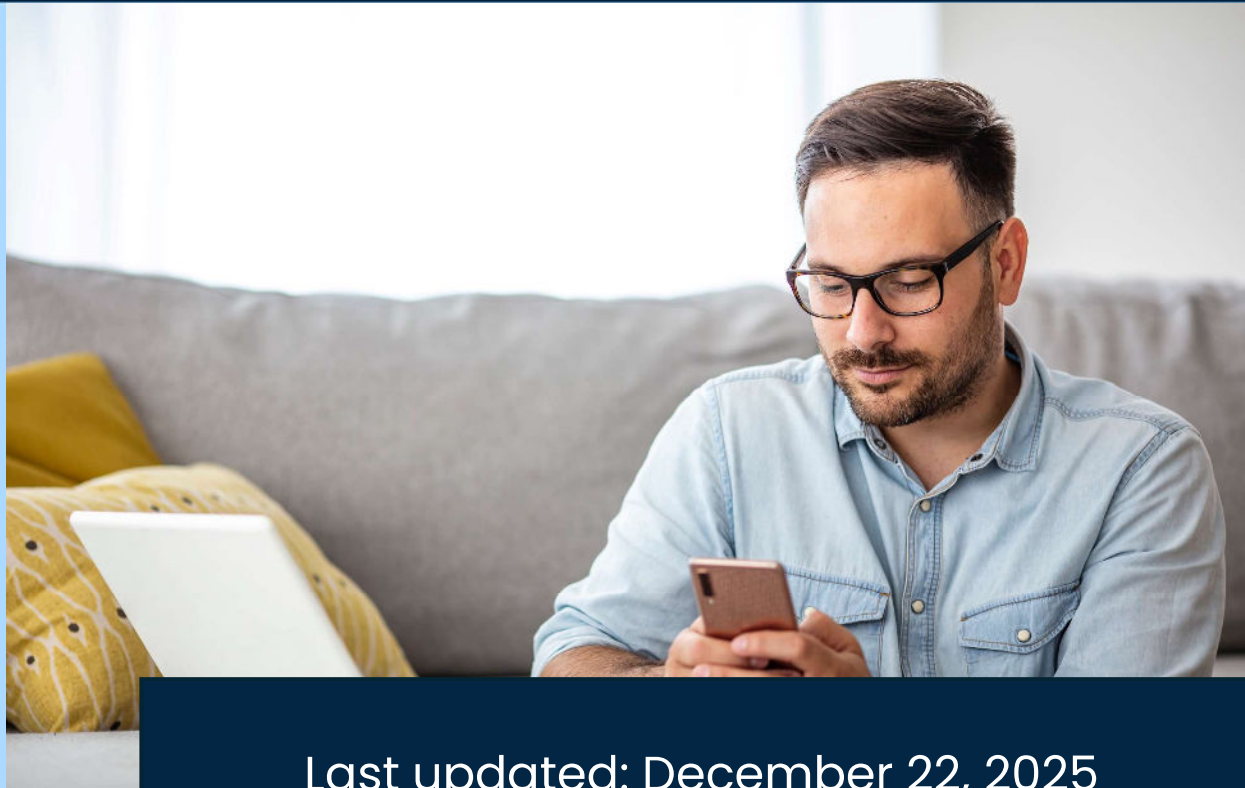


# QRG

## Quick Reference Guide (1-24 Steps)

### How to Report Intermittent FMLA Time Off for an Existing Claim

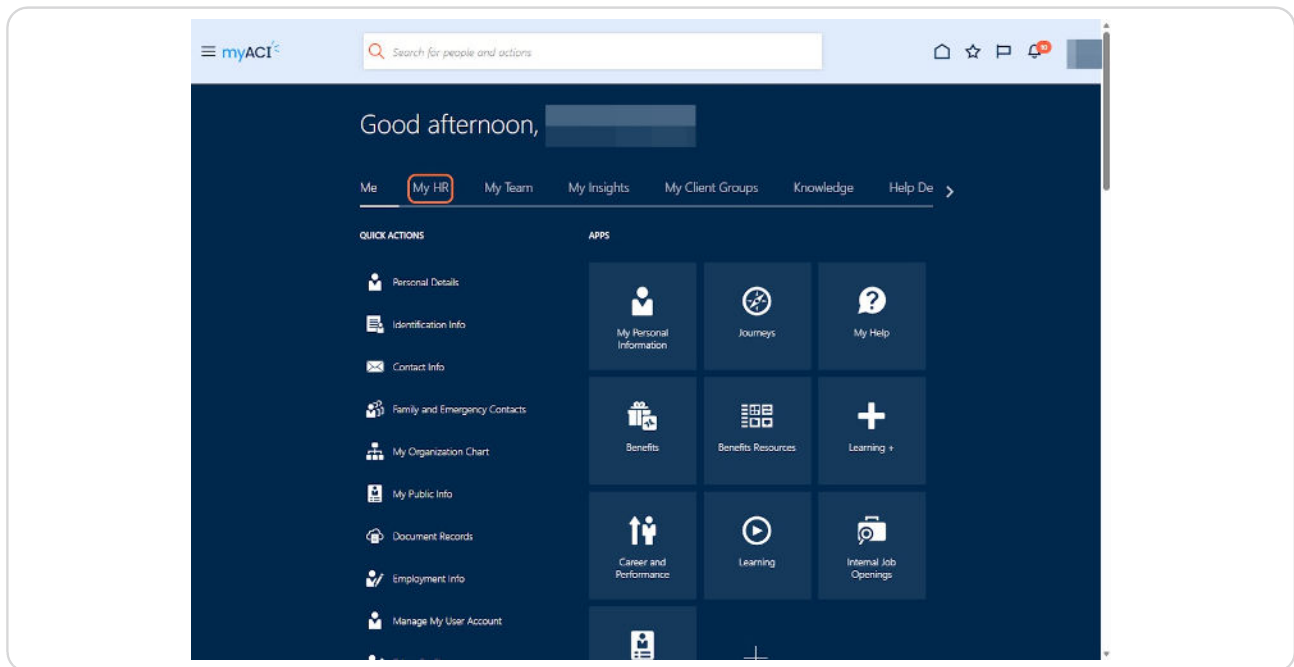
This QRG is for managers, HR representatives and associates who need to report intermittent FMLA usage either for themselves or on behalf of an associate.



Last updated: December 22, 2025

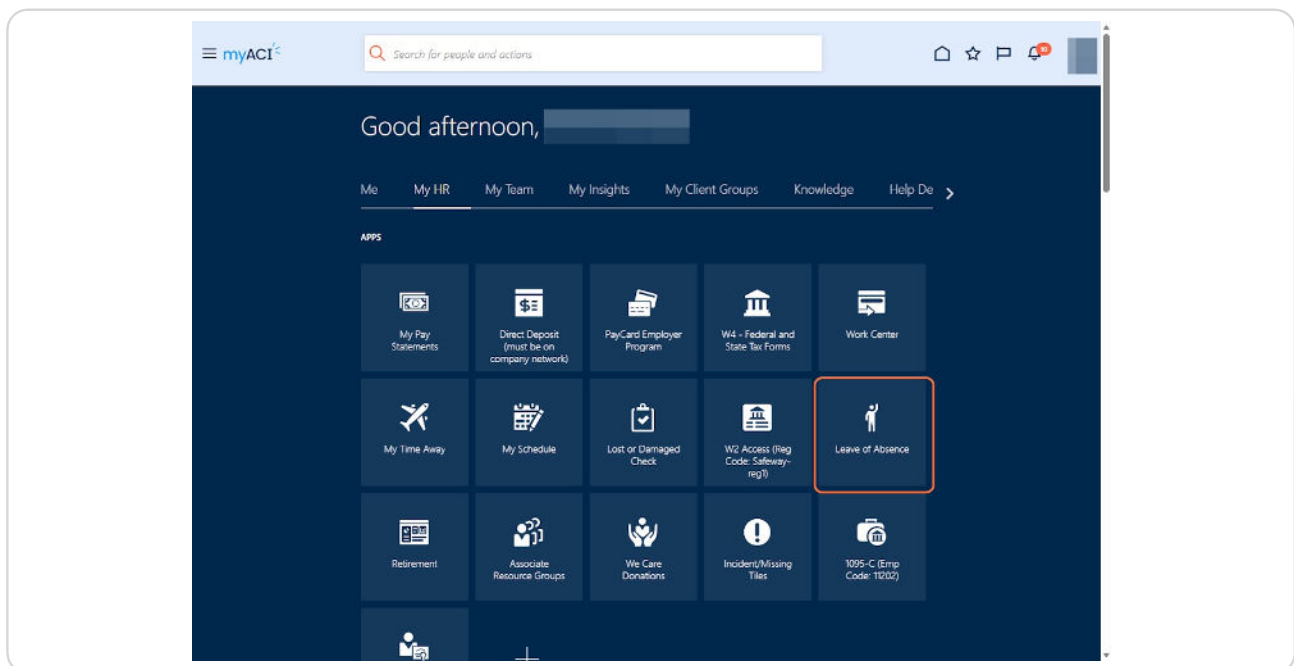
## STEP 1

Sign in to myACI then click on My HR.



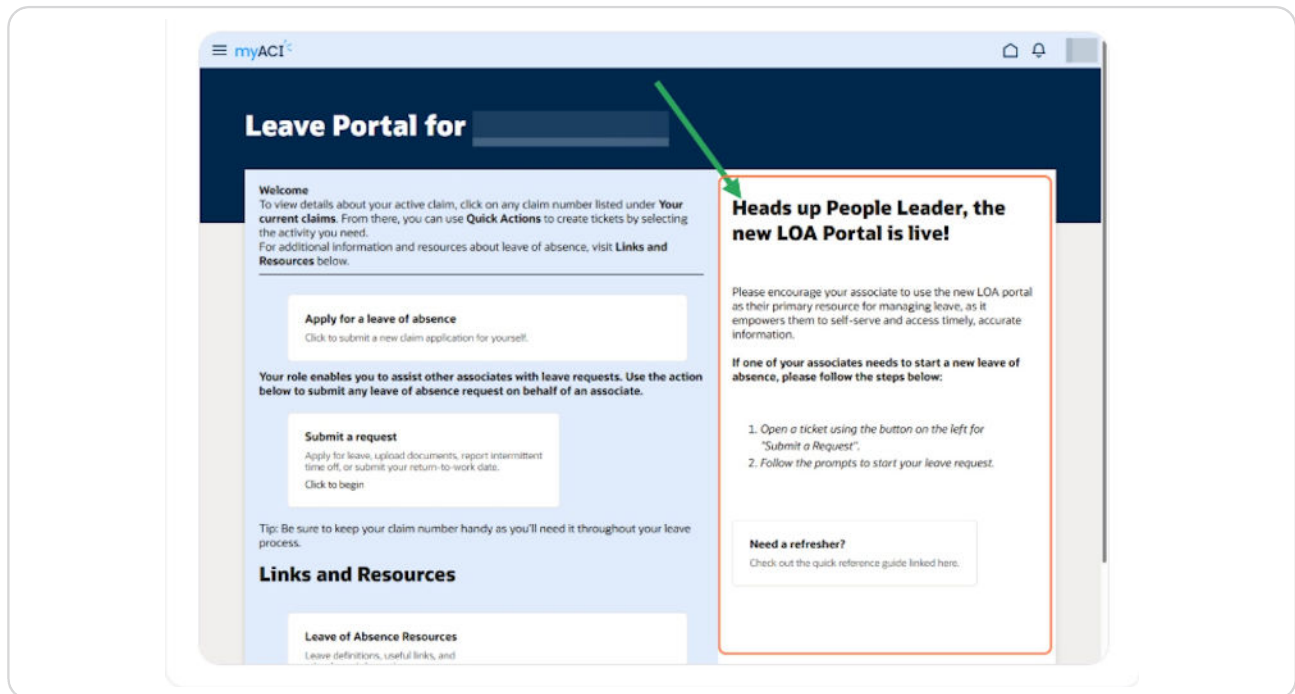
## STEP 2

Click on Leave of Absence



### STEP 3

If you are an HR/People 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.

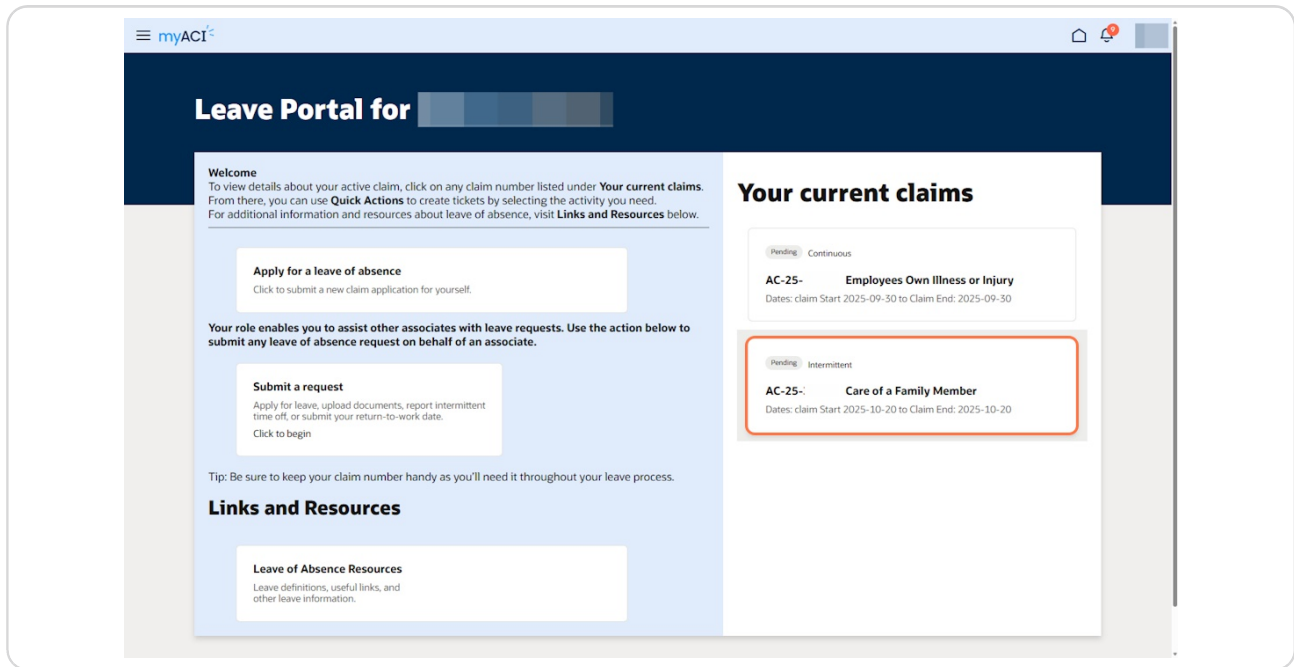


**i** If you are an HR/People Leader Reporting Intermittent Time on behalf of an associate, skip to step 13.

**i** If you are an associate Reporting Intermittent Time for yourself, proceed to step 4.

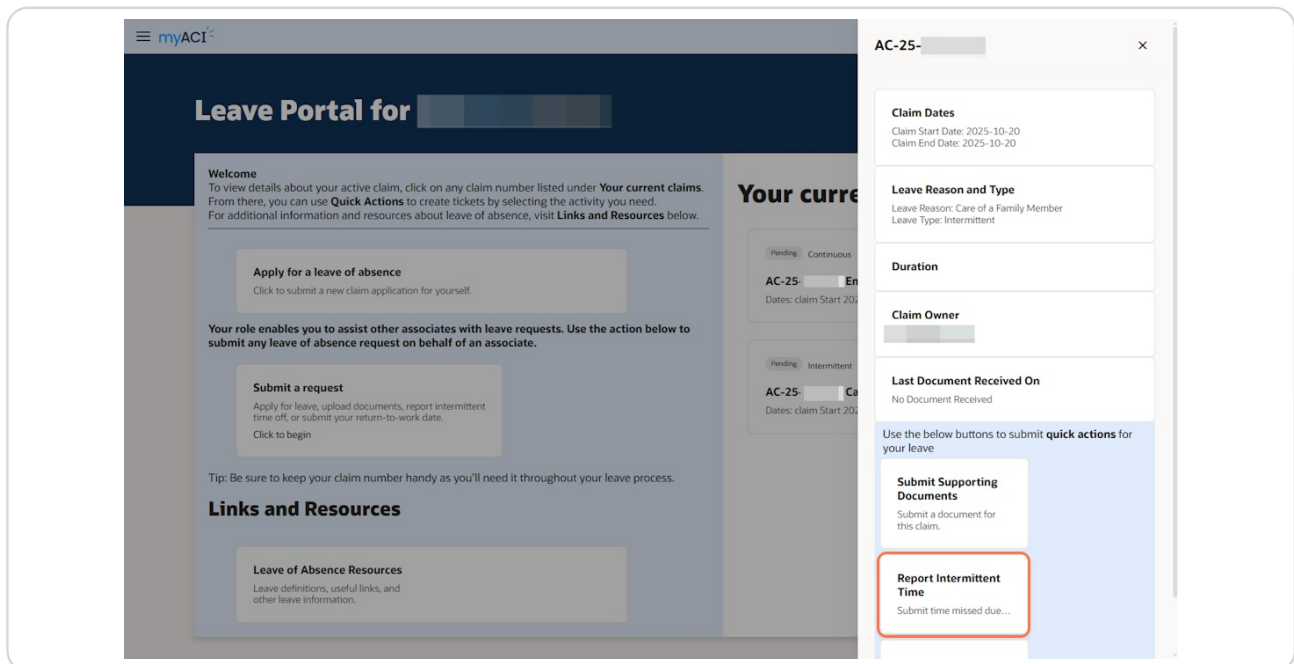
## STEP 4

Click on the claim number that you are reporting intermittent time for.



## STEP 5

Click on "Report Intermittent Time" in the quick actions section.



## STEP 6

Select the date that you used intermittent hours.

The screenshot shows the 'myACI' Leave Portal interface. A modal titled 'Report missed hours' is open in the center. The modal contains a calendar for December 2025, with the date '19' selected. Below the calendar are input fields for 'Hours missed' and 'Minutes missed', both set to '0'. There are radio buttons for 'Treatment' and 'Incapacity', with 'Treatment' selected. At the bottom of the modal are three buttons: 'Save and Add another', 'Save and Review Form', and 'Cancel'. The background shows the 'Leave Portal for [Name]' with sections for 'Welcome', 'Apply for a leave of absence', 'Submit a request', 'Links and Resources', and 'Claim Dates'.

**Report missed hours**

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. **First select the date to apply the intermittent hours missed to.**

December 2025

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	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	31			

Hours missed: 0

Minutes missed: 0

Was the time missed due to treatment or incapacity?

☒ Treatment ☐ Incapacity

Required

Save and Add another Save and Review Form Cancel

## STEP 7

**Enter how many intermittent hours and minutes were used on the date you've just selected.**

**EXAMPLE:** If you used 4 hours and 30 minutes, enter 4 in the "Hours missed" field and enter 30 in the "Minutes missed" field.

The screenshot shows the myACI Leave Portal interface. A modal titled "Report missed hours" is open, displaying a calendar for December 2025. The date 19 is selected. Below the calendar, there are two input fields: "Hours missed" and "Minutes missed". The "Hours missed" field contains the value 0, and the "Minutes missed" field contains the value 0. Green arrows point to these fields. Below the input fields, there is a question: "Was the time missed due to treatment or incapacity?" with two radio button options: "Treatment" and "Incapacity". At the bottom of the modal, there are three buttons: "Save and Add another", "Save and Review Form", and "Cancel".

**Report missed hours**

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. **First select the date to apply the intermittent hours missed to.**

December 2025

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	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	31			

Hours missed: 0 Minutes missed: 0

Was the time missed due to treatment or incapacity?

☐ Treatment ☐ Incapacity

Required

Save and Add another Save and Review Form Cancel

## STEP 8

### 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.

The screenshot shows the 'myACI' Leave Portal interface. A modal titled 'Report missed hours' is open, displaying a calendar for December 2025. The date 19 is selected. Below the calendar, there are input fields for 'Hours missed' (8) and 'Minutes missed' (0). A red box highlights the question 'Was the time missed due to treatment or incapacity?' with two radio button options: 'Treatment' and 'Incapacity'. The 'Incapacity' option is selected. Below the radio buttons, the word 'Required' is written. At the bottom of the modal, there are three buttons: 'Save and Add another', 'Save and Review Form', and 'Cancel'.

**Report missed hours**

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time. **First select the date to apply the intermittent hours missed to.**

December 2025

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	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	31			

Hours missed: 8      Minutes missed: 0

Was the time missed due to treatment or incapacity?

☐ Treatment    ☒ Incapacity

Required

Save and Add another    Save and Review Form    Cancel

## STEP 9

If needing to report intermittent hours for more than 1 day, click on "Save and Add another" and repeat steps 6 – 8.

If no additional hours need to be reported, proceed to step 10.

The screenshot shows the myACI Leave Portal interface. A modal titled "Report missed hours" is open, displaying a calendar for December 2025. The date 19 is selected. Below the calendar, there are input fields for "Hours missed" (8) and "Minutes missed" (0). The modal also includes a question "Was the time missed due to treatment or incapacity?" with radio buttons for "Treatment" and "Incapacity" (selected). At the bottom, there are three buttons: "Save and Add another" (highlighted with a red box), "Save and Review Form", and "Cancel".

## STEP 10

When all hours have been reported, click on "Save and Review Form"

The screenshot shows the myACI Leave Portal interface. A modal titled "Report missed hours" is open, displaying a calendar for December 2025. The date 22 is selected. Below the calendar, there are input fields for "Hours missed" (8) and "Minutes missed" (0). The modal also includes a question "Was the time missed due to treatment or incapacity?" with radio buttons for "Treatment" and "Incapacity" (selected). At the bottom, there are three buttons: "Save and Add another", "Save and Review Form" (highlighted with a red box), and "Cancel".



## STEP 11

**Review the "Report Intermittent Time" to confirm the information you entered is correct.**

**IMPORTANT:** Verify that the reported date, hours/minutes, and reason for the intermittent reporting is correct.

The screenshot shows a web application interface with a modal titled "Report Intermittent Time". The modal is overlaid on a background page that includes sections like "Have Portal for...", "Apply for a leave of absence", "Submit a request", and "Links and Resource". The modal itself has a title bar with a close button (X). Inside the modal, the title "Report Intermittent Time" is at the top. Below it, the text "Intermittent Time for AC-25-" is displayed. There are two date selection boxes, each with a green arrow pointing to it. The first box shows "2025-12-19" and "For Incapacity 8 hours and 0 minutes". The second box shows "2025-12-22" and "For Incapacity 8 hours and 0 minutes". Below these are four buttons: "Report Third Day", "Report Fourth Day", "Report Fifth Day", and "Submit Time". To the right of these buttons is a text area that says "If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time." Below this text area is a red button labeled "Submit Time" and a yellow oval containing the text "Total Hours 16:00".

**Report Intermittent Time**

Intermittent Time for AC-25-

2025-12-19  
For Incapacity  
8 hours and 0 minutes

2025-12-22  
For Incapacity  
8 hours and 0 minutes

Report Third Day

Report Fourth Day

Report Fifth Day

Submit Time

Total Hours 16:00

If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time.

## STEP 12

Click on "Submit Time" to report the intermittent hours used.

**Intermittent Time for AC-25-**

<b>2025-12-19</b> For Incapacity 8 hours and 0 minutes
<b>2025-12-22</b> For Incapacity 8 hours and 0 minutes
<b>Report Third Day</b>
<b>Report Fourth Day</b>
<b>Report Fifth Day</b>

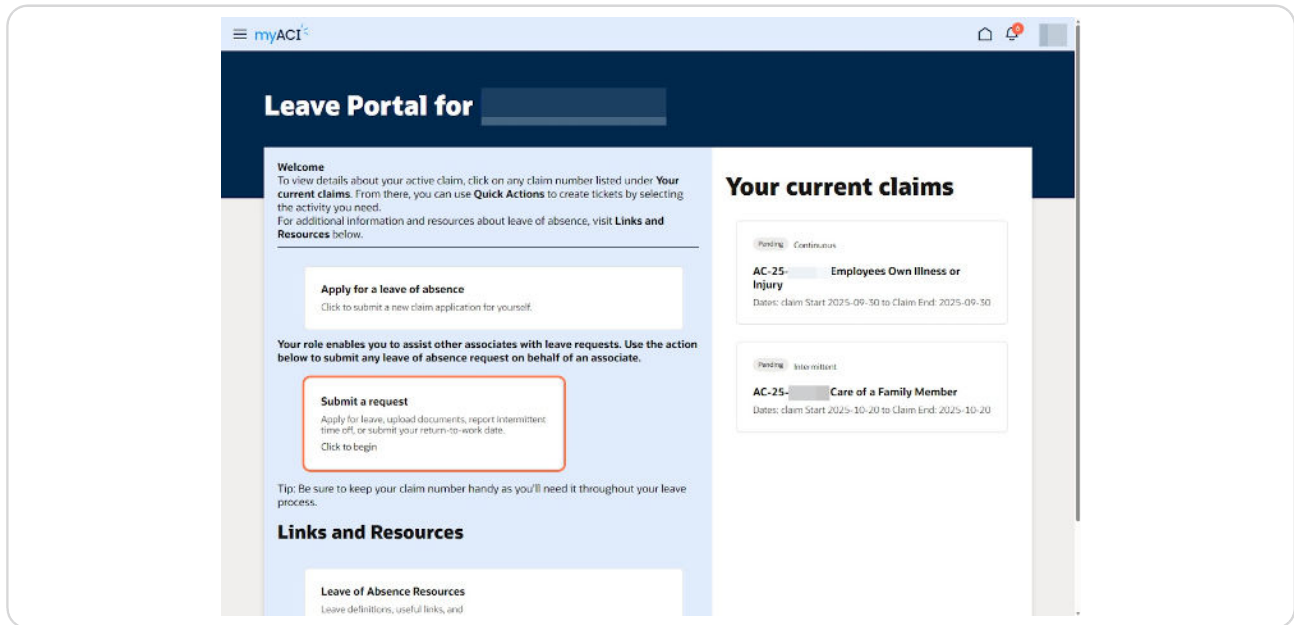
**If you have multiple intermittent claims, each claim must have its own separate ticket for reporting time.**

**Submit Time** Total Hours 16:00

**i** HR/People Leader Reporting Intermittent Time on behalf of an associate, start here.

## STEP 13

Click on "Submit a request" to navigate to report intermittent leave time off request.



## STEP 14

Enter the reason for the report Intermittent leave time off request.

EXAMPLE: Joe Black | 599843 | Intermittent Time

A screenshot of the myACI Leave of Absence Request form. The header shows the myACI logo and a home icon. The main heading is "Leave of Absence Request". Below this, there's a "Back" button and a red warning message: "This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team." A blue banner reads "Explore a range of new leave of absence resources on myACI-benefits.com." The form fields include "Subject" (highlighted with a red box), "Affected Party" (a dropdown menu), "Nature of request" (a dropdown menu), and "Description" (a text area). At the bottom, there's a red warning message: "Please confirm that all attachments have been fully uploaded and processed before submitting the ticket. Otherwise, it can cause issues when viewing the attachments." and a "Drag and Drop" section for attachments.

## STEP 15

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

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

myACI

### Leave of Absence Request

Kristen Smith - KSM933

[← 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  
Example: 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

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.

## STEP 16

Select "Report Intermittent leave time off from request category.

[← 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  
Example: 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

- Apply for LOA
- Update Existing LOA
- Report intermittent leave time off**
- Return from LOA
- Submit supporting Document
- Call Center Inquiry

Select or drop files here.

File Name File Size

No data to display.

## STEP 17

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).

**EXAMPLE:** AC-24-123456.

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

**NOTE:** If you are reporting for 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 a web form for reporting intermittent leave. At the top, there is a 'Back' button and a red notice: 'This category is used for/when applying LOA or submit information regarding an LOA to the Centralized Leave Team.' Below this is a blue banner with the text: 'Explore a range of new leave of absence resources on myACI-benefits.com.' The form fields include: 'Subject' (Example: Joe Black | 599843 | Intermittent Time), 'Affected Party' (dropdown), 'Nature of request' (dropdown, currently 'Report intermittent leave time off'), and 'ClaimVantage AC Number (Found on any LOA letter)' (text input, highlighted with a red border). Below the AC number field is a red note: 'Enter 12 or fewer characters. 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 form then has three identical sections for reporting time off. Each section includes: 'Date Off' (calendar icon), 'Number of Hours Missed' (text input), 'Number of Minutes Missed' (text input), and 'Treatment or Incapacity' (dropdown). The sections are labeled '1', '2', and '3'.

## STEP 18

Select the date that intermittent hours were used.

Report intermittent leave time off

ClaimVantage AC Number (Found on any LOA letter)  
AC-24-125456

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.

Date Off 1	Number of Hours Missed 1	Number of Minutes Missed 1
<div>&lt; November 2025 &gt; 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</div>	Number of Hours Missed 2	Number of Minutes Missed 2
	Number of Hours Missed 3	Number of Minutes Missed 3
	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		

## STEP 19

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 1". Then, enter 30 under "Number of Minutes Missed 1" (see step 21 below).

The screenshot shows a web form titled "Report intermittent leave time off". At the top, there is a dropdown menu for "Nature of request" and a text field for "ClaimVantage AC Number (Found on any LOA letter)" with the value "AC-24-123456". Below this is a red warning message: "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 form contains five identical rows for reporting leave. Each row has a "Date Off" field (with a calendar icon), a "Number of Hours Missed" field (highlighted with a red border in the first row), and a "Number of Minutes Missed" field. Below each date field is a dropdown menu for "Treatment or Incapacity". At the bottom of the form is a "Description" field. A "Required" label is positioned to the right of the first "Treatment or Incapacity" dropdown.

Date Off	Number of Hours Missed	Number of Minutes Missed	Treatment or Incapacity
11/03/2025	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Description

## STEP 20

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 1" (see step 20 above). Then, enter 30 under "Number of Minutes Missed 1."

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 ClaimVantage AC Numbers into a single ticket.

Date Off 1 11/03/2025	Number of Hours Missed 1 8	Number of Minutes Missed 1
Treatment or Incapacity 1		
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		
Description		

Required



## STEP 21

### 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.

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 ClaimVantage AC Numbers into a single ticket.

Date Off 1 11/03/2025	Number of Hours Missed 1 8	Number of Minutes Missed 1 0
Treatment or Incapacity 1		
Treatment		
Incapacity		
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		
Description		

## STEP 22

**If needing to report intermittent hours for more than 1 day, repeat steps 19 – 22.**

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

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 ClaimVantage AC Numbers into a single ticket.**

Date Off 1 11/03/2025	Number of Hours Missed 1 8	Number of Minutes Missed 1 0
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		

Description

## STEP 23

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*

19 of 20

## STEP 24

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.

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