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| **Qualifying Condition/Reason for Leave** | **Separate Leave Options Available** | | | |
| **FMLA** | **OFLA** | **Paid Leave Oregon** | **Short Term Disability** |
| **To tend to the employee's own serious health condition** | Up to 12 weeks in a 52-week period. | N/A | Up to 12 weeks in a 52-week period. | Up to 13 weeks for each event as determined by insurance provider. |
| **To tend to the serious health condition of the employee's:** |  |  |  |  |
| **Spouse** | Up to 12 weeks in a 52-week period.  \*Husband or wife as defined under Oregon state law and a same sex spouse of an employee if they are married in a state that legally recognizes same sex marriage. | N/A | Up to 12 weeks in a 52-week period.  \*Spouse or domestic partner. | N/A |
| **Parent or in loco parentis** | Up to 12 weeks in a 52-week period.  \*Biological or adoptive mother or father, or an individual who stood in loco parentis when the employee was a child. | N/A | Up to 12 weeks in a 52-week period.  \*Biological, adoptive, stepparent, foster parent, or legal guardian, the parent of your spouse or domestic partner, or your parent’s spouse or domestic partner. | N/A |
| **Child** | Up to 12 weeks in a 52-week period.  \*17 years of age or younger, or incapable of self-care. Biological, adopted, foster or stepchild, a legal ward, or a child of an employee standing in loco parentis. | Up to 12 weeks in a 52-week period. | Up to 12 weeks in a 52-week period.  \*Biological, adopted, stepchild, or foster child, your spouse or domestic partner’s child, or the child’s spouse or domestic partner. | N/A |
| **Qualifying Condition/Reason for Leave** | **Separate Leave Options Available** | | | |
| **FMLA** | **OFLA** | **Paid Leave Oregon** | **Short Term Disability** |
| **Sibling or stepsibling, or sibling or stepsibling's spouse/domestic partner** | N/A | N/A | Up to 12 weeks in a 52-week period. | N/A |
| **Grandparent or grandparent's spouse/domestic partner** | N/A | N/A | Up to 12 weeks in a 52-week period. | N/A |
| **Any individual related by blood or affinity whose close association with a covered individual is the equivalent of a family relationship** | N/A | N/A | Up to 12 weeks in a 52-week period. | N/A |
| **Parental Leave** | Up to 12 weeks in a 52-week period. | N/A | Up to 12 weeks in a 52-week period. Plus, an additional 2 weeks for pregnancy related conditions. | N/A |
| **Leave to Care for a Child (Non-serious. 17 years of age or younger, or incapable of self-care) (Sick Child Leave)** | N/A | Up to 12 weeks in a 52-week period. Includes all illnesses, injuries, or conditions that require home care. Includes absence to care for a child whose school or childcare provider has been closed in conjunction with a statewide public health emergency declared by a public health official. | N/A | N/A |
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| **Qualifying Condition/Reason for Leave** | **Separate Leave Options Available** | | | |
| **FMLA** | **OFLA** | **Paid Leave Oregon** | **Short Term Disability** |
| **Pregnancy Related Disability** | Up to 12 weeks in a 52-week period. | Up to 12 additional weeks in a 52-week period. | N/A | Up to 13 weeks for each event as determined by insurance provider. |
| **Military Family Leave** | N/A | Up to 14 working days per deployment related to the deployment of an employee’s spouse or same-gender domestic partner. The 14 days is included in the 12-week  OFLA entitlement per 52-week period. | N/A | N/A |
| **Bereavement Leave** | N/A | Up to two weeks per family member, for a maximum of four weeks total, in a 52-week period (to be taken within 60 days of notification of the death) to deal with the death of a family member by: attending the funeral or alternative to a funeral, making arrangements necessitated by the death, or grieving. | N/A | N/A |
| **Qualifying Condition/Reason for Leave** | **Separate Leave Options Available** | | | |
| **FMLA** | **OFLA** | **Paid Leave Oregon** | **Short Term Disability** |
| **Qualifying Exigency Leave** | Up to 12 weeks in a 52-week period to attend to qualifying exigencies when the employee’s spouse, parent, son or daughter is on active duty or called into active duty in support of a contingency of operation for the military. | N/A | N/A | N/A |
| **Military Caregiver Leave** | Up to 26 weeks in a 52-week period to care for the employee’s spouse, parent, son or daughter of any age, or next of kin who is a covered service member with a serious injury or illness incurred in the line of duty on active duty, or a veteran discharged under other than dishonorable conditions within five years of receiving medical treatment, recuperation or therapy for a serious injury or illness. | N/A | N/A | N/A |
| **Foster or Adoption** | Up to 12 weeks in a 52-week period (included in Parental Leave). | Up to two additional weeks to effectuate the legal process required for placement of a foster child or adoption of a child between July 1, 2024, and December 31, 2024. | N/A | N/A |
| **Qualifying Condition/Reason for Leave** | **Separate Leave Options Available** | | | |
| **FMLA** | **OFLA** | **Paid Leave Oregon** | **Short Term Disability** |
| **Safe Leave** | N/A – unless it is for medical appointments. | N/A – unless the reason is a qualifying condition. | Up to 12 weeks in a 52-week period to care for yourself or your child if you or your child are survivors of sexual assault, domestic violence, harassment, bias crimes, or stalking. | N/A |
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