statement.

#### ***Notice and Documentation***

Caregivers are required to make a reasonable effort to schedule the use of earned paid sick time in a manner that does not unduly disrupt business operations. Requests to use earned paid sick time may be made orally, in writing or electronically (e.g., via email), and whenever possible, the request must include the expected duration of the caregiver's absence. When the use of earned paid sick time is foreseeable, the caregiver is required to make a good faith effort to provide notice of the need for such time to their Consumer in advance of the use of the earned paid sick time. When the use of earned sick time is not foreseeable, the caregiver is required to provide notice to their Consumer at least one (1) hour prior to the start of their workday or as soon as possible under the circumstances.

For earned paid sick time of three (3) or more consecutive workdays, FreedomCare requires reasonable documentation that the earned paid sick time has been used for a covered purpose. For reason #1 and #2 above, documentation signed by a health care professional indicating that earned paid sick time is necessary is reasonable. For reason #4 above, any of the following types of documentation selected by the caregiver is reasonable:

- a police report indicating that the Caregiver or the caregiver's family member was a victim of domestic violence, sexual violence, abuse or stalking;

- a protective order; injunction against harassment; a general court order; or other evidence from a court or prosecuting attorney that the caregiver or caregiver's family member appeared or is scheduled to appear, in court in connection with an incident of domestic violence, sexual violence, abuse or stalking; a signed statement from a domestic violence or sexual violence program or victim services organization affirming that the caregiver or caregiver's family member is receiving services related to domestic violence, sexual violence, abuse or stalking;
- a signed statement from a witness advocate affirming that the caregiver or caregiver's family member is receiving services from a victim services organization;
- a signed statement from an attorney, member of the clergy or a medical or other professional affirming that the caregiver or caregiver's family member is a victim of domestic violence, sexual violence, abuse, or stalking; or
- the caregiver's written statement affirming that the Caregiver or the caregiver's family member is a victim of domestic violence, sexual violence, abuse, or stalking, and that the earned paid sick time was taken for one of the purposes described above.

Documentation provided to FreedomCare should not explain the nature of the caregiver's or a family member's health condition or the details of the domestic violence, sexual violence, abuse, or stalking.

### ***Payment***

Earned paid sick time will be paid at the same hourly rate the caregiver earns from their employment at the time the caregiver uses such time, but no less than the applicable minimum wage, unless otherwise required by applicable law. Use of earned paid sick time is not considered hours worked for purposes of calculating overtime.

### ***Carryover and Payout***

The caregiver may carry over up to 40 hours of accrued, unused earned paid sick time to the following calendar year. Unused earned paid sick time will not be paid at separation.

### ***Enforcement & Retaliation***

Retaliation against the Caregiver who requests or uses earned paid sick time is prohibited. The Caregiver has the right to file a complaint if earned paid sick time as required by law is denied by an employer or if he/she is subjected to retaliation for requesting or taking earned paid sick time. The Arizona Industrial Commission's contact information is as follows: 800 W. Washington Street, Phoenix, AZ 85007 / 602-542-4515 / [www.azica.gov](http://www.azica.gov).

Questions about rights and responsibilities under the law can be answered by the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

## **VOTING LEAVE**

FreedomCare encourages caregiver to exercise their right to vote. FreedomCare requests that, whenever possible, caregiver vote before or after their regular hours of work to avoid interference with business operations.

If there are fewer than three (3) consecutive hours between the opening of the polls and the beginning of an caregiver's workday or between the end of an caregiver's workday and the closing of the polls, an Caregiver may take a paid leave for such length of time at the beginning or end of the workday that, when added to the time difference between workday hours and the opening or closing of the polls, will

provide a total of three (3) consecutive hours. The caregiver must inform his or her supervisor before the day of the election in which the absence is anticipated, and FreedomCare may specify the hours during which the caregiver may leave to vote.

## **Legal Protections and External Remedies for Arizona Employees**

Sexual harassment is not only prohibited by FreedomCare but is also prohibited by state, federal, and, where applicable, local law. Aside from the internal process at FreedomCare, you may also choose to pursue legal remedies with the following governmental entity at any time if you work in the state of Arizona:

### **Arizona Civil Rights Division**

**Number: 602-542-5263**

**Fax: 602-542-1275**

## Colorado Policies

### **Paid Sick Leave**

#### ***Accrual***

Caregivers who work in Colorado begin accruing paid sick leave pursuant to this policy at the start of employment. Caregivers will accrue one (1) hour of paid sick leave for every 30 hours worked, up to a maximum accrual of 48 hours each year.

For purposes of this policy, the year is the consecutive 12-month period beginning January 1 and ending on December 31.

#### ***Usage***

Caregivers may begin using accrued paid sick leave immediately. Paid sick leave may be used in hourly increments. Caregivers may not use more than 48 hours of accrued paid sick leave in any year.

Colorado Caregivers may use accrued paid sick leave, for the following reasons:

1. mental or physical illness, injury or health condition that prevents the Caregiver from working; the need to obtain a medical diagnosis, care, or treatment of a mental or physical illness, injury or health condition; or the need to obtain preventive medical care;
2. to care for a family member who has a mental or physical illness, injury, or health condition; needs to obtain a medical diagnosis, care or treatment of a mental or physical illness, injury or health condition; or needs to obtain preventive medical care;
3. the Caregiver or a family member has been the victim of domestic abuse, sexual assault or harassment and the use of leave is to:
  - seek medical attention to recover from a mental or physical illness, injury, or health condition
  - caused by the domestic abuse, sexual assault or harassment;
  - obtain services from a victim services organization;
  - obtain mental health or other counseling;
  - seek relocation due to the domestic abuse, sexual assault, or harassment; or
  - seek legal services, including preparation for or participation in a civil or criminal proceeding
  - relating to or resulting from the domestic abuse, sexual assault or harassment;
4. due to a public health emergency, a public official has ordered closure of the Caregiver's place of business or the school or place of care of the Caregiver's child and the Caregiver needs to be absent from work to care for the child.

For purposes of this policy, “family member” means a person who is related to the Caregiver by blood, marriage, civil union or adoption; a child to whom the Caregiver stands in loco parentis or a person who stood in loco parentis when the Caregiver was a minor; or a person for whom the Caregiver is responsible for providing or arranging health- or safety-related care.

Use of paid sick leave will not be conditioned upon the Caregiver searching for or finding a replacement worker.

Unless advised otherwise, the FreedomCare will assume, subject to applicable law, that Caregivers want to use available paid sick leave for reasons set forth above. Caregivers will be paid for such absences to the extent they have paid sick leave available.

### ***Notice and Documentation***

Paid sick leave may be requested orally, in writing, electronically or by any other means acceptable to FreedomCare. When possible, Caregivers should include the expected duration of the absence. If the need is foreseeable Caregivers must provide reasonable advance notice to FreedomCare of the need to use accrued paid sick leave, and also make a reasonable effort to schedule the paid sick leave in a manner that does not unduly disrupt FreedomCare’s operations. Where the need is not foreseeable, Caregivers should provide notice as early as practicable.

For paid sick leave of four (4) or more consecutive workdays, FreedomCare may require reasonable documentation that the paid sick leave was used for an authorized purpose. FreedomCare will not require the disclosure of details relating to domestic violence, sexual assault or stalking or the details of the Caregiver’s or family member’s health information as a condition of providing paid sick leave.

### ***Payment***

Paid sick leave will be paid at the same hourly rate or salary and with the same benefits, including health care benefits, as the Caregiver normally earns during hours worked. Use of paid sick leave is not considered hours worked for purposes of calculating overtime.

### ***Carryover and Payout***

Caregivers who accrue paid sick leave under this policy may carry over up to 48 hours of accrued, unused paid sick leave to the following calendar year. Accrued but unused paid sick leave will not be paid at separation.

### ***Additional Public Health Emergency Paid Sick Leave***

In addition to accrued paid sick leave explained above, on the date a public health emergency is declared, FreedomCare will supplement each Caregiver’s accrued paid sick leave as necessary to ensure that the Caregiver may take paid sick leave as follows:

- Caregivers who normally work 40 or more hours in a week may take at least 80 hours of paid sick leave in a public health emergency;
- Caregivers who normally work fewer than 40 hours in a week may take at least the greater of

either the amount of time the Caregiver is scheduled to work in a 14-day period or the amount of time the Caregiver actually works on average in a 14-day period.

FreedomCare may count unused accrued paid sick leave, as explained above, toward the supplemental paid sick leave required for a public health emergency. Caregivers may use public health emergency paid sick leave until four (4) weeks after the official termination or suspension of the public health emergency. Caregivers may use public health emergency paid sick leave for the following absences related to a public health emergency:

1. To self-isolate and care for oneself when diagnosed with a communicable illness that is the cause of a public health emergency; self-isolate and care for oneself when experiencing symptoms of a communicable illness that is the cause of a public health emergency; seek or obtain medical diagnosis, care or treatment if experiencing symptoms of a communicable illness that is the cause of a public health emergency; seek preventive care concerning a communicable illness that is the cause of a public health emergency;
2. To care for a family member who is self-isolating after being diagnosed with a communicable illness that is the cause of a public health emergency; is experiencing symptoms of a communicable illness that is the cause of a public health emergency; needs medical diagnosis, care or treatment if experiencing symptoms of a communicable illness that is the cause of a public health emergency; or is seeking preventive care concerning a communicable illness that is the cause of a public health emergency;
3. With respect to a communicable illness that is the cause of a public health emergency:
  - a local, state or federal public official or health authority having jurisdiction over the location in which the Company is located or the Company determines that the Caregiver's presence on the job or in the community would jeopardize the health of others because of the Caregiver's exposure to the communicable illness or because the Caregiver is exhibiting symptoms of the communicable illness, regardless of whether the Caregiver has been diagnosed with the communicable illness; or
  - care of a family member after a local, state or federal public official or health authority, having jurisdiction over the location in which the family member's place of employment is located, or the family member's employer determines that the family member's presence on the job or in the community would jeopardize the health of others because of the family member's exposure to the communicable illness, or because the family member is exhibiting symptoms of the communicable illness, regardless of whether the family member has been diagnosed with the communicable illness;

4. care of a child or other family member when the individual's childcare provider is unavailable due to a public health emergency, or if the child's or family member's school or place of care has been closed by a local, state or federal public official or at the discretion of the school or place of care due to a public health emergency, including if a school or place of care is physically closed but providing instruction remotely;
5. inability to work because the Caregiver has a health condition that may increase susceptibility to or risk of a communicable illness that is the cause of the public health emergency

Caregivers must notify the FreedomCare of the need for public health emergency paid sick leave as soon as practicable when the need for paid sick leave is foreseeable and the Company's place of business has not been closed. Documentation is not required to take public health emergency paid sick leave.

Public health emergency paid sick leave in the amount described above may be taken once during the entirety of a public health emergency even if such public health emergency is amended, extended, restated, or prolonged.

#### ***Enforcement and Retaliation***

The Company cannot retaliate against Caregivers for requesting or using paid sick leave and Caregivers have the right to file a complaint with the Division of Labor Standards and Statistics in the Colorado Department of Labor and Employment or bring a civil action if paid sick leave is denied by the Company or the Company retaliates against Caregivers for exercising their rights under applicable law.

If Caregivers have any questions regarding this policy, they should contact the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

#### **Colorado Family Care Act Leave**

Colorado Caregiver who are eligible for leave under the Family Medical Leave Act of 1993 ("FMLA Leave") also may take FMLA Leave to care for the serious health condition of a domestic partner or a partner in a civil union.

#### ***Definitions***

For the purposes of this policy, the terms "serious health condition," "partner in a civil union," and "domestic partner," have the following meanings:

- A "serious health condition" means an illness, injury, impairment, or physical or mental condition that involves either (a) inpatient care in a hospital, hospice, or residential medical care facility; or (b) continuing treatment by a health care provider.
- A "partner in a civil union" means an individual with whom an Caregiver has established a civil union pursuant to Article 15 of Title 14 of the Colorado Revised Statutes.

- A “domestic partner” means an individual whom the Company has recognized as the Caregiver’s domestic partner or an individual with whom an Caregiver seeking leave under this policy has registered a domestic partnership in the State or municipality where the Caregiver resides.

### ***Relationship to FMLA Leave and FMLA Policy***

This policy does not increase the total amount of leave to which an Caregiver is entitled during a 12-month period under the FMLA. Except as specifically provided for in this policy, leave taken pursuant to this policy to care for the serious health condition a domestic partner or a partner in a civil union is considered, and treated as, FMLA leave subject to the same terms and conditions of FMLA leave.

### ***Certification***

Any request for leave to care for the serious health condition a domestic partner or a partner in a civil union must be supported by a medical certification from a health care provider in accordance with the same standards that apply to a request for FMLA Leave. Additionally, Caregivers who request leave to care for the serious health condition a domestic partner or a partner in a civil union may be required to provide reasonable documentation or a written statement confirming the existence of a civil union or domestic partner relationship.

### ***Colorado Family And Medical Leave Insurance Program***

Colorado’s Family and Medical Leave Insurance (“FAMLI”) program is a state-run program that provides partial income replacement to Caregivers who require time off from work for certain family-related reasons beginning on January 1, 2024.

### ***Eligibility for FAMLI Benefits***

Beginning on January 1, 2024, Caregivers are eligible to use FAMLI benefits if they have earned at least \$2,500 in wages subject to premiums within the state of Colorado in either the FAMLI base period or an alternative base period. The FAMLI base period is the first four of the last five completed calendar quarters immediately preceding the first day of the Caregiver’s benefit year, and the alternative base period is the last four completed calendar quarters immediately preceding the benefit year. Caregivers with questions about their eligibility for FAMLI benefits should contact the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### ***Reasons for FAMLI Leave***

Eligible Caregivers may access paid leave under FAMLI (“FAMLI Leave”) beginning on January 1, 2024 for the following reasons:

- To care for a new child during the first year after the birth, adoption, or foster care placement of that child;
- To care for a family member with a serious health condition;
- To care for the Caregiver’s own serious health condition;

- For qualifying exigency leave, meaning leave based on a need arising out of a covered family member’s active duty service or notice of an impending call or order to active duty in the armed forces; or
- To obtain safe housing, care and/or legal assistance in response to intimate partner violence, stalking, sexual assault, or sexual abuse.

For purposes of this policy, the term “family member” means a Caregiver’s child (biological, adopted, foster, stepchild, legal ward, child of a domestic partner, a child to which the Caregiver stands in loco parentis, or a person to whom the Caregiver stood in loco parentis when the person was a minor), parent (meaning a biological, adoptive, foster, stepparent, or legal guardian of the Caregiver or the Caregiver’s spouse or domestic partner, or a person who stood in loco parentis when the Caregiver or Caregiver’s spouse or domestic partner was a minor child), spouse, domestic partner, grandparent, grandchild, sibling, or someone with whom they have a significant personal bond that is or is like a family relationship, regardless of biological or legal relationship.

### ***Pay, Benefits and Protections During FAMLI Leave***

#### **Pay During FAMLI Leave**

Beginning on January 1, 2024, eligible Caregivers are entitled to up to twelve (12) weeks of FAMLI Leave per benefit year. Eligible Caregivers with a serious health condition caused by pregnancy complications or childbirth complications may be entitled to an additional four (4) weeks of FAMLI Leave per benefit year for a total of sixteen (16) weeks of leave. FAMLI Leave may be taken continuously, intermittently, or in the form of a reduced work schedule.

Pay during FAMLI Leave comes from Caregiver payroll deductions and employer contributions to the state-run FAMLI program. For most Caregivers, payroll deductions associated with the FAMLI program will begin in January 2023. FAMLI wage replacement benefits will be paid at a rate of up to 90% of the Caregiver’s average weekly wage, capped at \$1,100 per week. Benefits are calculated on a sliding scale using the Caregiver’s average weekly wage from the previous five calendar quarters in relation to the average weekly wage for the state of Colorado. Caregivers can estimate their potential benefits by using the calculator available at [famli.colorado.gov](http://famli.colorado.gov).

#### **Health Insurance Benefits**

During approved FAMLI Leave, the Company will maintain the Caregiver’s health benefits as if the Caregiver continued to be actively employed. Caregiver on approved FAMLI Leave shall continue to pay their share of the cost of health benefits as required prior to the commencement of leave.

#### **Other Benefits**

Although taking FAMLI Leave will not result in the loss of any employment benefits that accrued prior to the start of FAMLI Leave, Caregiver will not accrue benefits, such as paid time off, during any FAMLI leave period.

Caregivers should contact the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com) with any questions they may have regarding insurance coverage or other benefits during a period of FAMLI Leave (or any other leave) before commencing their leave.

### **Return to Job at End of FAMLI Leave**

Upon return from FAMLI Leave, Caregivers who have worked for the Company for at least one hundred and eighty (180) days must be restored to their original or comparable positions with comparable employment benefits, pay and other terms and conditions of employment in accordance with applicable laws. The Company will not prevent eligible Caregivers from taking FAMLI Leave and will not retaliate against any Caregiver who requests or takes FAMLI Leave.

### ***Caregiver Responsibilities When Requesting FAMLI Leave***

If the need to use FAMLI Leave is foreseeable, the Caregiver requesting leave must provide at least 30 days' prior notice of the need to take leave. When 30 days' notice is not practicable, notice must be given as soon as practicable. When an Caregiver takes intermittent FAMLI Leave, the Caregiver must provide notice as soon as is practicable before each day of intermittent leave.

### ***Coordination Between FAMLI Leave and Other Leaves of Absence***

FAMLI Leave runs concurrently with any leave available under the Family and Medical Leave Act, as well as any short-term or long-term disability leave. While Caregivers are not required to use accrued, but unused paid time off concurrently with FAMLI Leave, they may choose to do so in order to receive full wage replacement. However, under no circumstances may a Caregiver receive more than his or her average weekly wage during any period of FAMLI Leave.

### **Legal Protections and External Remedies for Colorado Employees**

Sexual harassment is not only prohibited by FreedomCare but is also prohibited by state, federal, and, where applicable, local law. Aside from the internal process at FreedomCare, you may also choose to pursue legal remedies with the following governmental entity at any time if you work in the state of Colorado:

#### **Colorado Civil Rights Division**

**Number: 303-894-2997**

**Email: [dora\\_ccrd@state.co.us](mailto:dora_ccrd@state.co.us)**

## **Nevada Policies**

### **Earned Paid Leave**

For Caregivers who work in Nevada, eligible Caregivers begin to accrue leave at the start of their employment but may start to use their accrued paid leave on the 90th day of employment. Caregivers accrue 0.01923 hours of paid leave for each hour of work performed. Caregivers may use up to forty (40) hours of paid leave per year and may carry over up to forty (40) hours of paid leave into the following year. The minimum of paid leave that can be taken is 2 hours. Eligible Caregivers may use earned paid leave for any use, including, without limitation:

- Treatment of a mental or physical illness, injury, or health condition;
- Receiving a medical diagnosis or medical care;
- Receiving or participating in preventative care;
- Participating in caregiving; or
- Addressing other personal needs related to the health of the Caregiver.

Caregivers must provide the Company notice of their use of paid leave as soon as practicable. Unused earned paid leave will not be paid at separation.

### **Kin Care Leave**

Nevada Caregivers are entitled to use accrued sick leave to assist an immediate family member who has an illness, injury, medical appointment, or other authorized medical need to the same extent and under the same conditions that apply to the Caregiver when taking such leave. For purposes of this policy, “immediate family member” means an Caregiver’s: child, foster child, spouse, domestic partner, sibling, parent, parent-in-law, grandchild, grandparent, stepparent, or any person for whom the Caregiver is the legal guardian. The amount of annual kin care leave that Nevada Caregivers are entitled to is limited to the amount of sick leave that such Caregiver accrues during a six (6)-month period.

### **Domestic Violence Victim Leave**

Eligible Caregivers who have been victims of domestic violence or who are caring for family or household members who have been victims of domestic violence are entitled to 160 hours of unpaid leave in a twelve (12)-month period. To be eligible, Caregivers must have worked for the Company for at least 90 days. Eligible Caregivers may use this leave for the following reasons related to an act of domestic violence against the Caregiver or the Caregiver’s family or household member:

- Diagnosis, care, or treatment of a health condition;
- To obtain counseling or assistance;
- To participate in court proceedings; or
- To establish a safety plan, including any action to increase the safety of the Caregiver or the Caregiver’s family or household member.

For purposes of this policy, the term “family or household member” means an Caregiver’s spouse, domestic partner, minor child, parent, or other adult person who is related within the first degree of consanguinity or affinity to the Caregiver, or other adult person who is or was actually residing with the Caregiver at the time of the act which constitutes domestic violence. The leave must be used within the twelve (12) months immediately following the date on which the act which constitutes domestic violence occurred.

An Caregiver who seeks leave under this section must provide notice to their Consumer and the Caregiver Benefits Department at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com) as soon as is practicable. After taking leave upon the occurrence of an act of domestic violence, an Caregiver must give the Company at least 48 hours’ notice if they need to take additional leave. The Company may require Caregivers to provide documentation to support their request for leave related to domestic violence. Any documentation provided to the Company is confidential and will be retained in compliance with applicable law.

The Company will not interfere, restrain, deny, retaliate, or discriminate against an Caregiver exercising his/her rights provided by this section.

### **Legal Protections and External Remedies for Nevada Employees**

Sexual harassment is not only prohibited by FreedomCare but is also prohibited by state, federal, and, where applicable, local law. Aside from the internal process at FreedomCare, you may also choose to pursue legal remedies with the following governmental entity at any time if you work in the state of Nevada:

#### **Nevada Equal Rights Commission**

**Number: 702486-7161**

**Website: <https://detr.nv.gov/NERC>**

#### **Nevada False Claims Laws**

In addition to the statutes identified Code of Business Ethics in the Handbook, Nevada has its own version of the False Claims Act and other statutes addressing potential fraud.

#### **Nevada False Claims Act**

The Nevada False Claims Act (“the NFCA”) makes it unlawful for any person to (a) knowingly present, or cause to be presented, a false or fraudulent claim for payment or approval; (b) knowingly make, use, or cause to be made or used a false record or statement material to a false or fraudulent claim; (c) have possession, custody, or control of public property or money used, or to be used, by the State or a political subdivision and knowingly deliver or cause to be delivered to the State or a political subdivision less money or property than the amount of which the person has possession, custody or control; (d) knowingly make, use, or cause to be made or used, a false record or statement that is material to an obligation to pay or transmit money or property to the State or a political subdivision; (h) be a beneficiary of an inadvertent submission of a false claim and, after discovering the falsity of the claim,

fail to disclose the falsity to the State or political subdivision within a reasonable time. See Nev. Rev. Stat. Ann. § 357.040.

A violator of the NFCA will be liable to the State or political subdivision for a civil penalty of not less than \$5,500 and not more than \$11,000, plus three times the amount of damages sustained by the State or political subdivision because of the act of the person, and the costs of a civil action brought to recover the damages. Certain liabilities may be reduced if the violator furnishes the State with all information known to the violator within thirty (30) days of receiving such information, and fully cooperates with any investigation by the State or political subdivision, provided that the violator does not have knowledge of an investigation at the time the violator furnishes such information. See Nev. Rev. Stat. Ann. §§ 357.040, 357.050 The Nevada Attorney General investigates any alleged violations of the NFCA and may bring a civil action against a person that has violated the NFCA. Furthermore, a district or city attorney may accept a designation from the Nevada Attorney General to investigate any alleged violation of the NFCA. See Nev. Rev. Stat. Ann. § 357.070.

### **Whistleblower Protections**

The NFCA contains an employee protection provision that provides that if an employee, contractor or agent is discharged, demoted, suspended, threatened, harassed or discriminated against in the terms and conditions of employment as a result of any lawful act of the employee, contractor, agent or an associate in furtherance of an action or any other effort to stop a violation of the NFCA, the employee, contractor or agent is entitled to all relief necessary to make the employee, contractor or agent whole, including, without limitation, reinstatement with the same seniority as if the discharge, demotion, suspension, threat, harassment or discrimination had not occurred or damages in lieu of reinstatement if appropriate, twice the amount of lost compensation, interest on the lost compensation, any special damage sustained as a result of the discharge, demotion, suspension, threat, harassment or discrimination and punitive damages if appropriate.

### **Nevada Medicaid Antifraud Statute**

The State of Nevada has also adopted several other antifraud statutes that are intended to prevent fraud and abuse in the Nevada Medicaid program. The Nevada Medicaid fraud statute makes it unlawful for any person to commit any of the following acts in relation to the Nevada Medicaid program: (a) make a claim or cause it to be made, knowing the claim to be false, in whole or in part, by commission or omission; (b) make or cause to be made a statement or representation for use in obtaining or seeking to obtain authorization to provide specific goods or services, knowing the statement or representation to be false, in whole or in part, by commission or omission; (c) make or cause to be made a statement or representation for use by another in obtaining goods or services knowing the statement or representation to be false, in whole or in part, by commission or omission; or (d) make or cause to be made a statement or representation for use in qualifying as a provider, knowing the statement or representation to be false, in whole or in part, by commission or omission.

## Oregon Policies

### **OREGON PAID SICK LEAVE**

#### **Accrual**

Under this policy, Caregivers will accrue paid sick leave at the rate of 1 hour per every 30 hours worked, up to a maximum of 40 hours per calendar year. Caregivers who accrue paid sick leave under this policy may carry over unused sick leave from one calendar year to the next but may never use more than 56 hours of sick leave per calendar year. Unused earned paid sick time will not be paid at separation.

#### **Usage**

Caregivers may begin using their accrued sick leave as of the 91st calendar day of employment.

Caregivers in Oregon may use their sick leave for these purposes:

- To care for yourself or your family member with a mental or physical illness, injury, or health condition, need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition, or need for preventive medical care;
- To care for an infant or newly adopted child under 18 years of age, or for a newly placed foster child under 18 years of age, or for an adopted or foster child older than 18 years of age if the child is incapable of self-care because of a mental or physical disability, completed within 12 months after birth or placement of the child
- To recover from or seek treatment for a health condition that renders you unable to perform at least one of the essential functions of your regular position
- Absences associated with the death of a family member by:
  - Attending the funeral or alternative to a funeral of the family member
  - Making arrangements necessitated by the death of the family member
  - Grieving the death of the family member
- Absences related to domestic violence, harassment, sexual assault or stalking
- To seek legal or law enforcement assistance or remedies to ensure the health and safety of yourself or your minor child or dependent, including preparing for and participating in protective order proceedings or other civil or criminal legal proceedings related to domestic violence, harassment, sexual assault or stalking
- To seek medical treatment for or to recover from injuries caused by domestic violence or sexual assault or harassment or stalking that you or your minor child or dependent experienced
- To obtain, or to assist a minor child or dependent in obtaining, counseling from a licensed mental health professional related to an experience of domestic violence, harassment, sexual assault or stalking
- To obtain services from a victim services provider for yourself or your minor child or dependent
- To relocate or take steps to secure an existing home to ensure your health and safety or that of your minor child or dependent;
- In the event of a public health emergency, including but not limited to:

- Closure of your place of business, or the school or place of care of your child, by order of a public official due to a public health emergency
- A determination by a lawful public health authority or a health care provider that your presence or your family member in the community would jeopardize the health of others
- Your exclusion from the workplace under any law or rule that requires your employer to exclude you from the workplace for health reasons

Covered family members include your spouse, same-gender domestic partner, biological child, adopted child, stepchild, foster child, same-gender domestic partner’s child, parent, adoptive parent, stepparent, foster parent, parent-in-law, same-gender domestic partner’s parent, grandparent, grandchild, and any individual with whom an employee has or had an in loco parentis relationship (day-to-day responsibilities to care for or financially support a child, or who had such responsibility for the employee when the employee was a child).

Caregivers requesting time off under this policy should provide ten (10) days’ advanced notice to the Company for foreseeable absences, or otherwise as much advance notice as practicable. Caregivers may be required to provide appropriate documentation to the Company in support of the leave taken. Leave under this policy may run concurrently with leave taken under other applicable policies as well as under local, state, or federal law.

#### **OREGON FAMILY LEAVE ACT**

Like the Family and Medical Leave Act, the Oregon Family Leave Act (“OFLA”) may provide family and medical leaves of absence for eligible Caregivers. Either or both of these laws may apply to a leave. Where both laws apply, any leave taken will be counted under both laws at the same time. This policy will be interpreted to comply with the law(s) that apply to a particular leave.

Leave under this section is available to Oregon Caregivers who (i) have been employed by the Company for at least one hundred and eighty (180) days immediately preceding the day the leave begins; and (ii) have worked an average of at least twenty- five (25) hours per week during that 180-day period (unless the leave is to care for a newborn child or newly placed foster or adopted child, in which case the weekly hour requirement is inapplicable).

Caregivers may take leave under this section for the following reasons:

- To care for a child who requires home care due to an illness, injury, or condition, or due to the closure of the child’s school or child care provider because of a public health; and
- To deal with the death of a family member by (i) attending the funeral (or alternative) of the family member; (ii) making arrangements necessitated by the death of a family member; or (iii) grieving the death of a family member.

Eligible Caregivers are entitled to a maximum of twelve (12) weeks leave per benefit year, subject to the following exceptions: (i) a female Caregiver who takes leave for a pregnancy-related disability (including routine prenatal care) may take up to an additional twelve (12) weeks for any OFLA-qualifying purpose; (ii) an eligible Caregiver may take an addition two (2) weeks of unpaid leave to effectuate the legal process required for placement of a foster child or the adoption of a child until Dec. 31, 2024; and (iii) an

eligible Caregiver is entitled to take a maximum of two (2) weeks of leave per death of a family member, up to a maximum of twelve (12) weeks per leave year. The leave must be completed within sixty (60) days after the date on which the employee receives notice of the death of the family member. Two-family members working for the Company are permitted to each take up to twelve (12) weeks of parental leave, but in some situations may be required to stagger the leave. Intermittent leave is permitted for the employee's or family member's serious medical condition, including pregnancy and prenatal care, as well as "sick child leave" (used for non-serious conditions). Intermittent leave is not available for parental leave. Intermittent leave may be taken in no less than 30-minute increments.

At the end of OFLA leave, subject to some exceptions, most Caregivers must be restored to the position they held prior to leave. If an Caregiver's original position has been eliminated, the Caregiver may be returned to an equivalent position with equivalent pay, benefits and other terms.

### **PAID LEAVE OREGON**

The Company's Paid Leave Oregon program provides partial income replacement funded by Caregiver and employer contributions to eligible Caregivers who require time off from work for certain family and medical reasons.

#### **Eligibility for Paid Leave Oregon**

Caregivers are eligible for Paid Leave Oregon if they work in Oregon and have earned at least \$1,000 in the year before the date of the benefit application.

#### **Reasons for Paid Leave Oregon**

Eligible Caregivers may use Paid Leave Oregon for the following reasons:

- To care for the Caregiver's serious health condition;
- To care for a family member with a serious health condition;
- In connection with the birth of a child;
- to effectuate the legal process required for placement of a foster child or the adoption of a child (after Dec. 31, 2024);
- To bond with a child in the first year after birth, adoption, or placement through foster care; or
- For qualifying reasons related to sexual assault, domestic violence, harassment or stalking.

For purposes of this policy, the term "family member" means a Caregiver's spouse, domestic partner, child (biological, adopted, step or foster), spouse or domestic partner's child, child's spouse or domestic partner, parent (biological, adoptive, step, foster or legal guardian), parent's spouse or domestic partner, sibling, stepsibling, sibling or stepsibling's spouse or domestic partner, grandparent, grandparent's spouse or domestic partner, blood relative of any kind, or person connected to the Caregiver like a family member and with whom the Caregiver has a family relationship. The term "serious health condition" means an illness, injury, impairment, or physical or mental condition that: (i) requires inpatient care; (ii) poses an imminent danger of death or possibility of death in the near future; (iii) requires constant or continuing care; (iv) involves a period of incapacity; (v) involves multiple treatments; or (vi) involves a period of disability due to pregnancy.

## **Pay, Benefits and Protections During Paid Leave Oregon**

### **1. Pay During Paid Leave Oregon**

Eligible Caregivers may take up to twelve (12) weeks of Paid Leave Oregon in a fifty-two (52) week period. Eligible Caregivers may also be able to take an additional two (2) weeks of Paid Leave Oregon if they are pregnant, have given birth, or have health needs because of childbirth. The amount paid to eligible Caregivers during Paid Leave Oregon is calculated by the Oregon Employment Department and depends upon how much the Caregiver earned in the previous year.

Caregivers may use any accrued leave to supplement their benefits under Paid Leave Oregon to the extent that the total combined amount does not exceed full wage replacement.

### **2. Health Insurance Benefits**

During approved Paid Leave Oregon, the Company will maintain the Caregiver's health benefits as if the employee continued to be actively employed. The Company will deduct the Caregiver's portion of the health plan premium as a regular payroll deduction, or the employee may be required to pay his or her health plan premium separately.

All premiums for the Company's optional benefit plans due while on Paid Leave Oregon are payable by the individual Caregiver on a monthly basis. Although taking Paid Leave Oregon will not result in the loss of any employment benefits that accrued prior to the start of Paid Leave Oregon, Caregivers will not accrue benefits, such as vacation, during any Paid Leave Oregon period.

Caregivers should contact The Caregiver Benefits team with any questions they may have regarding insurance coverage during a period of Paid Leave Oregon (or any other leave) before commencing their leave.

### **Return to Job at End of Paid Leave Oregon**

Upon return from Paid Leave Oregon, most Caregivers who have worked for the Company for ninety (90) days or more must be restored to their original or comparable positions with comparable employment benefits, pay and other terms and conditions of employment in accordance with applicable laws.

### **Caregiver Responsibilities When Requesting Paid Leave Oregon**

If the need to use Paid Leave Oregon is foreseeable, the Caregiver requesting leave must give the Company at least 30 days' prior notice of the need to take leave. Foreseeable qualifying events include, but are not limited to, an expected birth, placement for adoption or placement for foster care; or planned medical treatment for a serious health condition of a family member. When 30 days' notice is not practicable, notice must be given as soon as practicable. When a Caregiver takes intermittent Paid Leave Oregon, the Caregiver must provide notice to the Company as soon as is practicable before each day of intermittent leave.

All requests for Paid Leave Oregon must be submitted to the Caregiver Benefits Department. When submitting a request for Paid Leave Oregon, the Caregiver should provide information on the anticipated date when the Paid Leave Oregon would start as well as the duration of the Paid Leave Oregon.

Caregivers should also inform the Company if the requested leave is for a reason for which Paid Leave Oregon was previously taken or certified. The Company will not retaliate against Caregivers for requesting or taking Paid Leave Oregon.

#### **MILITARY FAMILY LEAVE**

During military conflict, the Company will provide fourteen (14) days of unpaid leave per deployment to Caregivers that are spouses of a member of the U.S. Armed Forces, National Guard or U.S. military reserves that has been notified of an impending call to active duty. The leave may be taken before and during deployment, as well as when the military spouse is on leave from deployment.

Employees may elect to substitute leave to which the employee is entitled for any or part of the family military leave. Family military leave taken shall run concurrently with leave authorized under the OFLA or FMLA.

A Caregiver that takes leave is entitled to be restored to the position held prior to leave being taken.

Employees must provide notice of intended leave within five (5) days of receiving an official notification of the call to duty.

#### **BONE MARROW DONATION LEAVE**

Caregivers who have worked for the Company for at least twenty (20) hours per week will be provided unpaid leave to undergo a medical procedure to donate bone marrow. Caregivers may use vacation for such leave. The Caregiver shall determine the length of the leave, but the amount of leave shall not exceed forty (40) work hours. Caregivers who use leave under this section must provide verification by a physician of the purpose and length of the leave. In the event of a medical determination that the employee does not qualify as a bone marrow donor, any paid leave used by the Caregiver prior to that medical determination is not affected.

#### **ORGANIZED MILITIA LEAVE**

A Caregiver who is a member of an organized militia may be granted unpaid leave to perform active state service if the militia is called into active service. Caregivers must provide notice to the Company of the need to take leave under this section as soon as is practicable. Such leave is granted until the Caregiver is released from state service. Most Caregivers will be restored to their prior position, or to an equivalent position. Caregivers must return to employment within seven (7) calendar days. Employees will not lose seniority, vacation credits, and sick time credits that had been earned at the time of the leave of absence.

#### **VOLUNTEER EMERGENCY RESPONDER LEAVE**

An eligible Caregiver who serves as a volunteer firefighter and has been called to an emergency shall be granted an unpaid leave of absence for the duration of the emergency. The Company may request documentation concerning the need to take leave under this section.

#### **DOMESTIC VIOLENCE VICTIM LEAVE**

Caregivers who are victims of domestic violence, harassment, sexual assault, or stalking may take an unpaid, reasonable leave of absence for any of the following reasons:

- To seek legal or law enforcement assistance or remedies;
- To seek medical treatment for or to recover from injuries caused by domestic violence, harassment, sexual assault, or stalking;
- To obtain or assist a minor child or dependent in obtaining counseling related to an experience of domestic violence, harassment, sexual assault or stalking; To obtain services from a victim services provider; or
- To relocate or take steps to secure an existing home.

A Caregiver is eligible for time off if he or she is a victim of domestic violence, sexual assault, or stalking, or is the parent or guardian of a minor child or dependent who is a victim of domestic violence, harassment, sexual assault or stalking.

A Caregiver who seeks leave under this section must provide reasonable advance notice of his or her intent to take leave unless giving advance notice is not feasible. They may require certification that the leave is being taken for a permissible purpose. Such certification may take the form of a police report, protective order, or documentation from a health care professional, clergy, attorney or law enforcement officer. Requests for leave and any documentation provided by the employee will be kept confidential.

Leave may be taken in multiple blocks of time and/or on an altered or reduced work schedule basis. The Company may transfer an employee on intermittent leave or a reduced work schedule to an alternate position that better accommodates the leave. Most employees will be returned to their former position upon notification to the Company that they are ready to return.

The Company may limit the amount of leave an eligible employee may take if the leave creates an undue hardship on the Company's business. An Employee's leave may also be covered by the OFLA or FMLA. In such situations, the two leaves may run concurrently.

#### **CRIME VICTIM LEAVE**

Caregivers may take time unpaid leave to attend a criminal proceeding or juvenile proceeding or any other proceeding at which a crime victim has a right to be present. A Caregiver may use vacation time to pay for leave taken under this section.

A Caregiver is eligible to take leave under this section if he or she has worked an average of more than twenty-five (25) hours per week for at least one hundred and eighty (180) days immediately before the date the employee takes leave to attend a criminal proceeding; and the employee is a victim who has suffered financial, social, psychological or physical harm as a result of a "person felony;" or the Employee is the spouse, domestic partner, father, mother, sibling, child, stepchild or grandparent of the victim.

Caregivers must provide reasonable notice of the intention to take leave and copies of any notices of scheduled criminal proceedings that the Employee receives from a law enforcement agency. Such records will be kept confidential.

The amount of leave may be limited if the leave creates an undue hardship to the Company's business.

## **LEGISLATORS AND PROSPECTIVE LEGISLATORS LEAVE**

Caregivers who are members of the Legislative Assembly may be granted leave as is reasonably necessary to attend any regular or special session of the Legislative Assembly or to perform official duties. An employee must give at least thirty (30) days' notice of the need for leave for regular sessions and as soon as it is reasonably apparent that a special or emergency session is to be called. Employees who use leave under this section must apply for restoration of employment within fifteen (15) days after adjournment of a regular session or five (5) days after completion of another legislative assignment where the leave is for a lesser period. Most Caregivers will be reinstated to the same or similar position, with the seniority and benefits accumulated during the leave and will not be retaliated against for taking such leave.

## **VETERANS DAY HOLIDAY**

Veterans who are otherwise scheduled to work on Veterans Day are entitled to take the day off unpaid upon request. A Caregiver is eligible if he or she served on active duty in the Armed Forces for at least six (6) months, or less than six (6) months, if released from active duty with a disability rating from the United States Department of Veterans Affairs, and received a discharge under honorable conditions. Caregivers seeking Veterans Day off must make the request at least twenty-one (21) days in advance of Veterans Day. The Company reserves the right to deny an Caregiver's request for time off on Veterans Day if granting the request would cause a significant economic or operational disruption or an undue hardship to the company. In those circumstances, the Company will allow the Caregiver a single unpaid day off before the following Veterans Day to honor the holiday.

## **Legal Protections and External Remedies for Oregon Employees**

Sexual harassment is not only prohibited by FreedomCare but is also prohibited by state, federal, and, where applicable, local law. Aside from the internal process at FreedomCare, you may also choose to pursue legal remedies with the following governmental entity at any time if you work in the state of Oregon:

### **Bureau of Labor & Industries**

**Number: 971-245-3844**

**Email: [boli\\_help@boli.oregon.gov](mailto:boli_help@boli.oregon.gov)**

## Pennsylvania Policies

Office Locations:	
1700 Market Street. Suite 1005 Philadelphia, PA 19103	2225 Sycamore Street, Suite #620 Harrisburg PA 17111
429 Fourth Ave., Suite 300 Pittsburgh, PA 15219	

**General Number:** 215-996-7140 (24 hours/7 days a week)

**Office Hours:** 9AM- 5PM Monday through Friday

All other times; please see below;

\* After 5:00 PM daily, messages left on the Voice Mail will NOT be picked up until the next day. Therefore, if you need to communicate your concern immediately you must adhere to the following instructions;

Emergencies after 5:00 PM must be relayed to the FreedomCare On-Call Service and 911 when appropriate. Always identify yourself as a FreedomCare employee, state your concern and an appropriate contact will respond to you within half-hour.

**On Call Tel Number: 215-996-7140**

### **EMPLOYEE REQUIREMENTS**

FreedomCare employees must submit the following documentation before they will be considered for employment:

- Passed a background check and received a child abuse clearance, if applicable
- TB screen less than one year old
- Demonstrated competency via one of the following: (1) valid nurses license; (2) passing a FreedomCare competency examination; (3) passing a nurse aide certification and training program sponsored by the Pennsylvania Department of Education, a 42 C.F.R. 484.36-compliant home health aide training program; a HCA/HCR Medicaid Waiver training program, or a Pennsylvania-regulations-approved training program
- Satisfactory face-to-face interview
- Two (2) satisfactory letters of reference

FreedomCare employees must annually pass a FreedomCare competency screening

Additional drug screens may be requested at random.

## **Philadelphia/Pittsburgh Paid Sick Leave**

### ***Accrual***

Caregivers working in Philadelphia or Pittsburgh shall accrue paid sick leave for every hour worked in Philadelphia or Pittsburgh at the rate of one (1) hour of paid sick leave for every 40 hours worked up to a maximum of 56 hours per calendar year. Paid sick leave begins to accrue on the first calendar day after the start of employment. Caregivers may carry over unused paid sick leave but may only use a maximum of 56 hours of paid sick leave per calendar year. Leave accrued under this policy is not paid upon termination.

### ***Usage***

Caregivers may use paid sick leave for:

- an Caregiver's mental or physical illness, injury, or health condition;
- an Caregiver's need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition;
- an Caregiver's need for preventive medical care;
- care of a family member with a mental or physical illness, injury, or health condition;
- care of a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition;
- care of a family member who needs preventive medical care; or
- absence necessary due to domestic abuse, sexual assault, or stalking, provided the leave is to allow the Caregiver to obtain for the Caregiver or the Caregiver's family member the following:
  - medical attention needed to recover from physical or psychological injury or disability caused by domestic or sexual violence or stalking;
  - services from a victim services organization;
  - psychological or other counseling;
  - relocation due to the domestic or sexual violence or stalking; or
  - legal services or remedies, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from the domestic or sexual violence.

Caregivers must provide reasonable notice of foreseeable reasons for use of paid sick leave, such as scheduled medical care. In cases where the need to use paid sick leave is not foreseeable, Caregivers must inform their supervisor and Human Resources by the start of the business day and for each day that they are unable to report to work. Caregivers who use paid sick leave for more than two consecutive days may be asked to provide documentation from a physician certifying the reason for such absence as it relates to themselves or a family member and, in the case of an Caregiver, that they are cleared to return to work.

All paid sick leave will be paid at a rate equivalent to the Caregiver's regular rate of pay for the week in which the sick leave was taken. Paid sick leave accrued under this policy is not paid upon termination.

The Company will not deny a valid request to use paid sick leave, nor will it in any way discriminate or retaliate against an Caregiver for valid use of available hours for sick leave purposes.

### **Pregnancy Disability Leave**

Written and unwritten employment practices and policies regarding job benefits and job security, including, but not limited to, commencement and duration of leave, the availability of extensions, the accrual of seniority and other benefits and privileges, reinstatement and payment under a health or disability insurance or sick leave plan, formal or informal, shall be applied to permanent or temporary disability due to pregnancy or childbirth on the same terms and conditions as they are applied to other permanent or temporary disabilities.

### **Domestic Violence Victim Leave**

Pennsylvania has no state-law requiring employers to provide domestic violence leave. However, qualified Philadelphia employers must provide domestic violence leave, as described below.

#### ***Philadelphia***

Philadelphia employers with 50 or more Caregivers must provide Caregivers with eight workweeks of leave for victims of domestic violence, sexual assault, or stalking during any 12-month period. Employers with fewer than 50 Caregivers must provide Caregivers with four workweeks of such leave during any 12-month period.

An Caregiver who is a victim of domestic violence, sexual assault, or stalking or has a family or household member who is a victim of domestic violence, sexual assault, or stalking whose interests are not adverse to the Caregiver as it relates to the domestic violence, sexual assault, or stalking may take unpaid leave from work to:

- Seek medical attention for, or to recover from, physical or psychological injuries to the Caregiver or the Caregiver's family or household member that are caused by domestic violence, sexual assault, or stalking
- Obtain services from a victim services organization for the Caregiver or the Caregiver's family or household member
- Obtain psychological or other counseling for the Caregiver or the Caregiver's family or household member
- Participate in safety planning, temporarily or permanently relocate, or take other actions to increase the safety of the Caregiver or the Caregiver's family or household member from future domestic violence, sexual assault, or stalking or to ensure economic security, or
- Seek legal assistance or remedies to ensure the health and safety of the Caregiver or the Caregiver's family or household member, including to prepare for or participate in any civil or criminal legal proceeding related to or derived from domestic violence, sexual assault, or stalking.

An Caregiver, who is entitled to take paid or unpaid leave (including family, medical, sick, annual, personal, or similar leave) pursuant to federal, state, or local law, a collective bargaining agreement, or

an employment benefits program or plan, may elect to substitute any period of such leave for an equivalent period of domestic violence leave provided in this section. If an Caregiver exercises their rights to substitute other categories of leave time, the Caregiver's remaining domestic violence is reduced by the amount of substituted leave.

An Caregiver must provide the Company with at least 48 hours of advance notice of the Caregiver's intention to take leave unless it is not practicable to provide such notice. The Company will not take any action against an Caregiver who fails to provide advance notice of the need for leave if the Caregiver provides certification within 45 days after the employer requests.

### **Organ and Tissue Donation Leave**

Employers who are covered by the FMLA must provide leave under this section, which includes employers with 50 or more Caregivers for each working day during each of 20 or more calendar workweeks in the current or preceding year.

Caregivers are eligible for leave under this section if they have been employed by the Company for at least 12 months and have worked at least 1,250 hours in the 12 months preceding the leave request and are living donors who donate all or part of an organ or tissue. Eligible Caregivers are entitled to up to 12 weeks of unpaid organ or tissue donation leave in a 12-month period if they themselves are a donor, or if they must care for their spouse, child, or parent who is a donor.

An organ is defined as a kidney, liver, heart, lung, pancreas, esophagus, stomach, small or large intestine or portion of the gastrointestinal tract or another part of the human body designated by the Department of Health by regulation. Tissue is defined as a portion of the human body other than an organ, including, but not limited to, a human eye, skin, bone, bone marrow, heart valve, spermatozoon, ova, artery, vein, tendon, ligament, pituitary gland, or fluid. It does not include blood or a blood derivative unless the blood or blood derivative is donated for the purpose of research or education.

The Company may require that eligible Caregivers submit written documentation regarding the preparation and recovery necessary for surgery related to organ or tissue donation by or for the eligible Caregiver or the eligible Caregiver's spouse, child, or parent.

### **Legal Protections and External Remedies for Pennsylvania Employees**

Sexual harassment is not only prohibited by FreedomCare but is also prohibited by state, federal, and, where applicable, local law. Aside from the internal process at FreedomCare, you may also choose to pursue legal remedies with the following governmental entity at any time if you work in the state of Pennsylvania:

#### **Pennsylvania Human Relations Commission**

**Website:** <https://www.pa.gov/agencies/phrc.html>

## **Illinois Policies**

### **Illinois Paid Leave**

\*This law, the Illinois Paid Leave For All Workers Act, applies to Illinois employees who work outside of Chicago and Cook County.

#### **Accrual**

Caregivers who work in Illinois will accrue one hour of paid leave for every 40 hours worked up to 40 hours of paid leave unless the Company provides a greater benefit.

#### **Usage**

Illinois Caregivers will receive 40 hours of paid leave unless the Company provides a greater benefit or the Company may grant covered employees 40 hours of paid leave on the first day of employment or the first day of the 12-month accrual period. Caregivers may take this leave for any reason of their choosing. Caregivers are not required to provide a reason for the leave and may not be required to provide documentation or certification as proof of or in support of the leave.

Caregivers may use this paid leave in minimum increments of two (2) hours per day. If the Caregiver's scheduled workday is less than two (2) hours, the Company will set a new minimum increment, which shall not exceed the length of the employee's regular workday.

Paid leave shall carry over annually to the extent not used by the employee. That said, the Company is not required to provide more than 40 hours of paid leave to an employee in the 12-month period unless the Company provides a greater benefit.

If use of paid leave under this policy is foreseeable, Caregivers must provide seven (7) calendar days' notice before the date the leave is to begin. If leave is not foreseeable, Caregivers shall provide such notice as soon as is practicable after the employee is aware of the necessity of the leave. Caregivers shall provide notice orally, in writing, electronically or by any other means acceptable to FreedomCare. Unused paid leave under this policy will not be paid out upon separation of employment.

For more information or if you have any questions, Caregivers can contact the Caregiver Benefits team at **CaregiverBenefits@freedomcare.com**.

### **Chicago Paid Leave**

\*This law applies to employees who work at least 80 hours for the Company within any 120-day period while physically present within the geographic boundaries of the City.

Such employees are entitled to up to 40 hours of paid sick leave ("PSL") and 40 hours of paid leave ("PL"). Caregivers will accrue one hour of PL and PSL for every thirty-five (35) hours worked within the City of Chicago.

### **Paid Sick Leave**

Caregivers who are or who have family members who are ill or injured, or who seek to receive professional care, may use PSL. Employees also may use PSL if they or their family members are the victim of domestic violence; to care for a family member whose school, class, or place of care has been closed due to a public health emergency; are obeying an order issued by the Mayor, the Governor of Illinois, the Chicago Department of Public Health, or a treating healthcare provider, requiring them to:

- Stay at home to minimize the transmission of a communicable disease;
- Remain at home while experiencing symptoms or sick with a communicable disease;
- Obey a quarantine order issued to employee; or
- Obey an isolation order issued to the employee.

If a Caregiver uses three consecutive days of PSL, the Company may also require documentation from a doctor.

Caregivers are eligible to take PSL after thirty (30) calendar days of employment. Each year, employees may rollover up to eighty (80) hours of PSL, or ten (10) sick days.

### **Paid Leave**

Caregivers may use PL for any reason at all, and employees need not provide a reason for such leave or documentation or certification as proof of the leave. Caregivers should make every reasonable effort to request paid leave at least ten (10) days in advance. A request to use PL may be denied due to the Company's operational needs.

Caregivers are to use PL after ninety (90) calendar days of employment. Each year, employees can carry over up to sixteen (16) hours, or two (2) days, of PL to the next year.

For more information or if you have any questions, Caregivers can contact the Caregiver Benefits team at **CaregiverBenefits@freedomcare.com**.

### **Cook County Paid Leave**

\*The law covers any employee who works in Cook County (but outside of Chicago).

Caregivers are eligible to use this paid leave after ninety (90) calendar days of employment.

Caregivers accrue one hour of paid leave for every 40 hours worked (up to 40 hours of paid leave) unless the Company provides a greater benefit. Paid leave shall accrue in one-hour increments. Caregivers may take this leave for any reason of their choosing. Caregivers are not required to provide a reason for the leave and may not be required to provide documentation or certification as proof or in support of the leave.

Paid leave shall carry over annually to the extent not used by the Caregivers. That said, the Company is not required to provide more than 40 hours of paid leave to an employee in the 12-month period unless the Company provides a greater benefit.

If use of paid leave under this Act is foreseeable, employees must provide seven (7) calendar days' notice before the date the leave is to begin. If leave is not foreseeable, employees shall provide such notice as

soon as is practicable after the employee is aware of the necessity of the leave. Employees shall provide notice orally, in writing, electronically or by any other means acceptable to FreedomCare.

A request for paid leave may be denied if granting leave would significantly impact the Company's business operations.

Caregivers who believe the Company is not providing the required hours of paid leave, failing to allow use of paid leave as required by the Ordinance, or is otherwise violating the Ordinance, should contact the Cook County Commission on Human Rights with any questions or to file a complaint. The complaint form and additional information can be accessed on the Commission's website (<https://www.cookcountyl.gov/service/paid-leave-ordinance-and-regulations>).

For more information or if you have any questions, Caregivers can contact the Caregiver Benefits team at **CaregiverBenefits@freedomcare.com**.

### **Bereavement Leave**

Pursuant to the Illinois Family Bereavement Leave Act, the Company provides up to two weeks (or ten (10) work days) of unpaid bereavement leave to (1) attend the funeral or alternative to a funeral of a covered family member, (2) make arrangements necessitated by the death of a covered family member, (3) grieve the death of a covered family member, or (4) be absent from work due to (i) a miscarriage; (ii) an unsuccessful round of intrauterine insemination or of an assisted reproductive technology procedure; (iii) a failed adoption match or an adoption that is not finalized because it is contested by another party; (iv) a failed surrogacy agreement; (v) a diagnosis that negatively impacts pregnancy or fertility; or (vi) a stillbirth. For purposes of this policy, a "covered family member" means an employee's child, stepchild, spouse, domestic partner, sibling, parent, mother-in-law, father-in-law, grandchild, grandparent, or stepparent.

### **Blood Donation Leave**

Eligible Caregivers may use up to one hour, or more if authorized by the Company, to donate blood every 56 days in accordance with appropriate medical standards.

### **Voting Leave**

The Company encourages employees to exercise their right to vote. The Company requests that, whenever possible, Caregivers vote before or after their regular hours of work to avoid interference with business operations.

Caregivers entitled to vote shall be permitted a period of two hours between the time of opening and closing of the polls to vote. The Company may specify the hours during which employees may be absent, except the Company will permit a two-hour absence during working hours if the employee's working hours begin less than two hours after the opening of the polls and end less than two hours before the closing of the polls. A Caregiver's request for leave must be made prior to the day of the election.

### **Victims' Economic Safety And Security Act**

The Company complies with the Illinois Victims' Economic Security and Safety Act (VESSA) and will provide up to twelve (12) weeks of unpaid leave in any twelve (12) month period to employees who are

victims of domestic or sexual violence or who have a family or household member who is a victim of domestic violence. Valid reasons for requesting such leave include:

- To seek medical attention for, or recovering from, physical or psychological injuries caused by domestic or sexual violence;
- To seek legal assistance, including preparing for or participating in any civil or criminal legal proceedings related to or derived from domestic or sexual violence;
- To obtain services from a victim services organization;
- To obtain counseling;
- To participate in safety planning, to temporarily relocate, to take other actions to ensure the safety of the employee, family member, or household member from future domestic or sexual violence, or to ensure economic security; or
- To help a family or household member who is a victim of domestic or sexual violence.

If you feel you may be eligible for a VESSA leave of absence based on the above criteria, you must request the leave to a direct supervisor at least 48 hours in advance of the expected leave, absent emergency circumstances or where it is not practicable. Your direct supervisor may request certification for VESSA leave. Any request for VESSA leave will be kept confidential in compliance with state and federal laws. If you elect to take VESSA leave, you will be reinstated to your same job or one of similar status and pay. Additionally, you will not lose any benefits accrued prior to the leave, but will not continue to accrue any benefits during the leave, unless otherwise required by law.

#### **Civil Air Patrol Leave**

Pursuant to the Illinois Civil Air Patrol Leave Act, the Company provides up to thirty (30) days of unpaid leave to employees who are members of the Civil Air Patrol, an auxiliary of the U.S. Air Force, in order to perform a Civil Air Patrol mission. An employee requesting Civil Air Patrol leave must provide at least fourteen (14) days' notice of the intended date on which leave will begin if the leave will consist of five (5) or more consecutive workdays. Otherwise, employees requesting Civil Air Patrol leave must provide as much notice as possible of their intent to take leave.

#### **Illinois Service Member Leave**

The Illinois Service Member Employment and Reemployment Rights Act expands the rights under the USERRA, as detailed in the "Military Service" section of this handbook, to cover (1) members of the Armed Forces of the United States whether active duty or reserve, including the National Guard when performing State duty; (2) members of Military Auxiliary Radio System, United States Coast Guard Reserve, Civil Air Patrol; (4) the Illinois State Guard; and (3) the Merchant Marines when performing official duties in support of an emergency. For more information on an employee's rights pursuant to the USERRA, please review the "Military Service" section of this handbook.

#### **Illinois Family Military Leave**

Pursuant to the Illinois Family Military Leave Act, the Company provides up to thirty (30) days of unpaid leave to employees whose spouse, parent, child, or grandparent has been called into military service that will last longer than thirty (30) days. The Caregiver requesting family military Leave must have exhausted all other accrued leave, except for sick leave and disability leave, before making such a request. A Caregiver requesting family military leave must provide at least fourteen (14) days' notice of

the intended date on which leave will begin if the leave will consist of five (5) or more consecutive workdays. Otherwise, Caregivers requesting family military leave must provide as much notice as possible of their intent to take leave.

### **School Visitation Leave**

The Company complies with the Illinois School Visitation Rights Act, which provides eligible Caregivers with up to eight (8) hours of unpaid leave during any school year, no more than four (4) hours of which may be taken on any given day, to attend classroom activities or school conferences if they cannot be scheduled during nonworking hours. You must exhaust all accrued PTO, for those eligible employees, to be eligible for this leave. If you feel you may be eligible for School Visitation Leave based on the criteria above, you must request the leave, in writing, to your supervisor at least seven (7) days in advance of the expected leave, absent emergency circumstances.

### **Other Leaves of Absence**

The leaves enumerated above are simply a summary description of some of the leaves of absence that may be available to the Company's employees. The Company will provide any and all other leaves of absences as are required by Illinois state and local law. For more information on whether an absence may be covered by a particular leave, please contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### **Illinois Pregnancy Accommodation Act**

Under the Illinois Pregnancy Accommodation Act, the Company will provide reasonable accommodations to those employees requiring an accommodation due to pregnancy, childbirth, or medical or common conditions related to pregnancy or childbirth. Caregivers seeking a reasonable accommodation to address a medical or common condition related to pregnancy or childbirth shall engage in a timely, good faith, and meaningful exchange with the Company to determine the most effective reasonable accommodation for the employee. Examples of reasonable accommodations for a pregnancy include, but are not limited to, more frequent bathroom breaks, assistance with heavy work, a private space for expressing milk, or time off to recover from the pregnancy.

A Caregiver taking leave because of a medical or common condition related to pregnancy or childbirth must use all paid vacation and sick leave concurrently with such leave, where permitted by federal, state, and local law. Likewise, where permitted by federal, state, and local law, other hours of leave will run concurrently with any leave taken under this provision.

We may request you provide certification from your health care provider concerning the need for the accommodation. An employee seeking a reasonable accommodation for a pregnancy related condition should consult Human Resources .

It is our policy that no adverse action shall be taken against any employee for requesting an accommodation for pregnancy related conditions. Retaliation is a very serious violation of Company policy and should be reported immediately should it occur. If you feel that you have been harassed or discriminated against on this basis, please follow the procedures detailed in the complaint procedure policy in the Handbook.

### **Illinois Nursing Mothers In The Workplace Act**

The Company will provide a reasonable amount of break time for an employee who wishes to express breast milk for her infant child for one year after the child's birth. The break time may run concurrently with rest and meal periods already provided to the employee. If break time cannot run concurrently with rest and meal periods, it will be paid for non-exempt employees, to the extent required by law.

The Company will make reasonable efforts to provide the use of a room or location other than a bathroom stall for the employee to express milk in private. This location may be the employee's private office, if applicable.

The Company may not be able to provide additional break time if doing so would create an undue hardship on Company operations. Please consult Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com) if you have questions regarding this policy.

### **One Day Rest In Seven**

Pursuant to Illinois law, eligible Caregivers are entitled to twenty-four (24) consecutive hours of rest in each calendar week. Part-time Caregivers whose total work hours for a week do not exceed twenty (20) hours are not entitled to a day of rest under this policy.

### **Meal Periods**

All non-exempt employees must comply with the minimum meal period requirements set forth below.

Non-exempt employees who work at least seven and a half (7.5) continuous hours must take an uninterrupted off duty meal period of at least twenty (20) consecutive minutes. Employees who work more than seven and a half (7.5) continuous hours will be provided an additional twenty (20) minute meal period for every additional four and a half (4.5) continuous hours worked. Uninterrupted twenty (20) minute meal periods will be provided and must be taken as follows:

- A first meal period which must begin no later than the end of the employee's fifth hour of work; and
- A second meal period which must begin no later than the end of the employee's tenth hour of work.

During meal periods employees are relieved of all duty, and should not work during this time. The Company expressly relinquishes control over what employees do during meal periods, and employees are free to leave the premises during meal periods. The Company's policy is that employees must take meal periods and must not work during meal periods. Employees who believe that they have been impeded or discouraged from taking a full and uninterrupted meal period should report it to Human Resources immediately.

The Company believes in taking breaks and wants to make every effort to ensure compliance with this Meal Period Policy. Employees who believe that they have been pressured, coerced, or encouraged not to take meal periods by a supervisor must contact Human Resources directly so this issue can be addressed. Employees who believe that they are entitled to meal periods, but have not been provided with meal periods required under this policy must contact the Human Resources Department immediately so this can be corrected.

Violations of this policy may result in discipline, up to and including termination. Exempt employees may take meal periods at their own discretion when practicable.

### **Chicago Sexual Harassment Policy**

Sexual harassment is strictly prohibited by the Company and illegal in Chicago. Under this policy, “sexual harassment” means any (i) unwelcome sexual advances or unwelcome conduct of a sexual nature; (ii) requests for sexual favors or conduct of a sexual nature when (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment; or (2) submission to or rejection of such conduct by an individual is used as the basis for any employment decision affecting the individual; or (3) such conduct has the purpose or effect of substantially interfering with an individual’s work performance or creating an intimidating, hostile, or offensive working environment; or (iii) sexual misconduct, which means any behavior of a sexual nature which also involves coercion, abuse of authority, or misuse of an individual’s employment position. Examples of sexual harassment include, but are not limited to, making sexually explicit comments, unwanted touching of another’s person, making inappropriate sexual gestures, and making sexual jokes.

All Caregivers in Chicago are required to participate in a minimum of one hour of sexual harassment prevention training annually. All supervisors and managers in Chicago are required to participate in a minimum of two hours of sexual harassment prevention training annually. All employees, including supervisors and managers, in Chicago are required to participate in one hour of bystander training annually. The Company will provide all required trainings.

Caregivers are encouraged to report in writing, or otherwise, any sexual harassment or behaviors that violate this policy to his or her supervisor or Human Resources immediately. The Company will provide all employees a complaint form for employees to report sexual harassment and file complaints. An employee may make a confidential report by contacting Human Resources. Managers and supervisors are required to report any complaint that they receive, or any sexual harassment that they observe or become aware of, to Human Resources. Retaliation for reporting sexual harassment is strictly prohibited by the Company and illegal in Chicago.

A Caregiver may file a complaint of sexual harassment with the Chicago Commission on Human Relations (“CCHR”). For more information, an employee may visit the CCHR’s website on sexual harassment at [https://www.chicago.gov/city/en/depts/cchr/supp\\_info/sexual-harassment.html](https://www.chicago.gov/city/en/depts/cchr/supp_info/sexual-harassment.html). Additionally, an employee may file a complaint with the Equal Employment Opportunity Commission.

### **Legal Protections and External Remedies for Illinois Employees**

Caregivers also should be aware that in addition to the EEOC, the Illinois Department of Human Rights (“IDHR”) investigates and prosecutes complaints of harassment, discrimination, and retaliation in employment. Caregivers in Illinois who believe that they have suffered unlawful discrimination, harassment, or retaliation may file a complaint with either of these agencies.

### **Illinois Department of Human Rights**

**Number: (312) 814-6200 (Chicago Office); (217) 785-5100 (Springfield Office)**

**Website: <https://dhr.illinois.gov/>**

## Ohio Policies

### **Military Family Leave**

Eligible Caregivers who are the parent, spouse, or legal custodian of a member of the uniformed services who is called to active duty for more than thirty (30) days or who is injured, wounded or hospitalized on active duty is entitled to ten (10) days or eighty (80) hours of unpaid leave, whichever is less, to care for the uniformed services member. Employees are eligible for leave under this section if: (i) they have worked for the Company for at least twelve (12) consecutive months; and (ii) they have worked for the Company for at least 1,250 hours in the twelve (12) months preceding the request for leave. Employees eligible for leave under this section also may be eligible for leave under the FMLA. In such a case, the employee's leave under this section and FMLA leave will run concurrently.

Unless the uniformed services member's situation is critical or life-threatening, employees must provide the Company with at least fourteen (14) days of notice before taking leave under this section, or at least two (2) days of notice if leave is taken due to the uniformed service member's injury, wound or hospitalization.

The Company will continue benefits to which the employee is entitled for an employee who takes leave under this section. Employees taking leave under this section remain responsible for their proportionate cost of those benefits during leave.

The Company will not retaliate against any employee for using leave under this section.

### **Voting Leave**

The Company encourages employees to exercise their right to vote. The Company requests that, whenever possible, employees vote before or after their regular hours of work to avoid interference with business operations.

Caregivers may take a reasonable amount of time to vote on election days. Non-exempt employees may take unpaid leave under this section. Exempt employees may take paid leave under this section.

The Company will not retaliate against any employee for using leave under this section.

### **Volunteer Leave**

A Caregiver who is a certified volunteer firefighter or volunteer provider of emergency medical services and is responding to an emergency is entitled to unpaid leave if they are late or absent to work. Within 30 days of certification as a volunteer firefighter or volunteer provider of emergency medical services, an employee must submit to the Company written notification signed by the chief of the volunteer fire department, or the medical director or chief administrator of the emergency medical organization, indicating the employee's status as a volunteer firefighter or volunteer provider of emergency medical services.

The employee should make every effort to notify the Company that they will be late or absent from work because they have been dispatched to an emergency. The Company may request a written statement from the chief of the volunteer fire department, or the medical director or chief administrator of the emergency medical organization, stating that the employee was responding to an emergency and stating

the time of that response. The Caregiver is required to notify the Company if the employee's status as a volunteer firefighter or volunteer provider of emergency services changes, including if the employee's service is terminated.

### **Other Leaves of Absence**

The leaves enumerated above are simply a summary description of some of the leaves of absence that may be available to the Company's employees. The Company will provide any and all other leaves of absences as are required by Ohio state and local law. For more information on whether an absence may be covered by a particular leave, please contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### **Legal Protections and External Remedies for Ohio Employees**

Caregivers also should be aware that in addition to the EEOC, the Ohio Civil Rights Commission ("OCRC") investigates and prosecutes complaints of harassment, discrimination, and retaliation in employment. Caregivers in Ohio who believe that they have suffered unlawful discrimination, harassment, or retaliation may file a complaint with either of these agencies.

### **Ohio Civil Rights Commission**

**Number: 614-466-2785**

**Website: <https://civ.ohio.gov/home>**

## Michigan Policies

### **Sick Leave**

#### **Accrual**

Under the Michigan's Earned Sick Time Act ("ESTA"), Caregivers accrue earned sick time at a rate of one (1) hour of paid earned sick time per thirty (30) hours worked, up to a maximum of seventy-two (72) hours per year.

#### **Usage**

A Caregiver may use accrued earned sick time as it is accrued, but Caregivers hired after February 21, 2025 may not be entitled to use their accrued time until they have been employed by the company for 120 calendar days. Caregivers may carry over up to seventy-two (72) hours of accrued, unused earned sick time from one year to the next. Caregivers may use their accrued paid earned sick time in hourly increments.

Eligible Michigan Caregivers are entitled to use earned sick time under the ESTA for the following reasons:

- The physical or mental illness, injury, or health condition of the Caregiver or the Caregiver's family member;
- The medical diagnosis, care, or treatment of a physical or mental illness, injury, or health condition of the Caregiver or the Caregiver's family member;
- The preventative medical care of the Caregiver or the Caregiver's family member
- The closure of the Caregiver's place of business or the closure of the school or place of care of the Caregiver's child by a public official due to a public health emergency;
- Exposure of the Caregiver or the Caregiver's family member to a communicable disease that would jeopardize the health of others as determined by health authorities or a healthcare provider
- The Caregiver or the Caregiver's family member is a victim of domestic violence or sexual assault and needs to:
  - Obtain medical care or psychological or other counseling
  - Obtain services from a victim services organization
  - Relocate
  - Obtain legal services
  - Participate in civil or criminal proceedings related to the domestic violence or sexual assault

For purposes of sick leave, a "family member" is any of the following:

- A biological, adopted, or foster child, stepchild, legal ward, a child of a domestic partner, or a child to whom the Caregiver stands in loco parentis;

- A biological, adoptive, or foster parent, stepparent, or legal guardian of a Caregiver or the Caregiver's spouse or domestic partner, or a person who stood in loco parentis when the Caregiver was a minor child;
- An individual to whom the Caregiver is legally married under the laws of any state or a domestic partner;
- A grandparent;
- A grandchild;
- A biological, foster, or adopted sibling;
- An individual related by blood to the Caregiver; and
- An individual whose close association with the Caregiver is the equivalent of a family relationship.

If a Caregiver's need to use earned sick time under the ESTA is foreseeable, the Caregiver is required to give seven (7) calendar days' advance notice to their supervisor. If the need to use earned sick time is not foreseeable, the Caregiver is required to give notice of their need to use paid sick time to their supervisor as soon as practicable.

The Company may require reasonable documentation for earned sick time use longer than three (3) consecutive days. Caregivers are provided at least fifteen (15) days from the date of the Company's request to provide any necessary documentation. If a Caregiver is using earned sick time because of domestic violence or sexual assault, the Company may request that the Caregiver provide documentation that the leave is being used for that purpose. The following types of documentation are satisfactory:

- A police report indicating that the Caregiver or the Caregiver's family member was a victim of domestic violence or sexual assault;
- A signed statement from a victim and witness advocate affirming the Caregiver or the Caregiver's family member is receiving services from a victim services organization; or
- A court document indicating that the Caregiver or the Caregiver's family member is involved legal action related to the domestic violence or sexual assault.

### **Social Security Number Privacy**

The Company will take all practical measures to keep its employees' social security numbers (SSNs) confidential, including limiting who has access to information and/or documents containing employees' SSNs to only employees who have a legitimate business reason for having access to such information and/or documents. The Company prohibits all unlawful disclosures of employees' SSNs. All documents featuring SSNs that are not required to be kept on file with the Company for a legitimate business reason must be properly disposed of through document destruction, such as by shredding physical documents and information and/or permanently deleting electronic records containing SSNs. Any Company employee who violates this policy will be subject to discipline, up to and including termination.

### **Military Leave**

Caregivers who serve in the state's military will be granted the right to take time off from work and to be reinstated afterwards as provided by Michigan law. For a Caregiver to be eligible for military leave, the Caregiver must be a member of (i) the armed forces; (ii) the reserve component of the armed forces; (iii)

the National Guard in active or state active service; (iv) the commissioned corps of a public health service; or (v) any other category of persons designated by the president or governor in a time of war or national emergency. In Michigan, members of the state or United States uniformed services who are called to active state or federal service are entitled to take unpaid leave, with reinstatement when their service has ended. Caregivers are also entitled to take time off to attend instruction, drills, or military encampment. Caregivers must provide advance notification for need to take leave.

### **Crime Victim Leave**

Caregivers who are crime victims or a victim's representative may have time off to respond to a subpoena or request by a prosecuting attorney to attend court and/or to give testimony.

A Caregiver who is a victim of a crime or a representative of a crime victim is entitled to take time off from work to testify in or attend a judicial proceeding. Leave is unpaid.

A victim representative is:

- The guardian or custodian of a child of a deceased victim, if the child is under 18 years of age;
- The parent, guardian or custodian of a victim of an assaultive crime, if the victim is under 18 years of age; or
- A person designated to act in place of a victim of an assaultive crime while the victim is physically or emotionally disabled.

### **Other Leaves of Absence**

The leaves enumerated above are simply a summary description of some of the leaves of absence that may be available to the Company's employees. The Company will provide any and all other leaves of absences as are required by Michigan state and local law. For more information on whether an absence may be covered by a particular leave, please contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### **Legal Protections and External Remedies for Michigan Employees**

Caregivers also should be aware that in addition to the EEOC, the Michigan Department of Civil Rights ("MDCHR") investigates and prosecutes complaints of harassment, discrimination, and retaliation in employment. Caregivers in Michigan who believe that they have suffered unlawful discrimination, harassment, or retaliation may file a complaint with either of these agencies.

### **Michigan Department of Civil Rights**

**Number: 1-800-482-3604**

**Website: <https://www.michigan.gov/mdcr>**

## **Wisconsin Policies**

### **Wisconsin Family and Medical Leave Act (“WFMLA”)**

A caregiver who works in Wisconsin for the Company for more than 52 consecutive weeks and has worked for the Company for at least 1,000 hours during the preceding 52-week period is eligible for leave under the WFMLA.

In a twelve (12) month period, an eligible caregiver may take: (1) up to six (6) weeks of family leave following the birth or adoption of a child if the leave begins within 16 weeks of the child’s birth or placement; (2) up to two (2) weeks of leave for the care of a child, spouse, domestic partner, parent, or parent of domestic partner with a serious health condition; (3) up to two (2) weeks for the caregivers own serious health condition.

Caregivers must provide reasonable advance notice of the need for leave. Caregivers may be required to provide certification from a health care provider necessitating the need for leave. Leave under the WFMLA may be taken all at once or intermittently. Leave under the WFMLA is unpaid but the caregiver may substitute with any available accrued paid leave, such as paid sick leave.

During an approved WFMLA leave, the Company will maintain a caregiver’s benefits under the same terms set forth in the Company’s Family Medical Leave Act policy, which includes continuation and payment of benefits by the Company for the employer portion of benefits and by the caregiver for the caregiver portion of benefits. At the conclusion of a WFMLA leave, caregivers will be reinstated to either their former position or a position with equivalent pay, benefits, and terms and conditions of employment. Leave under the WFMLA runs concurrently with any leave taken under the Family and Medical Leave Act.

### **Access to Personnel Records**

The Company will permit a current or former caregiver or a caregiver’s designated representative, upon request in writing, to inspect the caregiver’s personnel documents (i) at least twice each calendar year; (ii) within seven days from receiving the request; (iii) during normal working hours; (iv) at a location near the caregiver’s employment place where the records are maintained, or any other time and location as otherwise agreed between the Company and the caregiver.

A caregiver, a former caregiver or a caregiver’s designated representative is entitled to inspect personal medical records and any personnel documents that are used or that have been used in determining the caregiver’s qualifications for employment, promotion, transfer, additional compensation, termination or other disciplinary action.

A caregiver is not entitled to inspect records that contain: (i) records relating to the investigation of possible criminal offenses committed by the caregiver; (ii) letters of reference for the caregiver; (iii) any part of a test document other than the test scores; (iv) materials used by the employer for staff management planning, including judgments or recommendations concerning future salary increases and

other wage treatments, management bonus plans, promotions, and job assignments or other comments or ratings used for the employer's planning purposes; (v) personal information about someone other than the caregiver if disclosure would constitute a clearly unwarranted invasion of the other person's privacy; or (vi) records relevant to any other pending claim between the employer and the caregiver discoverable in a judicial proceeding.

### **Organ or Bone Marrow Donor Leave**

Eligible caregivers are eligible for an unpaid leave of absence for the purposes of donating an organ or bone marrow. Eligible caregivers will have been employed with the Company for more than 52 consecutive weeks and worked 1,000 hours in the previous twelve (12) months. Eligible caregivers may take up to six (6) weeks of unpaid leave in any twelve (12) month period to serve as an organ or bone marrow donor. Caregivers must provide the Company reasonable notice and request leave as soon as practicable.

Caregivers may be required to provide certification from a health care provider of any of the following: (1) that the donee has a serious health condition requiring a bone marrow or organ transplant; (2) the caregiver is eligible and has agreed to serve as a donor; and (3) the amount of time expected for the caregiver's recovery from the procedure. The Company will maintain a caregiver's benefits, which includes continuation and payment of benefits by the Company for the employer portion of benefits and by the caregiver for the caregiver portion of benefits. At the conclusion of leave, the caregiver will be reinstated to either their former position or a position with equivalent pay, benefits, and terms and conditions of employment. Leave under this policy may run concurrently with leave under the federal Family and Medical Leave Act but will not run concurrently with leave under the Wisconsin Family and Medical Leave Act.

### **Election Official Leave**

Caregivers will be excused from work without pay to serve as an election official. Specifically, caregivers may be absent from work for the entire 24-hour period of each election day during which the caregiver serves as an elected official. No caregiver will be subject to retaliation or discrimination for taking leave under this policy. Caregivers may substitute accrued but unused PTO for this unpaid leave, but are not required to do so. Caregivers must provide advance notice of their intention to take leave.

### **Wisconsin Voting Leave**

A caregiver is entitled to time off from work under this Wisconsin Voting Leave policy to vote in a primary or general election if the caregiver does not have at least three consecutive hours to vote outside of their scheduled working hours.

Wisconsin Voting Leave must be taken at either the beginning or the end of the caregiver's shift, unless both the supervisor and the caregiver agree that another time should be taken. Wisconsin Voting Leave is for the amount of time at the beginning or end of a caregiver's shift necessary to create a period of three consecutive hours between the opening of the polls and the start of their shift, or between the end of their shift and the closing of the polls, as appropriate.

### **Volunteer Emergency Worker Leave**

A caregiver who is a volunteer firefighter, emergency medical technician, first responder or ambulance driver for a volunteer fire department, a fire company, a public agency, or a non-profit corporation is

permitted to be absent from work if the caregiver is responding to an emergency that begins before the caregiver is required to report to work. The Company will not compensate a caregiver who takes leave under this policy. A caregiver who takes leave under this policy must provide notice to the Company as quickly as is practicable.

Within 30 days of becoming a volunteer firefighter, emergency medical technician, first responder ambulance driver, a caregiver must submit to the Company a written statement from the individual in charge of the caregiver's volunteer unit notifying the Company of the caregiver's affiliation.

When a caregiver takes leave under this policy, the Company may request a written statement from the individual in charge of the caregiver's volunteer unit certifying that the caregiver was responding to an emergency at the time of his or her absence, indicating the date and time of the response to the emergency.

The Company will not retaliate against caregivers who request or take leave in accordance with this policy.

### **Military Leave**

The Company will comply with applicable Wisconsin laws regarding military leave and reinstatement. The cumulative length of a caregiver's absence from work, including any previous absences by reason of active state service or federal active duty, cannot exceed five years. The Company will grant a caregiver who is a member of the Civil Air Patrol up to 15 days of unpaid leave in a year to participate in an emergency service operation. A caregiver may not take more than five consecutive working days of leave at a time.

Caregivers who are called into federal active duty for 90 days or more are entitled to reinstatement after discharge from military duty to their previous position, or to one with the same seniority, benefits, and pay, unless the caregiver is no longer qualified, the period of active duty service was not longer than 5 years unless extended by law, or the Company's circumstances have changed and reemployment is impossible or unreasonable. When a caregiver is re-employed after military duty and served over 30 days but less than 181 days on duty, the caregiver may not be discharged in the first 180 days on reemployment except for due cause. If the caregiver spent more than 180 days on active military duty after reemployment, the person may not be discharged for at least one year after reemployment.

### **Jury Duty Leave**

The Company will grant caregivers a leave of absence without loss of time in service for the period of jury service. For the purpose of determining seniority or pay advancement, the status of the caregiver shall be considered uninterrupted by the jury service. The Company will not use absence due to jury service as a basis for discharging a caregiver or for any disciplinary action against the caregiver.

### **Crime Victim/Witness Leave**

The Company will provide caregivers who are victims of or a witness to a crime leave from work to testify at an action or proceeding pursuant to a subpoena. The Company requests a caregiver seeking leave

under this policy notify the Company as soon as practicable. The Company reserves its rights to request proof of the subpoena.

The Company will not retaliate against caregivers who request or take leave in accordance with this policy.

### **Legal Protections and External Remedies for Wisconsin Employees**

Caregivers should also be aware that, in addition to the EEOC, the Wisconsin Department of Workforce Development — through its Equal Rights Division — investigates and enforces complaints of harassment, discrimination, and retaliation in employment. Caregivers in Wisconsin who believe they have experienced unlawful discrimination, harassment, or retaliation may file a complaint with either of these agencies.

### **Wisconsin Department of Workforce Development, Equal Rights Division**

**Number: 608-266-6860**

**Website: <http://dwd.wisconsin.gov/er/>**

## **New York Policies**

### **Paid Sick Leave**

#### **Accrual**

Under this policy, Caregivers will accrue paid sick leave under this policy at the rate of one hour per every 30 hours worked, up to a maximum of 56 hours per calendar year. Caregivers who accrue paid sick leave under this policy may carry over unused sick leave from one calendar year to the next but may never use more than 56 hours of sick leave per calendar year. Paid sick leave will be available for use 120 days after your first workday.

#### **Usage**

All New York Caregivers are eligible to use accrued paid sick leave under this policy, for any reason allowed under the New York State and New York City law, including the following:

- The Caregiver's mental or physical illness, injury or health condition or need for medical diagnosis, care, or treatment of a mental or physical illness, injury or health condition or need for preventative medical care;
- The care of the Caregiver's child, spouse, domestic partner or parent, or the child or parent of your spouse or domestic partner, sibling (including half siblings, step siblings, or siblings related through adoption), grandchild or grandparent, any other family member related by blood or other individual whose close association is the equivalent of a family relationship who needs medical diagnosis, care or treatment of a mental or physical illness, illness, injury or health condition or who needs preventative medical care;
- Closure of the Caregiver's place of business by order of a public official due to a public health emergency or your need to care for a child whose school or childcare provider has been closed by order of a public official due to a public health emergency; or
- An absence from work when the Caregiver or his or her family member has been the victim of domestic violence, a family offense, sexual offense, stalking or human trafficking due to the following:
  - to obtain services from a domestic violence shelter, rape crisis center, or other services program; participate in safety planning, relocate, or take other actions to protect the Caregiver's safety or that of his or her members, including enrolling children in a new school;
  - (ii) to meet with an attorney or social service provider to obtain information and advice related to custody, visitation, matrimonial issues, orders of protection, immigration, housing, discrimination in employment, housing or consumer credit or participate in a civil or criminal proceeding;
  - (iii) to file a complaint or a domestic incident report with law enforcement or meet with a district attorney's office; or

- (iv) to take any other actions necessary to ensure the health and safety of the Caregiver or his or her family member relating to their status as a victim of domestic violence or unwanted sexual contact, stalking, or human trafficking or threat thereof.

Caregivers must provide 7-days' notice of the need to their Consumer to use available sick leave if the need is foreseeable. Where the need is not foreseeable, Caregivers should provide notice as early as possible.

Supporting documentation may be required if the Caregiver uses available sick leave for more than 3 consecutive days. For sick leave used for reasons (a) or (b) above, documentation signed by a licensed health care provider indicating the need for the amount of sick leave taken will be considered reasonable documentation and such documentation need not specify the nature of the Caregiver or Caregiver's family member's injury, illness, or condition.

Sick leave will be paid at the same rate as the Caregiver earns from his or her employment at the time the Caregiver uses such time, but no less than the applicable minimum wage. Unused earned paid sick time will not be paid at separation.

### **New York Prenatal Leave**

New York Caregivers may take up to 20 additional hours of paid prenatal leave during any 52-week period. The 52-week period begins on the date that a Caregiver first uses leave under this policy. Caregivers can use prenatal leave for the health care services received by an employee during their pregnancy or related to such pregnancy, including physical examinations, medical procedures, monitoring and testing, and discussions with a health care provider related to the pregnancy. Prenatal leave may be taken for fertility treatment or care appointments, including in vitro fertilization, and end-of-pregnancy care appointments. However, leave may not be taken under this policy for post-natal or postpartum appointments. Only Caregivers directly receiving prenatal health care services may take leave under this policy.

Leave under this policy must be taken in hourly increments. Prenatal leave will be paid at the regular rate of pay. Unused paid prenatal leave will not be paid out upon termination.

Caregivers requesting to use prenatal leave should provide as much advance notice as is reasonably practicable.

Caregivers will not be discriminated against or retaliated against for exercising any rights guaranteed under the law or under this policy.

### **New York City Unpaid Sick Leave**

Caregivers who work in New York City are entitled to an additional 32 hours of unpaid sick leave per year. The full 32 hours of this leave will be provided for Caregivers on their first day of work and on the first of January every year. This leave can be used immediately for any purpose outlined in the policy listed [here](#). This supplemental sick leave does not carry over to the next year.

### **Blood Donation Leave**

New York Caregivers working an average of twenty (20) or more hours per week are entitled to leave of up to a total of three (3) hours to donate blood in any twelve (12) month period. Caregivers should provide at least three (3) days' notice of their intent to donate blood and details on the time and place of the donation.

Retaliation against an Caregiver for requesting or obtaining leave under this policy is prohibited. Caregivers should feel free to contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com) if they have questions regarding applicable blood donation leave laws.

### **Bone Marrow Donation Leave**

New York Caregivers working an average of twenty (20) or more hours per week are entitled to unpaid leave of up to a total of 24 work hours to undergo a medical procedure to donate bone marrow or to determine if the Caregiver is a proper donor. The combined amount of leave may not exceed 24 work hours. The Company may require verification by a physician for the purpose and length of each leave requested. An Caregiver may elect to use PTO for this absence, where applicable. The Company will not retaliate against Caregivers who request or obtain such leave.

### **Jury Duty Leave**

Non-exempt Caregivers who are called to jury duty will be paid their regular wages for the first three (3) days of service on a jury, not to exceed \$40.00 per day. Exempt Caregivers will receive their full weekly salary (less any jury duty payments) for any week in which they perform any work and are also on jury duty. Caregivers are expected to report to work any day that they are excused from jury duty.

Upon your return to work, you must notify the Consumer and submit a signed Certificate of Jury Service (obtained from the court) indicating the number of days served. Please note that if the jury duty falls at a time when business needs require your presence, the court may allow you to choose a more convenient time to serve

### **Crime Victim/Witness Duty Leave**

Caregivers in New York are permitted unpaid leave to attend court proceedings, consult with the district attorney, or exercise rights provided by law in the following circumstances:

- the Caregiver is a victim of an offense, or the Caregiver's next of kin is a victim, or the Caregiver is a deceased victim's representative, a good Samaritan, or pursuing an application or enforcement of an order of protection under the criminal procedure law or family court act; or
- the Caregiver is subpoenaed to attend a criminal proceeding as a witness.

The Caregiver must notify the Consumer of his or her intent to appear as a witness prior to the day of attendance. The Caregiver must provide written certification of his or her service by the party who sought the Caregiver's attendance

### **Volunteer Emergency Responder Leave**

Eligible New York Caregivers will be allowed time off from work to perform duties as a volunteer firefighter or member of a volunteer ambulance service during a declared state of emergency, unless providing the leave would impose an undue hardship. To be eligible for leave under this policy, Caregivers must have previously provided written documentation from the volunteer fire department or ambulance service providing notice of the Caregiver's status as a volunteer firefighter or volunteer ambulance service member, and the Caregiver's volunteer duties must be related to the declared emergency.

Leave under this policy will be unpaid except that Caregivers may elect to use any other applicable paid leave to which they are entitled. The Company may request certification of the need for leave in the form of a notarized statement from the head of the fire department or ambulance service certifying the time period that the Caregiver's volunteer services were required.

### **Voting Leave**

Caregivers are encouraged to exercise their right to vote. Caregivers are expected to take advantage of polling hours prior to the beginning or following the end of their workday.

Caregivers who are unable to vote during nonworking hours will be granted up to two (2) hours of paid time off to vote during the regular workday. Individuals who need time off to vote during the regular workday must inform the Consumer at least two (2) days advance of the need for leave. Any Caregiver needing additional unpaid time off to vote should contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### **Military Spouse Leave**

Eligible Caregivers may take up to ten (10) days of unpaid leave during the period the Caregiver's spouse or registered domestic partner is home on leave from deployment during a period of military conflict. Eligibility requirements for this type of leave are as follows:

- The Caregiver must be regularly scheduled for work at least twenty (20) hours per week; and
- The Caregiver's spouse or domestic partner must (a) be a member of the U.S. Armed Forces, National Guard or military reserves who has been deployed during a period of military conflict (as defined in applicable state law), and (b) if a member of the U.S. Armed Forces, have been deployed to an area designated as a combat theater or combat zone by the President of the United States.

An Caregiver wishing to take this kind of leave must give the Consumer advance notice of the leave, within two (2) business days of receiving notice that the spouse or domestic partner will be on leave from deployment. The Caregiver must also submit written documentation of the dates that the spouse or domestic partner will be on leave from military deployment.

## **NYS Paid Family Leave**

Pursuant to New York Paid Family Leave (“NYPFLA”), Caregivers are eligible for family leave benefits if they: (i) regularly work 20 or more hours per week and have been employed for at least 26 consecutive workweeks preceding the first full day family leave is taken; or (ii) regularly work less than 20 hours per week and have been employed for at least 175 days preceding the first full day leave is taken.

Eligible Caregivers will be entitled to NYPFLA leave and benefits (i) to care for a family member with a serious health condition, (ii) to bond with a child after birth or placement for adoption or foster care within the first 12 months after the birth or placement, or (iii) because of any qualifying exigency, as interpreted by the Family and Medical Leave Act (FMLA), arising from the fact that an Caregiver’s spouse, domestic partner, child or parent is on active duty (or has been notified of an impending call or order to active duty) in the armed forces of the United States. The NYPFLA provides up to 12 weeks of leave and benefits within any 52 consecutive week period. Leave can be taken either all at once or intermittently but must be taken in full-day increments.

PFL benefits are financed solely through Caregiver contributions via payroll deductions. NYPFLA benefits are paid at 67% of your average weekly wage, capped at 67% of the New York State Average Weekly Wage, as calculated annually by the New York State Department of Labor, whichever is less.

EXAMPLE 1: An eligible Caregiver who earns \$1,000 a week would receive a benefit of \$670 a week (67% of \$1000).

EXAMPLE 2: An eligible Caregiver who earns \$2,000 a week would receive a benefit of \$971.61. This Caregiver’s benefit is capped at 67% of New York State’s Average Weekly Wage, currently \$1,688.19, which equals \$1,131.087.

Caregivers must provide at least 30 days advance notice to FreedomCare and the Consumer before leave is to begin if the qualifying reason for leave is foreseeable. When not foreseeable, Caregivers must provide notice as soon as practicable under the facts and circumstances. Failure to provide timely notice may result in leave being delayed or denied.

In order to request NYPFLA leave and benefits, Caregivers must contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com). The Caregiver Benefits team will complete the employer portion of the claim and send the PFL-1 form and additional certification forms and documentation directly to the Caregiver. Once the Caregiver has completed the forms, he or she should submit them to The Hartford at [GBClaims@thehartford.com](mailto:GBClaims@thehartford.com) to process the claim.

Employees may elect to charge all or part of their NYPFLA leave time to paid sick leave and receive full pay. However, Caregivers cannot receive more than your full wages while receiving NYPFLA benefits. If an Caregiver elects to use sick leave to supplement NYPFLA benefits, please contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com) to make necessary arrangements.

NYPFLA leave may only be taken in full day increments, unless otherwise provided by law. Short-term disability leave and NYPFLA leave may not be used at the same time. Caregivers will not be entitled to NYPFLA leave if their family leave combined with disability benefits previously received exceeds 26 weeks during the same 52 consecutive calendar weeks.

If an Caregiver is unable to work and qualifies for Workers' Compensation Benefits, they may not use NYPFLA benefits at the same time as Workers' Compensation Benefits. While utilizing NYPFLA Leave, Caregivers will not accrue other paid leave.

Leave taken under this policy is job protected. Thus, an Caregiver who returns from leave must generally be restored to the same or a comparable position. While on leave, Caregivers will continue to receive existing health insurance coverage, provided that they continue to pay their share of health insurance premiums. Caregivers may lose coverage retroactively to the date an unpaid premium was due (upon proper notice from our carrier) if they fail to pay their portion of the premium in a timely fashion.

In accordance with state law, NYPFLA benefits are funded through payroll deductions at a prescribed amount from each eligible Caregiver. Caregivers who are ineligible for paid family leave will be given the option of filing a waiver of benefits, exempting them from payroll deductions, as permitted by law.

### **New York Prenatal Leave Policy**

In addition to the sick time available under FreedomCare's Paid Sick Leave Policy, starting January 1, 2025, all New York employees may take up to 20 hours of paid prenatal leave during any 52-week period. The 52-week period begins to run on the date an employee first uses leave under this policy.

Employees can use prenatal leave for the health care services received by an employee during their pregnancy or related to such pregnancy, including physical examinations, medical procedures, monitoring and testing and discussions with a health care provider related to the pregnancy. Prenatal leave may be taken for fertility treatment or care appointments, including in vitro fertilization, and end-of-pregnancy care appointments. However, leave may not be taken under this policy for post-natal or postpartum appointments. Only employees directly receiving prenatal health care services may take leave under this policy.

Leave under this policy must be taken in hourly increments. Prenatal leave will be paid at the employee's regular rate of pay. Unused paid prenatal leave will not be paid out upon termination.

In the event of a foreseeable absence (e.g., a scheduled doctor's appointment), an employee must advise their supervisor or Human Resources in writing of the need for leave at least seven days in advance of taking such leave. In the event of an unforeseeable absence, an employee must provide oral or written notice, including email or text message, to their supervisor or Human Resources as soon as is practicable.

Employees will not be discriminated or retaliated against for exercising any rights guaranteed under the law or under this policy.

For more information on how to request this type of leave, please contact the Caregiver Benefits team at [CaregiverBenefits@freedomcare.com](mailto:CaregiverBenefits@freedomcare.com).

### **Reporting Sexual Harassment in New York**

#### **New York State Division of Human Rights (DHR)**

The Human Rights Law (HRL), codified as N.Y. Executive Law, art. 15, § 290 et seq., applies to employers in New York State with regard to sexual harassment, and protects Caregivers, paid or unpaid interns and

non-Caregivers regardless of immigration status. A complaint alleging violation of the Human Rights Law may be filed either with DHR or in New York State Supreme Court.

Complaints with DHR may be filed any time within one year of the harassment. If an individual did not file at DHR, they can sue directly in state court under the HRL, within three years of the alleged discrimination. An individual may not file with DHR if they have already filed a HRL complaint in state court.

Notifying FreedomCare does not extend your time to file with DHR or in court. The one year or three years is counted from date of the most recent incident of harassment.

You do not need an attorney to file a complaint with DHR, and there is no cost to file with DHR.

DHR will investigate your complaint and determine whether there is probable cause to believe that discrimination has occurred. Probable cause cases are forwarded to a public hearing before an administrative law judge. If discrimination is found after a hearing, DHR has the power to award relief, which varies but may include requiring your employer to take action to stop the harassment, or redress the damage caused, including paying monetary damages, attorney's fees and civil fines.

DHR's main office contact information is: NYS Division of Human Rights, One Fordham Plaza, Fourth Floor, Bronx, New York 10458, (718) 741-8400, [www.dhr.ny.gov](http://www.dhr.ny.gov)

Contact DHR at (888) 392-3644 or visit [dhr.ny.gov/complaint](http://dhr.ny.gov/complaint) for more information about filing a complaint. The website has a complaint form that can be downloaded, filled out, notarized and mailed to DHR. The website also contains contact information for DHR's regional offices across New York State.

### **Local Protections**

Many localities enforce laws protecting individuals from sexual harassment and discrimination. An individual should contact the county, city or town in which they live to find out if such a law exists. For example, Caregivers who work in New York City may file complaints of sexual harassment with the New York City Commission on Human Rights. Contact their main office at Law Enforcement Bureau of the NYC Commission on Human Rights, 40 Rector Street, 10th Floor, New York, New York; call 311 or (212) 306-7450; or visit [www.nyc.gov/html/cchr/html/home/home.shtml](http://www.nyc.gov/html/cchr/html/home/home.shtml)

## **Sexual Harassment Complaint Form**

### **FreedomCare**

New York State Labor Law requires all employers to adopt a sexual harassment prevention policy that includes a complaint form for Caregivers to report alleged incidents of sexual harassment.

If you believe that you have been subjected to sexual harassment, you are encouraged to complete this form and submit it to [person or office designated; contact information for designee or office; how the form can be submitted]. Once you submit this form, your employer must follow its sexual harassment prevention policy and investigate any claims.

If you are more comfortable reporting verbally or in another manner, your employer is still required to follow its sexual harassment prevention policy by investigating the claims as outlined at the end of this form. For additional resources, visit: [ny.gov/combating-sexual-harassment](http://ny.gov/combating-sexual-harassment)

### **YOUR INFORMATION**

Name:

Home Address:

Work Address:

Home Phone:

Work Phone:

Job Title:

Email: Select Preferred Communication Method:

### **COORDINATOR INFORMATION**

FreedomCare Coordinator's Name:

Title:

Work Phone:

Work Address:

YOUR INFORMATION

1. Your complaint of Sexual Harassment is made against:

Name:

Title:

Work Address:

Work Phone:

Relationship to you:  Supervisor  Subordinate  Co-Worker  Other

2. Please describe the conduct or incident(s) that is the basis of this complaint and your reasons for concluding that the conduct is sexual harassment. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.

3. Date(s) sexual harassment occurred:

Is the sexual harassment continuing?  Yes  No

4. Please list the name and contact information of any witnesses or individuals that may have information related to your complaint: The last two questions are optional, but may help facilitate the investigation.

5. Have you previously complained or provided information (verbal or written) about sexual harassment at FreedomCare?  Yes  No

If yes, when and to whom did you complain or provide information? Caregivers that file complaints with their employer might have the ability to get help or file claims with other entities including federal, state or local government agencies or in certain courts.

6. Have you filed a claim regarding this complaint with a federal, state or local government agency?  Yes  No

Have you instituted a legal suit or court action regarding this complaint?  Yes  No

Have you hired an attorney with respect to this complaint?  Yes  No

I request that FreedomCare investigate this complaint of sexual harassment in a timely and confidential manner as outlined below, and advise me of the results of the investigation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

