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LEAVE AND DISABILITY REGULATORY COMPLIANCE

Summary of legislative and regulatory changes

Private employer sector | July 2023

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Delaware

19 DAC Subch. 1401 (final rule re: Healthy Delaware Families Act)

Adopted June 30, 2023

Effective July 1, 2023

Benefits begin Jan. 1, 2026

Last year, Delaware enacted the Healthy Delaware Families Act (HDFA), creating a paid family and medical leave (PFML) requirement. The PFML program is not yet in effect; the obligation to provide paid leave benefits under the program does not begin until Jan. 1, 2026, with employer and employee contributions beginning Jan. 1, 2025. The Delaware Department of Labor's Division of Paid Leave (Division) has published an initial set of rules regarding the program.

The HDFA applies to employers with 10 or more employees in Delaware. Employers with 10 to 24 employees in Delaware, however, must comply with the law's parental leave requirements only; employers with 25 or more employees in Delaware are subject to all PFML requirements. In accordance with the rules, employers must determine whether they meet either the 10-employee or 25-employee coverage threshold by counting the number of employees over the preceding 12-month period.

Covered employees include employees who primarily work at a worksite in the state of Delaware, meaning they work at least 60% of their work hours physically in Delaware, and who meet or are reasonably expected to meet the employee eligibility requirement of 12 months of service and 1,250 hours of service within the previous 12-month period. Any "reclassified" employees must be counted, but employees who are covered by a waiver of coverage form are not.

Employers may "reclassify" individuals who work primarily at a worksite outside Delaware in certain circumstances to (a) continue to provide coverage for Delaware employees who are temporarily assigned to an out-of-state location, or (b) make those employees who are telecommuting or who work on a continuing basis out-of-state eligible for coverage when they would normally be in the state of Delaware. In order to meet the reclassification requirements, a reclassification form must be signed by both the employee and the employer stating that while the employee is not physically located in the state of Delaware, the employer and employee voluntarily agree to designate the employee as a Delaware-based employee for the purposes of paying payroll contributions into the PFML program and to be eligible for PFML benefits under the terms of the program. Once an employee is reclassified, the employee will remain subject to the PFML program until both the employee and employer voluntarily sign a form to declassify the employee.

If both the employer and the employee agree the employee was not hired to work on a permanent basis and/or was not expected to work at least 25 hours per week, so they reasonably do not expect the employee to be covered by the HDFA, the employer may submit a waiver of coverage form through the Division's online portal. Employers must still report wage information to the Division for employees subject to a waiver, and if at any point the Division determines that the employee has worked for more than 12 months and has satisfied the 1,250 hours-of-service requirement during the preceding 12 months, the Division will revoke the waiver. Upon revocation, the employer (but not the employee) will be responsible for making the required payroll contributions for past quarters in which the employee qualified for coverage, and the employee will become immediately eligible for PFML benefits. If a waiver is canceled voluntarily, the employer and employee will thereafter be subject to the payroll contribution.

Once an employer meets either the 10-employee or 25-employee coverage threshold, the employer will remain subject to the program for at least a 12-consecutive-month period. After 12 consecutive months with a covered employee count below either the 10-employee or 25-employee coverage threshold, the employer will no longer be obligated to comply with the applicable provisions of the HDFA. However, employers with 10 to 24 employees may voluntarily "opt-in" to allow their employees access to PFML benefits for family caregiver leave, medical leave or qualified exigency leave through the program. The law also requires employers to provide notice to employees who gain or lose coverage under the HDFA due to a change in their employer's headcount.

The rules classify PFML benefits into four different "lines of coverage":

1. **Parental leave:** Leave authorized for time off within the first year after the birth, adoption or placement through foster care of a child.

2. **Family Caregiving Leave:** Leave authorized for time off in the event of a serious health condition (illness or accident) of a child, spouse or parent.

3. **Medical Leave:** Leave authorized for time off in the event of the employee's serious health condition (illness or accident).

4. **Qualified Exigencies:** Leave authorized for time off for qualified issues that arise in connection with military deployment.

Employees are eligible to receive up to six weeks of PFML in a 24-month period to be used for family caregiving leave, medical leave or qualified exigencies. The 24-month period is the 24-month period that begins on the first day of the requested leave (rolling forward). Employees who are on a family caregiving leave for a family member who dies must notify the Division of the date of the family member's death within 72 hours of the event. The Division may then continue to pay benefits under PFML. In addition, employees who choose to return to work before the conclusion of their approved leave will continue to receive PFML benefits for one week after the payment period in which they return.

Employees are eligible for up to 12 weeks of PFML in an application year to be used for parental leave. The "application year" is the employer's designated 12-month period for leave under the federal Family Medical Leave Act (FMLA). If employees are combining parental leave with another line of coverage, employees are eligible for a maximum of 12 weeks of PFML in an application year. Employers with 10 to 24 employees may temporarily reduce the parental leave maximum benefit duration from 12 weeks to a minimum of six weeks for claims submitted prior to Jan. 1, 2031. To qualify for this option, employers must notify the Division of their intention to do so by Jan. 1, 2024, and they must notify their employees of this decision in writing no later than Dec. 1, 2024.

The Division will approve PFML benefits for leave taken on an intermittent or reduced schedule basis, but this is only when it is medically necessary and supported by documentation. PFML benefits are payable in increments as small as one workday. If an employee is approved for and takes intermittent FMLA in smaller increments (e.g., two hours), the employee will not be eligible for PFML benefits during that absence. The rules do not contemplate the possibility of taking parental leave intermittently.

Under the rules, employees generally can be required to provide employers with at least 30 days advance notice of a need for leave under the HDFA. If 30-day notice is not practicable, because of a lack of knowledge of approximately when leave will be required to begin, a change in circumstances or a medical emergency, notice must be given as soon as practicable, considering all the facts and circumstances in an individual case. If the need for leave was clearly foreseeable to the employee at least 30 days in advance but the employee fails to give timely advance notice with no reasonable excuse, the employer may delay coverage until 30 days after the employee provides notice.

Payroll contributions will begin on the later of Jan. 1, 2025, or the first day of the payroll period after the employer meets or exceeds the 10-employee or 25-employee coverage threshold. Payroll contributions will be submitted to the Division on a quarterly basis. For 2025 and 2026, contributions will be based on the following percentages of wages: 0.32% (Parental leave); 0.4% (Medical Leave); and 0.08% (Family Caregiver Leave/Qualified Exigencies). Beginning in 2027, the state will adjust the contribution rate based on consumer price index changes.

Employers must contribute 50% of the total contribution, but they may elect to contribute more. If an employer decides to contribute more than 50%, the employer must file a change with the Division through the online portal system and provide notice to all affected employees by Dec. 15 of the year prior to the Jan. 1 effective date the following year. Contributions are calculated based on the employee's FICA wages earned in Delaware, subject to the annual FICA limit.

PFML benefits will be calculated only based on FICA wages earned within the state of Delaware. The online portal system will calculate an employee's weekly benefits by taking the employee's average gross weekly wages for the 52 weeks prior to the submission of the claims application and multiplying that average weekly wage by the benefit percentage (80%). If the result of the calculation is less than $100, the weekly benefit amount for that individual will instead be the average of the employee's weekly wages. If the average of the employee's wages is more than $900 (the current maximum benefit), the employee's weekly benefit amount will be capped at $900.

The maximum weekly benefit amount will increase annually based on Consumer Price Index changes beginning Jan. 1, 2028.

Employers may opt to use a private PFML plan rather than the state's PFML program. The private plan must be at least as generous as the public plan, offering the same rights, protections and benefits. Employers may require employees to contribute to the private plan, but the amount cannot be more than what employees would have contributed under the state plan. Employers may also opt for a hybrid approach — i.e., a private plan for certain lines of coverage only and the state PFML program for the remaining lines of coverage. Employers may purchase an approved insurance plan or may apply for a self-insured private plan.

For employers seeking private plan approval from the outset of the program on Jan. 1, 2025, the opt-out form will be available on the Division's online portal from Sept. 1, 2024, through Dec. 1, 2024. For all subsequent years, employers must seek private plan approval or annual renewal between Oct. 1 and Dec. 1, to be effective Jan. 1 of the following calendar year.

Employers that offered private paid time off benefit plans that were in place before May 10, 2022, may be exempt from compliance with the HDFA until Dec. 31, 2029, if their plan is deemed "comparable" to the state's public plan and they were made available to all employees. The Division has noted that the online portal will open for applications for these grandfathered plans on Oct. 1, 2023, and it will close on Jan. 1, 2024.

As with private plans, a hybrid approach may be possible — i.e., employers may utilize a grandfathered policy for certain lines of coverage only and the state PFML program for the remaining lines of coverage. To qualify for this exemption, employees may not be required to contribute more to the employer's grandfathered plan than what they would be required to continue under the state PFML program.

Additionally, the grandfathered plan's benefit percentages, maximum benefits and benefit duration must be within 10% of the state PFML components, as follows:

- Employees must receive at least 72% of their average weekly wages in benefits, and employees must be eligible for a maximum weekly benefit of at least $810.

- Employees must be eligible for at least 10.8 weeks (54 days) of parental leave.

- For family caregiving leave, medical leave or qualified exigencies, employees must be eligible for at least 5.4 weeks (27 days) of leave.

- For a parental leave exclusion, the grandfathered benefit must provide coverage for the birth, adoption and fostering of a child and offer those benefits regardless of the parent's sex, gender or marital status.

Any grandfathered plan cannot be altered unless the change improves the benefit offered to employees and is approved by the Division.

Short-term disability plans are eligible to be grandfathered as an exemption to the medical leave provisions of the HDFA. However, the Division notes that due to the number of short-term disability plans in the state, a high volume of grandfathering requests could threaten the solvency of the program. In that event, the Division may terminate grandfathered status for medical leave approved for all employers before Dec. 31, 2029.

Delaware

HB 184 (domestic and sexual violence leave certification amendment)

Enacted July 25, 2023

Effective July 25, 2023

Delaware has amended its certification requirements for verifying an employee is a victim of domestic violence for purposes of the antidiscrimination and leave protections. The state's domestic and sexual violence leave law requires an employer to request supporting documentation from an employee to verify that the employee is using leave for a covered purpose. Under the law, acceptable supporting documents include a court order or a statement from a reliable third-party professional, including a law enforcement agency or officer, a domestic violence or domestic abuse service provider, or a health care provider. The amended law provides that an employer may, but is not required to, request that an employee provide verification from a domestic violence service provider, medical provider, mental health provider, law enforcement, court order or a family medical leave document.

District of Columbia

B 389 (short-term disability insurance benefit protection)

Enacted July 26, 2023

Effective July 26, 2023

The District of Columbia has amended the Universal Paid Leave Act ("Act") regarding the Act's effect on insurance benefits. Under the law, an insurer that provides temporary or short-term disability insurance policies may not reduce or offset the benefits it provides to an eligible individual based on the paid leave benefits that the individual may receive under the Act, subject to certain exceptions. The provision applies regardless of the jurisdiction in which a policy was issued, executed, written or delivered.

The amended law clarifies that an "eligible individual" and "self-insured employer" are defined as provided elsewhere in the Act. Under the Act, an eligible individual means a person whose claim for paid leave benefits is not based on employment for the United States, the District of Columbia or an employer that the District of Columbia is not authorized to tax under federal law or treaty, and:

- Has been a covered employee during some or all of the 52 calendar weeks immediately preceding the qualifying event for which paid leave is being taken, or
- Is a self-employed individual who has:
    - Opted into the paid leave program established pursuant to the Act, and
    - Earned self-employment income for work performed more than 50% of the time in the District of Columbia during some or all the 52 calendar weeks immediately preceding the event for which paid leave is being taken.

A self-insured employer means an employer that uses its own resources, rather than providing benefits directly through an insurance contract with a third-party insurer, to pay its employees' leave benefits and includes an employer that contracts with a third-party insurer to administer its leave benefits.

Illinois

56 IAC 280 (final rule re: Victims' Economic Security and Safety Act)

Adopted Nov. 2, 2022

Effective Nov. 2, 2022

The Illinois Department of Labor has adopted amended regulations to incorporate statutory changes expanding the scope of the Victims' Economic Security and Safety Act (VESSA) to employers who employ at least one employee. The amendment captures statutory changes that took effect Jan. 1, 2022.

The amended regulations provide that employees who are, or have a family or household member who is, a victim of domestic violence, sexual violence, gender violence or any other crime may take unpaid leave to:

- Seek medical attention to address the incident of violence.
- Obtain services from a victim services organization.
- Obtain counseling.
- Participate in safety planning.
- Relocate.
- Seek legal assistance.
- Prepare or participate in any legal proceeding related to the incident.
- Take other actions to ensure the health, safety or economic security of the employee or employee's family or household members.

In addition, the amended regulation provides that employers are prohibited from discriminating against employees who are victims of violence, and employers must provide reasonable accommodations in a timely manner to covered employees.

Illinois

HB 2493 (victims' economic security and safety act crime victim amendment)

Enacted July 25, 2023

Effective Jan. 1, 2024

Illinois has amended its Victims' Economic Security and Safety Act (VESSA) to require an employer to provide up to two work weeks of unpaid leave to an employee for a family or household member who is killed in a crime of violence. Under the amendment, an employee may take this leave to attend the funeral, or an alternative of a funeral, or wake of a family or household member who is killed in a crime of violence. In addition, leave can be used for making arrangements necessitated by the death of a family or household member who was killed by a crime of violence, and leave may be also taken to grieve the death of the family or household member. An employee is entitled to use a cumulative total of not more than two work weeks (10 workdays) of unpaid leave for these purposes. The leave must be completed within 60 days after the date on which the employee receives notice of the death of the victim.

Note that existing VESSA requirements also allow an employee, or an employee's family or household member, who is a victim of a crime of violence to seek legal assistance or remedies related to the health and safety of the employee, or the employee's family or household member, to prepare or participate in any civil, criminal or military legal proceeding related to or derived from domestic violence, sexual violence, gender violence or any other crime of violence. The amount of leave depends on employment size.

VESSA allows an employer to require an employee to provide certification to the employer verifying that leave is being taken for approved purposes and that the employee or the employee's family or household member is a victim of domestic violence, sexual violence, gender violence or other crimes of violence. An employee may satisfy the certification requirement by providing the employer a sworn statement of the employee, and certain documents, provided that the employee has such documents. The amended law provides that allowable documentation also includes a death certificate, published obituary or written verification of a death.

Except as otherwise provided, if an employee is also entitled to take unpaid bereavement leave under the Family Bereavement Leave Act ("Act") as a result of the death of the victim, VESSA does not create a right for the employee to take unpaid bereavement leave that exceeds, or is in addition to, the unpaid bereavement leave the employee is entitled to take under the Act.

If an employee is also entitled to take unpaid bereavement leave under the Act because of the death of the victim, leave taken under VESSA for purposes related to the victim's death, or leave taken under the Act, must be in addition to, and must not diminish, the total amount of leave time to which an employee is entitled. If an

employee is not entitled to unpaid bereavement leave under the Act, leave may be taken under VESSA for purposes related to the victim's death and must be deducted from the total amount of leave time to which an employee is entitled.

Maine

LD 258 (paid family and medical leave program)

Enacted July 11, 2023

Effective Jan. 1, 2026

Benefits begin May 1, 2026

Maine has enacted a new law to provide paid family and medical leave to covered employees in the state. To pay for this new program, the state will impose a 1% payroll tax split evenly between the employer and employee. The Maine Department of Labor will administer the program and establish procedures and forms for filing claims for family and medical leave benefits, including specifying what supporting documentation is necessary to support a claim for benefits. Employers and employees (as well as self-employed individuals) must start paying the payroll tax beginning Jan. 1, 2025. Covered individuals can start taking paid family and medical leave on Jan. 1, 2026.

All public and private full- and part-time employees (as well as self-employed individuals) who have earned at least six times the state average weekly wage in the first four calendar quarters immediately preceding the first day of an individual's benefit year are covered by the law. Using the current average weekly wage ($1,036), so long as the individual has earned at least $6,216 in the year before taking leave, they are covered.

Employers of all sizes are covered by the program. Note that although employers with fewer than 15 employees need not contribute toward the payroll tax, these small employers must still collect and remit to the state their employees' portions of the tax. Eligible employees of small employers may still take paid family and medical leave and can do so immediately upon commencing employment.

Private employers that offer equivalent or greater paid leave benefits may apply to the state for a waiver to avoid participating in the state's program. For private employers that are a party to a collective bargaining agreement, the bill does not obviate an employer's obligations to comply with any employer policy, law or collective bargaining agreement that provides for rights to leave greater than or additional to those provided by the new state program.

Eligible employees or self-employed individuals may take up to 12 weeks of paid leave for any of the following reasons:

- To bond with the covered individual's child during the first 12 months after the child's birth or the first 12 months after the placement of the child for adoption or foster care with the covered individual.

- To care for a family member with a serious health condition.

- To attend to a qualifying exigency arising out of a covered individual's family member's active duty service or notice of an impending call or order to active duty in the United States Armed Forces.

- To care for a family member of the covered individual who is a covered service member.

- Safe leave, otherwise known as sexual assault victim leave.

- Any reason set forth in Maine's family and medical leave statute. Such additional reasons include:

    - A serious health condition of the individual.

    - The birth of the employee's child or the individual's domestic partner's child.

    - Placing a child 16 years of age or under with the individual or the individual's domestic partner in connection with the adoption of the child.

    - The death or serious health conditions of certain family members in the military who died or incurred a serious health condition while on active duty.

    - The donation of an organ by the individual for a human organ transplant.

Note that the law defines "family member" as a biological, foster, step or adopted child (regardless of age), grandparent, grandchild, sibling, spouse or domestic partner, or an individual with whom the covered individual has a significant personal bond that is or is like a family relationship, regardless of biological or legal relationship.

An employee may take up to 12 weeks of family leave and up to 12 weeks of medical leave in an application year, but an employee may not take more than 12 weeks, in the aggregate, of family leave and medical leave in the same application year. "Application year" means the 12-month period beginning on the first day of the calendar year in which an individual applies for family leave or medical leave benefits. Leave may be taken intermittently in increments of not less than eight hours, or if the employer and the employee agree, on a reduced leave schedule.

During the approved leave period, the program will replace 90% of an employee's wages for income earned that is equal to or less than 50% of Maine's average weekly wage, which is currently $1,036. The portion of the covered individual's average weekly wage that is over 50% of the state average weekly wage must be replaced at 66% up to the maximum weekly benefit. To calculate the benefit amount, the average weekly wages the individual earned over the preceding four calendar quarters will be used, but any earnings from bonuses will be excluded. The maximum weekly benefit is set at the state average weekly wage, which changes annually. Benefits are not subject to state income tax.

So long as a covered employee has been employed for at least 120 days before taking leave, the employer must restore that employee to the same or equivalent position with the same or equivalent benefits, pay and other conditions of employment. This requirement applies to all employers regardless of size. An employee who takes leave before working at least 120 days does not have the same job restoration rights; however, the law includes an express prohibition against retaliation for an employee exercising their right to paid family and medical leave. As a result, employers may potentially face retaliation claims from employees who take leave during their initial 120 days of employment and do not return to the same or similar job after their leave.

An employer must post a workplace notice of the benefits available under the program. An employer must also issue a written notice to each employee within 30 days of the start of employment that includes an explanation of benefits as well as information on employees' rights and obligations.

Oregon

HB 3028 (state board or commission leave)

Enacted July 18, 2023

Effective Sept. 24, 2023

Informational only – Sedgwick does not administer

Oregon has enacted a new law making it unlawful for an employer to discharge, threaten to discharge, intimidate or coerce any employee due to the employee's service or planned service as an appointed member of an Oregon state board or commission. Accordingly, an employer must allow an employee to take unpaid leave for this purpose. An employer cannot require an employee to use vacation leave, sick leave or annual leave for time spent as an appointed member of a state board or commission. An employee planning to use this leave must provide the employer with at least 21 days advance notice of any time the employee needs to spend in service to the board or commission. An employee alleging a violation of the new law may file a complaint with the Commissioner of the Bureau of Labor and Industries.

Oregon

HB 3443 (leave for victims of bias crimes)

Enacted July 31, 2023

Effective Jan. 1, 2024

Oregon law requires employers to provide a reasonable leave of absence to an employee who is a victim of domestic violence, harassment, sexual assault or stalking, or is the parent or guardian of a minor child or dependent who is a victim of domestic violence, harassment, sexual assault or stalking. The amended law expands the leave provisions to include victims of a bias crime. A bias crime is a crime that is committed because of the perpetrator's perception of the victim's race, color, religion, gender identity, sexual orientation, disability or national origin. Additionally, a "victim of bias" may also be defined as any other individual designated as a victim of bias by a rule adopted by the Bureau of Labor and Industries.

Oregon law requires an employee to provide certification to an employer to verify that the employee is using leave for a permissible purpose. Certification may be provided through an array of different documents. The amended law expands permissible documentation to include documentation from an employee of the Department of Justice division that provides victim and survivor services.

Oregon

SB 913 (paid family and medical leave amendments)

Enacted July 13, 2023

Effective Sept. 24, 2023

Oregon has enacted a law amending various provisions of its paid family and medical leave law. Under the law, employer and employee contributions to the state fund are capped at 1% of an employee's wages, up to a maximum of $132,900 in wages. The amended law removes the specific monetary value of the cap and replaces it with an amount equivalent to the Social Security contribution and benefit base limit as established by the federal government.

The law uses an employee's wages from services performed in the state or for certain services performed within and outside of the state to make determinations about benefits and eligibility. The amended law will use an employee's wages from services localized in Oregon, or service that is not localized in any state but with some of the service performed in Oregon where there is a base of operations or place where service is directed in Oregon, or the base of operations or place where service is directed is not in any state where the service is performed, but the individual employee resides in Oregon. To determine whether service is localized in Oregon, the amended law looks to service that is performed entirely within the state or both inside and outside of Oregon, but the service performed outside is incidental to that performed inside.

Employers may allow their employees to replace the entirety of their wages while on leave by using their paid sick time, vacation, or other paid time off benefits to supplement the benefits received under the state program. The amended law clarifies that employees may use all or part of their other paid time off benefits to do so.

The amended law permits the state's Employment Department to disclose information about claims in certain circumstances, such as to the Department of Revenue. Additionally, the law sets forth various procedures related to the administration of the paid family and medical leave program.

Oregon

OAR Ch 471 (final rule re: paid FMLA benefits and assistance grants)

Adopted July 28, 2023

Effective Aug. 1, 2023

Oregon has amended its rules regarding Paid Leave Oregon, under which eligible employees may take paid family and medical leave beginning Sept. 3, 2023. The following are of most interest to employers.

The amended rules define an intermittent leave as one taken periodically in separate blocks of time or leave taken for two or more types of leave simultaneously, for an entire work day or work week. An employee that is taking leave intermittently, or for more than one qualifying purpose, must submit weekly claims to receive benefits.

Generally, an employee may receive two weeks of leave beyond the normal 12 for limitations related to pregnancy, childbirth or a related medical condition. The amended rules clarify that an employee may not take these two additional weeks more than once per pregnancy, even if the employee has started a new benefit year.

A new rule clarifies that employees will only receive Paid Leave Oregon benefits if they are on leave during a time that they would be regularly scheduled to work. In other words, if an employee was on a nine-month contract that did not cover the month of December, then the individual could not receive Paid Leave Oregon benefits in December because they would not be taking a leave from work during that month.

If an employee qualifies for benefits for more than one reason during the same week, they may file separate applications for each purpose. The rules also describe how benefits will be calculated for self-employed individuals.

The program requires an employee to support a claim for paid leave benefits to submit supporting documentation verifying that the employee will be using paid leave for a covered purpose. To verify that a serious health condition exists, the amended rules permit an employee to submit information sufficient to establish that the individual or family member has a serious health condition, including a diagnosis.

Employees must give notice to employers before taking leave, if possible. The amended rules clarify that employees must give oral notice at least 30 calendar days before taking leave if the leave is foreseeable. Employees must give notice for leave taken intermittently within 24 hours of each period of leave taken if known in advance.

Oregon

OAR Ch 471 (final rule re: paid FMLA contributions and recovery)

Adopted July 28, 2023

Effective Aug. 1, 2023

Oregon has amended its rules regarding Paid Leave Oregon, under which eligible employees may take paid family and medical leave beginning Sept. 3, 2023. To pay for the program's benefits, employers may deduct 60% of the total contribution required for each employee to the Paid Leave Oregon program from employees' wages. The amended rules clarify that this amount must be rounded to the nearest cent, where any number with the last figure of five or greater is rounded up. The rounding should only occur at the final step.

Oregon

OAR Ch 471 (final rule re: paid FMLA equivalent plans)

Adopted July 28, 2023

Effective Aug. 1, 2023

Oregon has amended its rules regarding Paid Leave Oregon, under which eligible employees may take paid family and medical leave beginning Sept. 3, 2023. Employers may choose to provide employees benefits under a state-run benefits plan or their own equivalent plan. The rules amend the guidelines for how the equivalent plans should be administered, including the time frame during which an employee may appeal a decision made by an equivalent plan employer. Additionally, the amended rules describe the procedures for when the state terminates an equivalent plan.

Puerto Rico

PC 951 (calculation of maternity leave)

Passed Senate; Passed House; To governor July 10, 2023

If enacted, effective immediately after becoming a law

If enacted, this amendment to Puerto Rico's Working Mothers Protection Act of 1942 would clarify that maternity leave is calculated using working days rather than consecutive calendar days.

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