

Congress of the United States

Washington, DC 20515

February 5, 2026

The Honorable Lori Chavez-DeRemer

Secretary

U.S. Department of Labor

200 Constitution Avenue, NW

Washington, DC 20210

Dear Secretary Chavez-DeRemer:

We are writing to request that you clarify that Endometriosis and Adenomyosis are chronic, debilitating conditions that are included on the Family Medical Leave Act (FMLA) certification form and American with Disabilities (ADA) forms to protect workers, significantly improve compliance, and reduce employer confusion—without any statutory or regulatory changes.

Currently, the WH-380 Certification of Health Care Provider for Employee’s Serious Health Condition under the FMLA provided by the Department of Labor states, “FMLA Chronic Conditions: (e.g. asthma, migraine headaches) Due to the condition, it is medically necessary for the patient to have treatment visits at least twice per year.” Under current law, Endometriosis and Adenomyosis already meet the definition of chronic serious health conditions for purposes of FMLA. In addition, these conditions qualify under the ADA based on their ability to substantially limit one or more major life activities. However, because Endometriosis and Adenomyosis are not listed, most employees do not obtain any protection under this law. This lack of protection impacts tens of millions of employers, employees and their families as well as the economy.

Approximately 1 in 10 women have Endometriosis, while the prevalence of Adenomyosis potentially affects 20-60% of women, often co-occurring and more prevalent in those with pelvic pain or infertility, according to NIH.¹ In addition, it takes on average 7-10 years to diagnose and can emerge at any age, both pre- and post-menopause. Compared to people without endometriosis, patients with endometriosis are at a 2.131-fold higher risk of developing mental disorders, especially in elder women due to the severe and debilitating pain, diagnostic odyssey, and inability to access excision surgery, according to the NIH.²

There are three key types of endometriosis: superficial peritoneal, ovarian, and deep infiltrating, and the impact on the body is pervasive and long-lasting. In addition to pelvic pain, these conditions are full-body and systemic and can involve multiple organ systems, leading to symptoms such as shortness of breath due to diaphragmatic or thoracic involvement, leg pain and impaired mobility from sciatic endometriosis, bowel and bladder dysfunction, chronic fatigue, and debilitating menstrual symptoms, all of which contribute to its profound economic and social impact. It causes severe pain and infertility, hinders the ability to work, and significantly reduces the quality of life, with a substantial economic impact.³ That is why we must ensure that employers and employees alike understand that the FMLA applies to these conditions.

¹<https://pmc.ncbi.nlm.nih.gov/articles/PMC12629041/#:~:text=The%20prevalence%20of%20endometriosis%20and%20adenomyosis%20varies%20significantly%20across%20different,epidemiological%20data%20on%20these%20conditions>

² <https://pmc.ncbi.nlm.nih.gov/articles/PMC10693200/>

³ <https://www.frontiersin.org/journals/global-womens-health/articles/10.3389/fgwh.2022.902371/full>

In practice, employers, HR professionals, and even healthcare providers rely primarily on Department of Labor guidance when determining whether a condition qualifies for FMLA. When a condition is named on the certification form, it is understood to be legitimate and protected. When it is absent, it is frequently treated as discretionary, minimized, or misunderstood.

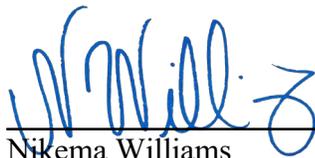
As a result, workers with Endometriosis and Adenomyosis routinely experience:

- Denial of intermittent leave for flare-based symptoms
- Employer skepticism about the seriousness or legitimacy of the condition
- Improper termination or discipline tied to absences
- Reluctance from providers to complete FMLA certifications due to uncertainty
- Excessive requests for recertification due to misunderstanding of chronic conditions

While no form can provide an exhaustive list of chronic conditions, listing Endometriosis and Adenomyosis on the Department's FMLA website, on the WH380 form, and in educational materials would have immediate, real-world impact that benefits employees and employers alike. In addition, we encourage the Department to describe these conditions accurately as full-body, systemic diseases that can fluctuate and are multi-dimensional, as this is essential to proper FMLA administration. This clarification would improve consistency in FMLA determinations, reduce disputes and improper denials, support employer compliance, and align DOL guidance with existing law and medical reality.

Thank you for your time, leadership, and consideration. We look forward to your prompt response.

Sincerely,



Nikema Williams
Member of Congress



Nydia M. Velázquez
Member of Congress



Rashida Tlaib
Member of Congress



David Scott
Member of Congress



Eleanor Holmes Norton
Member of Congress



April McClain Delaney
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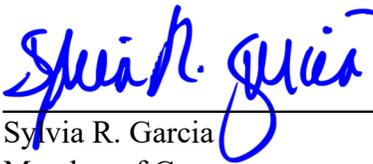
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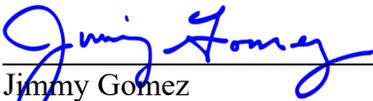
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