90 Days for Childbearing Leave vs. 90 Days full pay/90 days base pay for Medical Leave

The Dean’s Office at the School of Medicine is often asked about differences between Compensation Plan leave types for childbearing vs. personal medical leave. Please see below to help differentiate the usage.

Compensation Plan Appendix A, Section VII

Childbearing leave is provided for a Plan Participant who holds a 12-month appointment and bears a child or children, regardless of academic series or months of service. The Plan Participant will be granted 90 days of paid leave at full pay (X, X’+Y), (excluding clinical incentives and bonuses) for Childbearing leave. This benefit is intended to substitute other benefits with partial pay, and therefore may not be taken in conjunction with PFCB or short-term disability. In addition to this Compensation Plan benefit, faculty may use accrued vacation, and any FMLA/CFRA unpaid leave to cover any combination of pregnancy disability and baby bonding leave. This leave is not available to fathers or adoptive/foster parents at this time.

Compensation Plan Appendix A, Section IX

Faculty in the Compensation Plan may use up to 90 days of full pay (X, X’+ Y) and 90 days of partial pay (total base, X + X’ only) for personal illness, unrelated to childbearing (except in the case of rare, long-term pregnancy disability complications). Using this benefit requires medical certification placing the faculty member on an ongoing or intermittent leave. This benefit is considered a bank of leave time and available once every ten-year period, while in a compensation-plan-eligible title. Faculty may use this benefit consecutively with Disability benefits (which afford partial pay), accrued vacation time, and any FMLA/CFRA unpaid leave to cover any long-term personal illness.