

## **INFORMATION NEEDED FROM YOUR HEALTH CARE PROVIDER**

### **Qualifying Disabilities Under the Americans with Disabilities Act (ADA), as Amended:**

To be protected under the ADA, an individual with a disability is defined as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment.

Major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.

Under the ADA, as amended, "major life activities" is expanded to include "major bodily functions." Major bodily functions include, but are not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

### **Medical Certification:**

According to the ADA, you must be capable of performing the essential functions of your position, with or without reasonable accommodations. To begin the interactive process to request workplace accommodations, we need to receive a letter from your appropriate health care provider documenting the medical necessity of your request. While we do not need a disclosure of your medical diagnosis, we do need enough detail to make a determination about the accommodation request. Please ensure that your health care provider's statement includes:

- 1) Confirmation that you have a disability that would qualify you for an accommodation as required under the ADA. (We do not need your medical diagnosis.)
- 2) What specific requirements of your position are you unable to perform without reasonable accommodations?
- 3) What specific accommodations are being requested? For this item, we are seeking specific information about the accommodations that you need. In some cases, we receive requests for specific equipment or office furniture that may allow you to perform the essential functions of your position. Please ensure your health care provider provides a detailed description of the item needed (for example,

dimensions) so we can determine whether we can accommodate the request. We also receive requests for accommodations in the form of a description of the specific requirements of your position that you are unable to perform, such as, “no bending or stooping,” “no lifting greater than 10 pounds,” “the employee may need rest breaks of X duration every X number of hours,” etc. **If you are requesting remote work due to an ADA qualifying health concern related to COVID-19, please have your health care provider specify whether mitigating measures, such as social distancing, plexiglass barriers, our mandatory mask mandate, or any other accommodations that may be requested by your health care provider, would allow you to return to in-person work.**

4) What is the period of time the accommodations are expected to apply?

The letter provided by your health care provider must be on their letterhead and include the name of the health care provider, the name of the hospital/facility/practice, the address of the hospital/facility/practice, and its appropriate contact numbers.

Submit your health care provider’s statement along with a completed [accommodation request form](#) to either your department HR Contact or the Division of Human Resources’ Employee Relations Office at [user@mailbox.sc.edu](mailto:user@mailbox.sc.edu).

Follow up information may be needed regarding your ADA accommodations request. You will be notified if further information is needed from either you or your health care provider.

The Employee Relations Office does not share your confidential health condition/status with outside parties. We only discuss requested or proposed accommodations with appropriate representatives from your department/division, such as your supervisor or HR Contact. The purpose of these discussions is to determine whether requested or proposed accommodations can be provided to allow you to perform the essential functions of your position without creating an undue hardship on your department/division or the university.

If you need assistance or have any questions, please contact the Employee Relations Office at 803-777-3821.