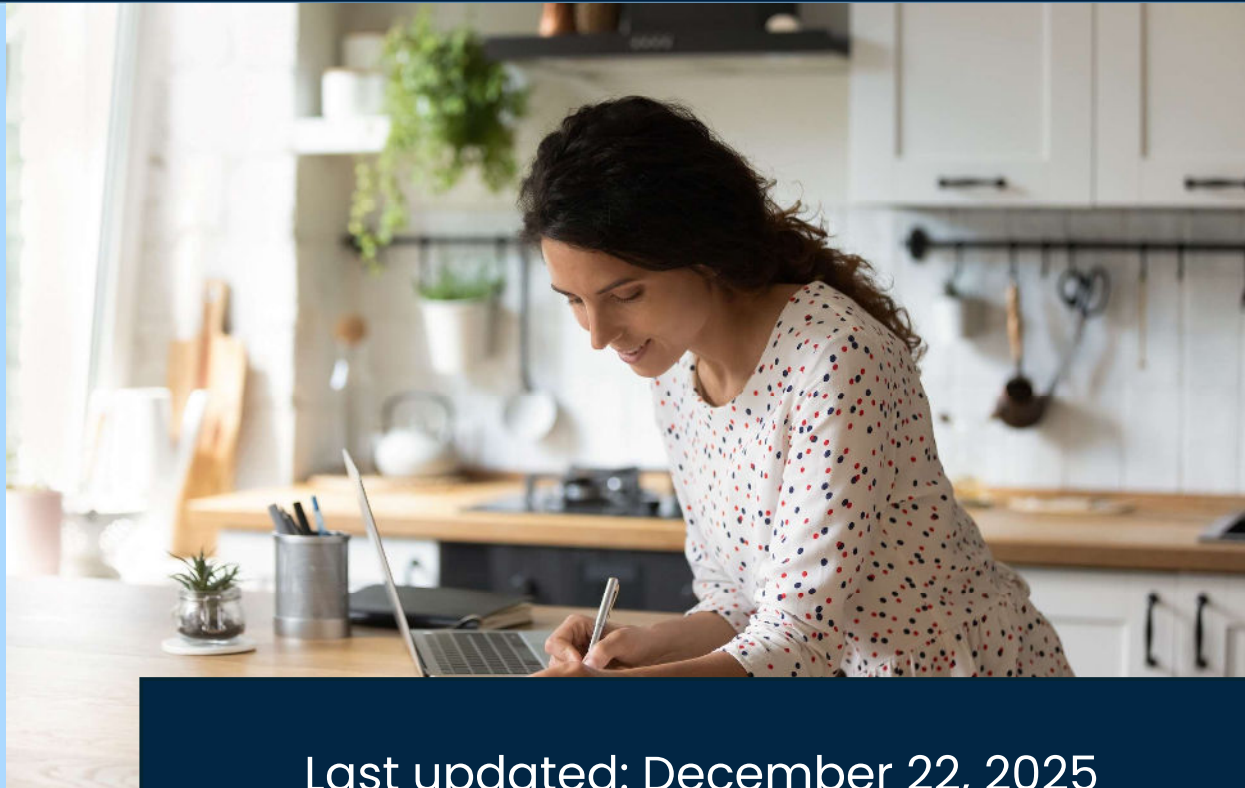# QRG

Quick Reference Guide (1-29 Steps)

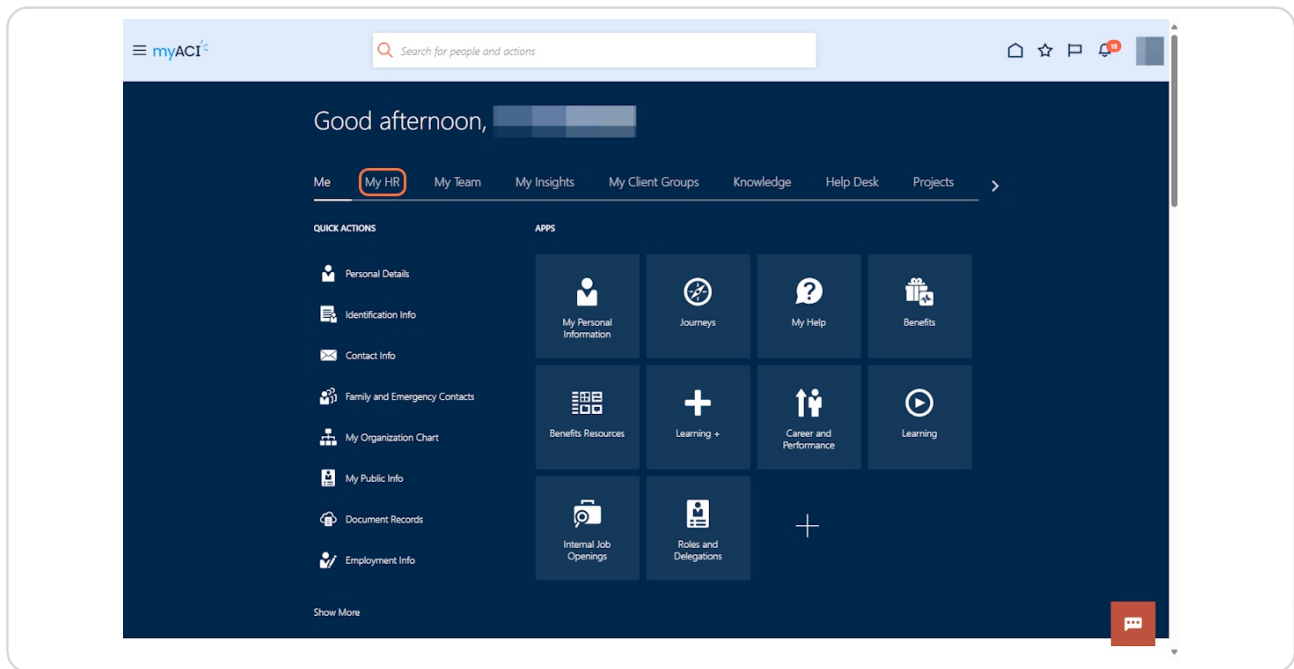### How to Process Return from Leave of Absence

This QRG is for managers, HR representatives and associates on how to submit a Return from Leave of absence (LOA) request.
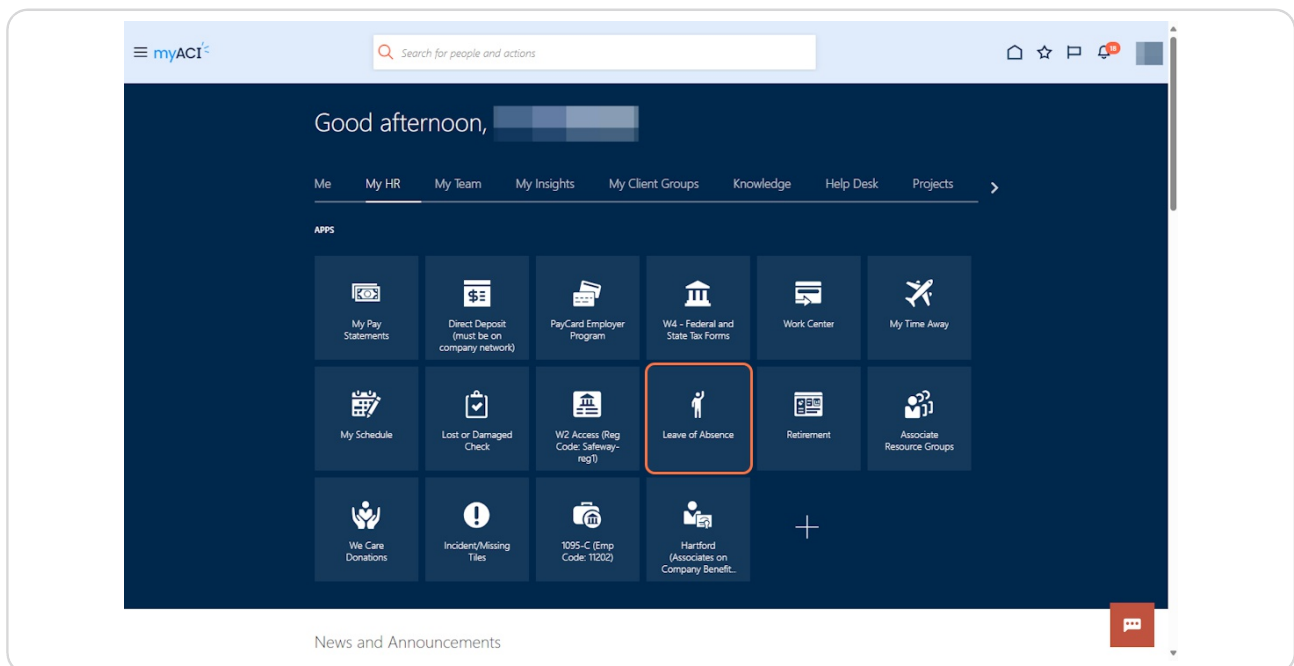
Last updated: December 22, 2025
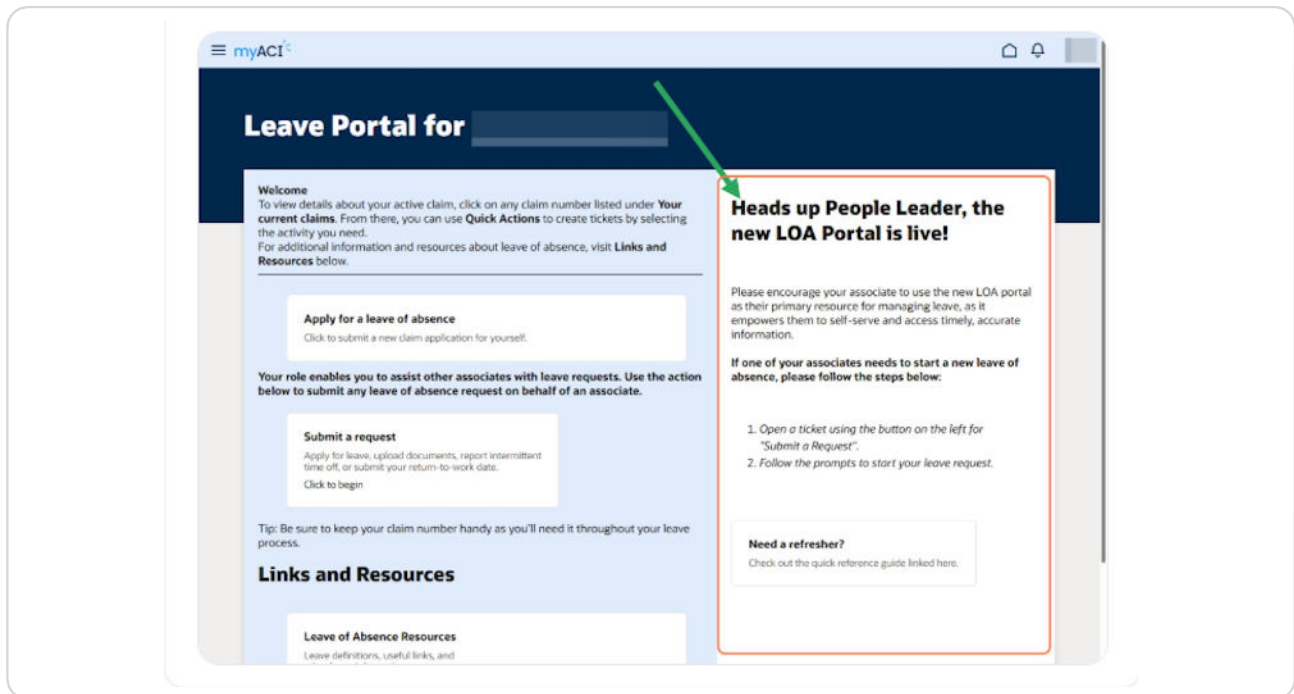
STEP 1

Sign in to myACI then click on My HR.

STEP 2

Click on Leave of Absence

If you are an HR/People Leader, this section of the screen will appear for you. Associates will not see the "Heads up People Leader, the new LOA portal is live!" section on their view.
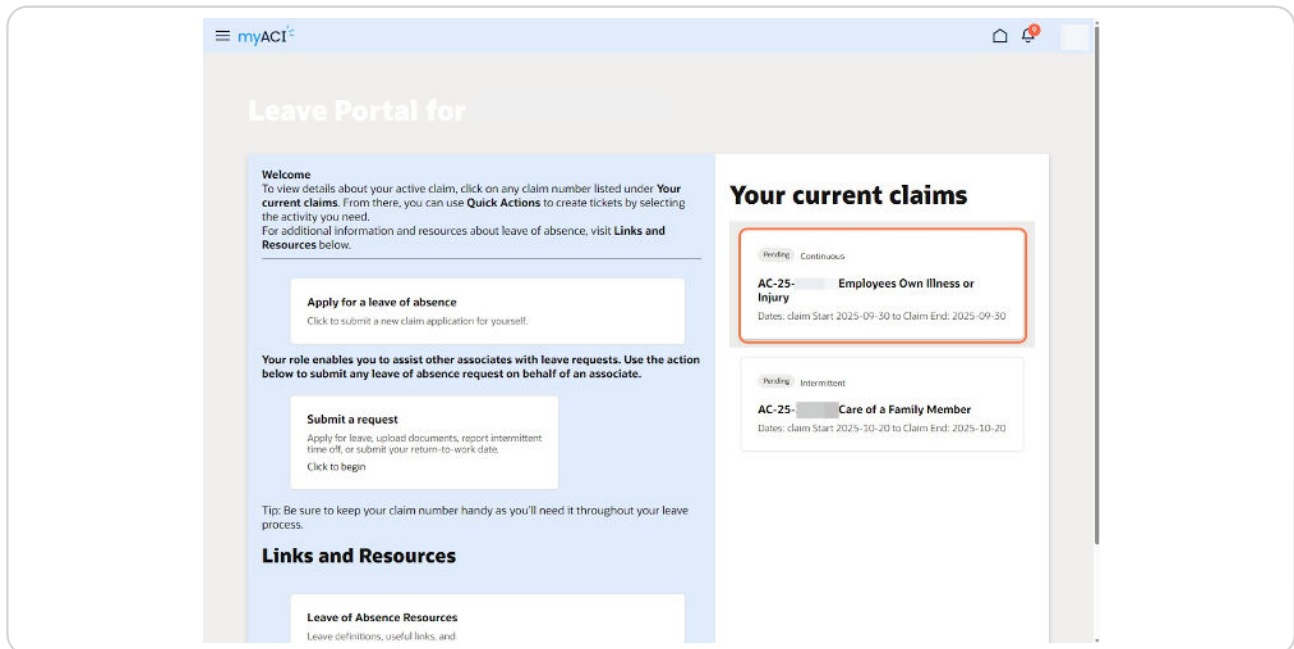

ⓘ If you are an HR/People Leader submitting a Return from LOA on behalf of an associate, skip to step 14.

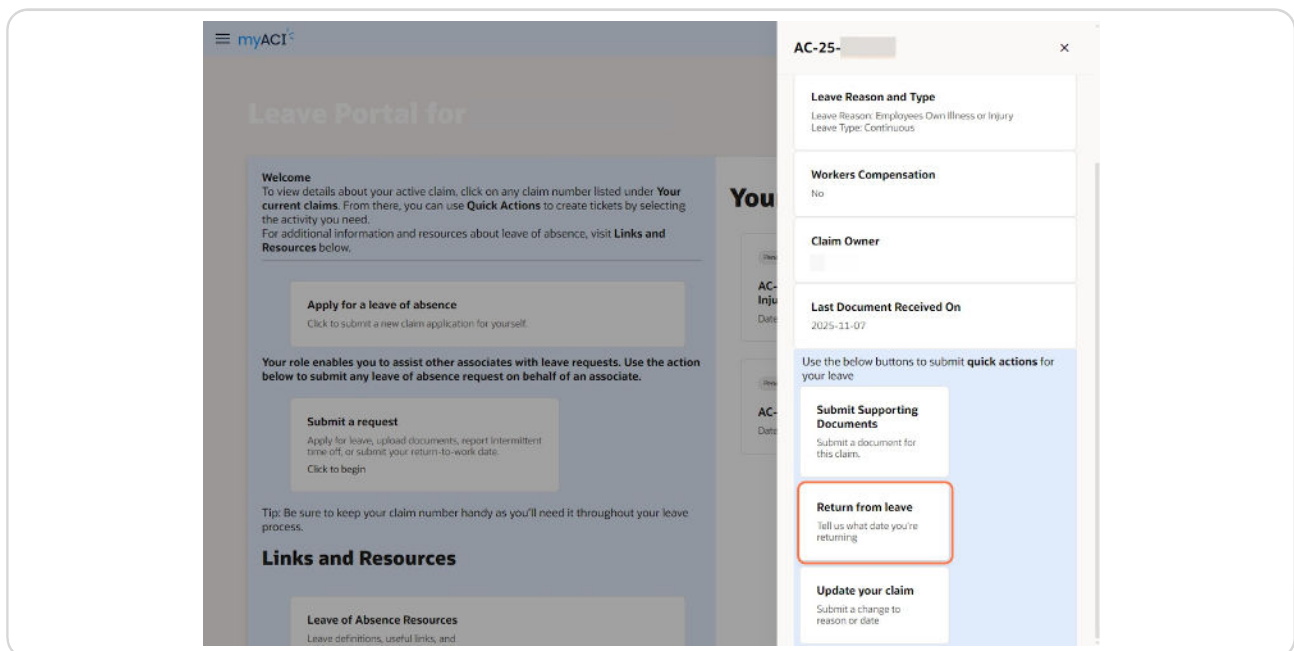ⓘ If you are an associate submitting a Return from leave for yourself, proceed to step 4.

STEP 4

Click on the claim number that you are returning from leave.

STEP 5

Click on "Return from leave" in the quick action section.

> For Employee Own Illness/Injury leaves, proceed to step 6.
>
> **All other leave reasons, proceed to step 11.**

> Employee Own Illness/Injury Steps 6 - 10.

STEP 6

Select the date you returned to work.

NOTE: By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**

For Employee Own Illness/Injury leaves, a return-to-work form or note MUST be submitted to the Centralized Leave Team (CLT) prior to returning to work.

Select **YES** if a release has already been sent to the CLT **or** if one is being submitted on this form.
Select **NO** if no release has been sent to the CLT and one is NOT being submitted on this form.

If YES was selected in step 7, confirm whether restrictions or limitations are present on the return-to-work form.

Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.

Select **YES**, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.
Select **NO**, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.

STEP 9

Drag and Drop any documents in this section. If you selected YES in step 7 and have any documents, attach them here.

NOTE: Documents must be in PDF or JPEG format no larger than 8MB.

IMPORTANT: Wait for the document to fully upload before moving to the next step.

Click on "Submit your Return from Leave" in the upper right corner of the screen to save and submit the return from leave request.

If you do not click on the Submit your Return from Leave button, the return from leave will not be submitted to the claim.

ℹ️ All other leave reason steps 11 – 13.

Select the date you returned to work.

NOTE: By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**

Drag and Drop any documents in this section.

NOTE: Documents must be in PDF or JPEG format no larger than 8MB.

IMPORTANT: Wait for the document to fully upload before moving to the next step.

Click on "Submit your Return from Leave" in the upper right corner of the screen to save and submit the return from leave request.

If you do not click on the Submit your Return from Leave button, the return from leave will not be submitted to the claim.
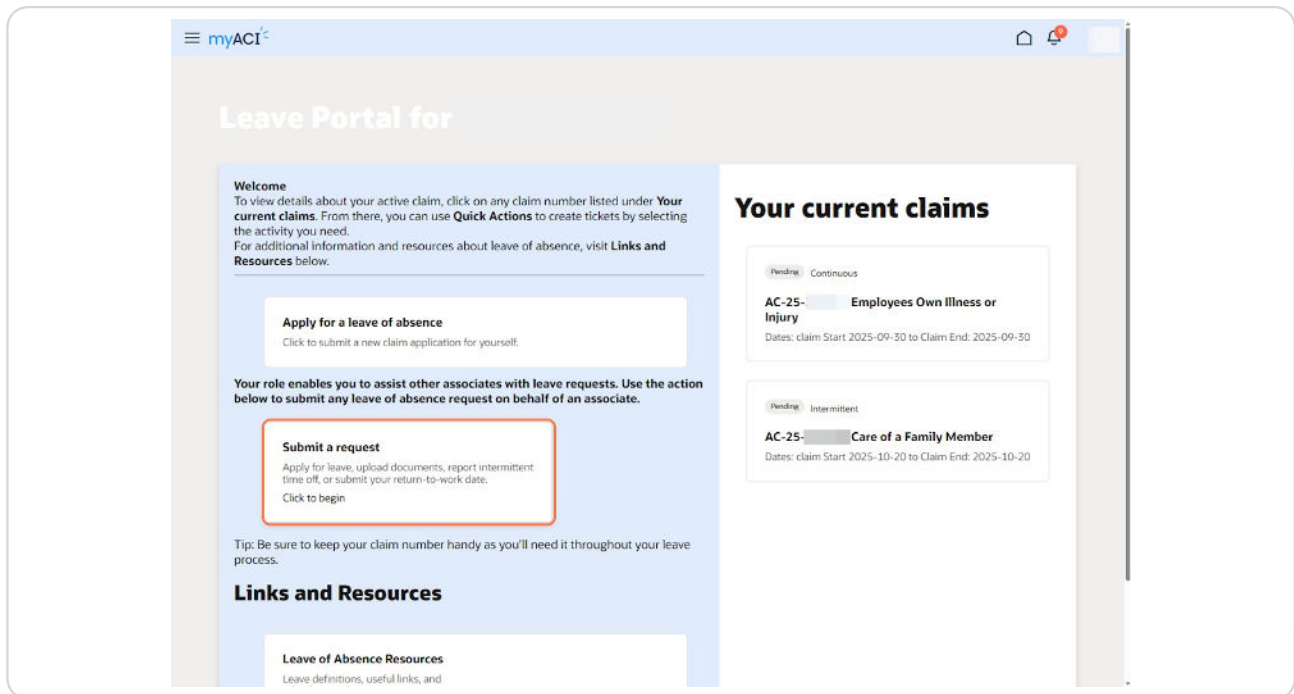

> ℹ️ HR/People Leader submitting a Return from LOA on behalf of an associate, start here.

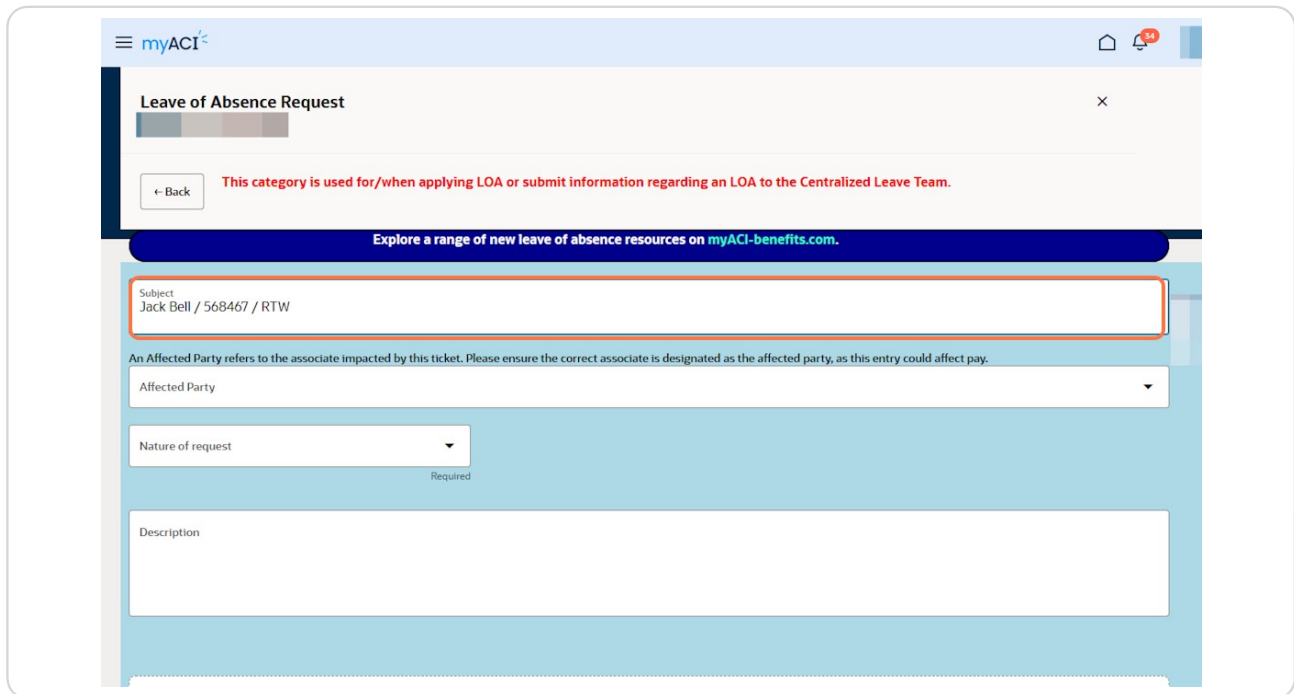## Click on "Submit a request" to navigate to submit Return from LOA request.

HR/People Leader: Be sure to have the CV Number for the associates claim you are submitting the return from leave for, as you will need it when submitting the ticket.

Enter the subject for the leave request.
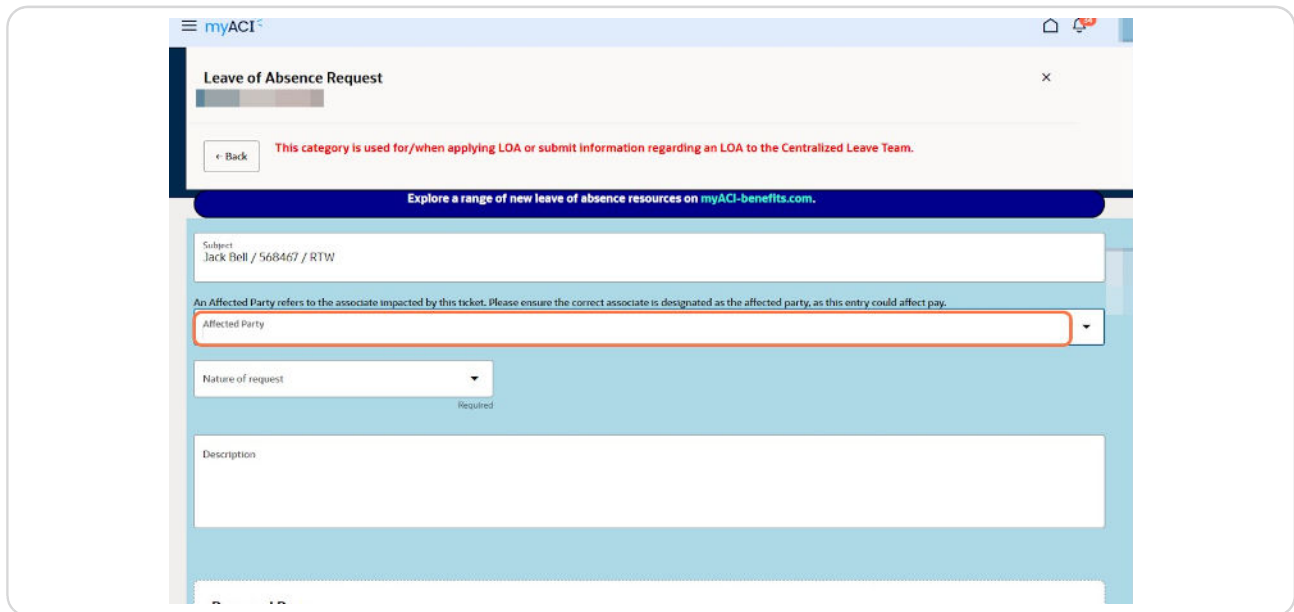
__EXAMPLE__: Jack Bell / 568467 / RTW

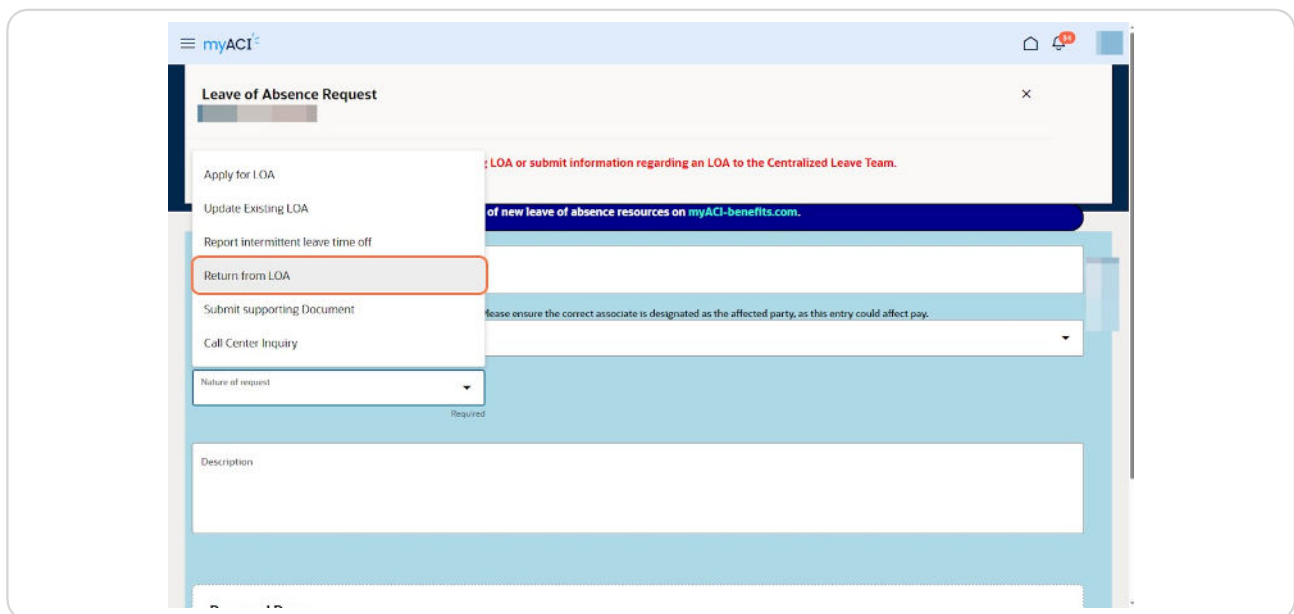**In the Affected Party, enter the Employee ID (EID) of the associate who the Return from Leave request is for.**

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

Select "Return from LOA" from request category.

For "What is the leave reason you're returning from", select the correct leave reason the associate is returning from leave.

NOTE: By submitting this return–from–leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**

ℹ️ If the associate is returning from an Employee Own Illness/Injury leave, proceed to step 19.

All other leave reasons, proceed to step 26.

ℹ️ Employee Own Illness/Injury Steps 19 - 25.

For Employee Own Illness/Injury leaves, a return-to-work form or note MUST be submitted to the Centralized Leave Team (CLT) prior to the associate returning to work.

Select **YES** if a release has already been sent to the CLT **or** if one is being submitted on this form.

Select **NO** if no release has been sent to the CLT and one is NOT being submitted on this form.

If YES was selected in step 19, confirm whether restrictions or limitations are present on the return-to-work form.

Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, and need to sit for 5 minutes every two hours.

Select **YES**, I acknowledge that my return to work is subject to restrictions and / or limitations outlined by my healthcare provider.
Select **NO**, I acknowledge that no restrictions and / or limitations affect my ability to perform work-related duties.

Enter the leave of absence claim number (ClaimVantage AC#). This can be found on email notifications that are sent from the Centralized Leave Team (CLT).

<u>EXAMPLE</u>: AC-24-123456.

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

Select the date the associate returned to work.

NOTE: By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. **Submitting false or inaccurate information may be subject to disciplinary actions.**

Use the detailed description box to enter any additional information about the return from leave request.

Return from LOA

By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. Submitting false or inaccurate information may be subject to disciplinary actions. If you are submitting on behalf of an associate, ensure the return-to-work date entered is accurate. Return-to-work dates may be submitted up to two days prior to the actual return.

What is the leave reason you're returning from?
Employees Own Illness or Injury

Has a return-to-work form been submitted to Centralized Leave Team (CLT)?
Yes

Does the form indicate any work restrictions or limit...
No

(Some examples but not limited to: No lifting over 15 pounds, no prolonged standing, no use of right hand, need to sit for 5 minutes every two hours).

ClaimVantage AC Number (Found on any LOA letter)
AC-25-36

Date employee returned from leave
Required

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.		

Drag and Drop any documents in this section. If you selected YES in step 19 and have any documents, attach them here.

NOTE: Documents must be in PDF or JPEG format no larger than 8MB.

IMPORTANT: Wait for the document to fully upload before moving to the next step.

Click on "Save" in the lower left corner of the screen to save and submit the return from LOA request.

NOTE: If you do not click "Save", the return from leave will not be submitted to the claim.

> ℹ️ All other leave reason steps 26 – 29.

Enter the leave of absence claim number (ClaimVantage AC#). This can be found on email notifications that are sent from the Centralized Leave Team (CLT).

<u>EXAMPLE</u>: AC-24-123456.

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

Select the date the associate returned to work.

NOTE: By submitting this return-from-leave ticket, you acknowledge that you have returned to work on the date entered. <u>**Submitting false or inaccurate information may be subject to disciplinary actions.**</u>

STEP 28

Use the detailed description box to enter any additional information about the return from leave request.

STEP 29

Click on "Save" in the lower left corner of the screen to save and submit the return from leave request.

NOTE: If you do not click "Save", the return from leave will not be submitted to the claim.