January 16, 2018

NEW YORK STATE

Paid Family Leave

A Guide for Employees

Agenda

1. Why We Need Paid Family Leave
2. Uses of Paid Family Leave
3. Benefits
4. Employee Contributions
5. Eligibility
6. How to Take Paid Family Leave
7. Resources
8. Questions

Why Do We Need Paid Family Leave?

Why Do We Need Paid Family Leave?

1. Employees struggle to choose between maintaining a job and caring for loved ones
2. Employees face the stress of weeks of lost wages
3. Employees fear losing their jobs

NY Leads the Nation

- Governor Cuomo worked to develop the nation's strongest and most comprehensive Paid Family Leave policy
- April 2016 the bill was signed into law

Paid Family Leave Basics

Provides Paid Time Off and Job Protection so you can:

Bond with a new child

Care for a sick family member

Assist loved ones when a family member is deployed abroad

Helpline: (844) 337-6303 Website: www.ny.gov/PaidFamilyLeave

NEW YORK STATE | Paid Family Leave

Uses of Paid Family Leave

Bonding with a Child

Provides for both parents to bond with a child within the first 12 months of:

- Birth
- Adoption
- Foster Care

Caring for a Sick Family Member

Provides paid time off to care for:

- a family member
- with a serious health condition

Caring for a Sick Family Member

Qualifying family members include:

- spouse
- domestic partner
- child
- stepchild
- parent
- parent-in-law
- stepparent
- grandparent
- grandchild

These family members can live outside of New York State and even outside the U.S.

Caring for a Sick Family Member

A serious health condition is an illness, injury, impairment, or physical or mental condition requiring either:

1. inpatient care; or
2. continuing treatment or supervision by a health care provider

Caring for a Sick Family Member

Examples of serious health conditions:

- your mother is receiving chemotherapy
- your father is recuperating from surgery
- your child is undergoing treatment for addiction

Caring for a Sick Family Member

Examples of health conditions not considered serious under Paid Family Leave:

- common cold/flu
- routine dental, orthodontia
- cosmetic treatment

Assisting During a Military Deployment

For assistance when a spouse, child, domestic partner or parent is deployed abroad on active military service. Events may include:

- Short notice military deployment
- Military events; related activities
- Service member's rest, recuperation or counseling
- Post-deployment activities
- Making financial/legal arrangements
- Child care arrangements for military member's child

Benefits

Time Off Benefits

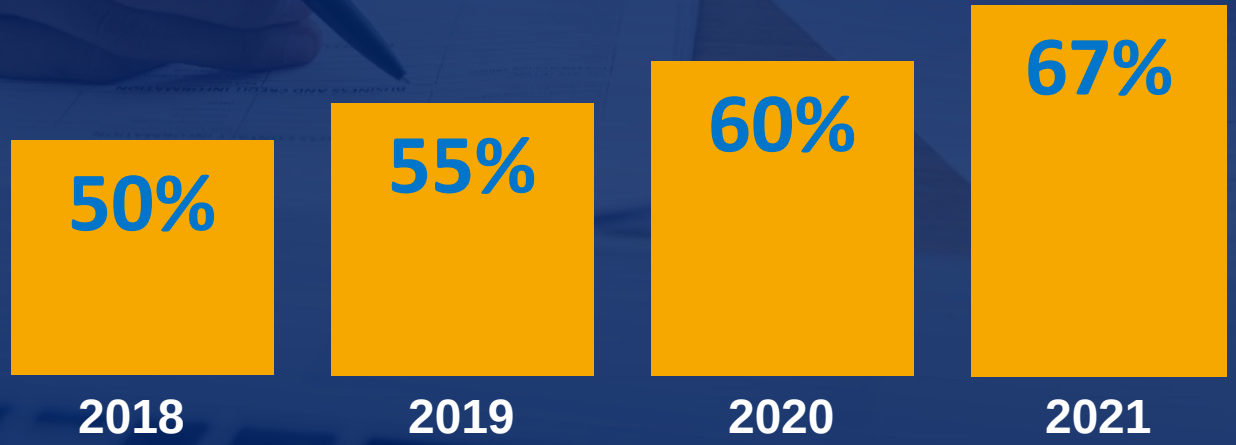
Time off benefits phased in starting January 1, 2018 at 8 weeks and will reach 12 weeks by 2021

2018	2019	2020	2021
8 WEEKS	10 WEEKS	10 WEEKS	12 WEEKS

* The Department of Financial Services will review the marketplace every year before benefits are increased

Wage Benefits

Benefits phased in starting January 1, 2018 at 50% of an employee's average weekly wage and will reach 67% by 2021



* Benefits will be capped at the designated percentage of the New York State Average Weekly Wage

Your Rights and Protections

Employees have paid time off and:

- **Job Protection**
- **Health insurance** continued while on leave
  - Employees continue paying their share, if any
- **Protection from discrimination and retaliation** for requesting or taking Paid Family Leave

Paid Family Leave & Other Leave Policies

Helpline: (844) 337-6303 Website: www.ny.gov/PaidFamilyLeave

NEW YORK STATE | Paid Family Leave

How are Paid Family Leave and FMLA Similar?

Both Paid Family Leave and the Family and Medical Leave Act provide:

- Leave for :
  - bonding with a child
  - caring for sick family members
  - assisting family when a service member is deployed abroad
- Job protection
- Continued health insurance during leave

How do Paid Family Leave and FMLA Differ?

	PFL	FMLA
Benefits	**Paid**	**Unpaid**
Coverage	• All private employers • Public employers may opt in • **One or more employees** in any calendar year	• Public and private employers • **50 or more employees** in a 75-mile radius
Eligibility	• After **26** consecutive weeks of employment if regularly working **20** or more hours per week • After **175** days worked if regularly working less than **20** hours per week	• **12** months of employment • **1,250** hours of work in the **12**-month period preceding leave
Reason for Leave	• Employees **cannot** use for own serious health condition • Can be used to care for a child of any age	• Employee **can** use for own serious health condition • Can only be used to care for a child if the child is under 18 years old, or "incapable of self-care because of a mental or physical disability"
Length of Leave	• Only in full-day increments	• Hourly basis
Paid Time Off	• Employers cannot require employees use paid time off while on PFL	• Employer can compel an employee to use paid time off while on FMLA

What about Paid Family Leave and Other Types of Leave?

- **Short-term disability:** Employees cannot collect disability and Paid Family Leave benefits during the same period of time
- **Workers' Compensation:** Employees cannot collect Paid Family Leave benefits while collecting Workers' Compensation for a total disability
  - Employees on a reduced earnings schedule may be eligible for benefits

Employee Contributions

How Much Do You Pay?

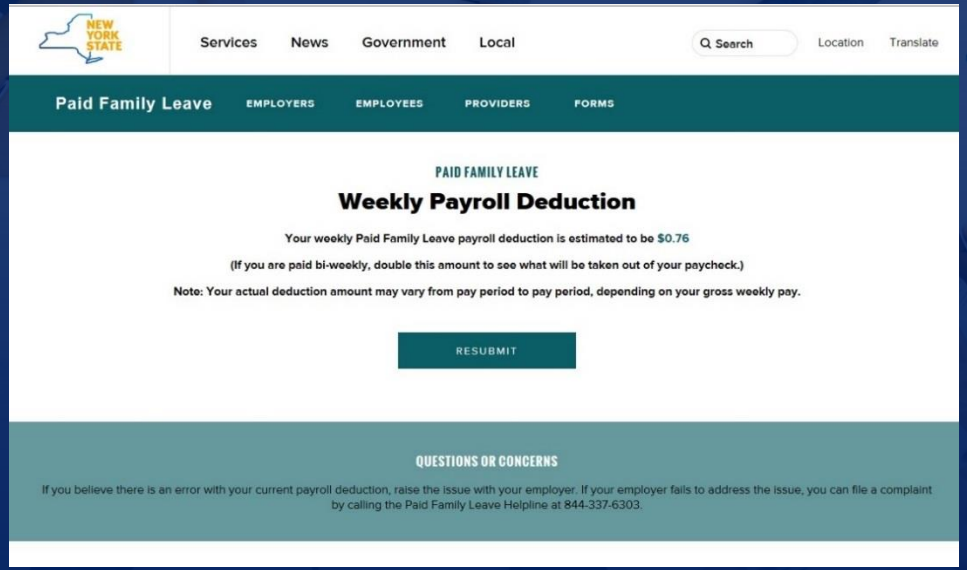
- You pay for these benefits through a small weekly payroll deduction
- The 2018 payroll contribution is 0.126% of your weekly wage
  - Contributions are capped at an annual maximum of $85.56
  - If you earn less than the NYS Average Weekly Wage, your annual contribution will be less than the cap

Example: If you earn $27,000 this year ($519 a week), you will pay about 65 cents per week for Paid Family Leave

Weekly Deduction Calculator

A weekly deduction calculator is available:

ny.gov/PFLcalculator



Examples for 2018 Paid Family Leave Coverage

Weekly Salary	Weekly PFL contribution	Maximum PFL Time Off	Weekly Pay on PFL	Maximum Paid Benefit
$500 ($26,000 annually)	$0.63/week ($32.76 annually)	8 weeks	$250	$2000
$1305.92 ($67,907 annually)	$1.65/week ($85.56 annually)	8 weeks	$652.96	$5223.68

Employee Eligibility

Who is Eligible?

- Most employees who work for private employers
- If you are a public employee, your employer may opt in
- Public employees represented by a union may be covered if Paid Family Leave is collectively bargained

Who is Eligible?

You are eligible if you regularly work:

- 20 or more hours per week
  - For 26 consecutive weeks
- Less than 20 hours per week
  - For 175 days

You are eligible regardless of your citizenship and/or immigration status

Can You Waive Coverage?

Employees who do not work the minimum time may file waivers

- Available at ny.gov/PaidFamilyLeave
- Employees who file a waiver will be ineligible for benefits and exempt from making contributions

Can You Revoke a Waiver?

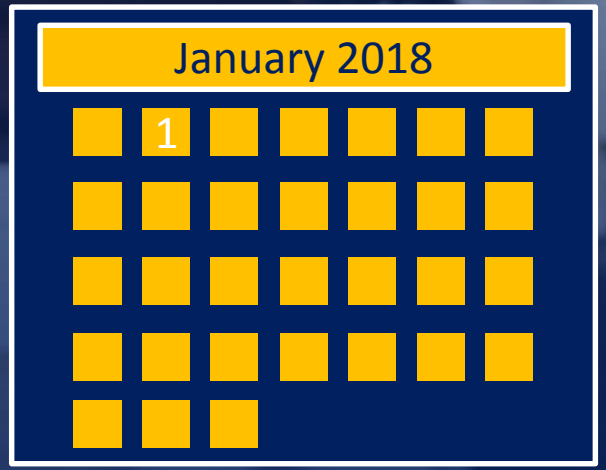
- The waiver will be automatically revoked if your schedule changes or you may voluntarily revoke it at any time
- You will begin making Paid Family Leave contributions along with any retroactive amounts due

Taking Paid Family Leave

Helpline: (844) 337-6303 Website: www.ny.gov/PaidFamilyLeave

NEW YORK STATE | Paid Family Leave

When Can You Take Paid Family Leave?



- As of January 1
- Maximum benefit available once every 52 weeks

How You Request Leave

Employee

- Notifies employer of the need for PFL 30 days in advance, if foreseeable

Employee

- Files claim form with employer

Employer

- Enters information onto claim form
- Returns to employee within 3 days

Employee

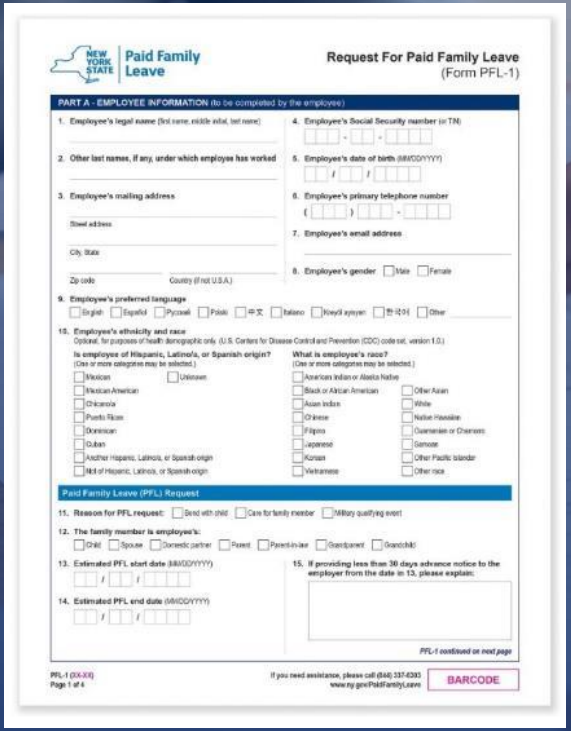
- Attaches supporting documentation
- Submits to the insurer

Insurers must pay or deny the claim within 18 days of receipt

Getting Request Forms

You can get Paid Family Leave request forms from:

- Your employer
- Your employer's insurance carrier
- ny.gov/PaidFamilyLeaveApply



NEW YORK STATE | Paid Family Leave

Request For Paid Family Leave
(Form PFL-1)

PART A - EMPLOYEE INFORMATION (to be completed by the employee)

1. Employee's legal name (first name, middle initial, last name)
2. Other last names, if any, under which employee has worked
3. Employee's mailing address
   Street address
   City, State
   Zip code Country (if not U.S.A.)
4. Employee's Social Security number (or TIN)
5. Employee's date of birth (MM/DD/YYYY)
6. Employee's primary telephone number
7. Employee's email address
8. Employee's gender ☐ Male ☐ Female
9. Employee's preferred language
   ☐ English ☐ Español ☐ Русский ☐ Polski ☐ 中文 ☐ Italiano ☐ Kreyòl ayisyen ☐ 한국어 ☐ Other
10. Employee's ethnicity and race
    Optional, for purposes of health demographic only. (U.S. Centers for Disease Control and Prevention (CDC) code set, version 1.0.)
    Is employee of Hispanic, Latino/a, or Spanish origin? (One or more categories may be selected.)
    ☐ Mexican ☐ Unknown
    ☐ Mexican American
    ☐ Chicano/a
    ☐ Puerto Rican
    ☐ Dominican
    ☐ Cuban
    ☐ Another Hispanic, Latino/a, or Spanish origin
    ☐ Not of Hispanic, Latino/a, or Spanish origin
    What is employee's race? (One or more categories may be selected.)
    ☐ American Indian or Alaska Native
    ☐ Black or African American
    ☐ Asian Indian
    ☐ Chinese
    ☐ Filipino
    ☐ Japanese
    ☐ Korean
    ☐ Vietnamese
    ☐ Other Asian
    ☐ White
    ☐ Native Hawaiian
    ☐ Guamanian or Chamorro
    ☐ Samoan
    ☐ Other Pacific Islander
    ☐ Other race

Paid Family Leave (PFL) Request

11. Reason for PFL request: ☐ Bond with child ☐ Care for family member ☐ Military qualifying event
12. The family member is employee's: ☐ Child ☐ Spouse ☐ Domestic partner ☐ Parent ☐ Parent-in-law ☐ Grandparent ☐ Grandchild
13. Estimated PFL start date (MM/DD/YYYY)
14. Estimated PFL end date (MM/DD/YYYY)
15. If providing less than 30 days advance notice to the employer from the date in 13, please explain:

PFL-1 continued on next page

PFL-1 (XX-XX)
Page 1 of 4

If you need assistance, please call (844) 337-6303
www.ny.gov/PaidFamilyLeave

BARCODE

NEW YORK STATE | Paid Family Leave

Handling Disputes

- If your claim is denied, you may request a review
- Arbitration under a neutral arbitrator will resolve disputes

Protection from Discrimination

If your employer:

- does not reinstate you to the same or similar position,
- terminates you,
- reduces your pay and/or benefits, or
- disciplines you for requesting or taking Paid Family Leave,

you can file a discrimination claim with the Workers' Compensation Board

Paid Family Leave is Here

Helpline: (844) 337-6303 Website: www.ny.gov/PaidFamilyLeave

NEW YORK STATE | Paid Family Leave

Learn More

Visit ny.gov/PaidFamilyLeave to access:

- Detailed information on Paid Family Leave
- Weekly payroll deduction calculator
- Paid Family Leave frequently asked questions
- Paid Family Leave request forms

Learn More

Helpline:
(844) 337-6303

Website:
ny.gov/PaidFamilyLeave

Get Email Updates:
Select "Get Updates" on the bottom of PFL website

GET UPDATES

NEW YORK STATE | Paid Family Leave