Massachusetts Employee FAQs

Massachusetts Paid Family and Medical Leave (MA PFML)

Updated as of December 2024



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Massachusetts Paid Family and Medical Leave (MA PFML) Overview

What is Massachusetts Paid Family and Medical Leave (MA PFML)?

Massachusetts Paid Family and Medical Leave (MA PFML) is a MA program that lets you ask for wage replacement benefits if you are sick or hurt and cannot work. MA 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 MA PFML to handle a qualifying military exigency if you have to deal with urgent issues that come up due to a family member's military duty.

Is my employer required to offer MA PFML benefits?

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?

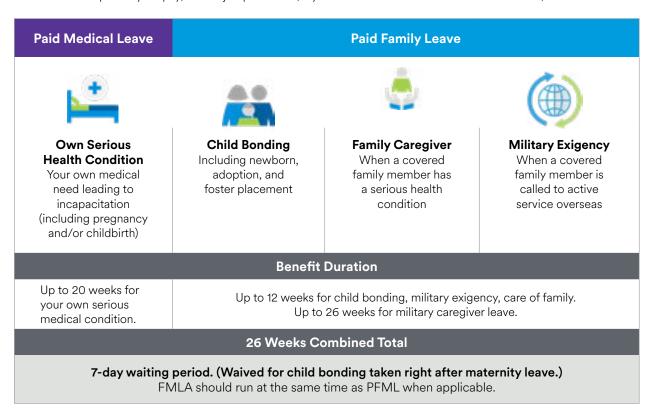
No, while private employers are required to offer MA PFML, they may choose to apply for an exemption if they want to offer equal or improved benefits through private insurance or a self-funded program.

Am I eligible for MA PFML coverage?

All employees working for a covered employer are eligible for benefits. Most Massachusetts workers are eligible for benefits after they have earned at least \$6,300 over the past 4 calendar quarters. In addition, you must have earned at least 30 times the benefit amount that you are eligible to receive.

What are the 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:



What should I do if I am thinking of taking PFML?

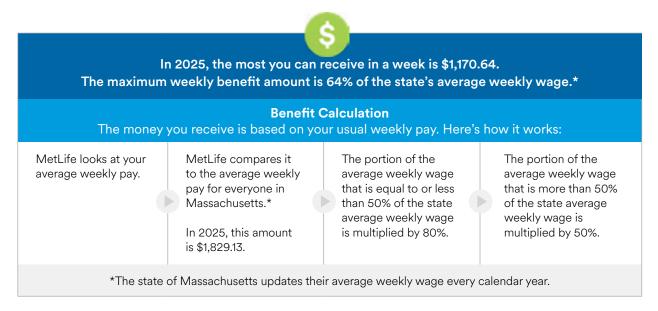
Start by checking your employer's benefits handbook or talking to Human Resources. They can tell you:

- 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 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.



Filing for Benefits

How do I file for benefits?

| Notify your employer | 2 Apply for benefits | Submit supporting documentation | 4 Stay connected until you return to work |
|---|--|--|---|
| At least 30 days before your leave. If your leave is unforeseeable, notify as soon as you can. | Contact your claim administrator within 30 days before or 30 days after leave starts. MetLife can accept claims via web, telephone, or paper claim. The method is dependent on your employer's coverage plan. | Proof may be required before the claim decision can be made. MetLife will make a claim decision within 14 calendar days of receiving all information (or the first day of leave, whichever is later). | 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. |

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 | MA PFML | | | | |
|--|---------|--------|------|--|--------------------------|
| | MA PML | MA PFL | FMLA | Company | Other |
| You have complications due to pregnancy | Yes | No | Yes | Short-Term Disability (STD) | |
| You have a serious health condition requiring days/weeks/months away from work | Yes | No | Yes | STD-continuous or reduced leave schedules with partial disability No intermittent leave | |
| You are injured at work | Yes | 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 | Maybe Sick leave, PTO | |
| You need to care for other family members: grandparent, sibling, or grandchild with a serious health condition | No | Yes | No | Maybe Sick leave, PTO | |
| You are a former employee receiving unemployment (less than 26 weeks posttermination) and you have a qualifying event | Yes | Yes | No | No | Unemployment |
| You are a former employee (less than 26 weeks post-termination) not working and not on unemployment and you have a qualifying event | Yes | Yes | No | No | |

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

MA PFML is a wage replacement and job protected benefit. Both the company leave and PFML can run concurrently to provide job protection. As part of MetLife's 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), and apply the necessary adjustment.

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 the claimant and their 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:

- 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
- Other documentation reasonably acceptable to MetLife



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

- Certification of a 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 his or her bedside

Coverage and Claims

Who is a covered family member?

Covered family members include:

- Your spouse or domestic partner
- Your children, stepchildren, or domestic partner's children
- Your parents, stepparents, or parent's domestic partner
- Your spouse or domestic partner's parents
- Your grandchildren, step-grandchildren, or domestic partner's grandchildren
- Your grandparents, step-grandparents, or grandparent's domestic partner
- Your siblings or stepsiblings

In addition, family members who are related through in loco parentis, custodial/non-custodial care, and/or as your legal ward are covered.

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

Yes, MA PFML can be taken intermittently, or on a continuous leave or reduced leave basis. However, there are some restrictions on your ability to use leave intermittently or on a reduced schedule basis, depending on your qualifying leave event.

Why does the law say I 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. There is no requirement for the insurance claim to be submitted early.

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.

| If MetLife is the claim administrator | If the State is the claim administrator |
|--|--|
| You can submit a written request for appeal to: | MA PFML State On-Line Appeal |
| DisabilityAppeals@metlife.com | MA PFML Appeals Phone: (833) 344-7365. |
| Or fax: (844) 380-0569 | A paper Appeal Request form will be sent. |
| Or mail: MetLife Disability P.O. Box 14592 Lexington, KY 40512-4592 | Once you file the appeal, you have a right to a hearing if they choose. The hearing will be conducted in accordance with the Standard Rules of Practice and Procedure, as found in Massachusetts regulations 801 CMR 1.02 (Informal/Fair Hearing Rules). |

Additional MA PFML Details

How is the program funded?

The state-run program is 100% funded by employee and employer contributions. In 2025, the total contribution rate is 0.88% of an employee's earnings for employers with 25 or more covered individuals. This rate is split into 0.70% for Paid Medical Leave and 0.18% for Paid Family Leave.

The contribution rate is subject to the income cap tied to Social Security taxable wages which is updated annually.

How does my employer calculate MA PFML premium amounts due for each employee?

Your employer may take payroll deductions (not to exceed 0.46%) from your wages until your cumulative contributions reach the annual maximum, which is \$810.06 in 2025. This total is split into two parts: \$493.08 for Paid Medical Leave (0.28%) and \$316.98 (0.18%) for Paid Family Leave.

| MA PFML | Employee A | Employee B | Employee C | | | |
|-------------------------|------------|------------|------------|--|--|--|
| Employee Wages | \$35,000 | \$75,000 | \$176,100 | | | |
| Rate | 0.88% | 0.88% | 0.88% | | | |
| Annual Max Contribution | \$308.00 | \$660.00 | \$1,549.68 | | | |
| Contribution Breakdown: | | | | | | |
| Paid Family 0.18% | \$63.00 | \$135.00 | \$316.98 | | | |
| Paid Medical 0.70% | \$245.00 | \$525.00 | \$1,232.70 | | | |
| Employee Pays (0.28%) | \$98.00 | \$210.00 | \$493.08 | | | |
| Employer Pays (0.42%) | \$147.00 | \$315.00 | \$738.90 | | | |
| Annual Max Contribution | \$308.00 | \$660.00 | \$1,549.68 | | | |
| Total Employee Pay | \$161.00 | \$345.00 | \$810.06 | | | |
| Total Employer Pay | \$147.00 | \$315.00 | \$739.62 | | | |

General Tax Information

Are benefits taxable?

Yes.

Are taxes automatically withheld from benefits?

Private plan administered:

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 for taxes to 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 contributions?

Employers should report employee contributions on both Form W-2 using Box 14 (State disability insurance taxes withheld) and Form 1099-MISC using Box 16. In both cases, the boxes should read "MAPFML".

Resources



Need more information? Visit:

The MetLife PFML website regarding state-mandated benefits.

For MA State PFML resources, please click here.

For details regarding your coverage, contact your MetLife Representative.

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