



# A Guide for **Employees**



**Paid Family  
Leave**

# 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?

Helpline: **(844) 337-6303**

Website: **[PaidFamilyLeave.ny.gov](https://PaidFamilyLeave.ny.gov)**



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# 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

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# NY Leads the Nation



In April 2016, Governor Cuomo signed the nation's **strongest** and **most comprehensive** Paid Family Leave policy into law

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# Paid Family Leave Basics

Provides **paid time off** and **job protection** so you can:



Bond with a new child



Care for a family member with a serious health condition



Assist loved ones when a spouse, domestic partner, child, or parent is deployed abroad

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# Uses of Paid Family Leave

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# Bonding with a Child

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

Birth

Adoption

Foster  
Care

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# Caring for a Family Member with a Serious Health Condition

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 Family Member with a Serious Health Condition

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

- **inpatient care**; or
- **continuing treatment or supervision** by a health care provider

# Caring for a Family Member with a Serious Health Condition

Examples of conditions that may qualify as serious health conditions:

- your mother is receiving chemotherapy and needs emotional support
- your father is recuperating from surgery
- your child is undergoing treatment for addiction

New in 2019! Support for tissue and organ donors

# Caring for a Family Member with a Serious Health Condition

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 and recuperation
- Counseling
- Post-deployment activities
- Making financial/legal arrangements
- Child care arrangements for military member's child

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# Benefits

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# Time Off Benefits

Time off benefits are at 10 weeks as of January 1, 2019 and will reach 12 weeks by 2021



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

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# Wage Benefits

As of January 1, 2019, wage benefits are 55% of an employee's average weekly wage and will reach 67% by 2021



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

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# Wage Benefit Calculator

A wage benefit calculator is available:

[Paidfamilyleave.ny.gov/PFLbenefitscalculator2019](https://Paidfamilyleave.ny.gov/PFLbenefitscalculator2019)

PAID FAMILY LEAVE

## 2019 Wage Benefit Calculator

In 2019, employees who take Paid Family Leave will receive 55% of their average weekly wage (AWW), capped at 55% of the New York State Average Weekly Wage. Your AWW is the average of your last eight weeks of pay prior to starting Paid Family Leave. The maximum weekly benefit for 2019 is \$746.41.

Use the calculator below to view an estimate of your weekly benefit.\*

Enter your last eight weeks of gross pay:

<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

Note: When calculating benefits, Paid Family Leave insurers must use whichever is higher: the last eight weeks worked **including** the week when PFL started, or the last eight weeks worked **not including** the week PFL started.

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# Your Rights and Protections

Employees have paid time off and:

- **Job Protection**
- **Continued health insurance** while on leave, on the same terms as if you had continued to work
  - 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

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# 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 a family member with a serious health condition
  - assisting when a family member is called to active military service abroad
- Job protection
- Continued health insurance during leave on the same terms as if the employee had continued to work

# How do Paid Family Leave and FMLA Differ?

	PFL	FMLA
<b>Benefits</b>	<b>Paid</b>	<b>Unpaid</b>
<b>Coverage</b>	<ul style="list-style-type: none"> <li>• Almost all private employers</li> <li>• Public employers may opt in</li> <li>• <b>One or more employees in employment</b> on each of at least 30 days in any calendar year</li> </ul>	<ul style="list-style-type: none"> <li>• Public and private employers</li> <li>• <b>50 or more employees</b> in a 75-mile radius</li> </ul>
<b>Eligibility</b>	<ul style="list-style-type: none"> <li>• After <b>26</b> consecutive weeks of employment if regularly working <b>20</b> or more hours per week</li> <li>• After <b>175</b> days worked if regularly working less than <b>20</b> hours per week</li> </ul>	<ul style="list-style-type: none"> <li>• <b>12</b> months of employment</li> <li>• <b>1,250</b> hours of work in the <b>12</b>-month period preceding leave</li> </ul>
<b>Reason for Leave</b>	<ul style="list-style-type: none"> <li>• Employees <b>cannot</b> use for own serious health condition</li> <li>• Can be used to care for a child of any age</li> </ul>	<ul style="list-style-type: none"> <li>• Employee <b>can</b> use for own serious health condition</li> <li>• 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”</li> </ul>
<b>Length of Leave</b>	<ul style="list-style-type: none"> <li>• Only in full-day increments</li> </ul>	<ul style="list-style-type: none"> <li>• Hourly basis</li> </ul>
<b>Paid Time Off</b>	<ul style="list-style-type: none"> <li>• Employers cannot require employees use paid time off while on PFL</li> </ul>	<ul style="list-style-type: none"> <li>• Employer can compel an employee to use paid time off while on FMLA</li> </ul>

# What about Paid Family Leave and Other Types of Leave?

- **Short-term disability:** You cannot collect statutory disability and Paid Family Leave benefits during the same period of time
- **Workers' Compensation:** You 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

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# How Much Do You Pay?

The 2019 payroll contribution is **0.153%** of your gross wages each pay period

- Contributions are capped at an **annual maximum of \$107.97**
- If you earn less than the New York State Average Weekly Wage, your annual contribution will be less than the cap



# Weekly Deduction Calculator

- A weekly deduction calculator is available:  
[Paidfamilyleave.ny.gov/paid-family-leave-calculator2019](https://Paidfamilyleave.ny.gov/paid-family-leave-calculator2019)

PAID FAMILY LEAVE

## 2019 Paid Family Leave Payroll Deduction Calculator

If you are eligible for Paid Family Leave, you pay for these benefits through a small payroll deduction equal to 0.153% of your gross wages each pay period. In 2019, these deductions are capped at the annual maximum of \$107.97.

Use the calculator below to view an estimate of your deduction.

Enter your gross pay for the pay period, including estimated bonuses/commissions:

\*This calculator is meant to give only an estimate of your PFL deduction. Your actual deduction amount may change depending on whether you receive bonuses and commissions or other forms of compensation as part of your wage.

SUBMIT

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# Employee Eligibility

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# Who is Covered?

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

# Who is Eligible?

Employees who work for covered employers are eligible if they:

- Regularly work 20 or more hours per week
  - After 26 consecutive weeks of employment with the same employer
- Regularly work fewer than 20 hours per week
  - For 175 days with the same employer

Citizenship and/or immigration status is not a factor in eligibility

# Can You Waive Coverage?

You can only waive coverage if you:

- Regularly work 20 or more hours per week but won't be in employment with your employer for 26 consecutive weeks or
- Regularly work fewer than 20 hours per week and won't work 175 days in a 52-week period

Employers must provide a waiver form to all employees who qualify for one.

Employees who properly file a waiver will be **ineligible** for benefits and **exempt** from making contributions



# Taking Paid Family Leave

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# When Can You Take Paid Family Leave?

- Paid Family Leave is now in its second year
- Maximum benefit available **once every 52 weeks**



# How to Request Leave

**NOTIFY EMPLOYER:** At least 30 days before start of leave, if foreseeable or as soon as possible

## OBTAIN

- Obtain forms from the **employer, employer's carrier, or on the website**



## COMPLETE & ATTACH

- Complete the form package **specific to the type of leave**
- Attach supporting documentation to forms



## SUBMIT

- Submit to the employer's **insurance carrier within 30 days of starting leave** to avoid losing benefits



# Getting Request Forms

You can get Paid Family Leave request forms from:

- Your employer
- Your employer's insurance carrier
- [PaidFamilyLeave.ny.gov/forms](https://PaidFamilyLeave.ny.gov/forms)

**NEW YORK STATE** | **Paid Family Leave** | **Request For Paid Family Leave (Form PFL-1)**

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

- Employee's legal name (last name, middle initial, first name)
- Other last names, if any, under which employee has worked
- Employee's mailing address  
Street address  
City, State  
Zip code County (if not U.S.A.)
- Employee's Social Security number (or TIN)
- Employee's date of birth (MM/DD/YYYY)
- Employee's primary telephone number
- Employee's email address
- Employee's gender  Male  Female
- Employee's preferred language  
 English  Spanish  Chinese  French  Korean  Japanese  Hindi  Other
- Employee's ethnicity and race  
Optical, 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, or Spanish origin?  
(One or more categories may be selected.)  
 Mexican  Cuban  Puerto Rican  Dominican  Other Hispanic, Latino, or Spanish origin  
What is employee's race?  
(One or more categories may be selected.)  
 American Indian or Alaska Native  Black or African American  Other Asian  Asian Indian  White  Other  
 Japanese  Korean  Other race

**Paid Family Leave (PFL) Request**

- Reason for PFL request:  Care with child  Care for family member  Military qualifying event
- The family member is employee's:  
 Child  Spouse  Domestic partner  Parent  Parent-in-law  Grandparent  Grandchild
- Estimated PFL start date (MM/DD/YYYY)
- Estimated PFL end date (MM/DD/YYYY)
- 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 (03/16) Page 1 of 4 If you need assistance, please call (844) 337-6303 or [www.ny.gov/paidfamilyleave](https://www.ny.gov/paidfamilyleave) **BARCODE**

# Handling Disputes

- If your claim is denied, or you have another claim-related dispute, you may request arbitration
- Arbitration for Paid Family Leave is handled by NAM (National Arbitration and Mediation) [www.nyspfla.com](http://www.nyspfla.com)

# Protection from Discrimination

If your employer:

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

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

# Paid Family Leave is Here

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# Learn More

Visit [PaidFamilyLeave.ny.gov](https://PaidFamilyLeave.ny.gov) to access:

- Detailed information on Paid Family Leave
- Paid Family Leave request forms and fact sheets
- Weekly benefit and payroll deduction calculators
- Paid Family Leave updates for 2019

# Learn More

Helpline:

**(844) 337-6303**

Website:

**[PaidFamilyLeave.ny.gov](https://PaidFamilyLeave.ny.gov)**

Get Email Updates:

**Select “Get Updates” on the bottom of PFL website**

GET UPDATES

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# Questions?

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