



CCI363.01  
EFFECTIVE DATE: 5 December 2016

---

**By Order of the Secretary of Health and Human Services:**

**Sylvia M. Burwell**

---

SUBJECT: Sick Leave

1. PURPOSE: This Instruction prescribes the policy and procedures for granting sick leave to the officers in the Commissioned Corps of the U.S. Public Health Service (Corps). This includes sick leave taken for pregnancy and recovery after delivery. It also states responsibilities for reporting serious illness or injury and for reporting medical care from non-Government sources.
2. APPLICABILITY: This Instruction applies to all Corps officers serving on extended active duty.
3. AUTHORITY:
  - 3-1. [42 USC 210-1](#) "Annual and Sick Leave"
  - 3-2. [42 USC 216](#) "Regulations"
  - 3-3. [CC49.1.1](#), "Annual, Sick, and Station Leave", dated 25 October 1979
  - 3-4. Joint Federal Travel Regulations (JFTR), as amended.
4. PROPONENT: The proponent of this Instruction is the Assistant Secretary for Health. The responsibility for assuring the day-to-day management of the Corps is the Surgeon General (SG).
5. SUMMARY OF REVISIONS AND UPDATES: This is the second issuance of this Instruction within the electronic Commissioned Corps Issuance System (CCIS) and replaces Commissioned Corps Instruction (CCI) CCI363.01, "Sick Leave," dated 16 February 2012. Substantive changes include:
  - 5-1. This instruction, although signed by the Secretary remains a policy issuance and not a directive or federal regulation. Further revisions may be made by ASH in accordance with section 4 of this issuance.
  - 5-2. Removes requirement of completing a paper form PHS-1345 "Request and Authority for Leave of Absence."
  - 5-3. Policy no longer differentiates between regular and Caesarean section delivery.

- 5-4. Authorizes 84 consecutive days of maternity leave beginning the day following the day of hospital discharge, not the day of delivery.

## 6. POLICY:

- 6-1. Granting Sick Leave. Sick leave may be granted as needed, but only when the officer is in need of medical, dental or mental health services (medical services) or is incapacitated for the performance of duties by sickness, injury, or for pregnancy and postpartum recovery.
- a. In some cases, the SG or his/her designee, may be the leave granting authority for sick leave.
  - b. There is no accrual of sick leave under the Corps' leave system; however, sick leave is not without limits.
- 6-2. Documentation of illness. The leave-granting authority may require a statement from the officer's health care provider that certifies the need for medical services or period of incapacitation. For an absence in excess of 3 workdays, or for a lesser period when determined necessary, the leave-granting authority, Medical Affairs Branch (MAB), or the SG or his/her designee, may also require a medical provider's certification of illness or period of incapacitation.
- a. The validity of such certification is subject to review, either by requiring concurrent second opinion (also known as a MAB command-directed evaluation), or by review in MAB of the certifying provider's records of care.
  - b. In the usual case, sick leave that has been certified prospectively by a health care provider cannot be denied after the absence has occurred, unless the review of records indicates that the certification was clearly unfounded and that the officer misrepresented the sick leave status. Thus, a concurrent second opinion by a provider of equal or higher professional qualification (preferably in the uniformed services) may be the most effective means of preventing sick leave abuse.
  - c. A medical report and copies of pertinent health records are required at the end of each 30 days of continuous absence except for those officers on maternity leave. Medical documentation may include, but not limited to:
    - (1) Statements by a physician or other qualified provider of the officer's current and anticipated functional limitations;
    - (2) Projected dates of return to limited and full duty;
    - (3) Projected needs for absence from duty to receive medical services;
    - (4) Verification of attendance at medical appointments; and
    - (5) Any other relevant information deemed necessary by the SG or his/her designee.
  - d. The supervisor or leave-granting authority shall not require medical confidential or protected health information such as diagnoses, medical history, examination, test results, and/or treatment.
  - e. When the leave-granting authority or the SG or his/her designee requests a medical investigation, MAB is responsible for the review of medical records. MAB

will provide recommendations to the leave-granting authority or the SG or his/her designee.

- 6-3. Maternity Leave. Maternity leave is a period of approved sick leave related to pregnancy and postpartum recovery after delivery.
- a. Maternity leave is granted for 84 consecutive days beginning the day following the day of hospital discharge, not the day of delivery.
  - b. Any sick leave beyond those limits cited in 6-3a, must be justified by the officer's actual incapacity to return to full or limited duty. If it is anticipated that the officer will require sick leave beyond the limits of maternity leave as stated in 6-3a, then approval of the sick leave should be obtained prior to the end of the period of maternity leave.
  - c. A request for sick leave beyond the period of maternity leave shall require a second opinion.
  - d. Child care needs shall not be considered a reason for extension of maternity leave. Leave for this purpose, if granted, is chargeable to annual leave (see [CC29.1.2](#), "Annual Leave").
  - e. The officer should notify her supervisor as soon as possible after she knows that she is pregnant if necessary staffing adjustments are required for the health and safety of the officer and the fetus.
  - f. The officer shall submit a leave request, according to the operational guidance for requesting leave, as provided by the Director, Division of Commissioned Corps Personnel and Readiness (DCCPR) once the officer knows:
    - (1) The approximate date which she will be requesting her maternity leave to begin;
    - (2) The estimated date of her delivery; and
    - (3) The date of her anticipated return to duty.
  - g. Upon return to duty from maternity leave, the officer shall submit a physician's statement indicating her fitness to resume her duties, and shall complete all requirements for finalizing leave in accordance with guidance provided by the Director, DCCPR.
- 6-4. Referral to Medical Review Board (MRB). If an officer is absent from duty because of illness, injury or postpartum convalescence for a period of more than 90 consecutive days, or for an aggregate of more than 120 days in any consecutive 12-month period, the personnel and other pertinent files of such officer will be referred to MAB for a mandatory fitness-for-duty evaluation.
- 6-5. An officer may be denied sick leave for but not limited to the following reasons:
- a. Absence from duty because of death or illness of a family member can be requested as and is chargeable to annual leave, unless the absence was for less than a full workday and then may be granted as station leave, (see [CC29.1.1](#), "Leave of Absence; General").
  - b. When an officer has requested voluntary separation from the Corps and

becomes ill immediately prior to the date of separation, sick leave may be granted and the separation action may be postponed if the officer, the Operating Division (OPDIV), Staff Division (STAFFDIV) or non-HHS organization, and the SG or his/her designee, all agree to such postponement.

- c. Involuntary separations and previously approved voluntary separations will not be postponed to permit an officer to remain in active duty status for postpartum maternity leave.
- d. If the officer is being separated under involuntary conditions, the SG or his/her designee, may authorize postponement of separation until questions are resolved and/or a determination regarding the officer's fitness can be made.
- e. Previously approved sick leave may be cancelled, revoked or denied by the SG or his/her designee, or the leave-granting authority, should an investigation and review of medical records not support the sick leave request. In such instances the SG or his/her designee, or the leave-granting authority, may:
  - (1) Allow the officer to take annual leave to cover the period of unexplained sick leave; or
  - (2) Replace the unexplained sick leave with Absent Without Leave (AWOL) status.

6-6. Corps officers are not eligible for benefits under the following acts:

- a. Family and Medical Leave Act of 1993, [29 USC 2611](#);
- b. Americans with Disabilities Act of 1990, as amended; and
- c. The Rehabilitation Act of 1973, as amended.

6-7. Personnel records are subject to the Privacy Act of 1974 and [42 USC 290dd-2](#), "Confidentiality of Records", as applicable.

6-8. Medical records are subject to [PL 104-191](#), "Health Insurance Portability and Accountability Act (HIPAA)", as applicable.

## 7. RESPONSIBILITIES:

7-1. Officer. The officer shall be responsible for:

- a. Notifying his/her supervisor as soon as practicable when he/she becomes incapacitated for duty or is in need of medical services.
  - (1) The officer is responsible for keeping his/her supervisor informed of his/her whereabouts at all times during the period of sick leave.
  - (2) Informing the supervisor of the most convenient means of making contact at the times or intervals, which the supervisor designates, and requesting and obtaining in advance (except in emergencies), the supervisor's permission to be away from the local areas of the duty station and/or the usual residence.
  - (3) If the officer does not make direct contact with his/her supervisor, the

officer has no guarantee that his/her requested sick leave will be granted.

Note: Unjustifiable inaccessibility while on sick leave may result in retroactive conversion of some or all of the sick leave to AWOL status.

- b. Requesting sick leave, in advance, when sick leave is required for prearranged medical services including cases of pregnancy and recovery after delivery;
- c. Providing the supervisor or leave-granting authority documentation from his/her medical provider which either the supervisor or leave-granting authority requests to make an administrative determination of the necessity for sick leave absence and to plan for programmatic needs.
- d. Cooperating fully with a request for command-directed evaluation.
- e. Reporting to the duty station and performing duties within functional limitations specified by the "accepted" provider opinion, if requested by the supervisor (see Subsection 7-1(d)(3)).
- f. Obtaining from the Chief of MAB, or his/her designee, in advance, authorization from the SG or his/her designee for financial support for travel incident to health care outside the local area and for non-emergent care from all providers other than MTFs. If care received from one of these providers is emergent, not allowing for preauthorization or access to an MTF, MAB must be notified within 72 hours, or as soon as possible, after the care was received.
- g. Releasing appropriate health care reports or records and obtaining any health care reports or records required by MAB, necessary to the discharge of MAB's official duties and responsibilities.

7-2. Supervisor. The officer's supervisor will be responsible for:

- a. Notifying the leave maintenance clerk when an officer reports that he/she is unable to report to duty for medical reasons.
- b. Notifying MAB:
  - 1. Immediately by telephone, fax, or electronic mail when an officer fails to report to duty because of serious illness or injury;
  - 2. If an officer requires the use of sick leave because of a medical condition which may have existed prior to the officer's call to active duty;
  - 3. When an officer has been, or is expected to be on sick leave for 30 consecutive days;
  - 4. When an officer is hospitalized in an MTF, private or civilian hospital; and
  - 5. If an officer's sick leave usage is suggestive of leave abuse or a serious health problem so that a determination can be made regarding the officer's health status.

7-3. The SG, or his/her designee, is responsible for ensuring that appropriate health care reports are received on all officers using excessive sick leave or on prolonged sick leave and referring such cases to MAB, when appropriate, for a determination on the officer's

fitness for continued active duty.

- 7-4. MAB is responsible for maintaining in each officer's central medical file reports of sick leave and reports of medical evaluations and treatments.
  - 7-5. The leave-granting authority is responsible for ensuring that the reasons for granting sick leave to an officer and sick leave reports are submitted in accordance with this Instruction. When there is adequate reason to suspect that an officer's provider may not be supplying full or accurate information regarding the officer's capacity to work in either a full duty or limited duty status, the leave-granting authority may direct the officer to MAB for a MAB command-directed evaluation of his/her medical condition.
  - 7-6. In some cases, the SG or his/her designee may be the leave granting authority for sick leave requests (e.g., temporary caregiver status of an officer, travel in conjunction with TRICARE and the Joint Travel Regulations (JTR) accompanied events or actions).
8. **PROCEDURES:** The officer shall submit a leave request, according to the operational guidance for requesting leave, as provided by the Director, DCCPR. Sick leave must be requested by the officer and approved by the leave-granting authority for each period of sick leave of 1 day or more and may, at the discretion of the leave-granting authority, be required for absences of less than a full day. A continuous period of leave, most of which is sick leave, punctuated by station leave used for medical purposes, may be counted as a continuous period of sick leave.
  9. **HISTORY:** This is the second issuance of this Instruction within the electronic Commissioned Corps Issuance System (CCIS) and replaces Commissioned Corps Instruction (CCI) CCI363.01, "Sick Leave," dated 16 February 2012.
    - 9-1. Commissioned Corps Instruction (CCI) CCI363.01, "Sick Leave," dated 16 February 2012.
    - 9-2. Commissioned Corps Personnel Manual (CCPM) CC29.1.4, "Sick Leave," dated 25 September 1997.