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Alabama

Alabama Paid Family Leave Income Replacement Benefits Act

Enacted April 27, 2023

Mandated Program	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of the child’s birth or the placement for adoption or foster care • Qualifying military exigency • Care for a family member who is injured in the line of duty in the Armed Forces • Other family leave as specified in the policy
Covered Family Members	Child, Spouse, Parent, or any other individual defined as a family member in the insurance policy
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limits	As defined in the insurance policy
Elimination Period	As defined in the insurance policy
Duration	At least 2 weeks in a 52-week period
Job Protection	Based on employer policy
Where to find additional information	Alabama Family Leave Insurance Rule

Arkansas

Arkansas Family Leave Insurance

Enacted February 17, 2023

Mandated Program	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Birth of an employee's child or adoption of a child by the employee • Placement of a foster child in the home of the employee • Care of a family member with a serious health condition • Qualifying military exigency
Covered Family Members	As defined in the insurance policy
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limits	As defined in the insurance policy
Waiting Period	As defined in the insurance policy
Duration	As defined in the insurance policy
Job Protection	Based on employer policy
Where to find additional information	Arkansas Family Leave Insurance Rule

California

California Statutory Disability Insurance (CA DI) and Paid Family Leave (CA PFL), together referred to as SDI

SDI benefits effective January 1, 1946, PFL benefits effective January 1, 2004

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> Earned at least \$300 from which SDI deductions were withheld during the base period Work is localized in CA, or work is not localized in any state but operations are based in CA, or operations are not based in any state but the employee's work is directed from CA, or work is not directed from any state but the employee resides in CA May collect when unemployed, if eligible
Private Plan Option	Yes; self-funded only
Covered Leave Reasons	DI: <ul style="list-style-type: none"> Employee's own non-work-related disability PFL: <ul style="list-style-type: none"> Care for a family member with a serious health condition Bond with a child within 12 months of their birth, adoption, or foster care placement Military assist due to a spouse, domestic partner, parent, or child's military deployment
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling
Contributions	1.3% of wages (no limit) ¹ <ul style="list-style-type: none"> Fully employee paid
Benefit Calculation	Benefits varies based on employee's annual earnings. If annual earnings are: <ul style="list-style-type: none"> Less than \$1,199.96, not eligible or a benefit \$1,200.00 to \$2,889.96, benefit is \$50 \$2,890.00 to \$62,025.60, benefit is 90% of weekly earnings \$62,025.64 to \$79,747.20, benefit is \$1,074 More than \$79,747.20, benefit is 70% of weekly earnings up to the weekly maximum
Weekly Benefit Limits	<ul style="list-style-type: none"> Maximum: \$1,765 Minimum: \$50
Waiting Period	<ul style="list-style-type: none"> DI: 7-day, non-payable waiting period PFL: None
Duration	<ul style="list-style-type: none"> DI: 52 weeks PFL: 8 weeks
Job Protection	None
Where to find additional information	California Employment Development Department SDI website

¹ Limit was removed effective 1/1/2024 for state plan; may still be applied for voluntary plans

Colorado

Colorado Paid Family and Medical Leave Insurance Act (CO FAMILI)

Benefits effective January 1, 2024

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> Earned at least \$2,500 in wages within the state during the base period or elected coverage and meets the requirements Work is localized in CO and work performed outside of CO is incidental, or work is not localized in any state but operations are based in CO, or operations are not based in any state but the employee's work is directed from CO, or work is not directed from any state but the employee resides in CO Must be actively employed
Private Plan Option	Yes; insured or self-funded
Covered Leave Reasons	<ul style="list-style-type: none"> Employee's own serious health condition Care for a family member with a serious health condition Bond with a child within 12 months of their birth, adoption, or foster care placement Qualifying military exigency Safe leave to address the immediate safety needs and impact of domestic violence, stalking, and/or sexual assault NICU leave when an employee's child is receiving inpatient care in a Neonatal Intensive Care Unit (NICU)
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling, and any other individual with whom the employee has a significant personal bond that is or is like a family relationship, regardless of biological or legal relationship
Contributions	<p>0.88% of wages up to \$184,500</p> <ul style="list-style-type: none"> Employers must fund at least 0.45% and may collect 0.45% from employees <p>Note: Total contribution rate decreases to 0.88% on 1/1/2026</p>
Benefit Calculation	<ul style="list-style-type: none"> 90% of the employee's AWW that is \leq50% of the state AWW, plus 50% of the employee's AWW that is $>$50% of the state AWW <p>Note: The state AWW is \$1,534.94.</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> Maximum: \$1,381.45 Minimum: None
Waiting Period	None
Duration	<p>12 weeks, plus 4 additional weeks available for a covered individual with a serious health condition related to pregnancy or childbirth complications</p> <p>An additional 12 weeks for an employee with a child who is receiving inpatient care in a neonatal intensive care unit (NICU) while the child is in the NICU, which will apply to claims occurring on or after January 1, 2026</p>



Job Protection	Yes, if the employee has worked for their employer for at least 180 days
Where to find additional information	Colorado Family and Medical Leave Insurance Program (FAMLI) website

Connecticut

Connecticut Paid Leave (Paid Family and Medical Leave Insurance) (CT PL)

Benefits effective January 1, 2022

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Subject to CT state unemployment insurance (UI) obligations, or if not subject to CT UI, work is localized in CT, or work is not localized in any state but operations are based in CT, or operations are not based in any state but the employee's work is directed from CT, or work is not directed from any state but the employee resides in CT • Earned at least \$2,325 in the highest-earning quarter of the base period and (1) are currently employed or have been employed in the 12 weeks immediately prior to filing a claim or (2) are self-employed or a sole-proprietor who enrolled in the program
Private Plan Option	Yes; insured or self-funded
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own serious health condition • Organ or bone marrow donation • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • To care for a parent, spouse, child, or next of kin who was injured in the line of duty on active duty in the military • Qualifying military exigency • Safe leave to address specific situations associated with family violence
Covered Family Members	Child, Spouse, Parent, Grandparent, Grandchild, Sibling, and an individual related to the employee by blood or affinity whose close association the employee shows to be the equivalent to family relationship
Contributions	0.5% of wages up to \$184,500 <ul style="list-style-type: none"> • Fully employee paid
Benefit Calculation	<ul style="list-style-type: none"> • 95% of the employee's AWW that is $\leq 40x$ the state minimum wage, plus • 60% of the employee's AWW that is $> 40x$ the state minimum wage • The benefit rate is capped at 60 times the state minimum wage <p>Note: State minimum wage is \$16.94</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$1,016.40 • Minimum: None
Waiting Period	None

Duration	12 weeks, plus 2 additional weeks available for a serious health condition resulting in incapacitation during pregnancy, with the following exceptions: <ul style="list-style-type: none">• 12 days for safe leave
Job Protection	None
Where to find additional information	Connecticut Paid Leave website

Delaware

Delaware Paid Family and Medical Leave Insurance / Healthy Delaware Families Act (DE Paid Leave)

Contributions begin January 1, 2025, Benefits effective January 1, 2026

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Employees earning at least 60% of wages in DE each calendar quarter • Remote/hybrid workers are not covered under DE PFML unless the employer and employee elect in writing to reclassify the employee as being covered • Employed for at least 12 months with their employer and have worked for at least 1,250 hours with that employer in the previous 12-month period • Must be actively employed
Private Plan Option	<p>Yes; insured or self-funded (self-funding requires at least 100 employees)</p> <ul style="list-style-type: none"> • Parental, medical, and family leave may be administered separately
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own serious health condition • Care for a family member with a serious health condition • Parental leave to bond with a child within 12 months of their birth, adoption, or foster care placement • Qualifying military exigency
Covered Family Members	Child, Spouse, Parent
Contributions	<p><u>For employers with 25 or more employees:</u> 0.8% of wages up to \$184,500</p> <ul style="list-style-type: none"> • 0.4% for medical leave, 0.08% for family leave, and 0.32% for parental leave • Employers must fund at least 0.4% and may collect 0.4% from employees <p><u>For employers with 10-24 employees:</u> 0.32% of wages up to \$184,500</p> <ul style="list-style-type: none"> • 0.32% for parental leave • Employers must fund at least 0.16% and may collect 0.16% from employees <p>Note: Employers who voluntarily provide benefits under DE PFML greater than they are legally required to, may not collect contributions from employees for those additional benefits</p>
Benefit Calculation	80% of an employee's AWW
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$900 • Minimum: Lesser of \$100 or 100%
Waiting Period	None

Duration	<p>Up to 12 weeks in a single application year:</p> <ul style="list-style-type: none"> • Up to 12 weeks for parental leave in a single application year • Up to 6 weeks for medical or family leave in any 24-month period <p>Note: Requires a 12-month rolling forward counting method for application year for both the state and private plans</p>
Job Protection	Yes
Where to find additional information	Delaware Paid Leave website

District of Columbia

D.C. Paid Family Leave (Universal Paid Leave) (DC PFL)

Benefits effective July 1, 2020

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Employees spend at least 50% of work physically working in D.C., or are based in DC and spend a substantial amount of time in DC and not more than 50% of work in another jurisdiction during the 52 weeks immediately preceding a qualifying leave event • Must be actively employed
Private Plan Option	No
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own serious health condition, including prenatal leave • Care for a family member with a serious health condition • Parental leave to bond with a child within 12 months of their birth, adoption, foster care placement, or legally assuming parental responsibility
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Sibling
Contributions	0.75% of wages (no limit) <ul style="list-style-type: none"> • Fully employer paid
Benefit Calculation	<ul style="list-style-type: none"> • 90% of the employee's AWW that is \leq150% of the DC minimum wage multiplied by 40, plus • 50% of the employee's AWW that is $>$150% of the DC minimum wage multiplied by 40 <p>Note: DC Minimum wage is \$17.95</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$1,153 • Minimum: None
Waiting Period	None
Duration	12 weeks, plus 2 weeks of prenatal leave in addition to any allowed amount of parental or family leave
Job Protection	None
Where to find additional information	DC Paid Family Leave (PFL) website

Florida

Florida Paid Family Leave Insurance

Enacted May 25, 2023

Mandated Program?	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of the child's birth or placement for adoption or foster care • Qualifying military exigency • Care for a family member who is injured in the line of duty in the Armed Forces • Other family leave as specified in the policy
Covered Family Members	Child, Spouse, Parent, or any other person as defined as a family member of the employee in the policy
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limits	As defined in the insurance policy
Waiting Period	As defined in the insurance policy
Duration	At least 2 weeks in a 52-week period
Job Protection	Based on employer policy
Where to find additional information	Florida Family Leave Insurance Rule

Hawaii

Hawaii Temporary Disability Insurance (HI TDI)

Benefits effective January 1, 1969

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is localized in HI, or work is not localized in any state but operations are based in HI, or operations are not based in any state but the employee's work is directed from HI, or work is not directed from any state but the employee resides in HI • Worked at least 14 weeks in Hawaii and paid for 20+ hours during each week and earned at least \$400 in the 52 weeks preceding first day of disability • Must be actively employed or has been employed in the last 2 weeks
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own non-work-related injury or sickness, including pregnancy
Covered Family Members	N/A
Private Plan Option	No state plan; Employer must fully-insure or self-fund
Contributions	<p>Total rate varies by employer</p> <ul style="list-style-type: none"> • Employers may collect up to 0.5% of wages from employees, up to the state base wage of \$1,500.21 per week, with a maximum weekly deduction of \$7.50
Benefit Calculation	58% of an employee's AWW
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$871 • Minimum: Not stated
Waiting Period	7 days
Duration	26 weeks per benefit year
Job Protection	None
Where to find additional information	Hawaii TDI website

Kentucky

Kentucky Paid Family Leave Insurance Act

Enacted April 5, 2024

Mandated Program?	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of the child’s birth or placement for adoption or foster care • Qualifying military exigency • Care for a family member who is in the Armed Forces or a first responder injured in the line of duty • Other family leave as specified in the policy
Covered Family Members	Child, Spouse, Parent, and any other person defined as a family member in a paid family leave insurance policy or contract
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limits	As defined in the insurance policy
Waiting Period	As defined in the insurance policy
Duration	At least 2 weeks in a 52-week period
Job Protection	Based on employer policy
Where to find additional information	Kentucky Family Leave Insurance Rule

Maine

Maine Paid Family and Medical Leave (ME PFML)

Contributions began January 1, 2025, Benefits effective May 1, 2026

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Employees may be permitted, required, or directed by an employer to engage in any employment in the State • Earned at least 6 times the state average weekly wage in wages subject to premium during the individual's base period • Must be actively employed
Covered Leave Reasons ²	<ul style="list-style-type: none"> • Employee's own serious health condition • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • To care for a family member who is a covered service member • Qualifying military exigency • Safe leave to protect the employee or a family member who is a victim of violence, assault, sexual assault, stalking, and/or any other act that would support an order of protection
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling, and an individual with whom the employee has a significant personal bond that is or is like a family relationship, regardless of biological or legal relationship
Private Plan Option	Yes; insured or self-funded (self-funding requires at least 50 employees)
Contributions	<ul style="list-style-type: none"> • Employers with ≥ 15 employees: <ul style="list-style-type: none"> ○ 1% of wages up to \$184,500 ○ Employers must fund at least 0.5% and may collect 0.5% from employees • Employers with < 15 employees: <ul style="list-style-type: none"> ○ 0.5% of wages up to \$184,500 ○ Employers may collect up to the 0.5% from employees • Self-employed individuals: <ul style="list-style-type: none"> ○ 0.5% of wages up to \$184,500
Benefit Calculation	<ul style="list-style-type: none"> • Tier 1 Benefit: 90% of an employee's AWW that is $\leq 50\%$ of the state AWW, plus • Tier 2 Benefit: 66% of the employee's AWW that is $> 50\%$ of the state AWW <p>Note: The state AWW is \$1,198.84</p>

² Maine allows an employer to reasonably determine if the timing or duration of an employee's leave creates an undue hardship, meaning a significant impact on the operation of the business or significant expense considering the financial resources of the employer, the size of the workforce, and the nature of the industry that cannot be overcome with the amount of notice given. The [Maine PFML final rules](#) specifies what the employer must do in order for their determination of undue hardship to be considered reasonable.



Weekly Benefit Limits	<ul style="list-style-type: none">• Maximum: \$1,198.84• Minimum: None
Waiting Period	7 days for medical leave only
Duration	12 weeks in a benefit year
Job Protection	Yes, if the employee has been employed for at least 120 days
Where to find additional information	Maine PFML website

Maryland

Maryland Paid Family and Medical Leave (MD FMLI)³

Contributions begin January 1, 2027, Benefits effective January 3, 2028

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> Work is localized in MD and work performed outside of MD is incidental An employee must have worked at least 680 hours in Maryland over the four most recently completed calendar quarters before the Anchor Date⁴ to be eligible for PFML benefits Must be actively employed; former employees will be covered under the state program
Covered Leave Reasons	<ul style="list-style-type: none"> Employee's own serious health condition Care for a family member with a serious health condition Bond with a child within 12 months of their birth or placement through adoption, foster, or kinship care placement Qualifying military exigency Care for a covered service member
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, and Sibling
Private Plan Option	Yes; insured or self-funded
Contributions	<ul style="list-style-type: none"> Employers with ≥ 15 employees: <ul style="list-style-type: none"> 0.9% of covered wages (limit TBD) Employers must fund at least 0.45% and may collect 0.45% from employees Employers with < 15 employees: <ul style="list-style-type: none"> 0.45% of covered wages (limit TBD) Employers may collect the full 0.45% from employees
Benefit Calculation	<ul style="list-style-type: none"> 90% of an employee's AWW that is $\leq 65\%$ of the state AWW, plus 50% of the employee's AWW that is $> 65\%$ of the state AWW <p>Note: The state AWW is TBD</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> Maximum: \$1,000 in 2028 Minimum: \$50
Waiting Period	None

³ Information subject to change due to delay of program start

⁴ Anchor Date is defined as the earlier of the date the benefit application is complete, or the date leave begins for a Covered Individual

Duration	12 weeks in a 12-month period <ul style="list-style-type: none">An additional 12 weeks, for a combined maximum of 24 weeks, if an employee is eligible for leave for their own serious health condition and to care for a new child in the same 12-month period
Job Protection	Yes
Where to find additional information	Maryland FMLI website

Massachusetts

Massachusetts Paid Family and Medical Leave (MA PFML)

Benefits effective January 1, 2021

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is localized in MA, or work is not localized in any state, but operations are based in MA, or operations are not based in any state, but the employee resides in MA • Has earned at least \$6,300 in the last 4 completed calendar quarters and at least 30 times the employee's weekly benefit amount • Must be actively employed or employed within the last 26 weeks
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own serious health condition • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or placement • Qualifying military exigency • Care for a covered service member
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, and Sibling
Private Plan Option	Yes; insured or self-funded <ul style="list-style-type: none"> • Medical and family leave may be administered separately
Contributions	<ul style="list-style-type: none"> • Employers with ≥ 25 employees: <ul style="list-style-type: none"> ○ 0.88% of wages up to \$184,500 ○ 0.70% for medical leave: Employers must fund at least 0.42% and may collect 0.28% from employees ○ 0.18% for family leave: Employers may collect the full 0.18% from employees • Employers with < 25 employees: <ul style="list-style-type: none"> ○ 0.46% of wages up to \$184,500 ○ 0.28% for medical leave: Employers may collect the full 0.28% from employees ○ 0.18% for family leave: Employers may collect the full 0.18% from employees
Benefit Calculation	<ul style="list-style-type: none"> • 80% of an employee's AWW that is $\leq 50\%$ of the state AWW, plus • 50% of the employee's AWW that is $> 50\%$ of the state AWW <p>NOTE: The state AWW is \$1,922.48</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$1,230.39 • Minimum: None
Waiting Period	7 days <ul style="list-style-type: none"> • Waiting period does not apply for family leave that immediately follows medical leave for pregnancy or childbirth

Duration	26 weeks in a 52-week period <ul style="list-style-type: none">• Up to 12 weeks for family leave for bonding, care for a family member, or for military exigency leave• Up to 20 weeks for medical leave• Up to 26 weeks to care for a covered service member
Job Protection	Yes
Where to find additional information	Massachusetts PFML website

Minnesota

Minnesota Paid Leave (MN PL)

Contributions and benefits begin January 1, 2026

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> 50% or more of employment during the calendar year is performed in MN, or less than 50% of work is performed in MN and resides in MN 50% or more of the calendar year, or less than 50% of work is performed in MN but work is directed and controlled in MN Earned at least 5.3% of the State's AWW within the State within the year Must be actively employed or employed within the last 26 weeks
Covered Leave Reasons	<ul style="list-style-type: none"> Employee's own serious health condition Care for a family member with a serious health condition Bond with a child within 12 months of their birth, adoption, or foster care placement Qualifying military exigency Safety leave resulting from domestic abuse, sexual assault, or stalking of the employee or a family member
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling, and an individual with an expectation for care from the employee
Private Plan Option	Yes; insured or self-funded <ul style="list-style-type: none"> Medical and family leave may be administered separately
Contributions	<ul style="list-style-type: none"> Standard Premium Rate: 0.88% of wages up to \$184,500 <ul style="list-style-type: none"> Funded by employer and employee contributions, of which employers must pay at least 50% of the total rate Small Employer⁵ Rate: 0.66% of wages up to \$184,500 <ul style="list-style-type: none"> Employers may collect up to 0.44% from workers and are responsible for the remaining 0.22%
Benefit Calculation	<ul style="list-style-type: none"> 90% of an employee's AWW that is \leq50% of the state AWW, plus 66% of the employee's AWW that is >50% of the state AWW but not more than 100% of the state AWW, plus 55% of the employee's AWW that is >100% of the state AWW <p>Note: The state AWW is \$1,423</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> Maximum: \$1,423 Minimum: None
Waiting Period	None, but 7-Day Qualifying Event: <ul style="list-style-type: none"> For continuous leaves, the employee must be out for 7 consecutive days before a retroactive payment for the initial week is made For intermittent leaves, the 7 days do not need to be consecutive For bonding, there is no 7-day qualifying event required

⁵ A small employer is an employer with 30 or fewer workers who have an average employee wage of less than or equal to 150% of the state AWW for the base period. MN will determine who qualifies as a small employer based on quarterly filings.

Duration	20 weeks in a benefit year <ul style="list-style-type: none">• 12 weeks for a medical leave• 12 weeks for family leave and safety leave• If an employee takes both medical and family leave within a single benefit year, they get a combined maximum of 20 weeks
Job Protection	Yes, if the employee has been employed for at least 90 days
Where to find additional information	Minnesota Paid Leave website



New Hampshire

Voluntary Granite State Paid Family Leave Plan (NH PFML)

Benefits effective January 1, 2023

Mandated Program	No; employers and employees may participate voluntarily ⁶
Employee Eligibility Requirement	<ul style="list-style-type: none"> • State employees • Designated as working for a NH employer with a physical location in NH and report wages to NH for unemployment purposes, and work for covered employers who have purchased coverage • Individuals who elect coverage • Must be actively employed (full-time or part-time)
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own serious health condition, when disability coverage does not apply • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • Qualifying military exigency • Care for a service member
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, and Grandparent
Private Plan Option	<p>Voluntary plan through State's insurance carrier, insured through alternative carrier, or self-funded</p> <ul style="list-style-type: none"> • Employees of employers who offer an equivalent plan are not eligible to elect individual coverage
Contributions	Varies
Benefit Calculation	60% of an employee's AWW
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$2,128.85 • Minimum: None
Waiting Period	Up to 7 calendar days, equivalent to 1 workweek
Duration	6 weeks (standard) or 12 weeks if selected by the employer
Job Protection	None
Where to find additional information	New Hampshire PFML website

⁶ Also creates insurance rules which authorizes insurers to offer paid family leave benefit policies

New Jersey

New Jersey Temporary Disability Insurance (NJ TDI) and Family Leave Insurance (NJ FLI)

TDI benefits effective January 1, 1948, FLI benefits effective January 1, 2008

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is localized in NJ and work performed outside of NJ is incidental, or work is not localized in any state but operations are based in NJ, or operations are not based in any state but the employee's work is directed from NJ, or work is not directed from any state but the employee resides in NJ • Worked 20 calendar weeks in the base year; and earned \$310 or more per week or earned \$15,500 or more in the base year • Must be actively employed or become disabled within 14 days of the last day worked
Covered Leave Reasons	<p>TDI:</p> <ul style="list-style-type: none"> • Employee's non-work related disability <p>FLI:</p> <ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • Safe Leave • State of emergency declared due to an epidemic where the individual or family member must receive in-home care
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling, any other individual related by blood or marriage, and any individual shown to have a close association with the employee
Private Plan Option	Yes; insured or self-funded
Contributions	<p>TDI:</p> <ul style="list-style-type: none"> • Employee: 0.19% of wages up to \$171,100 • Employer: Varies from 0.1% to 0.75% of wages up to \$44,800 <p>FLI:</p> <ul style="list-style-type: none"> • Employee: 0.23% of wages up to \$171,100 • Employer: None
Benefit Calculation	85% of an employee's AWW
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$1,199 • Minimum: None
Waiting Period	<ul style="list-style-type: none"> • TDI: 7 days; however, WP is paid retroactively if employee is on leave for 3 consecutive weeks • FLI: None
Duration	<ul style="list-style-type: none"> • TDI: 26 weeks in a 12-month period • FLI: 12 weeks in a 12-month period
Job Protection	None
Where to find additional information	New Jersey TDI and FLI website

New York

New York Disability Benefits Law (NY DBL) and Paid Family Leave (NY PFL)

DBL benefits effective January 1, 1949, PFL benefits effective January 1, 2018

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<p>DBL:</p> <ul style="list-style-type: none"> • Work is localized in NY and work performed outside of NY is incidental, or work is not localized in any state but operations are based in NY, or operations are not based in any state but the employee's work is directed from NY, or work is not directed from any state but the employee resides in NY • Worked 4 consecutive weeks with a covered employer • Must be actively employed or employed within the last 4 weeks <p>PFL:</p> <ul style="list-style-type: none"> • Work is localized in NY and work performed outside of NY is incidental, or work is not localized in any state but operations are based in NY, or operations are not based in any state but the employee's work is directed from NY, or work is not directed from any state but the employee resides in NY • Full-time employees who worked 20+ hours per week for 26 weeks Part-time employees who worked less than 20 hours per week for 175 days • Must be actively employed
Covered Leave Reasons	<p>DBL:</p> <ul style="list-style-type: none"> • Employee's non-work related injury or illness <p>PFL:</p> <ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • Qualifying military exigency
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling
Private Plan Option	<p>Yes; insured, self-funded, or state fund (NYSIF)</p> <ul style="list-style-type: none"> • PFL and DBL must be administered together, unless an exception applies
Contributions	<p>DBL:</p> <ul style="list-style-type: none"> • Rate varies by employer • Employers may collect 0.5% of wages but not more than \$0.60 per week from employees <p>PFL:</p> <ul style="list-style-type: none"> • 0.432% of wages, up to up to an annual contribution of \$411.91 Employers may collect full 0.432% from employees
Benefit Calculation	<ul style="list-style-type: none"> • DBL: 50% of an employee's AWW • PFL: 67% of an employee's AWW

Weekly Benefit Limits	DBL: <ul style="list-style-type: none"> • Maximum: \$170 • Minimum: None PFL: <ul style="list-style-type: none"> • Maximum: \$1,228.53 • Minimum: Lesser of \$100 or 100% of an employee's AWW
Waiting Period	<ul style="list-style-type: none"> • DBL: 7 days • PFL: None
Duration	26 weeks of combined DBL and PFL <ul style="list-style-type: none"> • DBL: 26 weeks in a 52 week period • PFL: 12 weeks in a 52 week period
Job Protection	<ul style="list-style-type: none"> • DBL: None • PFL: Yes
Where to find additional information	New York DBL website New York PFL website

Oregon

Paid Leave Oregon (PLO)

Benefits effective September 3, 2023

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is localized in OR and work performed outside of OR is incidental, or work is not localized in any state, but operations are based in OR, or operations are not based in any state, but the employee's work is directed from OR, or work is not directed from any state, but the employee resides in OR • Earned at least \$1,000 in wages during the base year or at least \$1,000 in the alternate base year • Must be actively employed
Covered Leave Reasons	<ul style="list-style-type: none"> • Employee's own serious health condition • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • Related to pregnancy issues for birthing parent • Effectuate the legal process required for foster child placement or child adoption • Safe Leave to ensure health and safety of the employee and the employee's minor child or dependent adult related to domestic violence, harassment, sexual assault, or stalking
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, Sibling, or any individual related by blood or affinity whose close association with employee is the equivalent of a family relationship
Private Plan Option	Yes, insured or self-funded
Contributions	<p>1% of employee wages up to \$184,500</p> <ul style="list-style-type: none"> • Employers with ≥ 25 employees nationwide must fund at least 0.4% and may collect 0.6% from employees • Employers with < 25 employees are not required to pay the employer portion
Benefit Calculation	<ul style="list-style-type: none"> • 100% of an employee's AWW that is $\leq 65\%$ of the state AWW, plus • 50% of an employee's AWW that is $> 65\%$ of the state AWW <p>Note: The state AWW is \$1,363.80</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$1,636.56 • Minimum: \$68.19
Waiting Period	None

Duration	<p>12 weeks in a benefit year</p> <ul style="list-style-type: none"> • An additional 2 weeks available for leave related to pregnancy issues for birthing parent • An additional 4 weeks may be unpaid for a total of 18 weeks in a benefit year
Job Protection	Yes, if the employee has worked for the employer for at least 90 days
Where to find additional information	Paid Leave Oregon website

Puerto Rico

Puerto Rico Temporary Disability Benefit Act (PR SINOT)

Benefits effective January 1, 1968

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is conducted in Puerto Rico • Received wages of at least \$150 of insured employment in the base year • May apply for benefits while unemployed
Covered Leave Reasons	<ul style="list-style-type: none"> • Non-work related illness or injury
Covered Family Members	N/A
Private Plan Option	Yes; insured or self-funded
Contributions	<p>0.6% of covered wages up to \$9,000 per year for industrial employees</p> <ul style="list-style-type: none"> • Employers must fund at least 0.3% and may collect 0.3% from employees
Benefit Calculation	<p>60% of an employee's AWW</p> <ul style="list-style-type: none"> • Dismemberment benefits range from \$2,000 to \$4,000 • Death benefit is \$4,000, plus any benefits owed
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: \$113 for industrial employees, \$55 for agricultural • Minimum: \$12
Waiting Period	7 days unless hospitalized
Duration	26 weeks in a 52-week period
Job Protection	None
Where to find additional information	Puerto Rico SINOT website

Rhode Island

Rhode Island Temporary Disability Insurance (RI TDI) and Temporary Caregiver Insurance (RI TCI)

TDI benefits effective January 1, 1942, TCI benefits effective January 1, 2014

Mandated Program	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is localized in RI and work performed outside of RI is incidental, or work is not localized in any state but operations are based in RI, or operations are not based in any state but the employee's work is directed from RI, or work is not directed from any state but the employee resides in RI • Paid at least \$19,200 in the base period; or earned at least \$3,200 in one base period quarter and total base period taxable wages are at least 1.5x the highest quarter earnings and base period taxable wages are at least \$6,400 • Must be actively employed
Covered Leave Reasons	<p>TDI:</p> <ul style="list-style-type: none"> • Unemployment due to employee's own illness, surgery, or injury <p>TCI:</p> <ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of their birth, adoption, or foster care placement • Bone marrow or organ donation
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, or Sibling
Private Plan Option	No
Contributions	<p>1.1% of wages up to \$100,000</p> <ul style="list-style-type: none"> • Employers may collect the full 1.1% from employees
Benefit Calculation	<p>4.62% of an employee's wages paid in the highest quarter of the base period</p> <ul style="list-style-type: none"> • Employees with dependent children may be entitled to a dependency allowance of the greater of \$20 or 7% of the benefit rate, for up to 5 dependents <p>Note: Benefit rate increases to 5.38% effective 1/1/2027 and 5.77% on 1/1/2028</p>
Weekly Benefit Limits	<ul style="list-style-type: none"> • Maximum: <ul style="list-style-type: none"> ○ \$1,103 ○ For claims with up to 5 dependents, maximum is \$1,489 ○ TDI and TCI benefits together cannot exceed 30x the employee's weekly benefit rate in a benefit year • Minimum: \$148
Waiting Period	<ul style="list-style-type: none"> • TDI: None, but must be unable to work for at least 7 consecutive days • TCI: None

Duration	<ul style="list-style-type: none">• TDI: 30 weeks in a 12-month period• TCI: 8 weeks in a 12-month period<ul style="list-style-type: none">○ Bone marrow donors can access 1 week○ Organ donors can access 30 business days
Job Protection	Yes
Where to find additional information	Rhode Island TDI and TCI website

Tennessee

Tennessee Paid Family Leave Insurance Act

Enacted April 18, 2023

Mandated Program?	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Bond with a child after the child's birth or placement for adoption or foster care • Care of a family member with a serious health condition • Qualifying military exigency
Covered Family Members	Child, Spouse, Parent, and another person defined as a family member in a policy insurance
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limit	As defined in the insurance policy
Waiting Period	As defined in the insurance policy
Duration	As defined in the insurance policy
Job Protection	Based on employer policy
Where to find additional information	Tennessee Family Leave Insurance Rule

Texas

Texas Group Family Leave Insurance

Enacted June 12, 2023

Mandated Program?	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Care for a family member with a serious health condition • Bond with a child within 12 months of the child's birth or placement for adoption or foster care • Qualifying military exigency • Care for a family member who is injured in the line of duty in the Armed Forces • Other family leave as specified in the policy
Covered Family Members	A dependent, spouse, parent, and any other person defined as a family member in the family leave insurance policy
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limit	As defined in the insurance policy
Waiting Period	As defined in the insurance policy
Duration	At least 2 weeks in a 52-week period
Job Protection	Based on employer policy
Where to find additional information	Texas Family Leave Insurance Rule

Vermont

Vermont Voluntary Paid Family and Medical Leave Insurance (VT FMLI)⁷

Benefits effective July 1, 2023, for state employees, July 1, 2024, for large employers, and July 1, 2025, for small employers and individuals

Mandated Program?	No; employers and employees may participate voluntarily
Employee Eligibility Requirement	<ul style="list-style-type: none"> Physically working in VT for a VT employer Individuals who work for Vermont employers that offer VT FMLI; or do not offer VT FMLI, self-employed Vermonters and employers with one employee who purchase coverage Must be actively employed
Covered Leave Reasons	<ul style="list-style-type: none"> Own serious health condition Care for a family member with a serious health condition Bond with a child within 12 months of the child's birth or placement for adoption or foster care Qualifying military exigency Care for a family member who is injured in the line of duty
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Parent-in-Law, Grandparent, Grandchild, and Sibling
Private Plan Option	N/A ⁸
Contributions	Varies
Benefit Calculation	Options of 60% or 70% of an employee's AWW
Weekly Benefit Limits	<ul style="list-style-type: none"> Maximum: \$2,128.85 (if 60% benefit percentage) / \$2,483.65 (if 70% benefit percentage) Minimum: None
Waiting Period	7 days for medical leave only
Duration	Options of 6 to 26 weeks in a 12-month period
Job Protection	None
Where to find additional information	Vermont FMLI website

⁷ VT FMLI coverage can be customized by the employer purchasing the policy; information indicated here reflects the state minimum coverage

⁸ VT FMLI can be purchased through VT's insurance partner, The Hartford. Vermont does not offer employers the option of offering an "equivalent" plan (such as exists New Hampshire).

Virginia

Virginia Private Family Leave Insurance

Enacted April 7, 2022

Mandated Program?	No; employers may purchase from insurance carrier voluntarily. Act authorizes insurers to offer paid family leave benefit policies.
Employee Eligibility	As defined in the insurance policy
Covered Leave Reasons	<ul style="list-style-type: none"> • Bond with a child after the child’s birth or placement for adoption or foster care • Care of a family member with a serious health condition • Qualifying military exigency
Covered Family Members	As defined in the insurance policy
Private Plan Option	N/A
Contributions	Determined by contract, in accordance with insurance law
Benefit Calculation	As defined in the insurance policy
Weekly Benefit Limit	As defined in the insurance policy
Waiting Period	As defined in the insurance policy
Duration	As defined in the insurance policy
Job Protection	Based on employer policy
Where to find additional information	Virginia Family Leave Insurance Rule

Washington

Washington Paid Family and Medical Leave (WA PFML)

Benefits effective January 1, 2020

Mandated Program?	Yes; all covered employers must comply
Employee Eligibility Requirement	<ul style="list-style-type: none"> • Work is localized in WA, or work is not localized in any state but operations are based in WA, or operations are not based in any state but the employee's work is directed from WA, or work is not directed from any state but the employee resides in WA • Worked 820+ hours in the qualifying period in WA • May be eligible under the state plan if unemployed; private plan covers current or future employees only
Covered Leave Reasons	<ul style="list-style-type: none"> • Own serious health condition • Care for a family member with a serious health condition • Bond with a child within 12 months of the child's birth or placement of a child under the age of eighteen • For the 7 days following the loss of a child if the employee would have qualified for medical leave or family leave • Leave for family member about to be deployed or returning from deployment
Covered Family Members	Child, Spouse or Domestic Partner, Parent, Grandparent, Grandchild, Sibling, or an individual with an expectation to rely on the employee for care
Private Plan Option	<p>Yes; self-funded only</p> <ul style="list-style-type: none"> • Medical and family leave may be administered separately
Contributions	<p>1.13% of wages up to \$184,500</p> <ul style="list-style-type: none"> • Employers must fund at least 0.323% and may collect 0.807% from employees • Employers with less than 50 employees are not required to pay the employer portion of the premium
Benefit Calculation	<ul style="list-style-type: none"> • 90% of an employee's AWW that is \leq50% of the state AWW, plus • 50% of the employee's AWW that is $>$50% of the state AWW <p>Note: The state AWW is \$1,830</p>
Weekly Benefit Limits ⁹	<ul style="list-style-type: none"> • Maximum: \$1,647 • Minimum: Lesser of \$100 or 100% of the employee's AWW
Waiting Period	7 consecutive calendar days beginning the Sunday of the first week an eligible employee starts taking leave, except for bonding, medical leave during the postnatal period, family leave for the loss of a child, and qualifying exigency leave

⁹ Effective January 1, 2026, the minimum claim duration decreases to 4 hours.

Duration	<p>12 weeks per year</p> <ul style="list-style-type: none"> • Combined 16 weeks is available when a combination of family and medical leave is used • Combined 18 weeks is available when a combination of family and medical leave is used, and leave is a result of a pregnancy complications
Job Protection	<p>Yes, if the employer has at least 25 employees and the employee has worked for the employer for at least 180 days prior to leave</p> <p>Note: Job protection provision expands on January 1, 2027 to include employers with 15 or more employees, and on January 1, 2028 to include employers with 8 or more employees</p>
Where to find additional information	<p>Washington PFML website</p>

Alera Leave Compass Subscription Service Overview

In today's rapidly changing regulatory environment, managing compliance with statutorily mandated disability, paid family and medical leave (PFML), and paid sick and safe leave (PSL) requirements has become increasingly complex for employers, insurance companies, and third-party administrators. With varying requirements across jurisdictions, companies face significant risk if they fail to stay informed of updates and make the required changes to their policies and processes. Our comprehensive Alera Leave Compass subscription service empowers subscribers not only to navigate the intricacies of statutory disability and paid leave with confidence, but also to remain proactive in meeting their obligations by anticipating and planning for regulatory changes. By subscribing to the Alera Leave Compass, your organization will have access to the following:

BASE ALERA LEAVE COMPASS SUBSCRIPTION
Initial Statutory Disability, PFML, and PSL Diagnostic and Overview Session
Initial State Registration Verification
Company-Specific Heat Map Analysis of Statutory Disability, PFML, and PSL Jurisdictions
Company-Specific Watch List for Legislative Activities in Statutory Disability, PFML, and PSL Jurisdictions Where Company has Employees Working
Quarterly Update Calls: <ul style="list-style-type: none"> • Review of statutory and regulatory updates, as well as new case law • Discussion of emerging legislation and regulatory changes • Adjustments to Company-Specific Heat Map based on updated census file
Quarterly Newsletter
Realtime Alerts
Complimentary DMEC Membership (for 1 year)
Access to the Statutory Disability, PFML, and PSL Ask the Expert Hotline (2 questions per month)

In addition, as a subscriber to the Alera Leave Compass, you will have access to the following additional services at a reduced consulting fee:

ADDITIONAL SERVICES	
ONGOING SUPPORT	PRIVATE/EQUIVALENT PLAN SUPPORT
Quarterly Contribution/Premium Calculation	Private/Equivalent v. State Plan and Self-Funded v. Insured Modeling
Annual Compliance Notices to Employees	
Statutorily Mandated Quarterly and Annual Reporting Support	Private/Equivalent Plan Filing Coordination and Guidance ¹⁰ and Appeal Assistance in event of Denied Application
Employee Waiver Process Assistance	
Ongoing Election/Vote Coordination and Guidance	Vendor RFP Process, Proposal Analysis, and Negotiation
Customized Training	Implementation of New Vendor
Communications Development and Review	Private Plan Renewal Support and Negotiation
Review of Other Employer Leave of Absence Policies for Benefit Coordination	Termination/Withdrawal of Private Plan Coordination and Guidance
REGULATORY SUPPORT	
Compliance Audit	
Regulatory Compliance Review Support	
Fine Negotiation with Regulators	

¹⁰ Includes project management of filing process, filing checklist and timelines, entity registration, calculation of surety bond or letter of credit, election/vote support, template policy documents/private plan policy drafting, and assistance when completing application



About Alera Group

Alera Group is an independent financial services firm with \$1.5 billion in gross revenue, offering comprehensive property and casualty insurance services, employee benefits, wealth services and retirement plan solutions to clients nationwide. Working collaboratively across specialties and across the country, Alera Group's team of more than 4,500 colleagues offer unique solutions, personalized services and proactive insights to help ensure each client's business and personal success. For more information, visit aleragroup.com and follow us on [LinkedIn](https://www.linkedin.com/company/aleragroup).

Comprehensive, Cost-Effective, and Compliant Absence Strategies

Alera Group offers clients of all sizes and industries access to leading insights, tools, and expertise to help you manage your entire workforce, including:

- Focus on three key areas of impact:
 - Integrated Absence Management
 - Total Health & Productivity Management
 - ADA and PWFA Accommodations
- Manage multiple touchpoints across absence, disability, and workers' compensation
- Understand and address regulations and requirements to ensure compliance
- Streamlines administration and improve record keeping and reporting
- Enhance employee engagement to attract and retain a competitive workforce
- Improve return-to-work rates and decrease employee absences
- Provide access to meaningful data, benchmarking, and outcome reporting
- Increase productivity and improve overall workforce health

For more information and to discuss how we can help, please reach out to the Alera Absence Management team at absencemgmt@aleragroup.com.

*STATISTICS ACCURATE AS OF JANUARY 1, 2025.



**Compliance
Guidance**



**Optimized
Solutions**



**Subject Matter
Experts**



**National
Collaboration**

Collaborating for Your Success

As an Alera Group client, you have the peace of mind that comes from working with a trusted, local partner, backed by national community of problem solvers, together we deliver local, optimized benefits solutions to help grow and protect your business.

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