PAID FAMILY & MEDICAL LEAVE: A WIN FOR CONNECTICUT WOMEN, FAMILIES, AND BUSINESSES

FREQUENTLY ASKED QUESTIONS

Campaign for PAID FAMILY LEAVE

CWEALF
CONNECTICUT WOMEN’S EDUCATION AND LEGAL FUND
In the 2019 legislative session, Connecticut lawmakers PASSED paid family and medical leave legislation. Public Act No. 19-25: An Act Concerning Paid Family and Medical Leave creates a statewide system of job protected paid leave to workers who need to take time off to care for themselves or a loved one, or welcome a new child.

The United States remains one of only two countries in the world without a national paid family and medical leave program. Currently, only 17% of workers and 6% of low-wage workers, who are disproportionately women and people of color, have access to paid family and medical leave through their employer. Connecticut is surrounded by states (RI, NY, NJ and MA) that previously passed paid family and medical leave. This year, Connecticut became the seventh state to pass paid family and medical leave and the new law is one of the most comprehensive paid leave programs in the country.

Paid family and medical leave is a win for Connecticut's women, families and businesses. Paid family and medical leave:

- Attracts and retains a talented workforce our economy needs to thrive and removes the financial burden from small businesses when workers have a major health or family event and need to take time off from work.
- Improves health outcomes for workers, caregivers, and children, and leads to lower mortality rates and emergency health care spending. Without paid leave, workers often spiral into debt, are forced to quit their jobs, and are unable to pay medical bills or other household expenses.
- Is a critical racial justice issue: workers of color are overrepresented in low-wage jobs that do not provide paid leave and, due to racial wealth and wage gaps, have fewer resources to absorb the financial impact of a family or personal medical emergency.

Since 2013, the Campaign for Paid Family Leave, a coalition of more than 75 organizations and 100 small businesses, fought for the passage of real paid leave that is accessible to and inclusive of all workers - no matter where they work, what they earn, or who they care for. CWEALF leads the Campaign for Paid Family Leave and will continue to advocate for a transparent and successful implementation of the paid family and medical leave program.

Keep reading to learn more about P.A. 19-25 and how the law will positively affect workers, families, and businesses here in Connecticut.

Keep up the fight for women's economic security: www.cwealf.org
Why can I take paid family and medical leave?

Workers can take paid family and medical leave to recover from a serious health condition; welcome a new child by birth, adoption, or foster care placement; provide care to a family member with a serious illness; serve as an organ or bone marrow donor; or to care for an injured service member.

How is the program funded?

Paid family and medical leave is entirely employee funded by small payroll deductions. Workers will contribute up to 0.5% of their weekly earnings up to the same taxable income as social security (about $132,000). Research from the Institute for Women’s Policy Research indicates this program (both paid leave compensation and the administrative costs) is self-sustaining and does not require annual appropriation from the state budget.

How many weeks of leave can I take?

Eligible workers can take up to 12 weeks of leave in a 12 month period depending on what is medically recommended, plus an extra 2 weeks if they experience pregnancy complications.

How much of my weekly earnings will I receive while out on leave?

Workers will receive 95% of their weekly earnings up to 40 times the minimum wage; plus 60% of earnings above 40 times the minimum wage. The total weekly compensation will be capped at 60 times the minimum wage. By 2022 (when benefits will begin), the minimum wage in Connecticut will be $14 per hour. That means, a worker earning minimum wage will receive $532 per week. A worker earning $22 per hour will receive about $725 per week.
Who is covered by paid family and medical leave?

All workers who work for an employer of one or more can take paid family and medical leave. State employees not covered by a collective bargaining agreement (CBA) will automatically be included in the program. State and municipal employees covered by a CBA can bargain to be included in the program. Municipal employees not covered by a CBA are included based on the decision of the local bargaining unit.

How do I become eligible for paid family and medical leave?

Workers must earn at least $2325 in the highest earning quarter within the base period (four of the five most recently completed quarters). Earnings can be with one or multiple employers.

Are men eligible for paid family and medical leave?

Yes, absolutely. People of any sex or gender identity are eligible for leave. In other states, ¾ of paid leave use has been for the worker’s own medical crisis.

What constitutes a “serious health condition”?

Serious health condition means an illness, injury, impairment, or physical or mental condition that involves inpatient care in a hospital, hospice, nursing home or residential medical care facility; or continuing treatment, including outpatient treatment, by a healthcare provider.

Can I take paid leave if I’m unemployed?

Workers must be currently employed or have been employed within the previous 12 weeks.

Can I take paid leave if I’m self-employed?

Self-employed workers may enroll in the program for an initial period of three years. After the initial 3 year period, self-employed workers will be automatically re-enrolled yearly in the program for one year at a time unless they opt-out.
**Is my job protected while I am out on paid family and medical leave?**

Yes. All workers taking leave are eligible for job protection (regardless of the size of their employer) after working at their employer for 3 months.

**What family members are covered by paid family and medical leave?**

Workers can take leave to care for a parent, spouse, child of any age, sibling, grandchild, grandparent, and any other individual related by blood or affinity whose close association with the employee is the equivalent of those family relationships.

**What if my employer already offers paid leave?**

Employers who offer a paid family and medical leave benefit equal to or better than the state’s plan may apply for approval to meet their obligations through a private plan. Private plans must provide all of the same rights, protections and benefits provided to employees as the state plan, including at least the same number of weeks of benefits, at least the same level of wage replacement for each of those weeks and benefits in each circumstance for needing to take leave. Private plans must also be approved by a majority of the employer’s employees, cost employees no more than the state premium (which will not exceed 0.5%), and provide coverage for all employees throughout their period of employment.

**How does paid leave interact with other benefits (PTO, sick days, etc.)?**

Employers may require workers or workers may elect to use any accrued paid vacation, personal leave or family leave before taking paid family and medical leave. Workers may retain at least two weeks of such leave for other purposes.
Can I take leave intermittently?

Yes, workers can take nonconsecutive hours of leave. An employee may take leave intermittently or on a reduced leave schedule for a serious health condition or to care for an ill family member, and must agree with their employer to take leave intermittently for the birth or placement of a child. If an employee takes leave intermittently based on planned medical treatment, their employer may transfer the employee temporarily to an available alternative position that offers equivalent pay and benefits and better accommodates recurring periods of leave.

How does the program protect against fraud?

Employers may request medical certification issued by the healthcare provider of the employee or family member of the employee. If there are doubts about the validity, the employer may require additional information by a different health care provider, at the employer’s expense. If the second opinion differs from the first, the employer may request a third certification at their expense, with a health care provider designated or approved jointly by the employer and employee. Any person who makes a false statement or misrepresentation may be disqualified from the program for two years and pay a penalty. If compensation is paid as a result of misrepresentation by a healthcare provider, that healthcare provider will also pay a penalty.

Who will administer paid family and medical leave?

Legislation creates the Paid Family and Medical Leave Insurance Authority, a quasi-public agency, to administer paid family and medical leave. The Authority's Board of Directors will consist of 13 voting members, including the Labor Commissioner, Secretary of OPM, Commissioner of Administrative Services, Commissioner of Economic and Community Development, and appointments by House and Senate leadership. The State Comptroller and State Treasurer will serve as non-voting members of the Board.
What functions of the program will be administered by the state?

The Department of Revenue Services (DRS) will collect payroll deductions, which will then go to a fund administered by the State Treasurer. The Department of Labor will write regulations and handle the claims appeals process. Other functions of the program, such as marketing and advertising, website development, database development, and initial claims processing may be contracted to an outside vendor through an RFP process.

What happens if the fund becomes insolvent?

According to the Institute for Women’s Policy Research (IWPR) and evidence from other states, the program will remain solvent. If employee contributions are the maximum percentage allowed (0.5%) and the Authority determines that employee contributions are not sufficient to ensure solvency of the program, the Authority will reduce the benefit for covered employees by the minimum amount necessary.

When will I be able to take paid family and medical leave?

Workers will begin to pay into the program in January 2021. Workers will be eligible to receive benefits beginning in January 2022.

Why do I have to pay into the program a year before I’m able to use it?

There must be a one-year waiting period to collect payroll deductions in order for the fund to be solvent before it begins to pay out benefits. This model is similar to programs successfully implemented in other states. When social security began, deductions were collected for several years before people were able to receive benefits.

If I don’t use paid leave, can I get reimbursed for my contributions?

No. The program operates much like an insurance fund. You may not ever need to use the program, but it will be there when you need it. In the meantime, contributions go toward those who need paid leave that year, and toward the administration of the program.
Contact: Maddie Granato, CWEALF | mgranato@cwealf.org
Learn more: www.paidfamilyleavect.org
*Keep up the fight for women’s economic security: www.cwealf.org*