

# Connecticut Paid Family and Medical Leave

(CT PFML)

Updated as of December 2024

# Table of Contents

- CT Paid Family and Medical Leave (CT PFML) Overview ..... 2**
  - What is Paid Family and Medical Leave (PFML)? ..... 2
  - Is my employer required to offer PFML benefits to employees? ..... 2
  - Is my employer required to use the state-run paid leave program? ..... 2
  - Am I eligible for coverage? ..... 2
  - What are the state benefits and what life events can they be used for? ..... 2
  - What should I do if considering taking PFML? ..... 2
  
- Benefit Calculation ..... 3**
  - How much of a benefit can I receive? ..... 3
  
- Filing for Benefits ..... 3**
  - How do I file for benefits? ..... 3
  - Coordination with other benefits ..... 3
  - Can I qualify for more than one benefit? ..... 4
  - If my employer has a parental leave program that pays 100% salary for a designated number of weeks, how would MetLife coordinate the private plan with the CT PFML benefit? ..... 5
  - If I take a private plan benefit at a different time, can my company be reimbursed benefits? ..... 5
  
- Documentation Requirements ..... 5**
  - What proof or supporting documentation is needed to support a claim? ..... 5
  
- Coverage and Claims ..... 6**
  - Who is a covered family member? ..... 6
  - Can CT PFML be taken intermittently or on a reduced leave schedule? ..... 6
  - Why does the law say the employee must give a 30-day advance notice of foreseeable leave? ..... 6
  - What if my claim is denied? ..... 6
  
- Additional CT PFML Details ..... 6**
  - How is the program funded? ..... 6
  - How does my employer calculate PFML premium amounts due for each employee in 2025? ..... 6
  
- General Tax Information ..... 7**
  - Are benefits taxable? ..... 7
  - Are taxes automatically withheld from benefits? ..... 7
  - How do employers report payroll contribution? ..... 7
  
- Resources ..... 7**

## CT Paid Family and Medical Leave (CT PFML) Overview

### What is Connecticut Paid Family and Medical Leave (CT PFML)?

Connecticut Paid Family and Medical Leave (CT PFML) is a Connecticut benefit offering that lets you ask for wage replacement benefits if you are sick or hurt and cannot work. CT PFML applies to family-related matters as well, such as bonding with a new child or caring for a family member who has a serious health condition. You can also use PFML to handle a qualifying military exigency to deal with urgent issues that come up due to a family member's military duty.

### Is my employer required to offer CT PFML benefits to employees?

Yes, private employers are required to offer these benefits if they employ at least one (1) employee. If you are self-employed or are a sole proprietor, you are eligible to opt-in to the program as well.

### Is my employer required to use the state-run paid leave program?

No, while private employers are required to offer CT PFML, they may choose to apply for an exemption if they want to offer equal or improved benefits through private insurance or a self-funded program.






### Am I eligible for coverage?

All employees working for a covered employer are eligible for benefit.

You must have earned at least \$2,325 or more from working in Connecticut in the first four of the last five finished calendar quarters before your benefit year starts. You must be currently employed or employed in the 12 weeks before the leave. If you are a Connecticut resident, you can enroll in the program even if you are self-employed or a sole proprietor.

### What are the state benefits and what life events can they be used for?

You can receive part of your pay, but no job protection, if you need to take time off for certain reasons, such as:\*

Paid Medical Leave	Safe Leave	Paid Family Leave		
 <p><b>Own Serious Health Condition</b> Your own medical need (including organ or bone marrow donations and pregnancy)</p>	 <p><b>Family Violence</b> When you are impacted by family violence</p>	 <p><b>Child Bonding</b> Including newborn, adoption, and foster care placement</p>	 <p><b>Family Caregiver</b> When a covered family member or covered service member has a serious health condition</p>	 <p><b>Military Exigency</b> When a covered family member is called to active service overseas</p>
<b>Benefit Duration</b>				
Up to 12 weeks in a 12-month period. Extra two (2) weeks if you are incapacitated during a pregnancy. 12 days if you have been victim of violence in a 12-month period. No waiting period.				

\*Job protection under a separate law called the CT FMLA should run at the same time as PFML when applicable.

### What should I do if considering taking CT PFML?

Start by checking your employer's benefits handbook or talking to Human Resources. They can tell you:

- How to apply for benefits
- How the leave works with other paid time off options such as sick pay or vacation time
- How it works with the other programs your employer offers that may overlap with CT PFML

## Benefit Calculation

### How much of a benefit can I receive?

The money you receive is based on how much you usually make each week at your job.



The most you can receive in a week is 60 times the current CT minimum wage. The benefit amount will adjust as the minimum wage increases.

#### Benefit Calculation

If your wages are less than or equal to the CT minimum wage multiplied by 40, then your weekly benefit rate under CT PFML will be 95% of your average weekly wage

If your weekly pay is more than 40 times the Connecticut minimum wage, then you will receive 95% of 40 times the minimum wage, plus 60% of the amount you make over 40 times the minimum wage

**2025 State Minimum Wage is \$16.35 per hour**

The amount you receive will never exceed the minimum wage multiplied by 60. **In 2025, that amount is \$981.00**

## Filing for Benefits

### How do I file for benefits?

1 Notify your employer	2 Apply for benefits	3 Submit supporting documentation	4 Stay connected until you return to work
<ul style="list-style-type: none"> <li>At least 30 days before your leave.</li> <li>If your leave is unforeseeable, notify as soon as you can.</li> <li>If your leave is related to family violence, you can notify 7 calendar days prior.</li> </ul>	<ul style="list-style-type: none"> <li>Contact your claim administrator within 30 days before or 30 days after your leave starts.</li> <li>MetLife can accept claims via web, telephone, or paper claim. The method is dependent on your employer's coverage plan.</li> </ul>	<ul style="list-style-type: none"> <li>Proof may be required before the claim decision can be made.</li> <li>MetLife will make a claim decision within 15 calendar days of receiving all information (or the first day of leave, whichever is later).</li> </ul>	<ul style="list-style-type: none"> <li>Your employer and MetLife will need to have your anticipated return to work date scheduled or an intermittent leave plan on file to efficiently manage the claim.</li> </ul>

### Coordination with other benefits

Connecticut Paid Family and Medical Leave Insurance (CT PFML) and the Connecticut Family and Medical Leave Act (CT FMLA) benefits can and should be used at the same time when applicable.

### Can I qualify for more than one benefit?

You may qualify for more than one benefit based on the reason for your leave. Some common events are:

Leave reason	CT PFML		FMLA	Company	Other
	CT PML	CT PFL			
You have complications due to pregnancy	Yes	No	Yes	Short-Term Disability (STD)	
You have a serious health condition requiring multiple days/weeks/months away from work (including acting as a bone/organ donor)	Yes	No	Yes	STD-continuous or reduced leave schedules with partial disability  No intermittent leave	
You are injured at work	No	No	Yes	No	Workers' Compensation
You are bonding with a newborn or fostering or adopting a child	No	Yes	Yes	Maybe (Parental/Bonding leave)	
You need to care for a parent, child, or spouse with a serious health condition	No	Yes	Yes	Sick leave, PTO	
You need to care for other family members: grandparent, sibling, grandchild, or affinity family member with a serious health condition	No	Yes	No	Sick leave, PTO	
You are affected by family violence (medical or non-medical reason)	Yes	No	Yes - if medical No - if non-medical	PTO  Sick leave if medical	
You are a former employee on unemployment and have a qualifying event (less than 12 weeks post-termination)	No	No	No	No	Unemployment
You are a former employee not working and not on unemployment (less than 12 weeks post-termination) and have a qualifying event	Yes	Yes	No	No	

## **If my employer offers parental leave that pays 100% salary for a designated number of weeks, how would MetLife coordinate the private plan with the CT PFML benefit?**

Coordinating CT PFML benefits with employer benefits depends on your employer determining the primary and secondary benefits, which have different wage replacement guidelines. If you are not losing wages, the PFML benefits may begin after the company paid leave ends. As part of our benefit coordination process, MetLife's claims team will reach out to you to coordinate dates of the company leave that directly overlap with the state leave (e.g., company's parental leave and PFL-child bonding).

## **If I take a private plan benefit at a different time, can my company be reimbursed benefits?**

No. Per the state law, the CT PFML benefits cannot be reimbursed to your employer.

## **Documentation Requirements**

### **What proof or supporting documentation is needed to support a claim?**

Each claim has its own requirements for supporting documentation, as listed below. If your claim requires paperwork from your doctor, be sure to submit the request to your doctor as soon as you can. The doctor's office may take two weeks or more to process your paperwork. In some cases, a statement confirming the relationship between you and the family member may also be requested.



#### **For your own serious health condition (when you are sick or hurt and cannot work for an extended period of time):**

- Certification of a Serious Health Condition form filled out by you and your healthcare provider, or
- A doctor's note or Attending Physician Statement (APS) that includes the same information as the Certification of Serious Health Condition form



#### **For child bonding with a newborn:**

- A copy of the child's birth certificate, or
- A statement from the child's healthcare provider stating child's date of birth, or
- A statement from the mother's healthcare provider stating child's date of birth



#### **For child bonding for adoption or foster care placement:**

- A copy of court documents finalizing the adoption, or
- Documentation from the child's healthcare provider, or
- Foster/adoption agency paperwork containing adoption or placement

If you are not the parent named in the court documents (in loco parentis), you may also be asked to provide proof verifying your relationship to the in loco parentis named in the court documentation. This could be a marriage certificate, civil union papers, or something showing you are in a domestic partnership.



#### **For leave to care for a family member with a serious health condition, including medical events related to pregnancy or childbirth, you must provide ONE of the following:**

- Certification of a Serious Health Condition form filled out by you and your family member's healthcare provider, or
- A doctor's note or APS that includes the same information as the Certification of Serious Health Condition form



**For qualifying military exigency needs, you will need to verify your family member's service with one of the following:**

- Your covered family member's active-duty orders, or
- Letter from the military unit documenting impending call or order to covered duty, or
- Documentation of military leave signed by the approval authority for the military member's rest and recuperation
- If leave is requested to meet with a third party, such as a school official, counselor, or attorney, you must provide documentation of the meeting that includes:
  - The name, address, and contact information of the individual or entity with whom you are meeting
  - A description of the meeting



**For caring for a family member who is a covered service member:**

- Certification of a Disability/Serious Health Condition form filled out by the service member's healthcare provider, or
- A doctor's note or APS that includes the same information as the Certification of Serious Health Condition form
- An alternative form of certification can be an Invitational Travel Order (ITO) or Invitational Travel Authorization (ITA) issued by the Department of Defense to any family member to join an injured or ill service member at their bedside.

## Coverage and Claims

### Who is a covered family member?

A covered family member can be your spouse or domestic partner, child, parent or legal guardian, sibling, grandchild, grandparent, spouse's grandparent, child-in-law, or an individual who has a relationship with you that creates an expectation and reliance on your care for them, regardless of whether you reside together.

### Can CT PFML be taken intermittently or on a reduced leave schedule?

Intermittent leave is available for leaves based on serious health conditions when it appropriately meets the individual's needs. For other leave types, intermittent leave depends on the specific circumstances. Providing proof of the need for intermittent leave may be required.

### Why does the law say the employee must give a 30-day advance notice of foreseeable leave?

The 30-day advance notice requirement requires you to alert your supervisor/employer that you will be absent. This can help with coordinating staffing and back-up training to cover for you while you are out on leave.

### What if my claim is denied?

If your claim has been denied, you can reach out to MetLife to have the claim reconsidered, especially if you have new information to support your claim. Following MetLife's decision on your request for reconsideration, you may file an appeal with the state. Appeal filing instructions can be found in the claim denial letter you received.

## Additional CT PFML Benefit Details

### How is the program funded?

The state-run program is 100% funded by employee contributions, with payroll deductions starting on day one of employment.

Private plans can be funded by both employee and employer contributions. Annual employee contributions are capped at the same rate as the state program which is up to 0.5% of the Social Security cap. For 2025, it is  $\$176,100 \times 0.5\% = \$880.50$

### How does my employer calculate PFML premium amounts due for each employee in 2025?

$\text{Wages} \times 0.5\% = \text{PFML payroll deduction}$ . When the cumulative total of the employee's contributions\* reaches \$880.50 for the 2025 calendar year, the payroll deductions stop.

Employee Taxes	Employee A	Employee B	Employee C	Employee D
<b>Annual Salary</b>	\$45,000	\$75,000	\$176,100	\$180,000
<b>Contribution Rate for 2024</b>	0.5%	0.5%	0.5%	0.5%
<b>Total Annual Premium</b>	\$225	\$375	\$880.50	\$880.50
<b>Weekly Payroll Deduction</b>	\$4.33	\$7.21	\$16.93	\$16.93

\*The state will collect the contributions quarterly basis in arrears. Private plans contributions can be aligned to billing frequency of other coverages.

## General Tax Information

### Are benefits taxable?

Yes.

### Are taxes automatically withheld from benefits?

**PFL:** No. Taxes will not automatically be withheld from benefits, but employees can request voluntary tax withholding. You need to submit a W-4S tax form to the claims team and taxes can be withheld. All PFL benefits paid to you will be reported on an IRS Form 1099-MISC.

**PML:** On fully insured Paid Medical Leave plans, employee FICA is withheld to the extent these taxes are owed, when applicable. Federal and State income taxes are withheld at the request of the employee and require they submit a form W-4S to the claims team. All taxable PML benefits paid to you will be reported on an IRS Form W-2.

### How do employers report payroll contribution?

Employers should report employee contributions on Form W-2 using Box 14 – State disability insurance taxes withheld.

## Resources



### Need more information? Visit:

The MetLife PFML [website](#) regarding state-mandated benefits.

For CT State PFML resources, please [click here](#).

For details regarding your coverage, contact your MetLife Representative.

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