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September 14, 2020

Joan Harrigan-Farrelly  
Deputy Director, Women's Bureau  
U.S. Department of Labor  
200 Constitution Avenue NW  
Room S-3002  
Washington, DC 20210

Submitted Electronically

Re: Request for Information; Paid Leave, RIN 1290-ZA03

Dear Ms. Harrigan-Farrelly,

A Better Balance (ABB) is writing to comment on the request for information (RFI) issued by the Women's Bureau of the U.S. Department of Labor (DOL) on July 16, 2020. A Better Balance is a national legal advocacy organization dedicated to promoting fairness in the workplace. Through legislative advocacy, strategic litigation, and direct legal services, we use the power of the law to advance justice for workers, so they can care for themselves and their loved ones without jeopardizing their economic security. We believe that when all working parents and caregivers have a fair shot in the workplace, our families, our communities, and our nation are healthier and stronger. To that end, we have been working on paid family and medical leave throughout the country for over a decade.

The RFI notice indicates that the DOL seeks to “gather information concerning the effectiveness of current state- and employer-provided paid leave programs, and how access or lack of access to paid leave programs impacts America's workers and their families,” in order to “identify promising practices related to eligibility requirements, related costs, and administrative models of existing paid leave programs.”

Although it is not mentioned in the RFI, there is already a vast wealth of information demonstrating the effects of not having paid family and medical leave and the benefits of state programs that provide it. DOL itself enabled several valuable studies on paid leave program design and implementation through the innovative Paid Leave Analysis Grant Program administered by the Women's Bureau, and the Chief Evaluation Office-funded Worker Leave studies. The overwhelming weight of the research is clear: the private sector as a whole has failed to solve the paid leave crisis faced by America's workers, and publicly funded social insurance represents the only viable path forward.

### **I. Paid Family and Medical Leave Must Work for All Workers**

*Question 1: Who benefits from paid leave and who bears the costs? (Also see Section III(A) below)*

At some point in their lives, nearly every working person will welcome a new child, deal with their own serious health issue or need to provide care to a seriously ill, injured or disabled loved one. Yet despite progress, most people still do not have the security they need to take time away from their jobs. Millions

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of people are forced to choose between their wages and their ability to care for themselves or their families. Just 19 percent of the workforce has paid family leave through their employers, and only 40 percent has personal medical leave through an employer-provided disability program.<sup>1</sup> The reality is especially stark for people of color and low-wage workers, who face the greatest disparities in their ability to access and afford leave. In fact, access to paid family leave for the lowest-income workers has increased by just 2 percentage points in the last 7 years, to a paltry 5 percent in 2019,<sup>2</sup> even after the enactment in 2017 of tax credits intended to incentivize employers to offer paid leave. These low access rates prove that private sector policies alone are insufficient to solve our nation's paid leave crisis.

Additionally, recently released data from the DOL's 2018 FMLA surveys shows that though the FMLA does not require that leave be paid, access to paid leave for all workers is crucial. The most common reason cited by workers who needed leave but didn't take it was that they couldn't afford to take unpaid leave<sup>3</sup>—nationwide, a striking 34 percent of workers receive no pay while on leave.<sup>4</sup> Low-wage workers and workers that are ineligible for FMLA are much more likely than their counterparts to lack access to paid leave.<sup>5</sup> The survey also confirmed that for many, receiving partial or no pay while on leave results in the worker struggling to make ends meet.<sup>6</sup>

American families have a critical need for paid family and medical leave insurance programs, especially as there are fewer non-working family members to provide care to children and elderly relatives. Paid leave is a cross-cutting societal issue that has specific benefits for different populations including women, children, LGBT families, the elderly, and businesses, as well as for society as a whole. Access to paid leave increases workforce attachment for mothers and rates of breastfeeding, saves businesses money through retention of employees, and reduces stress for family caregivers, among numerous other benefits. Paid leave also helps society as a whole as families who have access to it are healthier, more economically secure, and less likely to require taxpayer-funded public assistance resources. The lack of paid leave costs U.S. workers and their families \$22.5 billion each year in lost wages alone.<sup>7</sup>

Evidence from the states with paid leave programs has shown that in order to truly meet the needs of working people, a paid family and medical leave program must meet certain basic standards. It must be comprehensive by allowing leave for all FMLA-covered events, particularly as our nation ages and the shortage of paid caregivers means more working people are called upon to care for their family members.

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<sup>1</sup> U.S. Bureau of Labor Statistics. (2019, September). *National Compensation Survey: Employee Benefits in the United States, March 2019* (Table 16, Table 31). Retrieved 27 August 2020, from <https://www.bls.gov/ncs/ebs/benefits/2019/employee-benefits-in-the-united-states-march-2019.pdf>

<sup>2</sup> See note 1; U.S. Bureau of Labor Statistics. (2012). *National Compensation Survey: Employee Benefits in the United States, March 2012* (Table 32). Retrieved August 27 2020, from <https://www.bls.gov/ncs/ebs/benefits/2012/ebbl0050.pdf>

<sup>3</sup> Sixty-six percent of employees report that their reason for not taking needed leave is their inability to afford unpaid leave. *Employee and Worksites Perspectives of the Family and Medical Leave Act: Results from the 2018 Surveys* at Exh. 6-3 (2020), [https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDD\\_FMLA2018SurveyResults\\_FinalReport\\_Aug2020.pdf](https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDD_FMLA2018SurveyResults_FinalReport_Aug2020.pdf).

<sup>4</sup> *Id.* at iv.

<sup>5</sup> Low-wage workers (52%) less commonly report having access to paid leave for their own illness or medical care than do other workers (80%). Only 39% of low-wage workers have access to paid leave to care for a family member, compared to 65% of non-low-wage workers. *Id.* at Exh. 3-5.

<sup>6</sup> Two-thirds (67%) of employees who did not receive full pay while on leave report finding it much more or somewhat more difficult to “make ends meet” during their leave. *Id.* at 33.

<sup>7</sup> Glynn, S. J. (2020, January 21). *The Rising Cost of Inaction on Work-Family Policies*. Retrieved 27 August 2020 from Center for American Progress website: <https://www.americanprogress.org/issues/women/news/2020/01/21/479555/rising-cost-inaction-work-family-policies/>

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It must provide the same amount of leave regardless of a worker’s gender. It must replace individuals’ wages at an adequate level so that people can actually afford to take time off, as well as a meaningful duration of leave, so that people have enough time to meet their family or medical needs. It must allow leave to care for an inclusive range of family members in order to adequately reflect the way our families really look—particularly for families of color, immigrant families, and the LGBTQ community. It must guarantee job protection so that people can take the time off they need without having to worry if their job will still be there for them when they return. And it must be funded affordably and sustainably, without cutting other essential programs that working people need.

**II. A Comprehensive, Publicly Run Paid Leave Program Is the Best Option for Our Nation**

*Question 2: What are the needs of workers and employers when it comes to paid time off for care obligations? What elements of the existing public (e.g., state-administered) and private (employer-provided) options work well? Why do they work well? Are there any features and provisions that make a paid leave program successful for all stakeholders?*

*Question 3: What does not work well and why; and what are the existing gaps? What could be done to improve the existing patchwork of programs, which include state and employer-sponsored paid options? What are the impediments, costs and otherwise, faced in implementing those improvements?*

*Question 8: What are the features of an ideal paid leave program, from the perspective of a worker or employer?*

America’s working families need permanent, comprehensive paid family and medical leave. Fortunately, states are leading the way toward a more universal model that is proven to work. Nine states, including the District of Columbia, have enacted paid family and medical leave social insurance programs. Under this model, employees and/or employers contribute a small percentage of wages into a public fund, out of which benefits are paid as a percentage of an employee’s wages. This ensures that employees can access leave regardless of their employer, position, or part-time/full-time status—meaning that the workers most in need of leave can access it. It also eliminates employers’ large up-front costs of providing paid leave out of their own pockets—especially important for small businesses, who otherwise might not be able to afford this benefit, making it harder to compete with large businesses for the best employees. When workers need family or medical leave, the insurance system pays their benefits. This means that employers do not have to pay workers’ wages out of pocket when they are out on leave, making providing paid leave inexpensive to the employer. Polls of small businesses repeatedly demonstrate overwhelming support for a national paid leave policy structured as social insurance, and hundreds of small businesses have endorsed federal paid family and medical leave legislation.

Publicly administered paid leave programs are meant to create baseline benefits that employers are free to build upon. For example, employers can “top-up” paid leave benefits provided through a public plan to replace more or all of their workers’ wages and they can offer a longer period of leave. As a national paid leave system is developed, employers and insurers could work together to create products that fulfill the needs of workers and employers while ensuring an affordable, inclusive baseline program for all workers. While opponents of publicly provided and administered paid leave often claim some workers will lose better benefits that they currently have if a public program is implemented, there is absolutely no

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evidence from states that this has happened. The incentives that high-road employers have to use paid leave as a recruitment and retention tool will remain as it is now and the insurance market will adjust.

From the experience of the states, we know that there are certain key policy elements that must be included for a strong paid family and medical leave program. The following are key policy points that should be included in a comprehensive bill.

**A. Paid leave must cover health, caregiving, bonding, and military family needs.**

Strong paid family and medical leave programs ensure the ability of workers to take paid leave to address their own serious health needs, care for a loved one dealing with a serious health need, bond with a new child, or address the impact of military deployment. All four purposes are already embodied in the Family and Medical Leave Act (FMLA) and address the most important needs for leave across workers' lifespans. All state paid family and medical leave programs cover or will cover leaves for workers' own health, for family caregiving, and for bonding with a new child (including foster or adoptive children, for parents of any gender), while most also cover the needs of military family members dealing with the impact of deployment.

Nationwide, about 3 in 5 private sector workers lack access to short-term disability insurance through their employers, leaving them vulnerable when they need time off from work to address their serious health needs.<sup>8</sup> Among low-income workers, these numbers are even more stark. Over 80% of those in the bottom quarter of earners and nearly 90% of those in the bottom tenth of earners lack access to short-term disability insurance through their employers.<sup>9</sup> When workers do not have the leave they need, they may defer or forego necessary medical treatment.<sup>10</sup>

Today, nearly one in three U.S. households provide care for an adult loved one with a serious illness or disability.<sup>11</sup> With an aging population, these numbers will only increase in the future. Family caregivers can help these individuals recover more quickly and spend less time in hospitals.<sup>12</sup> Policies that support family caregiving create savings that benefit all taxpayers. Unpaid family caregivers not only help to ease the burden on our crowded hospitals and long-term care facilities but also create enormous financial savings. For example, recipients of family caregiving are less likely to have nursing home care or home health care paid for by Medicare.<sup>13</sup> Because most caregivers providing care for adults are employed,<sup>14</sup> the demands of providing care are in constant tension with earning a much-needed income. In addition, seriously ill children benefit when their parents can afford time off to care for them. Research shows that

<sup>8</sup> U.S. Bureau of Labor Statistics, Employee Benefits Survey: Mar. 2019, Table 16 (2019), <https://www.bls.gov/ncs/ebs/benefits/2019/ownership/private/table16a.pdf>.

<sup>9</sup> *Id.*

<sup>10</sup> See Abt Associates Inc., *Family and Medical Leave in 2012: Technical Report* 131 (Sep. 2012), <https://www.dol.gov/asp/evaluation/fmla/FMLA-2012-Technical-Report.pdf>.

<sup>11</sup> Catherine Albiston & Lindsey Trimble O'Connor, *Just Leave*, 39 HARV. J. L. & GENDER 1, 16 (2016).

<sup>12</sup> See, e.g., A. Houser & M.J. Gibson, *Valuing the Invaluable: The Economic Value of Family Caregiving, 2008 Update*, AARP Public Policy Institute (Nov. 2008), pp. 1-2, 6; *Valuing the Invaluable: A New Look at the Economic Value of Family Caregiving*, AARP (June 2007), p. 6.

<sup>13</sup> Houser & M.J. Gibson, *Valuing the Invaluable: The Economic Value of Family Caregiving, 2008 Update*, at 6.

<sup>14</sup> *Caregiving in the U.S.*, AARP & National Alliance for Caregiving (June 2015), p. 56, available at <http://www.aarp.org/content/dam/aarp/ppi/2015/caregiving-in-the-united-states-2015-report-revised.pdf>.

ill children have better vital signs, faster recoveries, and reduced hospital stays when cared for by parents.<sup>15</sup>

For over a decade, the FMLA has provided essential leave protections to military families for deployment-related needs. Recognizing the importance of honoring our nation's heroes, most states with paid family and medical leave programs have followed suit—New York, Washington State, California, Massachusetts, and Connecticut all allow or will allow paid family leave to be used to address certain military family needs. Alarming, the RFI omits military family leave as a covered purpose for paid leave, and only refers to the other covered FMLA purposes. Military families lack the protections they need when their loved ones are called to active duty service of our country. In one recent national survey, the amount of time service members spend away from family was ranked as the top issue of concern for service members and military spouses.<sup>16</sup> Families that make these sacrifices deserve the paid time off they need to address the effects of deployment on their families and their lives. Moreover, due to the impacts of the military lifestyle, a shocking 30% of military spouses are unemployed, despite actively seeking employment, and many more are underemployed.<sup>17</sup> 52% of military spouses reported that unemployment and underemployment are the main obstacles to financial security.<sup>18</sup> Ensuring that these patriots can take the time away they need and then return ready to work can help them maintain employment and better support their loved ones serving abroad and those who remain at home.

**B. Workers need a decent wage replacement in order to be able to take time off, especially workers at the bottom of the economic spectrum.**

A strong paid leave program provides a progressive wage replacement rate that workers, especially low-income workers can afford to use. Under progressive wage replacement systems, lower-income workers, who need to use all of their income to meet their basic needs, receive a higher proportion of their income while they are on leave. Progressive wage replacement systems strike a reasonable balance between meeting the needs of low-wage workers and offering a reasonable maximum benefit to help protect the solvency of the fund.

The wage replacement rate (the percentage of their own income workers receive while on leave) is an extremely important element of a paid family and medical leave program: if the rate is too low, workers will not be able to afford to take the leave they need. This problem can be especially acute for low-income workers living paycheck to paycheck, who need every dollar of their income to pay their bills. Moreover, for programs that are partially worker-funded, it is particularly essential to ensure that workers will not be required to pay for a program they cannot afford to use.

Though low-income workers are the most vulnerable, workers of any income level can find themselves unable to afford to take leave if the wage replacement rate is too low. In a major California study, workers

<sup>15</sup> See S. J. Heymann, A. Earle & B. Egleston, *Parental Availability for the Care of Sick Children*, *Pediatrics*, Vol. 98 No. 2 (Aug. 1996), p. 226-30; S.J. Heymann, *THE WIDENING GAP: WHY AMERICA'S WORKING FAMILIES ARE IN JEOPARDY AND WHAT CAN BE DONE ABOUT IT* (2000), p. 57.

<sup>16</sup> *Military Family Lifestyle Survey: Comprehensive Report*, BLUE STAR FAMILIES, p. 20 (2018), available at <https://bluestarfam.org/wp-content/uploads/2019/03/2018MFLS-ComprehensiveReport-DIGITAL-FINAL.pdf>.

<sup>17</sup> *Id.* at 10.

<sup>18</sup> *Id.*

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across income levels reported that the 55% wage replacement level made it difficult to afford to use the program, potentially contributing to low rates of use.<sup>19</sup> For this reason, California amended their statute to raise the wage replacement rate, especially for low-wage workers. The nation can learn from the experience of existing programs and create a benefit level that works for workers.

Most state paid family and medical leave laws provide a progressive wage replacement rate.<sup>20</sup> Typically, this means that the program replaces a higher percentage of income up to a threshold amount (often called the “bend point”), then replaces a lower percentage of income above that amount. In effect, this creates a sliding scale of income replacement. For example, the paid family and medical leave program in Washington State provides 90% of workers’ wages up to a bend point of 50% of the state average weekly wage and provide 50% of workers’ wages above that amount.<sup>21</sup> Washington State’s program currently caps benefits at \$1,000 per week, but benefits will be adjusted to 90% of the state average weekly wage in subsequent years.<sup>22</sup> Washington, D.C.; Massachusetts; Connecticut; and Oregon all use or will use progressive wage replacement systems following this model, though their exact bend points and rates of replacement vary.<sup>23</sup> California already provides progressive wage replacement benefits, though it uses a somewhat more complex system.<sup>24</sup>

### C. Workers must have sufficient time to care for themselves and their families.

A strong leave program would provide at least 12 weeks of paid family and medical leave. This minimum benchmark, which is also consistent with the FMLA, ensures that workers have the time they need to attend to their own or a family member’s serious health needs, address the impact of a family member’s military deployment, or bond with a new child. Providing 12 weeks of coverage would also match the length of paid family leave coverage in New York (once the program is fully phased in) and

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<sup>19</sup> Cal. Senate Office of Research, *California’s Paid Family Leave Program: Ten Years After the Program’s Implementation, Who Has Benefited and What Has Been Learned?* 6 (July 1, 2014), [http://sor.senate.ca.gov/sites/sor.senate.ca.gov/files/Paid\\_Family\\_Leave\\_FINAL\\_A1b.pdf](http://sor.senate.ca.gov/sites/sor.senate.ca.gov/files/Paid_Family_Leave_FINAL_A1b.pdf); Andrew Chang & Co., *Paid Family Leave Market Research*, Cal. Emp. Dev. Dep’t 70 (July 13, 2015), [https://www.edd.ca.gov/Disability/pdf/Paid\\_Family\\_Leave\\_Market\\_Research\\_Report\\_2015.pdf](https://www.edd.ca.gov/Disability/pdf/Paid_Family_Leave_Market_Research_Report_2015.pdf).

<sup>20</sup> Cal. Unemp. Ins. Code §§ 3301(b), 2655(e) (West 2019); D.C. Code Ann. § 32-541.04(g)(1)-(2) (West 2020); Wash. Rev. Code Ann. § 50A.15.020(4) (West 2020); Mass. Gen. Laws Ann. ch. 175M, § 3(b) (West 2019); S.B. 1, 2019 Gen. Assemb., Reg. Sess. § 3(c)(2) (Conn. 2019); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 7 (Or. 2019).

<sup>21</sup> Wash. Rev. Code Ann. § 50A.15.020(4) (West 2020).

<sup>22</sup> Wash. Rev. Code Ann. § 50A.15.020(5)(a) (West 2020).

<sup>23</sup> D.C. Code Ann. § 32-541.04(g)(1)-(2) (West 2020) (provides 90% of a worker’s average weekly wage up to an amount equal to 40 times 150% of the D.C. minimum wage and 50% of a worker’s average weekly wage above an amount equal to 40 times 150% of the D.C. minimum wage); Mass. Gen. Laws Ann. ch. 175M, § 3(b) (West 2019) (provides 80% of a worker’s average weekly wage up to an amount equal to 50% of the statewide average weekly wage and 50% of a worker’s average weekly wage above an amount equal to 50% of the statewide average weekly wage); S.B. 1, 2019 Gen. Assemb., Reg. Sess. § 3(c)(2) (Conn. 2019) (provides 95% of a worker’s average weekly wage up to an amount equal to 40 times the state minimum wage and 60% of a worker’s average weekly wage above an amount equal to 40 times the state minimum wage); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 7 (Or. 2019) (provides 100% of a worker’s average weekly wage up to an amount equal to 65% of the statewide average weekly wage and 50% of a worker’s average weekly wage above an amount equal to 65% of the statewide average weekly wage).

<sup>24</sup> California uses a system that creates three tiers of wage replacement. The first tier applies to workers who earn less than a fixed amount set in statute (approximately \$71.46 per week); workers in this tier receive \$50 per week. The second tier applies to workers who earn at least as much as a fixed amount set in statute (approximately \$71.46 per week) but less than approximately 33% of the state average weekly wage (for 2019, this works out to approximately \$414.26 per week); workers in this tier receive 70% of their *total* average weekly wage. The third tier applies to workers who earn at least approximately 33% of the state average weekly wage (for 2019, this works out to approximately \$414.26 per week); workers in this tier receive either approximately 60% of the worker’s *total* average weekly wage or an amount equal to 23.3% of the state average weekly wage (for 2019, this works out to approximately \$289.57), whichever is greater. See Cal. Unemp. Ins. Code §§ 3301(b), 2655(e) (West 2019).

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Massachusetts and of paid family and medical leave coverage in Washington State, Connecticut, and Oregon. At the same time, programs should recognize that workers who experience multiple needs in a year may need additional time, such as those who need medical leave for recovery from childbirth as well as time to bond with a new child.

Programs vary in the number of weeks of benefits workers can receive. For their own medical needs, workers can receive benefits for 52 weeks in California, 30 weeks in Rhode Island, 26 weeks in New York and New Jersey, 12 weeks in Washington State (with an additional 2 weeks for certain pregnancy-related health needs), and 2 weeks in Washington, D.C. Workers will be able to receive benefits for their own medical needs for 20 weeks in Massachusetts and 12 weeks in Connecticut and Oregon (with an additional 2 weeks for certain pregnancy-related health needs in each of these states). For paid family leave, workers can receive benefits for 12 weeks in New Jersey and Washington State, 8 weeks in California, and 4 weeks in Rhode Island. New York currently offers 10 weeks of paid family leave benefits and, when the program is fully phased in in 2021, will offer 12 weeks. Washington, D.C. provides 6 weeks of benefits to care for a seriously ill or injured loved one and 8 weeks of benefits to bond with a new child. Massachusetts, Connecticut, and Oregon will each offer 12 weeks of paid family leave benefits.<sup>25</sup> Programs vary in the extent to which workers can combine family and medical leave benefits sequentially.

The health benefits of providing 12 weeks of leave for bonding are overwhelming for children, mothers, and fathers. Children whose mothers do not return to work full time in the first 12 weeks are more likely to receive medical checkups and critical vaccinations.<sup>26</sup> Mothers who take at least 12 weeks of leave are also more likely to breastfeed, with important lasting health benefits for their children.<sup>27</sup> Fathers who take longer leaves experience greater engagement in their children's lives;<sup>28</sup> greater paternal engagement has cognitive and developmental advantages for children.<sup>29</sup> For foster children, the first few months are a critical adjustment period in the transition to a new placement,<sup>30</sup> during which children need time to bond with their foster parents. Experts including the American Academy of Pediatrics recommend that healthy full-term infants should not be enrolled in child care until they are at least 12 weeks old due to rapid developmental changes and the risk of developing severe undetected illness.<sup>31</sup>

For new birth mothers, having less than 12 weeks of family leave is associated with increased symptoms of postpartum depression.<sup>32</sup> For working fathers, taking longer paid family leave means increased satisfaction in their contact with their children.<sup>33</sup>

<sup>25</sup> Massachusetts will provide up to twenty-six weeks of family leave benefits for military caregivers.

<sup>26</sup> Lawrence M. Berger, Jennifer Lynn Hill, and Jane Waldfogel, "Maternity Leave, Early Maternal Employment and Child Health and Development in the US," *The Economic Journal* 115, no. 501 (2005).

<sup>27</sup> *Id.*

<sup>28</sup> del Carmen Huerta *et al.*, *Fathers' Leave, Fathers' Involvement and Child Development Are They Related?*

<sup>29</sup> Ann Sarkadi *et al.*, "Fathers' involvement and children's developmental outcomes: a systematic review of longitudinal studies," *Acta Paediatrica* 97: 153-158 (2008).

<sup>30</sup> Annette Semanchin Jones and Susan J. Wells, *PATH/Wisconsin-Bremer Project: Preventing Disruptions in Foster Care* (2008).

<sup>31</sup> American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education, *Caring for Our Children: National Health and Safety Performance Standards*, Third Edition (2011).

<sup>32</sup> Pinka Chatterji and Sara Makowitz, "Family Leave After Childbirth and the Mental Health of New Mothers," *The Journal of Mental Health Policy and Economics* 15, 61-76 (2012).

<sup>33</sup> Haas & Hwang, "The Impact of Taking Parental Leave on Fathers' Participation in Childcare and Relationships with Children", 85-104.

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**D. Job protection is critical to the ability of a worker to take this benefit.**

A strong paid family and medical leave program protects the jobs of workers taking paid family and medical leave by ensuring they have the right to return to work following leave. Job protection for all employees covered by the program is an essential element—without it, it’s not leave. This is especially important for low-income workers, who will often have less job security than other workers, and, because they change jobs more often than other workers<sup>34</sup> and are more likely to be working part time<sup>35</sup> (including many part-time workers who would prefer to be working full time), may be less likely to be covered by leave laws like the Family and Medical Leave Act.<sup>36</sup>

States are leading the way in providing paid leave with job protection. Massachusetts will provide job protection to all employees covered by its paid family and medical leave law.<sup>37</sup> Connecticut and Oregon will provide job protection to workers taking family or medical leave who have been employed by their current employer for approximately three months.<sup>38</sup> New York and Rhode Island provide job protection to all employees covered by their paid family leave laws.<sup>39</sup>

The need for job protection for workers in a paid family and medical leave program cannot be overstated. The need for such leave occurs at some of the most stressful times in a person’s life: the arrival of a new child, a health crisis in the family, or a looming deployment. At these times, workers shouldn’t have to worry whether they will have a job to return to after their leave. Without a legal right to get their job back, many workers will be unwilling to risk their livelihood by taking the leave they need—the risk to their long-term economic security will be too great. Without job protection, workers will pay for a program they can only use by risking their long-term economic survival. In one California study, fear of being fired was a commonly cited reason workers who were eligible for paid family leave under that state’s program did not take it.<sup>40</sup> In Rhode Island, 45% of workers who took leave under their state’s paid family leave law (which provides job protection) said that without the law they would not have taken leave for fear of losing their job.<sup>41</sup>

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<sup>34</sup> Jacquelyn Anderson et al., *A New Approach to Low-Wage Workers and Employers*, MDRC 5 (Mar. 2006), [https://www.mdrc.org/sites/default/files/full\\_9.pdf](https://www.mdrc.org/sites/default/files/full_9.pdf).

<sup>35</sup> Pamela Loprest et al., *Who Are Low-Wage Workers?*, U.S. Dep’t Health & Hum. Servs. (Feb. 2009) <https://aspe.hhs.gov/system/files/pdf/180021/rb.pdf>.

<sup>36</sup> Lonnie Golden, *Still Falling Short on Hours and Pay: Part-time Work Becoming New Normal*, Econ. Policy Inst. (Dec. 5, 2016), <http://www.epi.org/publication/still-falling-short-on-hours-and-pay-part-time-work-becoming-new-normal/>.

<sup>37</sup> Mass. Gen. Laws Ann. ch. 175M, § 2(e) (West 2019).

<sup>38</sup> Oregon will provide job protection to all covered workers who have been employed with their current employer for at least 90 days. H.B. 2005, 80th Leg. Assemb., Reg. Sess. § 10(1), (7) (Or. 2019). Connecticut made substantial amendments to its existing state unpaid leave law as part of the same bill that created its paid leave program. The amended unpaid leave law provides job protection to nearly all private sector employees in the state who have been employed with their employer for at least three months. Workers receiving benefits for domestic violence-related purposes do not have job protection under that law, although they may have employment protection under Connecticut’s family violence leave law. Conn. Gen. Stat. Ann. § 31-51nn(a) (West 2019).

<sup>39</sup> N.Y. Workers’ Comp. Law § 203-b (McKinney 2019); 28 R.I. Gen. Laws Ann. § 28-41-35(f) (West 2019).

<sup>40</sup> Eileen Appelbaum & Ruth Milkman, *Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California*, at 30 (2011), <https://www.cepr.net/documents/publications/paid-family-leave-1-2011.pdf>.

<sup>41</sup> Barb Silver, Helen Mederer, & Emilija Djurdjevic, *Rhode Island’s Temporary Caregiver Insurance Program: Findings from the First Year* (2015).



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Job protection keeps workers attached to the workforce. When workers are unable to take short-term leave and then return to their job, they are often pushed out of the workforce altogether. One study estimated that men who leave the labor force early due to caring for an aging parent lose almost \$90,000 in wages, while women who do so lose over \$140,000 in wages.<sup>42</sup> Women who take paid leave after having a baby are more likely to be working 9 to 12 months after the birth than women who take no leave.<sup>43</sup> And keeping workers on the job saves taxpayers money. Both men and women who return to work after taking paid leave are much less likely to be receiving public assistance or food stamps in the year following their child's birth than those who return to work without taking family leave.<sup>44</sup>

A strong paid family and medical leave program would also ensure that all workers are protected against retaliation for using their rights under the law. No one should be punished for taking the time they need and which they are guaranteed by law. This protection is especially important in light of the rise of punitive absence control policies, where workers assigned points for each absence and subject to punishment when they receive too many points.<sup>45</sup> States are also leading the way in prohibiting retaliation. For example, Massachusetts's paid family and medical leave law offers particularly robust protections against retaliation. The law includes a rebuttable presumption that any adverse action taken within six months of the exercise of a protected right was retaliatory.<sup>46</sup> Similarly, as part of a set of recent amendments to expand and improve their paid family and medical leave law, New Jersey added new strong anti-retaliation protections.<sup>47</sup>

In addition, a strong paid family and medical leave would ensure that workers won't lose their health insurance coverage while they are on leave. The times that workers need leave—in the face of major illness or when welcoming a new child—are often when workers and their families need health coverage the most. Yet without specific legal protections, workers may be cut off or face insurmountable increases in cost due to the loss of employer contributions. Many states already provide this needed protection. Massachusetts guarantees continuation of coverage for workers taking paid family or medical leave under its law; Oregon guarantees continuation of coverage for workers taking paid family or medical leave under its law, so long as they have been employed by their employer for at least 90 days prior to taking leave.<sup>48</sup> New York and Rhode Island guarantee continuation of coverage to all workers taking paid family leave under their laws.<sup>49</sup>

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<sup>42</sup> MetLife Mature Mkt. Inst., *The MetLife Study of Caregiving Costs to Working Caregivers* (2011), <https://www.caregiving.org/wp-content/uploads/2011/06/mmi-caregiving-costs-working-caregivers.pdf>.

<sup>43</sup> Linda Houser & Thomas P. Vartanian, *Pay Matters: The Positive Economic Impacts of Paid Family Leave for Families, Businesses and the Public* 2 (Jan. 2012), [https://epe.rutgers.edu/sites/default/files/images/CWW\\_Paid\\_Leave\\_Brief\\_Jan\\_2012\\_0.pdf](https://epe.rutgers.edu/sites/default/files/images/CWW_Paid_Leave_Brief_Jan_2012_0.pdf).

<sup>44</sup> Cal. Senate Office of Research, *California's Paid Family Leave Program: Ten Years After the Program's Implementation, Who Has Benefited and What Has Been Learned?* 6 (July 1, 2014), [http://sor.senate.ca.gov/sites/sor.senate.ca.gov/files/Paid\\_Family\\_Leave\\_FINAL\\_A1b.pdf](http://sor.senate.ca.gov/sites/sor.senate.ca.gov/files/Paid_Family_Leave_FINAL_A1b.pdf); Andrew Chang & Co., *Paid Family Leave Market Research*, Cal. Emp. Dev. Dep't 86 (July 13, 2015), [https://www.edd.ca.gov/Disability/pdf/Paid\\_Family\\_Leave\\_Market\\_Research\\_Report\\_2015.pdf](https://www.edd.ca.gov/Disability/pdf/Paid_Family_Leave_Market_Research_Report_2015.pdf).

<sup>45</sup> See A Better Balance, *Pointing Out: How Walmart Unlawfully Punishes Workers for Medical Absences* (June 2017), <https://www.abetterbalance.org/wp-content/uploads/2017/05/Pointing-Out-Walmart-Report-FINAL.pdf> (explaining that Walmart, the world's largest private employer, has used point-based absence control policies).

<sup>46</sup> Mass. Gen. Laws Ann. ch. 175M, § 9(c) (West 2019).

<sup>47</sup> N.J. Stat. Ann. § 43:21-55.2 (West 2019).

<sup>48</sup> Mass. Gen. Laws Ann. ch. 175M, § 2(f) (West 2019); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 10(2), (7) (Or. 2019).

<sup>49</sup> N.Y. Workers' Comp. Law § 203-c (McKinney 2019); 28 R.I. Gen. Laws Ann. § 28-41-35(g) (West 2019).

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**E. A strong paid family and medical leave program reflects and protects the diversity of today’s American families.**

Families today take many forms: they are multi-generational, blended,<sup>50</sup> LGBTQ,<sup>51</sup> and increasingly include close loved ones who aren’t biologically or legally related.<sup>52</sup> To work for all American families, a strong paid leave program would include a broad family definition that specifically covers spouses, domestic partners, children (regardless of age), parents, parents of a spouse or domestic partner, grandchildren, grandparents, siblings, nieces and nephews, aunts and uncles, and any other individual related by blood or affinity whose close association with the worker is the equivalent of a family relationship. Nationwide trends regarding family structures show that broad family coverage is imperative for strong paid leave laws. Given the makeup of American families and the longstanding success of inclusive family recognition as discussed below, it is particularly concerning that the RFI describes family leave as leave to “[care] for the employee’s spouse, child, or parent who has a serious health condition.” This restrictive definition of “family” especially leaves out single-parent and blended families, families headed by same-sex couples, chosen families, and multi-generational families. These families and their stories are essential to the inquiry on which DOL is embarking.

Today, adults ages 18 to 44 are more likely to have lived with an unmarried significant other than to have ever been married,<sup>53</sup> and as of 2016, the rising number of cohabiting adults in the U.S. reached about 18 million.<sup>54</sup> Thus, coverage of domestic partners and significant others is critical to many workers in long-term, committed relationships.

In addition to caring for spouses, children, and parents, workers often provide care to—or rely on care from—other biological, legal, and extended relatives with whom they share a close relationship. Since 1980, for example, the number of Americans living in multi-generational households has doubled to 57 million.<sup>55</sup> Given the prevalence of multi-generational households across the country, it is extremely

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<sup>50</sup> According to the U.S. Census Bureau, 16% of children live in “blended families,” or households with a stepparent, stepsibling, or half-sibling. *Parenting in America: Outlook, Worries, Aspiration Are Strongly Linked to Financial Situation*, Pew Research Center 19 (2015), [https://www.pewresearch.org/wp-content/uploads/sites/3/2015/12/2015-12-17\\_parenting-in-america\\_FINAL.pdf](https://www.pewresearch.org/wp-content/uploads/sites/3/2015/12/2015-12-17_parenting-in-america_FINAL.pdf).

<sup>51</sup> It is estimated that 4.5% of Americans, or over 11 million people, self-identify as lesbian, gay, bisexual, or transgender. Frank Newport, *In U.S., Estimate of LGBT Population Rises to 4.5%*, Gallup (May 22, 2018), <https://news.gallup.com/poll/234863/estimate-lgbt-population-rises.aspx>. Additionally, estimates show that between 2 million and 2.7 million minor children have an LGBTQ parent. Gary J. Gates, *Marriage and Family: LGBT Individuals and Same-Sex Couples*, *Future Child*, Fall 2015, at 67, 72.

<sup>52</sup> Nearly 33 million households in the United States, or 28% of all households, consist of an individual who lives alone, and in an emergency or during an illness, many of these individuals rely on care from close loved ones. See *Selected Social Characteristics in the United States, 2013-2017 American Community Survey 5-Year Estimates*, U.S. Census Bureau, [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_5YR\\_DP02&prodType=table%20c%20\(last%20accesed%20September%202018](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP02&prodType=table%20c%20(last%20accesed%20September%202018) (last visited Jan. 30, 2020). Additionally, in a 2016 national survey, 32% of people in the U.S. reported that they took time off work to provide care for a chosen family member. Katherine Gallagher Robbins *et al.*, *People Need Paid Leave Policies That Cover Chosen Family*, Center for American Progress 2 (2017), <https://cdn.americanprogress.org/content/uploads/2017/10/26135206/UnmetCaregivingNeed-brief.pdf>.

<sup>53</sup> “[T]he share of adults ages 18 to 44 who have ever lived with an unmarried partner (59%) has surpassed the share who has ever been married (50%) . . . .” Juliana Menasce Horowitz *et al.*, *Marriage and Cohabitation in the U.S.*, Pew Research Center (Nov. 6, 2019), <https://www.pewsocialtrends.org/2019/11/06/marriage-and-cohabitation-in-the-u-s/>.

<sup>54</sup> Renee Stepler, *Number of U.S. Adults Cohabiting with a Partner Continues to Rise, Especially Among Those 50 and Older*, Pew Research Center (Apr. 6, 2017), <https://www.pewresearch.org/fact-tank/2017/04/06/number-of-u-s-adults-cohabiting-with-a-partner-continues-to-rise-especially-among-those-50-and-older/>.

<sup>55</sup> Richard Fry & Jeffrey S. Passel, *In Post-Recession Era, Young Adults Drive Continuing Rise in Multi-generational Living*, Pew Research Center (July 17, 2014), <https://www.pewsocialtrends.org/2014/07/17/in-post-recession-era-young-adults-drive-continuing-rise-in-multi->

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important that any paid family and medical leave program cover grandparents and grandchildren. Furthermore, children of all ages should be covered because adult children with a serious illness are no less in need of care from their parents than any other adult to whom the worker is related; and older children, especially those who have not formed a family, will still rely on their parents for care in the face of a serious illness. Nationwide, 82% of children under the age of 18 live with at least one sibling, and as a long-lasting family relationship, many siblings look to their sisters or brothers as the first person to whom they would turn for care in the event of a serious illness.<sup>56</sup> This is often true for people with disabilities; as more people with disabilities outlive their parents, an increasing number of individuals are receiving primary care from siblings and extended family.<sup>57</sup>

Lastly, when an individual is sick or has a medical emergency, they often rely on individuals they live with—even absent a blood or legal relationship—for help and caregiving. While relationships with such close loved ones are important to many workers, a 2016 national survey showed that they are even more significant for LGBTQ people and people with disabilities, who reported taking time off to care for their “chosen family” in higher percentages than the population as a whole.<sup>58</sup> An inclusive family definition is also important to current and former members of the armed forces because many of those injured or ill as a result of their military service rely on friends or neighbors for care. This is particularly true for those who were ill or injured as a result of their service after September 11, 2001, as those service members are nearly twice as likely as their civilian counterparts to rely on care from friends and neighbors.<sup>59</sup>

States with paid family and medical leave laws understand the demographics of working families and have led the way with inclusive family definitions. All paid family leave jurisdictions cover at least workers’ parents, spouses, children, grandparents, and parents-in-law.<sup>60</sup> Additionally, in all jurisdictions the definition of “child” includes adult children,<sup>61</sup> and in eight of nine states with paid family and medical

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generational-living/#fn-19695-1. Multi-generational households are particularly prevalent in communities of color; approximately 25% of Latinx and Black Americans, and 27% of Asian Americans live in a multi-generational household. *Id.*

<sup>56</sup> Rachel Dunifon *et al.*, *Siblings and Children’s Time Use in the United States*, 37 *Demographic Res.* 1611, 1612 (2017).

<sup>57</sup> As more people with disabilities outlive their parents, an increasing number of adult siblings have taken on primary caregiving responsibilities. Rajan A. Sonik *et al.*, *Sibling Caregivers of People With Intellectual and Developmental Disabilities: Sociodemographic Characteristics and Material Hardship Prevalence*, 54 *Intell. & Developmental Disabilities* 332 (2016). Over 50% of sibling caregivers report having an annual income of less than \$25,000, making paid leave crucial. John Reagan *et al.*, *Research Brief: Sibling Caregivers Experience Less Choice and Control*, Family Support Research and Training Center at the University of Illinois at Chicago (2016), [https://fsrtc.ahslabs.uic.edu/wp-content/uploads/sites/9/2016/11/FSRTC-Data-Brief\\_1\\_2016-3-3.pdf](https://fsrtc.ahslabs.uic.edu/wp-content/uploads/sites/9/2016/11/FSRTC-Data-Brief_1_2016-3-3.pdf).

<sup>58</sup> 42% of LGBT individuals and people with disabilities reported “taking time off to care for chosen family,” compared with 31% of non-LGBT people and 30% of people without disabilities. Gallagher Robbins *et al.*, *supra* note 52, at 3. Family networks are particularly important to older LGBTQ adults who are especially likely to rely on those loved ones. MetLife Mature Mkt. Inst. & Am. Soc’y of Aging, *Still Out, Still Aging: The MetLife Study of Lesbian, Gay, Bisexual, and Transgender Baby Boomers* 15-17 (Mar. 2010), <https://www.asaging.org/sites/default/files/files/mmi-still-out-still-aging.pdf>.

<sup>59</sup> Rajeev Ramchand *et al.*, *Hidden Heroes: America’s Military Caregivers*, RAND Corp. 34 (2014), [https://www.rand.org/pubs/research\\_reports/RR499.html](https://www.rand.org/pubs/research_reports/RR499.html) (explaining that nearly a quarter of caregivers for post-9/11

military care recipients are friends or neighbors, while nearly 13% of caregivers for civilian care recipients are friends or neighbors).

<sup>60</sup> Nine states have passed paid family and medical leave laws with inclusive family definitions that can be found at: Rhode Island (28 R.I. Gen. Laws Ann. § 28-41-34 (West 2019)); California (Cal. Unemp. Ins. Code § 3302(f) (West 2019)); New Jersey (N.J. Stat. Ann. § 43:21-27(n) (West 2019)); New York (N.Y. Workers’ Comp. Law § 201(20) (McKinney 2019)); Washington, D.C. (D.C. Code Ann. § 32-541.01(7) (West 2020)); Washington State (Wash. Rev. Code Ann. § 50A.05.010(10) (West 2020)); Massachusetts (Mass. Gen. Laws Ann. ch. 175M, § 1 (West 2019)); Connecticut (S.B. 1, 2019 Gen. Assemb. (Conn. 2019). The law is only partially codified. The full text of the law can be found at <https://www.cga.ct.gov/2019/icoamd/pdf/2019LCO09302-R00-AMD.pdf>); Oregon (H.B. 2005, 80th Legis. Assemb., Reg. Sess. (Or. 2019). The full text of the law can be found at <https://olis.leg.state.or.us/liz/2019R1/Downloads/MeasureDocument/HB2005/Enrolled>).

<sup>61</sup> 28 R.I. Gen. Laws Ann. § 28-41-34(1) (West 2019); Cal. Unemp. Ins. Code § 3302(c); N.J. Stat. Ann. § 43:21-27(k) (West 2019); N.Y. Workers’ Comp. Law § 201(16) (McKinney 2019); D.C. Code Ann. § 32-541.01(7)(A) (West 2020); Wash. Rev. Code Ann. § 50A.05.010(1)

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leave, domestic partners are explicitly covered.<sup>62</sup> California, Massachusetts, New Jersey, Washington, D.C., Washington State, Connecticut, and Oregon also cover workers' siblings.<sup>63</sup> California, Massachusetts, New Jersey, New York, Washington State, Connecticut, and Oregon also cover workers' grandchildren.<sup>64</sup> In New Jersey, Connecticut, and Oregon workers can also take leave to care for other loved ones—whether biologically or legally related or not—to whom the worker has a close association that is the equivalent of a family relationship, though their exact definitions slightly differ; this definition includes close relationships with biological or legally related family members (such as aunts, uncles, nieces, and nephews), as well as close loved ones with whom the worker lacks a biological or legal relationship (such as a significant other or a best friend who is like a sibling).<sup>65</sup>

The federal government also has a successful track record of providing essential protections for the varied forms of working families. For over 50 years, the federal government, our nation's largest employer with over two million employees, has used an inclusive family definition. For example, an expansive family definition that covers workers' spouses, domestic partners, adult and minor children, parents, grandparents, grandchildren, siblings, and those whose close association with the employee is the equivalent of a family relationship has been used in the context of funeral leave since 1969, voluntary leave since 1989, and sick and annual leave since 1994.<sup>66</sup> Additionally, today, federal workers can accumulate and use up to 12 weeks of sick leave to care for family members with serious health conditions, including extended relatives and other loved ones who aren't biologically or legally related.<sup>67</sup>

**F. Workers must be able to take paid leave on an intermittent basis.**

It's also important that paid leave programs allow workers to take leave on an intermittent basis. Access to intermittent leave is imperative for workers to be able to take leave when they need it. For example, if a worker needs to take leave 2 days per week to take their ailing parent to regularly scheduled medical

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(West 2020); Mass. Gen. Laws Ann. ch. 175M, § 1 (West 2019); 458 Mass. Code Regs. 2.02 (2019); S.B. 1, 2019 Gen. Assemb. § 17(6), (15) (Conn. 2019); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 2(18)(b), (6) (Or. 2019).

<sup>62</sup> While Rhode Island, California, New Jersey, Washington, D.C., Washington State, and Oregon require that domestic partners be registered, New York and Massachusetts both have flexible domestic partner definitions that do not require legal registration. 28 R.I. Gen. Laws Ann. § 28-41-34(6) (West 2019); Cal. Unemp. Ins. Code § 3302(d) (West 2019); N.J. Stat. Ann. § 43:21-27(l) (West 2019); D.C. Code Ann. § 32-541.01(7)(C) (West 2020); Wash. Rev. Code Ann. § 50A.05.010(22) (West 2020); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 2(18)(g), (9) (Or. 2019); N.Y. Workers' Comp. Law § 201(17) (McKinney 2019); Mass. Gen. Laws Ann. ch. 175M, § 1 (West 2019); 458 Mass. Code Regs. 2.02 (2019).

<sup>63</sup> Cal. Unemp. Ins. Code § 3302(f) (West 2019); Mass. Gen. Laws Ann. ch. 175M, § 1 (West 2019); N.J. Stat. Ann. § 43:21-27(n) (West 2019); D.C. Code Ann. § 32-541.01(7)(E) (West 2020); Wash. Rev. Code Ann. § 50A.05.010(10) (West 2020); S.B. 1, 2019 Gen. Assemb. § 17(6) (Conn. 2019); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 2(18)(d) (Or. 2019).

<sup>64</sup> Cal. Unemp. Ins. Code § 3302(f) (West 2019); Mass. Gen. Laws Ann. ch. 175M, § 1 (West 2019); N.J. Stat. Ann. § 43:21-27(n) (West 2019); N.Y. Workers' Comp. Law § 201(20) (McKinney 2019); Wash. Rev. Code Ann. § 50A.05.010(10) (West 2020); S.B. 1, 2019 Gen. Assemb. § 17(6) (Conn. 2019); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 2(18)(f) (Or. 2019).

<sup>65</sup> N.J. Stat. Ann. § 43:21-27(n) (West 2019) (“Family member’ means . . . any other individual that the employee shows to have a close association with the employee which is the equivalent of a family relationship.”); S.B. 1, 2019 Gen. Assemb. § 17(6) (Conn. 2019) (“Family member’ means . . . an individual related to the employee by blood or affinity whose close association the employee shows to be the equivalent of those family relationships.”); H.B. 2005, 80th Legis. Assemb., Reg. Sess. § 2(18)(h) (Or. 2019) (“Family member’ means . . . [a]ny individual related by blood or affinity whose close association with a covered individual is the equivalent of a family relationship”).

<sup>66</sup> The relevant language covers “any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship.” Absence and Leave: Funeral Leave, 34 Fed. Reg. 13,655 (Aug. 26, 1969) (codified at 5 C.F.R. pt. 630) (first implemented during the Vietnam War, allowing federal workers to take funeral leave for the combat-related deaths of loved ones); Absence and Leave; Voluntary Leave Transfer Program, 54 Fed. Reg. 4749 (Jan. 31, 1989) (codified at 5 C.F.R. pt. 630); Absence and Leave; Sick Leave, 59 Fed. Reg. 62,266 (Dec. 2, 1994) (codified at 5 C.F.R. pt. 630).

<sup>67</sup> 5 C.F.R. § 630.401(c) (2020); see also 5 C.F.R. § 630.902.

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treatments, using intermittent leave would allow the worker to allocate their paid leave more efficiently and reduces any burden on the employer. A flexible program that works for workers and businesses makes sense. Intermittent leave is a well-established part of state programs for workers who need it, just as intermittent unpaid leave under the FMLA has been an essential part of the law's protection since its passage.

### III. The Need for a National Paid Leave Program is Clear

*Question 1: Who benefits from paid leave and who bears the costs? (Also see Section I above)*

*Question 9: What are the benefits and/or burdens of having access to paid leave for yourself and your family?*

#### A. Research demonstrates the clear benefits of public paid leave programs for workers and businesses.

Research from state programs has demonstrated that working families with paid leave are more economically secure and more able to manage work and family responsibilities. Parents in California and Rhode Island reported that paid leave improved their ability to arrange child care.<sup>68</sup> State paid leave programs improve the labor force participation of family caregivers,<sup>69</sup> reduce the likelihood that new mothers will fall into poverty,<sup>70</sup> and increase household incomes.<sup>71</sup>

The research also shows wide-ranging impacts on public health. Paid medical leave provides extended time off to deal with a serious health need. This includes acute conditions like cancer, chronic conditions like diabetes or asthma, or recovering from an accident or serious injury. When workers do not have the leave they need—most often because they could not afford unpaid leave—they may defer or forego necessary medical treatment.<sup>72</sup> Paid medical leave has been shown to help cancer patients manage their treatment and side effects.<sup>73</sup> For babies and young children, paid leave provides time to establish a strong bond with parents during the first months of life, increases rates and duration of breastfeeding,<sup>74</sup> supports

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<sup>68</sup> Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press; Silver, B., Mederer, H., & Djurdjevic, E. (2015). *Launching the Rhode Island Temporary Caregiver Insurance Program (TCI): Employee Experiences One Year Later*. Rhode Island Department of Labor and Training and University of Rhode Island. Retrieved 27 August 2020, from <https://web.uri.edu/ssirep/files/RI-Paid-Leave-Final-Report-April-2016.pdf>

<sup>69</sup> Saad-Lessler, J., & Bahn, K. (2017, September 27). The Importance of Paid Leave for Caregivers. Retrieved 27 August 2020, from Center for American Progress website: <https://www.americanprogress.org/issues/women/reports/2017/09/27/439684/importance-paid-leavecaregivers/>

<sup>70</sup> Stanczyk, A. (2019). Does Paid Family Leave Improve Household Economic Security Following a Birth? Evidence from California. *Social Service Review*, 93(2), 262-304. DOI: 10.1086/703138

<sup>71</sup> Ibid.

<sup>72</sup> See Brown, S., Herr, J., Roy, R., & Klerman, J. A. (2020, July). *Employee and Worksite Perspectives of the Family and Medical Leave Act: Results from the 2018 Surveys*, pp. 45-46. Retrieved 27 August 2020, from U.S. Department of Labor website: [https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDD\\_FMLA2018SurveyResults\\_FinalReport\\_Aug2020.pdf](https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDD_FMLA2018SurveyResults_FinalReport_Aug2020.pdf)

<sup>73</sup> Harrington, E., & McInturff, B. (2017). *Key Findings -- National Surveys of Cancer Patients, Survivors, and Caregivers*. American Cancer Society Cancer Action Network Publication. Retrieved 27 August 2020, from: <https://www.fightcancer.org/sites/default/files/ACS%20CAN%20Paid%20Leave%20Surveys%20Key%20Findings%20Press%20Memo%20FINAL.pdf>. The results of this survey strongly suggest that other workers with chronic or serious illnesses will have better access to treatment and care when they are able to take paid time off from work.

<sup>74</sup> Hamad, R., Modrek, S., & White, J. S. (2019). Paid Family Leave Effects on Breastfeeding: A Quasi-Experimental Study of US Policies. *American Journal of Public Health*. 109(1): 164-166. DOI: 10.2105/AJPH.2018.304693

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fathers' involvement in care,<sup>75</sup> improves rates of on-time vaccination,<sup>76</sup> reduces infant hospital admissions,<sup>77</sup> and reduces probabilities of having ADHD, hearing problems or recurrent ear infections.<sup>78</sup> Paid leave may also help prevent child maltreatment by reducing risk factors, such as family and maternal stress and depression.<sup>79</sup> Paid leave reduces the odds of a new mother experiencing symptoms of postpartum depression<sup>80</sup> and is associated with improvements in new mothers' health.<sup>81</sup> In California, implementing paid family leave was linked to an 11 percent relative decline in elderly nursing home usage.<sup>82</sup>

Meanwhile, employers have adapted well to state paid leave programs. The vast majority of California employers reported a positive or neutral effect on employee productivity, profitability and performance.<sup>83</sup> The California Society for Human Resource Management, a group of human resources professionals that initially opposed California's paid family leave law, declared that the law is less onerous than expected, and few businesses in their research reported challenges resulting from workers taking leave.<sup>84</sup> In New Jersey, the majority of both small and large businesses say they have adjusted easily.<sup>85</sup> Just one year after implementation of New York's paid family leave program, 93 percent of employers were in compliance with the new law.<sup>86</sup>

Additionally, state paid leave programs provide a model that works for small businesses. The majority of small business owners support the creation of family and medical leave insurance programs at the state and federal levels, as these programs make the benefit affordable, reduce business costs, increase their

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<sup>75</sup> Lamb, M. (2004). *The role of the father in child development*, 4th ed. (pp. 1-18, 309-313). Hoboken, NJ: John Wiley & Sons, Inc.; Smith, K. (2015). *After the Great Recession, More Married Fathers Providing Child Care*. Carsey School of Public Policy. Retrieved 27 August 2020, from <https://scholars.unh.edu/cgi/viewcontent.cgi?article=1233&context=carsey>

<sup>76</sup> Choudhury, A. R., & Polachek, S. W. (2019, July). The Impact of Paid Family Leave on the Timing of Infant Vaccinations. *I. Z. A. Institute of Labor Economics*. Retrieved 27 August 2020, from <http://ftp.iza.org/dp12483.pdf>

<sup>77</sup> Pihl, A. M., & Basso, G. (2018). Did California Paid Family Leave Impact Infant Health? *Journal of Policy Analysis and Management*. 38(1), 155-180. DOI: 10.1002/pam.22101

<sup>78</sup> Lichtman-Sadot, S., & Pillay Bell, N. (2017). Child Health in Elementary School Following California's Paid Family Leave Program. *Journal of Policy Analysis and Management*, 36(4), 790-827. DOI: 10.1002/pam.22012

<sup>79</sup> Klevens, J., Luo, F., Xu, L., Peterson, C., Latzman, N. (2016). Paid family leave's effect on hospital admissions for pediatric abusive head trauma. *Injury Prevention*. 22, 442-445. DOI: 10.1136/injuryprev-2015-041702

<sup>80</sup> Chatterji, P., & Sara Markowitz, S. (2008). *Family Leave After Childbirth and the Health of New Mothers*. Retrieved 27 August 2020, from National Bureau of Economic Research website: <http://www.nber.org/papers/w14156>; Kornfeind, K. R., & Sipsma, H. L. (2018). Exploring the Link between Maternity Leave and Postpartum Depression. *Women's Health Issues*, 28(4), 321-326. DOI: 10.1016/j.whi.2018.03.008

<sup>81</sup> Pal, I. (2016). *Work, Family and Social Policy in the United States - Implications for Women's Wages and Wellbeing*. Doctoral thesis, Columbia University. DOI: 10.7916/D87W6C74

<sup>82</sup> Arora, K., & Wolf, D. A. (2017, November 3). Does Paid Family Leave Reduce Nursing Home Use? The California Experience. *Journal of Policy Analysis and Management*, 37(1), 38-62. DOI: 10.1002/pam.22038

<sup>83</sup> Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press; Bartel, A., Baum, C., Rossin-Slater, M., Ruhm, C., & Waldfogel, J. (2014, June 23). *California's Paid Family Leave Law: Lessons from the First Decade*. Retrieved 20 August 2019, from U.S. Department of Labor website: <http://www.dol.gov/asp/evaluation/reports/PaidLeaveDeliverable.pdf>

<sup>84</sup> Redmond, J., & Fkias, E. (2010, January). *California's Paid Family Leave Act Is Less Onerous Than Predicted*. Society for Human Resources Management Publication. Retrieved 27 August 2020, from [https://www.sheppardmullin.com/media/article/809\\_CA%20Paid%20Family%20Leave%20Act%20Is%20Less%20Onerous%20Than%20Predicted.pdf](https://www.sheppardmullin.com/media/article/809_CA%20Paid%20Family%20Leave%20Act%20Is%20Less%20Onerous%20Than%20Predicted.pdf)

<sup>85</sup> Ramirez, M. (2012). *The Impact of Paid Family Leave on New Jersey Businesses*. New Jersey Business and Industry Association and Bloustein School of Planning and Public Policy at Rutgers, The State University of New Jersey Presentation. Retrieved 27 August 2020, from <https://bloustein.rutgers.edu/wp-content/uploads/2012/03/Ramirez.pdf>

<sup>86</sup> Office of Governor Andrew C. Cuomo. (2019, August 13). *New York State Paid Family Leave: 2018 Year in Review*. Retrieved 27 August 2020, from [https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/PFL\\_EOYReport\\_2018\\_FINAL.pdf](https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/PFL_EOYReport_2018_FINAL.pdf)

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competitiveness and can allow small business owners themselves to take paid leave when the need arises.<sup>87</sup> In California, although most employers of all sizes report positive or neutral outcomes associated with paid leave, small businesses reported more positive or neutral outcomes than large businesses in profitability, productivity, retention and employee morale.<sup>88</sup> A New Jersey survey found that, regardless of size, New Jersey businesses say they have had little trouble adjusting to the state's law.<sup>89</sup>

Finally, paid leave boosts employee morale and reduces costly turnover. In California, virtually all employers (99 percent) report that the state's program had positive or neutral effects on employee morale and 87 percent say that the state program had not increased costs. Sixty percent report coordinating their benefits with the state's paid family leave insurance system – which likely results in ongoing cost savings.<sup>90</sup> Firm-level analysis of employers in California before and after paid family leave was implemented confirmed that for the average firm, wage costs had not increased and turnover rates had decreased.<sup>91</sup>

Workers in lower quality jobs who used the state paid leave program reported returning to work nearly 10 percent more than workers who did not use the program.<sup>92</sup> Women who take a paid leave are 93 percent more likely to be in the workforce nine to 12 months after giving birth than women who take no leave.<sup>93</sup> In multiple studies, New Jersey employers have noted that the state's paid leave program is beneficial for employees and manageable for employers.<sup>94</sup>

## **B. Stories from workers demonstrate the need for paid leave programs.**

*Question 10: If you do not have access to paid leave, have you experienced individual or family circumstances for which you would have taken paid leave if it had been available? How might paid leave have affected those particular situations or outcomes?*

<sup>87</sup> Rouzer, S. (2017, February 7). *New Report: Small Business Owners Support Paid Family Leave, FAMILY Act*. Retrieved 27 August 2020, from Main Street Alliance website: [http://www.mainstreetalliance.org/small\\_business\\_owners\\_support\\_family\\_act](http://www.mainstreetalliance.org/small_business_owners_support_family_act); Small Business Majority & Center for American Progress. (2017, March 30). *Small Businesses Support Paid Family Leave Programs*. Retrieved 27 August 2020, from <http://www.smallbusinessmajority.org/our-research/workforce/small-businesses-support-paidfamily-leave-programs>; Mason, J. (2019, August). *Meeting the Promise of Paid Leave: Best Practices in State Paid Leave Implementation*. Retrieved 27 August 2020, from <http://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/meeting-the-promise-of-paid-leave.pdf>

<sup>88</sup> Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press

<sup>89</sup> Ramirez, M. (2012). *The Impact of Paid Family Leave on New Jersey Businesses*. New Jersey Business and Industry Association and Bloustein School of Planning and Public Policy at Rutgers, The State University of New Jersey Presentation. Retrieved 20 August 2019, from <http://bloustein.rutgers.edu/wpcontent/uploads/2012/03/Ramirez.pdf>

<sup>90</sup> Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press

<sup>91</sup> Bedard, K., & Rossin-Slater, M. (2016, October 13). *The Economic and Social Impacts of Paid Family Leave in California: Report for the California Employment Development Department*. Retrieved 27 August 2020, from [https://www.edd.ca.gov/disability/pdf/PFL\\_Economic\\_and\\_Social\\_Impact\\_Study.pdf](https://www.edd.ca.gov/disability/pdf/PFL_Economic_and_Social_Impact_Study.pdf)

<sup>92</sup> Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press

<sup>93</sup> Houser, L., & Vartanian, T. P. (2012, January). *Pay Matters: The Positive Economic Impacts of Paid Family Leave for Families, Businesses and the Public*. Center for Women and Work at Rutgers The State University of New Jersey Publication. Retrieved 27 August 2020, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/other/pay-matters.pdf>

<sup>94</sup> Lerner, S., & Appelbaum, E. (2014, June). *Business As Usual: New Jersey Employers' Experiences with Family Leave Insurance*. Retrieved 27 August 2020, from Center for Economic and Policy Research website: <http://www.cepr.net/documents/nj-fli-2014-06.pdf>; Mason, J. (2019, August). *Meeting the Promise of Paid Leave: Best Practices in State Paid Leave Implementation*. Retrieved 27 August 2020, from <http://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/meeting-the-promise-of-paid-leave.pdf>

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Workers themselves have also been loud and clear: they need paid family and medical leave. Through our Free Work-Family Legal Helpline, A Better Balance has heard from hundreds of workers across the country who are facing economic insecurity and struggling to care for themselves and their loved ones due to lack of access to paid family and medical leave.

Many of the workers that have called us have told us about lack of access to paid leave and how they've been forced to choose between the health of themselves and their families and their financial security because of it. For example, Mary<sup>95</sup> is a restaurant worker in Connecticut. Her husband had a kidney transplant and she will need to take off work for about a month to care for him but her employer does not offer any paid family leave benefits that would help her pay her bills during her leave.<sup>96</sup> Similarly, Anne<sup>97</sup> is a factory worker in Illinois who has been employed at her company for more than three decades. Her husband suffers from various serious health conditions, for which she was approved for unpaid FMLA leave. However, she cannot afford unpaid leave.

And even when workers wish to take unpaid FMLA leave, despite the sometimes devastating effects of foregoing income, many are unable to because of the law's barriers to access. Lashanda, who works in Kansas as an interior designer, needed to take time off work to care for her uncle, who was nearing the end of his life in hospice care. Lashanda's employer denied her FMLA leave because an uncle is not considered a protected family member under this law. As a consequence, when Lashanda was unable to show up to work because she needed to care for her uncle, her employer marked her as having voluntarily resigned. One week later, her uncle passed away, and Lashanda had lost her only source of income. We've also spoken to Madalynn, a social worker who is pregnant. When she was eight months pregnant, she had her hours cut during the COVID-19 pandemic. As a result, she no longer qualifies for her employer's short-term disability benefits, which she had counted on using while recovering from childbirth.

*Question 23: Are there key insights to be taken from FFCRA?*

The current COVID-19 crisis has highlighted the critical need for comprehensive, responsive paid leave protections for all workers. The passage of the Families First Coronavirus Response Act (FFCRA) was a necessary first step, providing for the first time a federal right to paid leave for covered workers. This law has provided much needed emergency protections to workers across the country, at a time when they could not be more pressing. Yet more remains to be done. The FFCRA does not cover all workers, leaving out those who work at employers with more than 500 employees and, as it has been interpreted by the DOL to exclude many health care workers, emergency responders, and employees of small employers on the front lines. And the FFCRA's protections are both temporary, expiring this at the end of this year, and limited to the current crisis.

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<sup>95</sup> Note that this name has been changed to protect the worker's confidentiality.

<sup>96</sup> Connecticut has passed a paid family and medical leave law; however, workers will not be able to receive benefits until 2022.

<sup>97</sup> Note that this name has been changed to protect the worker's confidentiality.



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As explained above, through our Free Work-Family Legal Helpline, A Better Balance has spoken to many workers who have successfully taken urgently-needed leave under the law, much to their and their families' benefit. For many of our callers who are covered by the law, and who are able to equip themselves with the facts, the FFCRA has provided invaluable leave at a difficult time. For example, Stephanie, who works for the city of Huntsville, Alabama, was unable to work because she needed to care for her son, who had recently been advised to quarantine by his doctor. She called us to find out if she was eligible for emergency sick time and family leave under the FFCRA. After sharing our fact sheet and talking with her employer, she was able to receive paid sick leave and paid family leave under the FFCRA to care for her son and maintain her income and benefits. We also heard from Angelica, who works at a warehouse in Santa Ana, California. She contracted COVID-19 and her employer gave her time off work to recover, but initially said she wouldn't get paid. Thankfully, she spoke with HR, who told her she will be able to get paid for two weeks under the FFCRA. These are only a few of the many workers who have been able to take the paid time off they urgently need under the FFCRA.

But we have also heard from many others who are unable to take FFCRA leave for the reasons mentioned above. For example, Jeffrey is an HVAC technician in Long Island, New York. He has worked at the same company for over ten years. He is immunocompromised and at an increased risk of infection. He has a 7-year-old son whose school closed due to the COVID-19 outbreak, and his wife, a nurse, is unable to stay at home during the work day because she is an essential worker. Jeffrey, worried about his family's options, called to find out if he might be eligible to take paid family leave to care for his son, while staying healthy and employed. He is likely not protected by the FFCRA since his employer is too large. We also spoke to Marina, a security officer in Georgia. Her 9-year-old's daycare was closed due to COVID-19. Additionally, the childcare provider who typically assists her 17-year-old, who has special needs, closed due to COVID-19. Due to the nature of Marina's work, she is considered an emergency responder under the FFCRA. Her employer opted for the emergency responder exemption under the FFCRA, so Marina was unable to take the leave she needed due to a lack of childcare for her daughter. As a result, she was forced to quit her job. Similarly, Stefano,<sup>98</sup> a paramedic in NYC, is caring for his pregnant fiancée, who tested positive for COVID-19, as well as her son, whose school is closed due to COVID-19. Invoking the emergency responder exemption, his employer told him that he doesn't qualify for paid leave under the FFCRA. He exhausted all his PTO and had no choice after that but to take unpaid leave to care for his fiancée and her son. These worker stories are not rare,<sup>99</sup> the FFCRA currently leaves out up to 106 million workers<sup>100</sup> and the law's exclusions disproportionately affect women of color and can weight especially heavily on low income workers.<sup>101</sup>

As a nation, we can learn a lot from the historic roll out of federal emergency paid leave via the FFCRA. For our workforce and economy to thrive, a national paid leave program must cover all workers, cover a

<sup>98</sup> Note that this name has been changed to protect the worker's confidentiality.

<sup>99</sup> For more stories from workers affected by the COVID-19 pandemic, including a state-by-state appendix of worker stories, see A Better Balance's Families First: Workers' Voices During the Pandemic, available at <https://www.abetterbalance.org/ffcra-worker-voices/>.

<sup>100</sup> See Sarah Jane Glynn, Coronavirus Paid Leave Exemptions Include Millions of Workers from Coverage, Center for American Progress (Apr. 17, 2020), <https://www.americanprogress.org/issues/economy/news/2020/04/17/483287/coronavirus-paid-leave-exemptions-exclude-millions-workers-coverage/>.

<sup>101</sup> New Emergency Legislation Provides Paid Sick Days and Paid Leave for Childcare for Millions, National Partnership for Women & Families (Apr. 2020), <https://www.nationalpartnership.org/our-work/resources/economic-justice/new-emergency-legislation-paid-sick-days-paid-leave-child-care.pdf>.

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range of leave purposes for an adequate amount of time, provide adequate wage replacement, include a broad family definition, and ensure that workers' jobs are protected.<sup>102</sup> It is also clear from the FFCRA that effective outreach and education for both workers and employers are crucial to a paid leave program's success.<sup>103</sup>

**C. As a small employer, A Better Balance supports public paid leave programs.**

As a small employer with employees in New York, Tennessee, Colorado, and D.C., A Better Balance has been committed since our founding to providing paid family and medical leave to all our employees. We have been proud to support and work to implement New York's paid leave law and now D.C.'s paid leave law for our employees. We believe that providing this critically needed benefit helps us compete for and retain the best employees, as well as being the right thing to do for our employees and their families.

*Question 12: What components currently make up or would make up a successful paid leave program at your business? (For example: Job protection, wage replacement level, duration of leave, minimum employment tenure allowed prior to accessing paid leave.)*

ABB believes that a successful paid leave program would provide 12 weeks of job-protected paid leave with full wage replacement after 6 months tenure and 6 weeks of job-protected paid leave with full wage replacement prior to 6 months tenure.

*Question 13: What is your company's current paid leave policy? Include specific components such as job protection, wage replacement level, duration of leave, and minimum employment tenure allowed prior to accessing paid leave.*

ABB's current paid leave policy is to offer 12 weeks of paid leave with full wage replacement and job protection after 1-year job tenure. For employees with between 6 months and 1-year tenure, ABB offers 4 weeks of paid leave with full wage replacement and job protection and 8 weeks of unpaid, job-protected leave. ABB employees with tenure of less than 6 months may take 12 weeks of unpaid, job-protected leave.

*Question 14: What are the benefits and costs of paid leave to your company and how are those benefits measured? Can they be quantified?*

At ABB, we rearrange work to ensure that all obligations are covered. We do not believe paid leave is a cost because the benefit of providing job security and income at a time when our employees need leave is important for job satisfaction.

*Question 15: Are there impediments to making adjustments to your company's paid leave policy?*

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<sup>102</sup> See Diana Boesch, *The Urgent Case for Permanent Paid Leave: Lessons Learned From the COVID-19 Response*, Center for American Progress (Sept. 1, 2020), <https://www.americanprogress.org/issues/women/reports/2020/09/01/489914/urgent-case-permanent-paid-leave/>.

<sup>103</sup> See *id.*

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*Question 16: Does your company have established strategies for backfilling extended absences by employees out on paid leave, owing to circumstances like medical illness and treatment, the birth or adoption of a child, accident recovery, etc.? Please describe.*

We've found that there are no impediments to making adjustments to our paid leave policy and redistribution of work has been an effective strategy for us.

*Question 17: What are the benefits and/or burdens of operating a business in a jurisdiction that has paid leave laws?*

*Question 18: What are the barriers to your company establishing a paid leave program?*

There are no burdens of operating a business in a jurisdiction that has paid leave laws, nor are there barriers to our organization establishing a paid leave program.

*Question 19: Different types and sizes of businesses may face unique challenges to providing paid leave. Please describe unique challenges to your businesses, industry, or locale in offering paid leave.*

ABB is a small enterprise of about 20 employees. We have faced no issues with respect to having a 12-week full wage replacement policy. Instead, we've encountered the opposite: job satisfaction and loyalty are increased by having a leave policy that allows our employees to take care of their family responsibilities.

\* \* \*

The evidence is overwhelming: paid leave is a win-win for workers and businesses, and the most equitable, sustainable model for paid leave is a national, publicly run social insurance program that builds on the innovation that states have pioneered.

We appreciate the opportunity to submit this comment. If you have any questions, please contact us at [paidfamilyleave@abetterbalance.org](mailto:paidfamilyleave@abetterbalance.org) or 212-430-5982.

Sincerely,

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**Appendix of Attached Resources**

- A Better Balance, *Families First: Workers' Voices During the Pandemic* (July 2020), available at <https://www.abetterbalance.org/ffera-worker-voices/>.
- A Better Balance, *A Foundation and A Blueprint: Building the Workplace Leave Laws We Need After Twenty-Five Years of the Family & Medical Leave Act* (Feb. 2018), available at <https://www.abetterbalance.org/resources/a-foundation-and-a-blueprint/>.
- A Better Balance, *Constructing 21<sup>st</sup> Century Rights for a Changing Workforce: A Policy Brief Series, Brief 1* (Feb. 2019), available at <https://www.abetterbalance.org/resources/report-constructing-21st-century-rights-for-a-changing-workforce-a-policy-brief-series/>.
- A Better Balance, *Constructing 21<sup>st</sup> Century Rights for a Changing Workforce: A Policy Brief Series, Brief 2* (Feb. 2019), available at <https://www.abetterbalance.org/resources/report-constructing-21st-century-rights-for-a-changing-workforce-a-policy-brief-series-brief-2/>.
- A Better Balance, *For the Health of Our Families: Engaging the Health Community in Paid Family Outreach and Education* (Oct. 2018), available at <https://www.abetterbalance.org/resources/report-for-the-health-of-our-families-engaging-the-health-community-in-paid-family-leave-outreach-and-education/>.
- A Better Balance, *Comparative Chart of Paid Family and Medical Leave Laws in the United States* (July 1, 2020), available at <https://www.abetterbalance.org/resources/paid-family-leave-laws-chart/>.