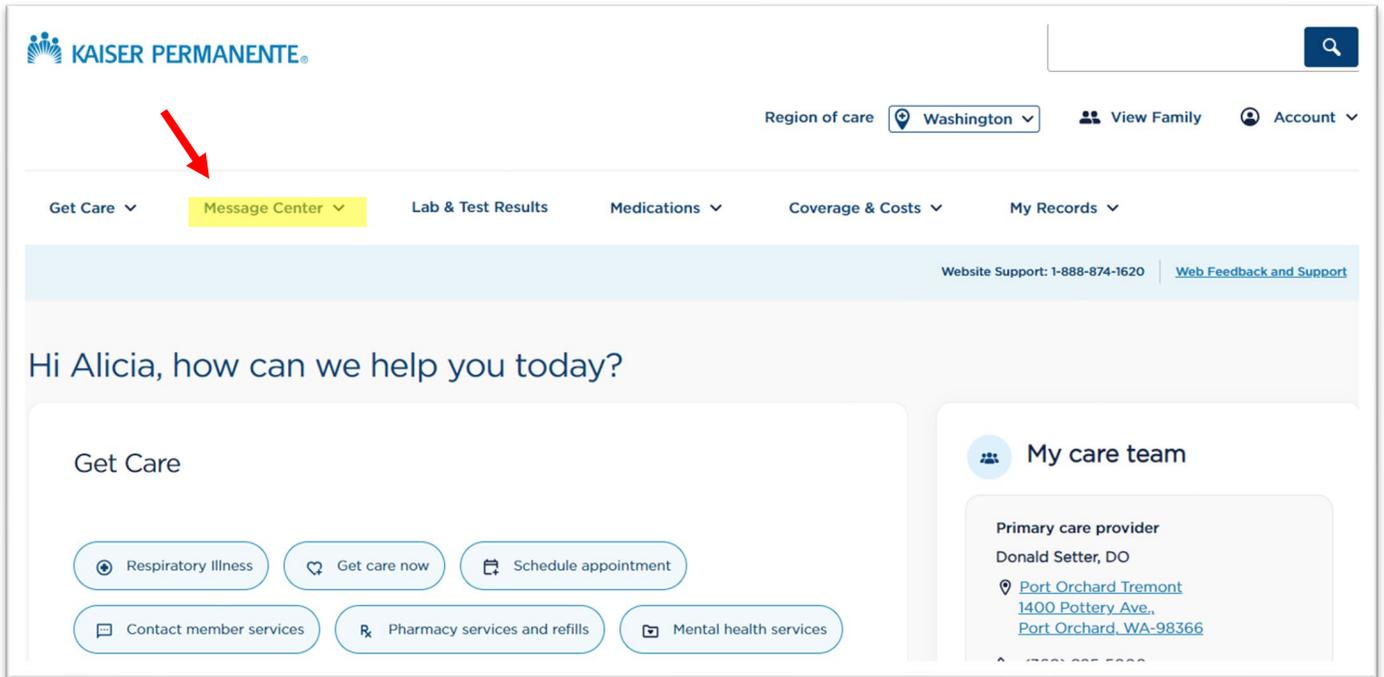


Kaiser Member Online Web Portal

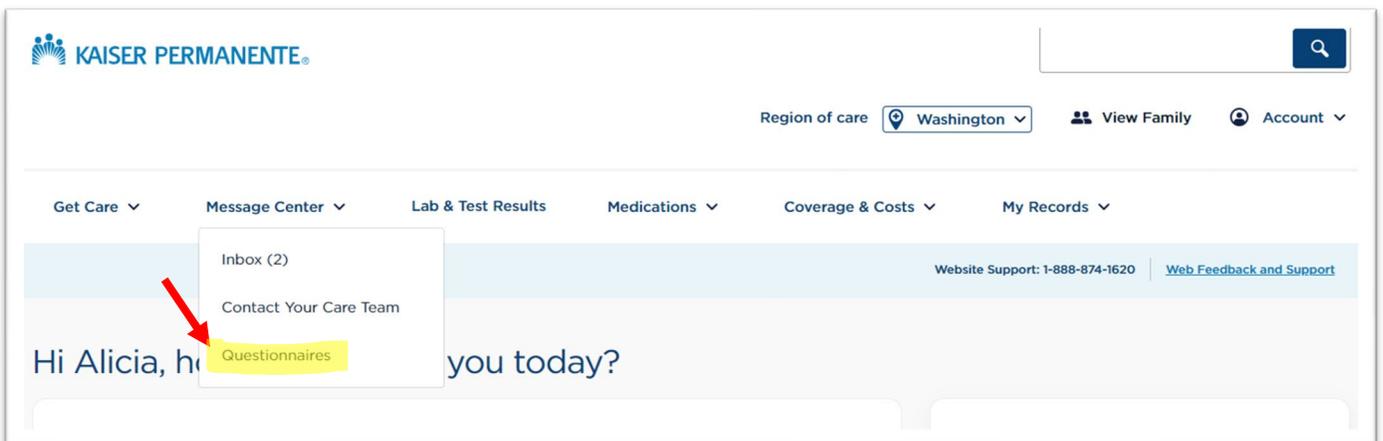
Medical Leave Documents Request

| Desktop/Tablet/Computer Access |

#1. You will need to log into your Kaiser online member portal:



#2. Select the **Message Center** menu option -> Drop down selection **Questionnaires**:



#3. From the **Questionnaires** listed options, you will scroll down to select the **FMLA Medical Certification Request**:

The screenshot shows the 'Questionnaires' section of a patient portal. At the top, there is a navigation bar with 'Menu', 'Appointments & Visi...', 'Message Center', 'Lab & Test Results', and 'Medications'. On the right, there is a user profile for 'Alicia'. Below the navigation, the 'Questionnaires' section is titled and includes a list of optional questionnaires. Each item has a title, a brief description, and a 'Not yet answered' status with a right-pointing arrow. A red arrow points to the 'FMLA medical certification request' item, which is highlighted in yellow. The other items are: 'Pharmacy: Medication transfer', 'Pharmacy: Prescription Preferences', 'Flu Vaccine Consent', and 'Immunizations: Flu vaccine from outside Kaiser Permanente'.

#4. You will then complete the required prompts for the FMLA/PFML application request. This will be sent to an internal SMART Team of Kaiser and reviewed by the medical provider:

The screenshot shows the 'FMLA medical certification request' form. At the top, there is a navigation bar with 'Menu', 'Appointments & Visi...', 'Message Center', 'Lab & Test Results', and 'Medications'. On the right, there is a user profile for 'Alicia'. Below the navigation, the form is titled 'FMLA medical certification request'. It includes instructions: 'The terms 'I' and 'you' refer to the patient and 'family member' refers to the patient's adult or minor child, spouse or parent. It may take up to 15 calendar days to process your certification request.' There is a note: '*Indicates a required field.' The main question is '*Which FMLA certification forms are you requesting?' with a yellow highlight on the text 'Select all that apply.' Below this are two radio button options: 'Myself' and 'My family member'. The next question is '*I had (or will have) planned medical treatment(s) (scheduled medical visits) on the following date(s):' with an example: 'For example, psychotherapy, prenatal appointments'. Below this is a text input field. At the bottom, there are three buttons: 'Continue', 'Finish later', and 'Cancel'.