Massachusetts Paid Family and Medical Leave

The Massachusetts Paid Family and Medical Leave (“Massachusetts PFML”) law covers the Company’s employees. It's a state-offered benefit for anyone who works in Massachusetts and who meets eligibility requirements to take up to 26 weeks of paid leave from work for certain medical or family reasons. The law requires contributions be paid to the State to fund the leave benefit. Contributions are paid by both the Company and the employee. Required contributions started on October 1, 2019. Access to certain benefit starts on January 1, 2021 and access to all benefits for eligible employees will be fully implemented started July 1, 2021.

**Explanation of Benefits**

* **Beginning January 1, 2021,** employees may be entitled to up to
* 12 weeks of paid family leave in a benefit year for the birth, adoption, or foster care placement of a child (intermittent or reduced schedule leave cannot be used to bond with a child during the first 12 months after the child's birth, adoption, or foster care placement), or because of a qualifying exigency arising out of the fact that a family member is on active duty or has been notified of an impending call to active duty in the Armed Forces;
* 20 weeks of paid medical leave in a benefit year if they have a serious health condition that incapacitates them from work (intermittent or reduced schedule leave may only be taken if medically necessary).
* 26 weeks of paid family leave in a benefit year to care for a family member who is a covered service member undergoing medical treatment or otherwise addressing consequences of a serious health condition relating to the family member’s military service.
* **Beginning July 1, 2021,** employees may be entitled to up to
	+ 12 weeks of paid family leave in a benefit year to care for a family member with a serious health condition.
	+ 26 total weeks, in the aggregate, of paid family and medical leave in a single benefit year.
* **The first week of leave is unpaid,** with the exception of medical leave during pregnancy or recovery from childbirth if supported by a healthcare provider that this medical leave follows immediately after the family leave.
* **Your weekly benefit amount** will be based on your employee earnings, with a maximum benefit of $850 per week.
* **Employees can use their accrued sick, personal or vacation time** **to cover the first unpaid week.**
* **Agreed-to Intermittent or Reduced Leave Schedules.** An employee who is approved for and takes leave on an intermittent or reduced leave schedule and who fails to work during the times or on the schedule agreed to with the Company may be subject to discipline.

**Job Protection, Continuation of Health Insurance, No Retaliation**

* **Job Protection:** Generally, if you take Massachusetts PFML and return to your job at the close of the period of approved family or medical leave, you will be restored to your previous position or to an equivalent position, with the same status, pay, employment benefits, length-of-service credit and seniority as of the date of leave.
* **Continuation of Health Insurance:** The company will continue to provide for and contribute to your employment-related health insurance benefits, if any, at the level and under the conditions coverage would have been provided if you had continued working continuously for the duration of such leave. The employee portion of the employee's employment-related health insurance benefits shall be remitted by the employee in accordance with the Company’s policies.
* **No Retaliation:** The company will not discriminate or retaliate against you for exercising any right to which you are entitled under the paid family and medical leave law. An employee or former employee who is discriminated or retaliated against for exercising rights under the law may, not more than three years after the violation occurs, institute a civil action in the superior court.

**Contributions to the DFML Family and Employment Security Trust Fund**

On October 1, 2019, contributions to the Department of Family and Medical Leave (DFML) Employment Security Trust Fund began. The State leave law plans to build up money in a fund before the benefit starts. Employee payments are deducted from paychecks. The State sets the amount. As of October 1, 2019, the combined amount of Company and employee payments is 0.75% of pay, which is equal to $7.50 per $1,000 of wages. It is divided between the employee and the employer. The State splits the deducted payments between funding the family leave and funding the medical leave benefits. The amount to be paid will change annually as determined by the State. The Company will adjust the percentages deducted as changed by the State.

**How to File a Claim**

Employees must file claims for paid family and medical leave benefits with the DFML using the Department’s forms. Forms and claim instructions will be available on the Department’s website www.mass.gov/DFML before January 2021.

Employees requesting Massachusetts PFML benefits must give at 30 days’ advance notice to the Company (or as soon as possible if unable to give 30 days’ notice for a reason beyond the employee’s control), along with the anticipated leave length and the expected return date. Notice is to be given to the Human Resources Department by either in person submission, emailing to Human.Resources@Ihserv.org or faxing to 413-831-6639. The DFML may reject benefit applications absent proof of notice.

**Payment for Concurrent Leave**

The Massachusetts PFML benefit described in this policy is separate from the unpaid federal Family and Medical Leave Act (“FMLA”) leave. Eligibility and benefits differ under the federal FMLA leave and the State PFML law.

Leave taken under the Massachusetts PFML law shall run concurrently with leave taken under other applicable state and federal leave laws, including but not limited to, Massachusetts’ Parental Leave Act, the federal Family and Medical Leave Act of 1993, as amended, when the leave is for a qualified reason under those acts.

Any paid leave provided under a company policy and paid at the same or higher rate than paid leave available under this law counts against the allotment of leave benefits available under the Massachusetts PFML law.

**Fitness for Duty Certification**

Employees returning from medical leave for their own serious health condition shall provide a fitness for duty certification to the company from a health care provider. The employee’s failure to provide the fitness for duty certification within the approved leave period forfeits their right to reinstatement.

**Department of Family and Medical Leave (DFML) Contact Information**

 **The Massachusetts Department of Family and Medical Leave**

 Charles F. Hurley Building

19 Staniford Street, 1st Floor

Boston, MA 02114

(617) 626-6565

www.mass.gov/DFML

**More Information is Available**

For more detailed information, please consult the Department’s website: [**www.mass.gov/DFML**](http://www.mass.gov/DFML).

**Current Rates**

|  |  |  |
| --- | --- | --- |
| **Family Leave Contribution** | **Medical Leave Contribution** | **Total Contribution Amount** |
| **.13%** | **.62%** | **.75%** |

Currently, the total contribution amount is 00.75% of wages. Of that 00.75% total contribution amount, there is a split: 17.3% is a family leave contribution and 82.7% is a medical leave contribution.

Under the law, employers are responsible for a minimum of 60% of the medical leave contribution (.372% of wages), but are permitted to deduct from employees’ wages up to 40% of the medical leave contribution (.248% of wages) and up to 100% of the family leave contribution (.13% of wages).

The employee contribution which will be deducted from your earnings is as follows:

* 40% of the Medical Leave Contribution
* 100% of the Family Leave Contribution

 Our company will contribute:

 - 60% of the Medical Leave Contribution o

 - 0% of the Family Leave Contribution

**Company Contact**

If you have any questions about the details of the Massachusetts Paid Family and Medical Leave, you should contact the Human Resources Department at Human.Resources@Ihserv.org or 413-507-2304.