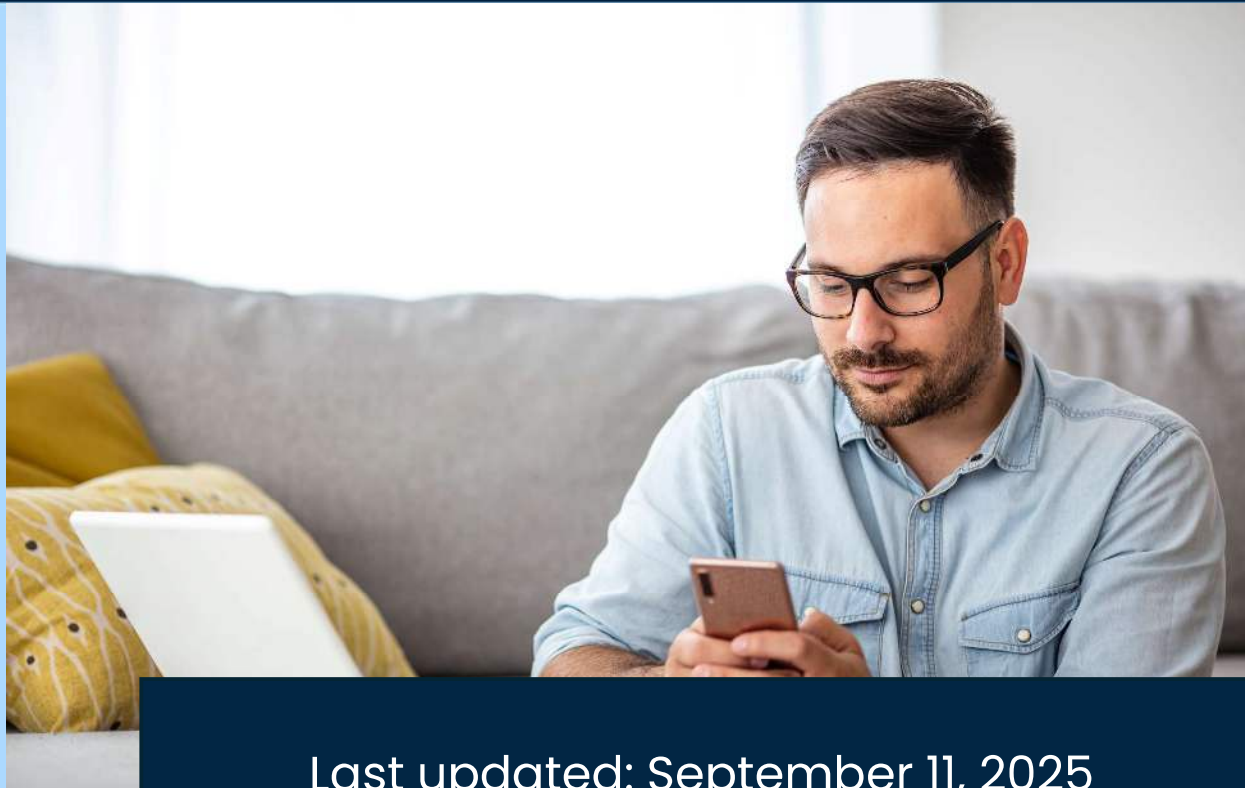


QRG

Quick Reference Guide (1-15 Steps)

How to Report Intermittent FMLA Time Off for an Existing Claim

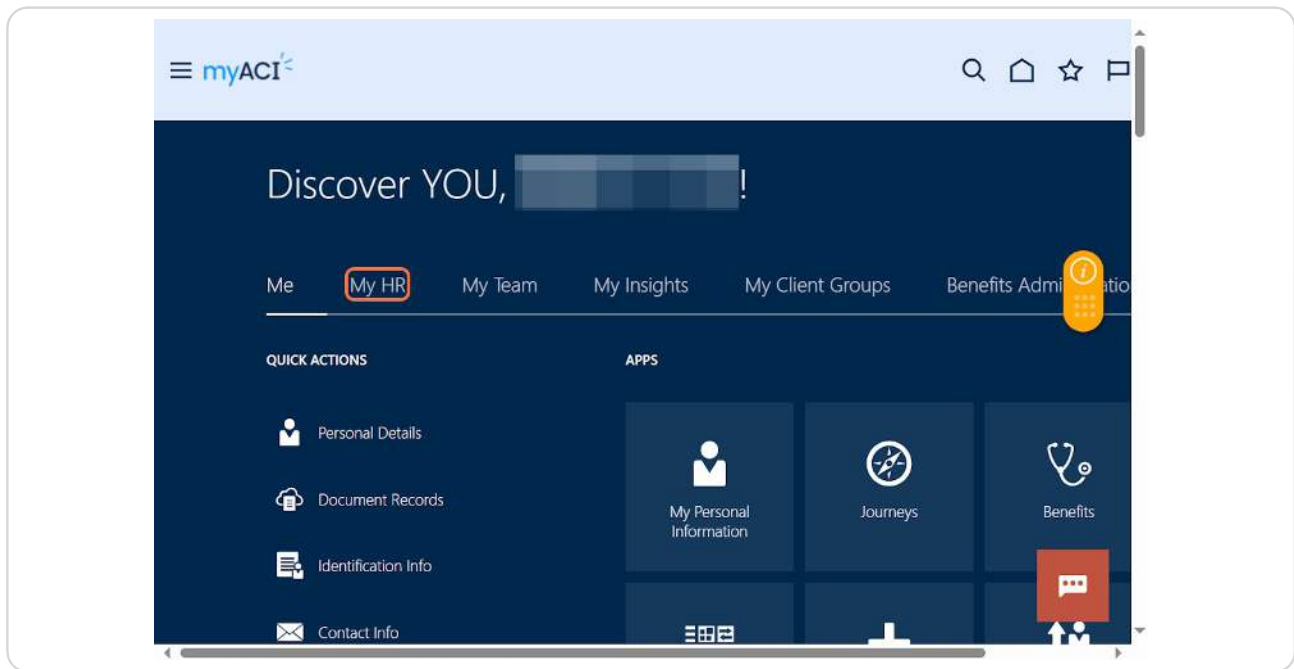
This QRG is for managers, HR representatives and associates who need to report intermittent FMLA usage either for themselves or on behalf of an associate.



Last updated: September 11, 2025

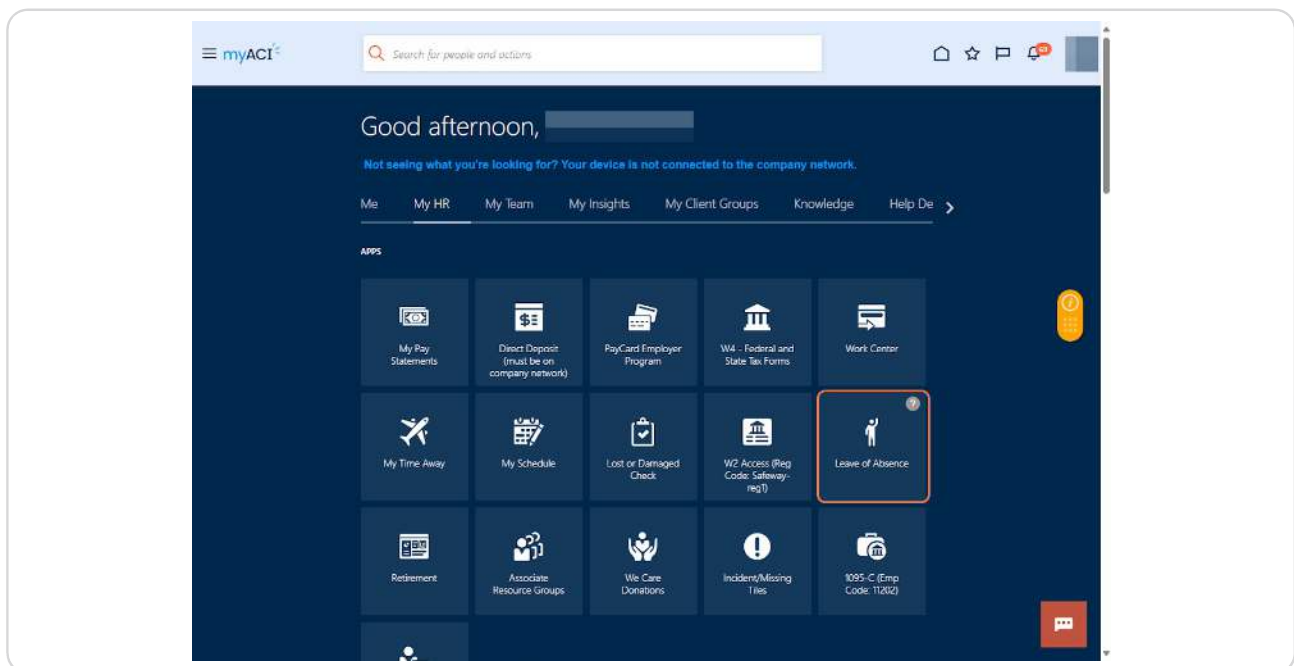
STEP 1

Sign in to myACI then click on My HR.



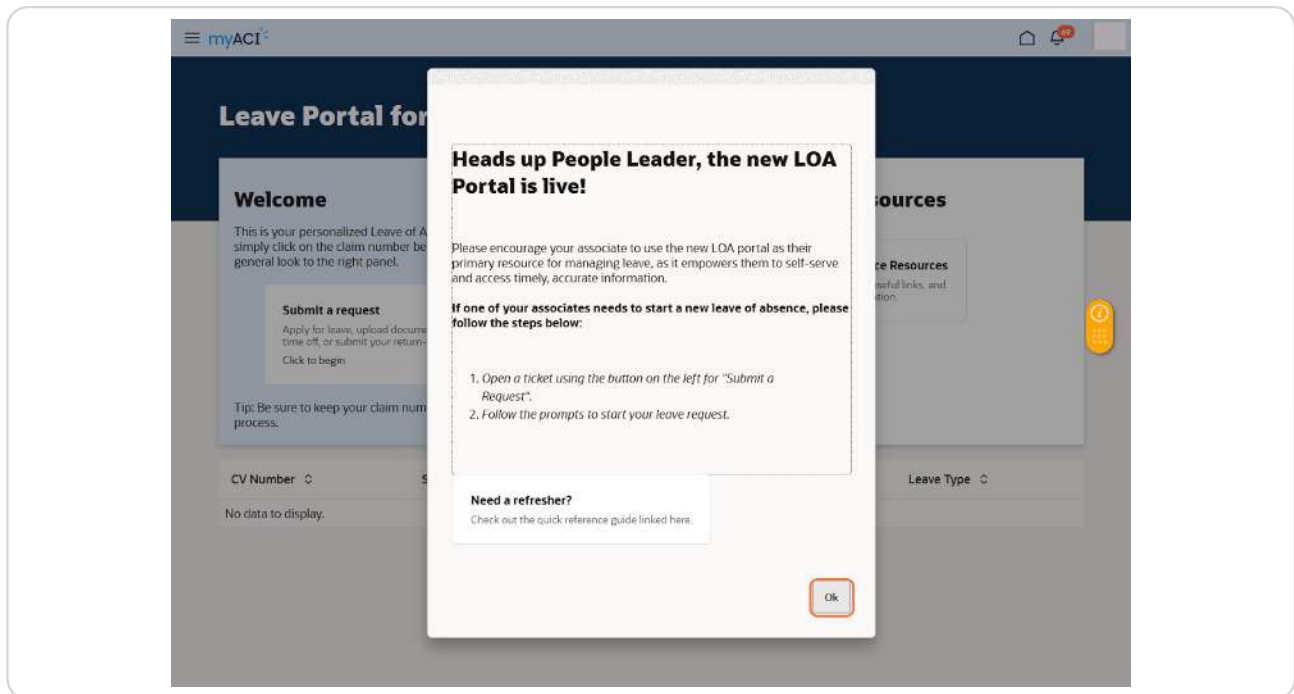
STEP 2

Click on Leave of Absence



STEP 3

If you are an HR/People Manager Reporting Intermittent Time on behalf of an Associate, click OK to continue. If you are Reporting Intermittent Time for yourself, skip to step 4.



STEP 4

Click on "Click to begin" to navigate to submit a request.

Associates: Be sure to copy your CV Number for the corresponding Intermittent claim you are Reporting Intermittent Time for, as you will need it when submitting your ticket.

HR/People Manager: Be sure to have the CV Number for the associates claim you are Reporting Intermittent Time for, as you will need it when submitting your ticket.

Leave Portal for Kristen Smith

Welcome

This is your personalized Leave of Absence Portal. To view details about your claim, simply click on the claim number below. For more information about leave of absence in general look to the right panel.

Submit a request
Apply for leave, upload documents, report intermittent time off, or submit your return-to-work date.
[Click to begin](#)

Tip: Be sure to keep your claim number handy as you'll need it throughout your leave process.

Links and Resources

Leave of Absence Resources
Leave definitions, useful links, and other leave information.

| CV Number | Status | Start Date | End Date | Leave Type |
|--------------|----------|------------|------------|--------------|
| AC-25-368994 | Pending | 2025-06-11 | 2025-06-11 | Continuous |
| AC-25-368993 | Approved | 2025-07-08 | 2026-07-07 | Intermittent |

STEP 5

Enter the reason for your intermittent time off.

Example: Joe Black | 599843 | Intermittent Time

The screenshot shows a web application interface for submitting a Leave of Absence Request. At the top, there is a header bar with the 'myACI' logo and a home icon. Below the header, a modal window titled 'Leave of Absence Request' is displayed. Inside this modal, there is a 'Back' button and a red text message: 'This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team.' Below this, a blue banner encourages users to explore new leave of absence resources on 'myACI-benefits.com'. The main form area has a light blue background. It starts with a 'Subject' field containing the text 'Joe Black | 599843 | Intermittent Time'. Below this is a note: 'An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay.' This is followed by an 'Affected Party' dropdown menu. Then, there is a 'Nature of request' dropdown menu, which is marked as 'Required'. Finally, there is a large 'Description' text area for the user to enter details about the request.

myACI

Leave of Absence Request

← Back This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team.

Explore a range of new leave of absence resources on [myACI-benefits.com](#).

Subject
Joe Black | 599843 | Intermittent Time

An Affected Party refers to the associate impacted by this ticket. Please ensure the correct associate is designated as the affected party, as this entry could affect pay.

Affected Party

Nature of request

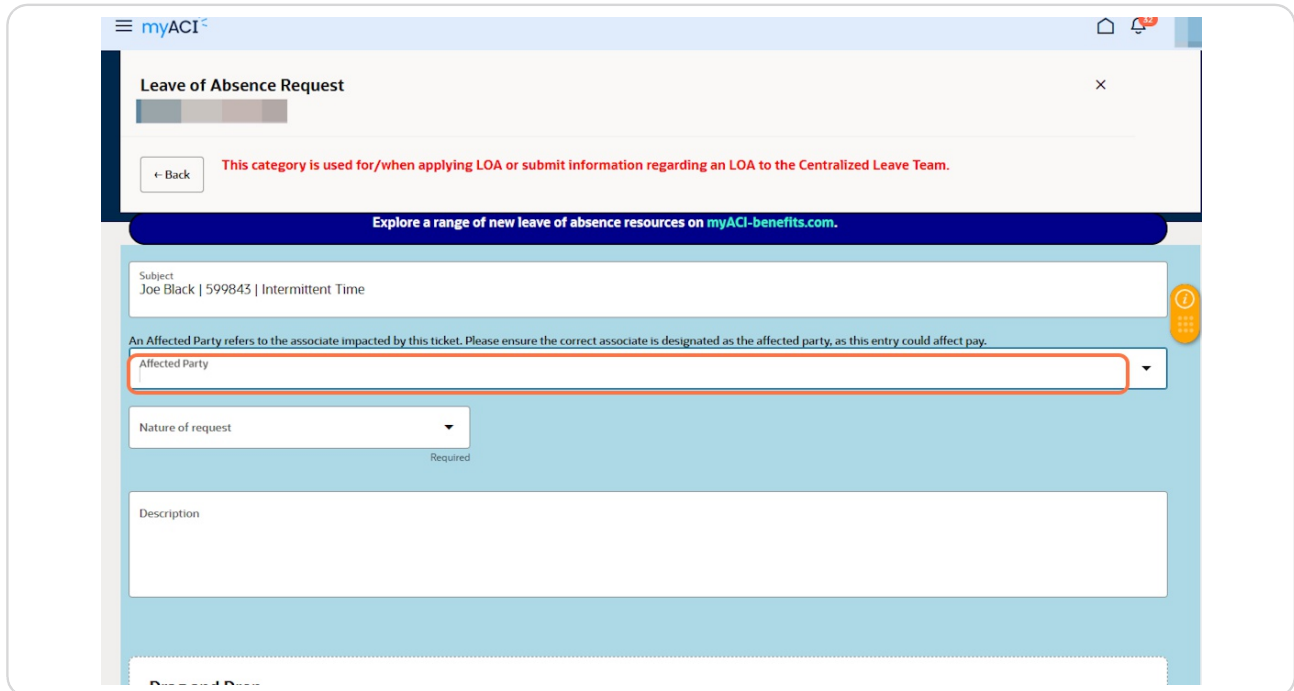
Required

Description

STEP 6

In the Affected Party, enter the Employee ID (EID) of the associate who is needing to report intermittent hours.

An Affected Party refers to the associate impacted by this ticket.



The screenshot shows a web application interface for a "Leave of Absence Request". At the top, there is a header bar with the "myACI" logo and a home icon. Below the header, the title "Leave of Absence Request" is displayed with a close button (X). A red message states: "This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team." A blue banner below the message reads: "Explore a range of new leave of absence resources on [myACI-benefits.com](#)." The form fields include: "Subject" (Joe Black | 599843 | Intermittent Time), "Affected Party" (a dropdown menu with a red border), "Nature of request" (a dropdown menu with a "Required" label), and "Description" (a text area). A "Back" button is located in the top left of the form area.

STEP 7

Select Report Intermittent leave time off from request category.

The screenshot displays a web form titled "Leave of Absence Request". A dropdown menu is open, showing the following options: "Apply for LOA", "Update Existing LOA", "Report intermittent leave time off" (which is highlighted with an orange border), "Return from LOA", "Submit supporting Document", and "Call Center Inquiry". Below the dropdown is a label "Nature of request" and a "Required" asterisk. In the background, there are several text boxes with instructions: "LOA or submit information regarding an LOA to th", "of new leave of absence resources on myACI-bene", and "Please ensure the correct associate is designated as the affect".

STEP 8

Enter the leave of absence claim number. This can be found on the Associate Leave Portal page; letters sent from the Centralized Leave Team or in email notifications.

Example: AC-24-123456

DO NOT SKIP THIS STEP. It's important that we have the accurate case number.

****Note:** If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. Do not combine the usage of two or more ClaimVantage AC Numbers into a single ticket.

The screenshot shows the 'myACI' web interface for a 'Leave of Absence Request'. The form includes a 'Subject' field with the text 'Joe Black | 599843 | Intermittent Time'. Below this is a blue banner with the text 'Explore a range of new leave of absence resources on myACI-benefits.com.' The 'Nature of request' dropdown is set to 'Report intermittent leave time off'. The 'ClaimVantage AC Number (Found on any LOA letter)' field is highlighted with a red border and contains the text 'AC-24-123456'. Below this is a note 'Enter 12 or fewer characters.' The form also includes fields for 'Date Off 1', 'Number of Hours Missed 1', 'Number of Minutes Missed 1', 'Treatment or Incapacity 1', and a dropdown for 'Select the leave to apply the intermittent hours missed from work 1'.

STEP 9

Select the date that intermittent hours were used.

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. Do not combine the usage of two single ticket.

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------------|-------|----|----|----|----|---|--|--|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--|--|--|--------------------------|-------|
| Date Off 1 | Number of Hours Missed 1 | Numbe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div><div><</div><div>April 2025</div><div>></div><table><tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr><tr><td></td><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr><tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr><tr><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td></tr><tr><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td></tr><tr><td>27</td><td>28</td><td>29</td><td>30</td><td></td><td></td><td></td></tr></table></div> | S | M | T | W | T | F | S | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | | | | Number of Hours Missed 2 | Numbe |
| S | M | T | W | T | F | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1 | 2 | 3 | 4 | 5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 27 | 28 | 29 | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date Off 3 | Number of Hours Missed 3 | Numbe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date Off 4 | Number of Hours Missed 4 | Numbe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Treatment or Incapacity 4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

STEP 10

Type in how many intermittent hours were used on the date you've just selected.


Note: You can only enter whole numbers in this box (e.g., 4, not 4.5 or 4 1/2).

Example: If you used 4 hours and 30 minutes, enter 4 under "Number of Hours Missed." Then, enter 30 under "Number of Minutes Missed" (see step 11 below).

e off

any LOA letter)


claims, each claim must have its own separate ticket for reporting time. Do not combine the usage of two or more ClaimVar



Number of Hours Missed 1


Enter 2 or fewer characters.

Number of Minutes Misse



Number of Hours Missed 2

Number of Minutes Misse



Number of Hours Missed 3

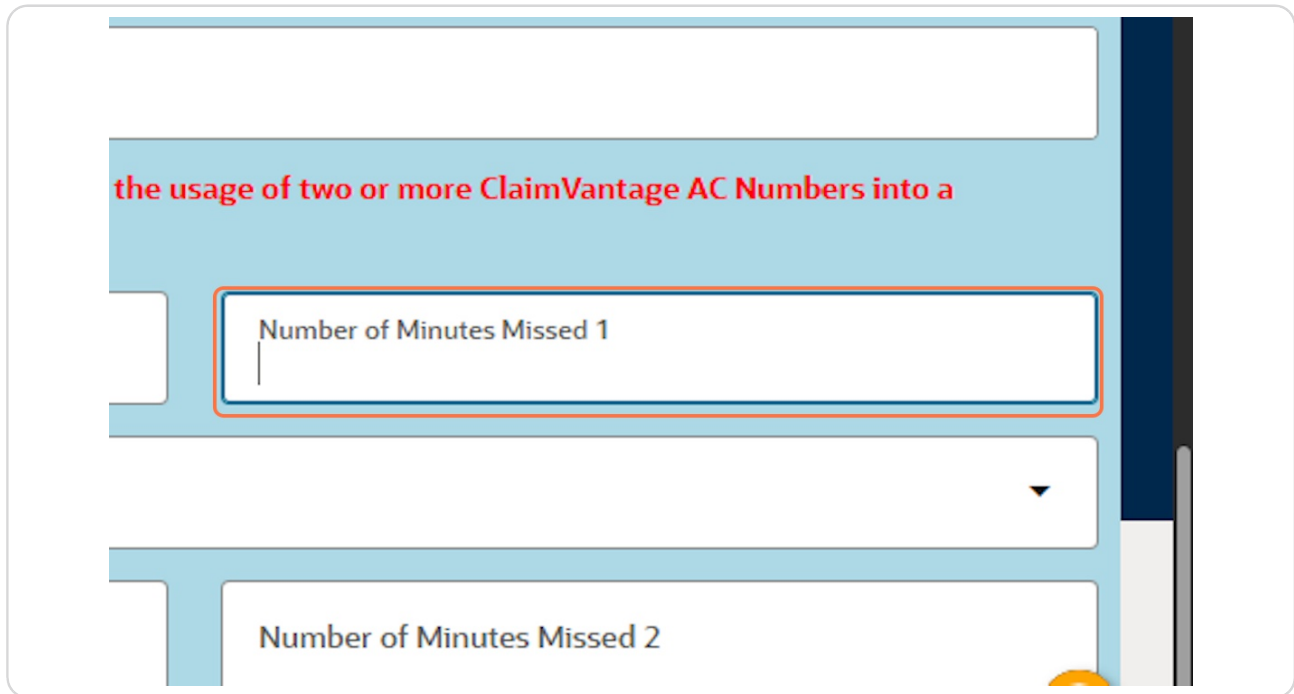
Number of Minutes Misse

STEP 11

Type in how many intermittent minutes used on the date you've just selected.

Note: You can only enter whole numbers in this box.

Example: If you used 4 hours and 30 minutes, enter 4 under "Number of Hours Missed" (see step 10 above). Then, enter 30 under "Number of Minutes Missed."



The screenshot shows a portion of a web form. At the top, there is a light blue header bar with the text "the usage of two or more ClaimVantage AC Numbers into a" in red. Below this, there are two input fields. The first field is labeled "Number of Minutes Missed 1" and has a red border. The second field is labeled "Number of Minutes Missed 2" and has a blue border. A small orange circle is visible at the bottom right of the form area.

STEP 12

Select the reason for taking intermittent hours: Incapacity or Treatment

Incapacity: Medical treatment or recovery periods or flare-ups of a chronic condition for own serious health condition or to care for a family member with a serious health condition.

Treatment: Scheduled medical appointment.

Report intermittent leave time off

Claim/Vantage AC Number (Found on any LOA letter)
AC-24-123456

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. Do not combine the usage of two or more Claim/Vantage AC Numbers into a single ticket.

Date Off 1

Number of Hours Missed 1

Number of Minutes Missed 1

Treatment or Incapacity 1

Treatment

Incapacity

Date Off 3

Number of Hours Missed 3

Number of Minutes Missed 3

Treatment or Incapacity 3

Date Off 4

Number of Hours Missed 4

Number of Minutes Missed 4

Treatment or Incapacity 4

Date Off 5

Number of Hours Missed 5

Number of Minutes Missed 5

Treatment or Incapacity 5

STEP 13

If needing to report intermittent hours for more than 1 day, repeat steps 9–12.

Note: If needing to report intermittent hours for more than 5 days, you will need to submit a new ticket for that claim.

Claim/Vantage AC Number (Found on any LOA letter)
AC-24-123456

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. Do not combine the usage of two or more Claim/Vantage AC Numbers into a single ticket.

Date Off 1

Number of Hours Missed 1

Number of Minutes Missed 1

Treatment or Incapacity 1
Incapacity

Date Off 2

Number of Hours Missed 2

Number of Minutes Missed 2

Treatment or Incapacity 2

Date Off 3

Number of Hours Missed 3

Number of Minutes Missed 3

Treatment or Incapacity 3

Date Off 4

Number of Hours Missed 4

Number of Minutes Missed 4

Treatment or Incapacity 4

Date Off 5

Number of Hours Missed 5

Number of Minutes Missed 5

Treatment or Incapacity 5

STEP 14

Use the detailed description box to enter any additional information about the intermittent hours being reported.

Treatment or Incapacity 3

Date Off 4

Number of Hours Missed 4

Number of Minutes Missed 4

Treatment or Incapacity 4

Date Off 5

Number of Hours Missed 5

Number of Minutes Missed 5

Treatment or Incapacity 5

Description

Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments.

Drag and Drop

Select or drop files here.

File Name

File Size

No data to display.

Save

Created with *Tango*

14 of 15

STEP 15

Click on Save in the lower left corner of the screen to save and submit the intermittent hours.

If you do not click on the Save button, the intermittent hours will not be submitted.

The screenshot shows a web form interface. At the top, a red banner contains the text: "Please confirm that all attachments have been fully uploaded and p". Below this is a dashed box containing the text: "Drag and Drop" and "Select or drop files here.". Below the dashed box is a section with the text: "File Name" followed by a dropdown arrow icon. Below this is a section with the text: "No data to display.". At the bottom left, a "Save" button is highlighted with a red rectangular box.