



# County of Riverside

## Human Resources Department

•Family and Medical Leave Act (FMLA) •California Family Rights Act (CFRA)  
•California Pregnancy Disability Act (PDL)

### USE OF ACCRUALS FOR PAID FAMILY AND MEDICAL LEAVE

Qualifying Reason	Type of Paid Time	STATUTE		
		Family and Medical Leave Act (Max: 12 Weeks) <b>FMLA</b> (Federal)	California Family Rights Act (Max: 12 Weeks) <b>CFRA</b> (CA State)	California Pregnancy Disability Act (Max: 4 Months) <b>PDL</b> (CA State)
<b>Employee's Serious Health Condition (SHC)</b> Not pregnancy-related	Accrued Sick Leave	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Vacation	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Holidays	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Annual Leave	NOT REQUIRED <sup>6</sup>	NOT REQUIRED <sup>6</sup>	N/A
	Accrued Comp. Time	REQUIRED <sup>2</sup>	REQUIRED <sup>2</sup>	N/A
<b>Employee's SHC</b> Receiving disability benefits such as Workers' Comp., STD, SDI or LTD  <b>Note: While disability application is pending, use of applicable leave accruals is required.</b>	Accrued Sick Leave	NOT REQUIRED <sup>5</sup>	NOT REQUIRED <sup>5</sup>	N/A
	Accrued Vacation	NOT REQUIRED <sup>5</sup>	NOT REQUIRED <sup>5</sup>	N/A
	Accrued Holidays	NOT REQUIRED <sup>5</sup>	NOT REQUIRED <sup>5</sup>	N/A
	Accrued Annual Leave	NOT REQUIRED <sup>6</sup>	NOT REQUIRED <sup>6</sup>	N/A
	Accrued Comp. Time	NOT REQUIRED <sup>5</sup>	NOT REQUIRED <sup>5</sup>	N/A
<b>Employee's SHC</b> Pregnancy or childbirth-related disabling condition (includes prenatal care and severe morning sickness)  <b>Note: If receiving disability benefits, refer to section above.</b>	Accrued Sick Leave	REQUIRED <sup>1</sup>	N/A	REQUIRED <sup>1</sup>
	Accrued Vacation	Follow PDL	N/A	NOT REQUIRED <sup>3</sup>
	Accrued Holidays	Follow PDL	N/A	NOT REQUIRED <sup>3</sup>
	Accrued Annual Leave	Follow PDL	N/A	NOT REQUIRED <sup>3</sup>
	Accrued Comp. Time	Follow PDL	N/A	NOT REQUIRED <sup>3</sup>
<b>Family Member's SHC</b> Spouse, registered domestic partner, child, child of domestic partner, parent sibling, grandparent, or grandchild.  <b>Note: If receiving Paid Family Leave benefits, follow the row above titled, "Employee's Serious Health Condition - Receiving disability benefits such as Workers' Comp., STD, SDI or LTD"</b>	Accrued Sick Leave	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Vacation	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Holidays	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Annual Leave	NOT REQUIRED <sup>6</sup>	NOT REQUIRED <sup>6</sup>	N/A
	Accrued Comp. Time	REQUIRED <sup>2</sup>	REQUIRED <sup>2</sup>	N/A
<b>Bonding with Child</b> Bonding for either parent with a newborn child, a newly adopted child or newly placed foster child.  <b>Note: If receiving Paid Family Leave benefits, follow the row above titled, "Employee's Serious Health Condition - Receiving disability benefits such as Workers' Comp., STD, SDI or LTD"</b>	Accrued Sick Leave	Not Allowed (see MOU) <sup>4</sup>	Not Allowed (see MOU) <sup>4</sup>	N/A
	Accrued Vacation	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Holidays	REQUIRED <sup>1</sup>	REQUIRED <sup>1</sup>	N/A
	Accrued Annual Leave	NOT REQUIRED <sup>6</sup>	NOT REQUIRED <sup>6</sup>	N/A
	Accrued Comp. Time	REQUIRED <sup>2</sup>	REQUIRED <sup>2</sup>	N/A
<b>Military Caregiver Leave</b> Spouse, son, daughter, parent, next of kin of covered service member (in Regular Armed Forces, National Guard or Reserves) with serious illness/injury	Accrued Sick Leave	REQUIRED <sup>1</sup>	N/A	N/A
	Accrued Vacation	REQUIRED <sup>1</sup>	N/A	N/A
	Accrued Holidays	REQUIRED <sup>1</sup>	N/A	N/A
	Accrued Annual Leave	NOT REQUIRED <sup>6</sup>	N/A	N/A
	Accrued Comp. Time	REQUIRED <sup>2</sup>	N/A	N/A
<b>Qualifying Exigency Leave</b> Spouse, registered domestic partner, son, daughter, or parent of covered military member (in Regular Armed Forces, National Guard or Reserves)	Accrued Sick Leave	Not Allowed (see MOU) <sup>4</sup>	Not Allowed (see MOU) <sup>4</sup>	N/A
	Accrued Vacation	REQUIRED <sup>1</sup>	REQUIRED <sup>7</sup>	N/A
	Accrued Holidays	REQUIRED <sup>1</sup>	REQUIRED <sup>7</sup>	N/A
	Accrued Annual Leave	NOT REQUIRED <sup>6</sup>	NOT REQUIRED <sup>6</sup>	N/A
	Accrued Comp. Time	REQUIRED <sup>2</sup>	REQUIRED <sup>7</sup>	N/A

## Time Reporting Codes for FMLA/CFRA and PDL Leaves:

TRC	Description
ANUC	Annual Lv. Used CFRA
ANUF	Annual Lv. Used FMLA
ANUFC	Annual Lv. Used FMLA/CFRA
ANUFP	Annual Lv. Used FMLA/PDL
ANUMF	Annual Lv. Used FMLA/Military Caregiver
ANUP	Annual Lv. Used PDL
AWOPC	AWOP CFRA
AWOPP	AWOP PDL
AWPF	AWOP FMLA
AWPFC	AWOP FMLA/CFRA
AWPFP	AWOP FMLA/PDL
AWPMF	AWOP FMLA/Military Caregiver
CLUC	Comp Lv. Used CFRA
CLUF	Comp Lv. Used FMLA
CLUFC	Comp Lv. Used FMLA/CFRA
CLUFM	Comp Lv. Used FMLA/Military Caregiver
CLUFP	Comp Lv. Used FMLA/PDL
CLUP	Comp Lv. Used PDL
HLUC	Holiday Used CFRA
HLUF	Holiday Used FMLA
HLUFC	Holiday Used FMLA/CFRA
HLUFM	Holiday Used FMLA/Military Caregiver
HLUFP	Holiday Used FMLA/PDL
HLUP	Holiday Used PDL
HOLC	Holiday CFRA
HOLF	Holiday FMLA
HOLFC	Holiday FMLA/CFRA
HOLFM	Holiday FMLA/Military Caregiver
HOLFP	Holiday FMLA/PDL
HOLP	Holiday PDL
IIAC	Ind. Injury CFRA
IIAF	Ind. Injury FMLA
IIAFC	Ind. Injury FMLA/CFRA

TRC	Description
IIPC	Ind. Injury Partial Day CFRA
IIPF	Ind. Injury Partial Day FMLA
IIPFC	Ind. Injury Partial Day FMLA/CFRA
MCUC	Mgmt. Comp Used CFRA
MCUF	Mgmt. Comp Leave FMLA
MCUFC	Mgmt. Comp Used FMLA/CFRA
MCUFM	Mgmt. Comp Used FMLA/Military Caregiver
MCUFP	Mgmt. Comp Used FMLA/PDL
MCUP	Mgmt. Comp Used PDL
SCKC	Sick Leave Used CFRA
SCKF	Sick Leave Used FMLA
SCKFC	Sick Leave Used FMLA/CFRA
SCKFM	Sick Leave Used FMLA/Military Caregiver
SCKFP	Sick Leave Used FMLA/PDL
SCKP	Sick Leave Used PDL
VACC	Vacation Lv. Used CFRA
VACF	Vacation Lv. Used FMLA
VACFC	Vacation Lv. Used FMLA/CFRA
VACFM	Vacation Lv. Used FMLA/Military Caregiver
VACFP	Vacation Lv. Used FMLA/PDL
VACP	Vacation Lv. Used PDL
SVUC	Special Vacation Used CFRA
SVUF	Special Vacation Used FMLA
SVUFC	Special Vacation Used FMLA/CFRA
SVUFM	Special Vacation Used FMLA/Military Caregiver
SVUFP	Special Vacation Used FMLA/PDL
SVUP	Special Vacation Used PDL
XVUC	Extra Vac Used CFRA
XVUF	Extra Vac Used FMLA
XVUFC	Extra Vac Used FMLA/CFRA
XVUFM	Extra Vac Used FMLA/Military Caregiver
XVUFP	Extra Vac Used FMLA/PDL
XVUP	Extra Vac Used PDL

1 (FMLA 29 CFR and PDL, 2 C.C.R. § 11092 Statutes require, or allow an employer to require, this type of paid accrued time to be used in lieu of an unpaid leave.

2 (FMLA 29 CFR § 825.207(f) Effective January 16, 2009, statutes allow an employer to require the use of accrued compensatory time.

3 (PDL) The employee, at her option, may request (in writing) this type of paid accrued time be used in lieu of an unpaid leave

4 MOU Leave Provisions govern use of sick leave.

5 FMLA 29 CFR § 825.207(e) Employer and employee may mutually agree to supplement WC and/or disability benefits (STD or LTD) with any other form of paid time off benefits (e.g. vacation, sick leave, annual leave), as long as permitted by state law.

6 Executive Office Memo, dated 3/14/06, indicates that the use of Annual Leave is optional.

7 Under CA. Government Code 12945.2(e) an employer can require this type of paid accrued time to be used in lieu of unpaid leave.

**Time Reporting Codes for  
FMLA/CFRA, FMLA or CFRA if Negatively Accruing Sick or Annual Leave:**

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TRC	Description
S19FC	Sick COVID-19 FMLA/CFRA
SK19F	Sick COVID-19 FMLA
SK19C	Sick COVID-10 CFRA
A19FC	Annual LV COVID-19 FMLA/CFRA
AN19F	Annual LV COVID-19 FMLA
AN19C	Annual LV COVID-19 CFRA

**Time Reporting Codes for  
FMLA/CFRA/PDL or Military if in Accrediting Council Graduate Medical Education program:**

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GMEC	ACGME Paid CFRA
GMEFC	ACGME Paid FMLA/CFRA
GMEFM	ACGME Paid Family/Military
GMEFP	ACGME Paid FMLA/PDL
GMEP	ACGME Paid PDL
GMEF	ACGME Paid FMLA