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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION Coverage allowed	BENEFITS Percentage & Maximums	BENEFITS Types & Duration	Eligibility	WAITING PERIOD		OST & Employee
California 1946 – State Disability Insurance (CA SDI) 2002 – Paid Family Leave (CA PFL) Disability Insurance Branch Employment Development Department (916) 653-0707 SDI (800) 480-3287 PFL (877) 238-4373 http://www.edd.ca.gov Colorado 2024 – Colorado Paid Family and Medical Leave Insurance Act (CO FAMLI)	- State administers or private plans (VPs) are permitted. - Employee Approved Voluntary Plans (VPs)-may be insured or self-insured but must be approved by EDD; A majority of employees must approve the plan, and the Voluntary plan must be more generous than the state plan in at least one aspect. State administration or self-insured (Private Plan) is allowed.	Employees who earn more than 1/3 of the state's average weekly wage (SAWW), 70% of the employee's quarterly base wages Employees who earn 1/3 or less than the (SAWW), 90% of the employee's quarterly base wages Maximum weekly benefit in 2024 is \$1,620 Beginning January 1, 2025, the maximum weekly benefit will increase to \$1,681 Approximately 90% of average weekly wage, up to \$1,100 (2024)	Disability Maximum disability benefit is 52 weeks (52x weekly benefit rate) Paid Family Leave (Bonding, Family Care, Military Exigency) Maximum benefit is 8 weeks in any 12-month (8x weekly benefit rate) 12 weeks (Additional 4 weeks if an employee experiences pregnancy complications) Parental, family care, medical (including pregnancy disability)	Employee must have earned at least \$300 from which SDI deductions were withheld during the Base Period. The Base Period is 5 to 18 months prior to the date the disability or PFL began. "For example, a disability beginning on Feb 1 – the Base Period is the 12 months ending on the last September 30th." \$2,500 earned the first four of the last five completed calendar quarters with any CO employer (s) immediately preceding the first day of the employee's	Disability Seven (7) day waiting period Paid Family Leave No waiting period- eligible day one (1)	Employer Employer has the option of paying the entire cost or sharing it with the employee. Employee. Shared cost of 0.45% of gross annual wages, through 2025	Employee 2024: 1.1% with no maximum annual cost. Beginning January 1, 2025, the rate will increase to 1.2% with no maximum annual cost. Employee Shared cost of 0.45% of gross annual wages, through 2025
Colorado Department of Labor and Employment 1 (866)-263-2654 Email: CDLE_FAMLI_info@state.co.us. Website: https://famli.colorado.gov/		Beginning January 1, 2025, the maximum weekly benefit will increase to \$1,324.21.	(including pregnancy disability), military exigency, and safe leave.	first day of the employee's benefit year.		through 2025	0.9% total shared cost between employee and employer. Premiums are capped at the Social Security Wage base. (\$168,600 in 2024; \$176,100 in 2025)
Connecticut 2022 – Paid Family and Medical Leave (CT PFML) Connecticut Paid Leave Authority www.ctpaidleave.org	- State administers claims (outsourced to Aflac, the insurance company). Employers are also permitted to source private insurance. - Employee Approved Voluntary Plans (VPs) Private plans are permitted; must be as liberal as state plan in eligibility requirements, benefit amounts, and duration.	Up to 95% of average weekly wage, up to \$941.40 Beginning January 1, 2025, the maximum weekly benefit will increase to \$981.	Maximum 12 weeks of all types of leave in a 12-month period, additional 2 weeks for pregnancy related complication. Disability (employee's own SHC and bone marrow or organ donor) Paid Family Leave (Bonding, Family Care, Military Exigency) Safe Leave Limited to 12 days	Employee must have earned at least \$2,325 during the highest quarter in the base period: first four of five most recently completed quarters. Must be currently employed in CT or have been in employment withing the last 12 weeks.	N/A	Employer None	Employee O.5% up to the Social Security wage base (\$168,600 in 2024; \$176,100 in 2025) Maximum employee contribution is \$843 in 2024; \$880.50 in 2025

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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION	BENEFITS	BENEFITS	Eligibility	WAITING PERIOD	со	ST
SIAIL	Coverage allowed	Percentage & Maximums	Types & Duration	Eugibiuty	WAITING PERIOD	Employer 8	Employee
Delaware* 2026 – Delaware Paid Family and Medical Leave Insurance (DE PFML) Department of Labor https://labor.delaware.gov/delaware-paid-leave-is-coming/ *Note: Law effective 01/01/26. Final details of the DE PFML are pending.	State administration or self- insured (Private Plan) is allowed.	Program to be implemented and benefits payable beginning January 1, 2026. Maximum weekly benefit in 2026 will be up to 80% of the average weekly wage, up to \$900 per week.	Parental Leave Maximum 12 weeks Medical (including pregnancy disability), family care, and military exigency leave Maximum 6 weeks in any 24- month period	Employee must have 12 months of employment with current employer, and 1,250 hours worked with a single employer in the 12 months preceding the leave	N/A	Employer Employer has option to pay the entire cost or share it with the employee (split evenly). Employers with 10-24 DE employees are eligible for parental leave only, or 25+ DE employees are eligible for parental and family/medical leave. The total contribution rate is 0.8%, allocated as follows: - 0.40% Medical Leave - 0.08% Family Leave - 0.32% Parental Leave	Employee Employee cost is half the total contribution rate to the fund unless employer funded.
District of Columbia 2020 – Paid Family Leave (DC PFL) Department of Employment Services, Office of Paid Family Leave (OPFL) Phone: (202) 724-7000 Fax: (202) 673-6993 TTY: (202) 698-4817 Email: does@dc.gov dcpaidfamilyleave.dc.gov	- State administers claims only. - Private plans not currently permitted.	Maximum weekly benefit prior to September 29, 2024, is up to 90% of average weekly wage, up to \$1,118 per week. Beginning September 29, 2024, the maximum weekly benefit is \$1,153. Employees may only use a combined maximum 12 weeks in a benefit year, and 14 weeks for pregnant employees taking prenatal leave.	Disability/Medical Leave Maximum 12 weeks Prenatal Leave 2 weeks Prenatal counts towards medical leave, but not the total of 12 weeks of PFL benefits. Parental Leave (Bonding) Maximum 12 weeks Family care leave Maximum 12 weeks	Employee must have worked over 50% of the time in D.C. in the 52 calendar weeks immediately preceding the leave; or regularly spend a substantial amount of time working in D.C. and work less than 50% of their time in another jurisdiction.	N/A	Employer Prior to 07/01/24 Covered employers must pay a 0.26% quarterly tax based on employee's gross earnings from previous quarter. No maximum/cap on employer tax. Effective 07/01/24 Covered employers must pay a 0.75% quarterly tax based on employee's gross earnings from previous quarter. No maximum/cap on employer tax.	Employee None 100% Employer Funded

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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION	BENEFITS	BENEFITS	Eligibility	WAITING PERIOD		OST
	Coverage allowed	Percentage & Maximums	Types & Duration			Employer	& Employee
Hawaii 1969 – Temporary Disability Insurance (HI TDI) Disability Compensation Division Department of Labor and Industrial Relations (808) 586-9188 http://hawaii.gov/labor/dcd/	No state administration of claims. Employers must insure or self-insure. Insured and self-insured plans must provide statutory minimum.	58% of average weekly wage, rounded to the next higher dollar. Maximum weekly benefit in 2024 is \$798. Beginning January 1, 2025, the maximum weekly benefit is \$837.	Benefits payable from the eighth day of disability for a maximum duration of 26 weeks in a benefit year.	Employee must have worked for a covered Hawaii employer for at least 14 weeks, been paid for 20+ hours in each week and earned wages of at least \$400 during the 52 weeks immediately preceding the first day of disability. Deductions from wages cannot be made if an employee does not meet the Law's eligibility requirements.	1 week (7 calendar days)	Employer Employers have the option to pay the entire cost or share it with the employee.	Employee 2024: The maximum employee cost is 0.5% of the first \$1,374.78 of employee's weekly wages. Maximum weekly cost is \$6.87. 2025: The maximum employee cost is 0.5% of the first \$1,441.72 of employee's weekly wages. Maximum weekly cost is \$7.21.
Maine* 2026 – Maine Paid Family and Medical Leave (ME PFML) Maine Department of Labor FAMLI Division https://www.maine. gov/labor/pfml/. *Note: Law effective 05/01/26. Final details of the ME PFML are pending.	State administration, or private plan through insurer or self-insured plan allowed.	Program to be implemented and benefits payable beginning May 1, 2026, with contributions to the program beginning January 1, 2025. 90% of an employee's wages that is equal to or less than 50% of the SAWW (2024; \$1,144.67). If the portion of the employee's AWW is more than 50%, the SAWW is replaced at 66% up to the maximum weekly benefit.	Medical (including pregnancy disability and organ donation). Leave 12 weeks (combined) Parental, Family Care. Qualifying Exigency, Safety. Bereavement Leave 12 weeks (combined). Bereavement is available for certain members in the military: spouse, domestic partner, parent, sibling, or child. Maximum 12 weeks in a benefit year between all leave types.	Employees will qualify if they have earned 6x the SAWW with any ME employer(s) during the year prior to the start of a leave.	1 week (7 calendar days)	Employer 2025 through 2027: Employers with 15 or more covered employees - Total of 1% of wages up to the current Social Security Wage Base (\$176,100 in 2025). Premiums can be split 50/50 between employer and employee, but employers may also pay the employers may also pay the employer of the wish. Employers with less than 15 covered employees - Total of 0.5% of wages up to the current Social Security Wage Base. Employers may pay the employee portion fully, or deduct the full amount from employees' wages, if they wish.	Employee Employers must cover at least 50% of the premiums, unless employing less than 15 employees. Employees pay the remaining portion, if any, of the premiums not covered by the employer.

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Summary of Statutory Disability & Paid Family Leave Plans

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STATE	Coverage allowed	Percentage & Maximums	Types & Duration	Eligibility	WAITING PERIOD	Employer 8	Employee
Maryland* 2026 – Maryland Family and Medical Leave Insurance (MD FAMLI) Maryland Department of Labor FAMLI Division https://paidleave.maryland.gov/Pages/default.aspx *Note: Law effective 01/03/28. Final details of the MD FAMLI are pending.	State administration, or private plan through insurer or self-insured plan allowed.	Program to be implemented and benefits payable beginning January 3, 2028, with contributions to the program beginning July 1, 2027. Previously, the effective dates were scheduled for July 1, 2026, and July 1, 2025, respectively. Maximum weekly benefit in 2026 will be \$1,000.	Disability/ Medical Leave Maximum benefit duration for medical leave is 12 times the weekly benefit. Paid Family Leave Maximum benefit duration for family leave is 12 times the weekly benefit. Medical and Family Leave Additional 12 weeks of paid leave when an EE requires both medical and parental leave. (Up to 12 weeks for pregnancy and 12 weeks for bonding)	Employees will qualify if they work 680 hours for any employer in the state in the 12-month period prior to the start of a leave.	N/A	Employer Employer has option to pay the entire cost or share it with the employee (split evenly). The total contribution rate effective 01/01/27 will be 0.9%. Covered employers (15 or more EEs) will contribute 0.45% up to the current Social Security wage base (\$168,600 in 2024; \$176,100 in 2025) Employers with less than 15 employees in MD are exempt from the ER contribution but must collect the EE's share of contributions.	Employee Beginning 2027: Employee cost is half the total contribution rate to the fund unless employer funded. EEs will contribute 0.45% up to the current Social Security wage base (\$168,600 in 2024; \$176,100 in 2025)
Massachusetts 2021 – Paid Family and Medical Leave (MA PFML) Executive Office of Labor and Workforce Development, Department of Family and Medical Leave (DFML) (617) 626-6565 https://www.mass.gov/orgs/department-of-family-and-medical-leave	State administration, or private plan through insurer or self-insured plan allowed. Allows private plan for PFL or Medical benefits separately or both programs (Requires state approval).	Maximum weekly benefit in 2024 is \$1,149.90 Beginning January 1, 2025, the maximum weekly benefit will increase to \$1,170.64.	Disability/ Medical Leave Maximum benefit duration for medical leave is 20 times the weekly benefit. Paid Family Leave Maximum benefit duration for family leave is 12 times the weekly benefit. Military Caregiver Leave Maximum duration is 26 weeks Maximum 26 weeks in benefit year for combination of leaves.	Employee must have earned 30x the weekly benefit amount and must have made at least \$5,700 in the last 4 completed calendar quarters (as of 2022). Those who are unemployed for 26 weeks or less, may also be eligible for benefits.	1 week (7 calendar days)	Employer Employers with less than 25 MA employees are exempt from employer cost. 2024 Shared cost of 0.88% of gross annual wages up to the Social Security Wage Base (\$168,600 in 2024) Employer cost is 0.42% of gross annual wages. 2025 Contribution rate remains the same as 2024, up to the Social Security Wage Base (\$176,100 in 2025)	Employee 2024: Employee cost is 0.46% of gross annual wages. Maximum employee contribution in 2024 is \$775.56 2025: Contribution rate remains the same as 2024. Maximum employee contribution in 2025 is \$810.06

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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION	ADMINISTRATION BENEFITS	BENEFITS	Eligibility	WAITING PERIOD	со	ST
31/112	Coverage allowed	Percentage & Maximums	Types & Duration	Lugionity	Willing! Emos	Employer 8	& Employee
Minnesota* 2026 – Paid Leave Law (MN PLL) Minnesota Employment and Economic Development (DEED) https://mn.gov/deed/programs- services/paid-family/ *Note: Law effective 01/01/26. Final Details of the MN PLL are pending.	State administration, or private plan through insurer or self-insured plan allowed.	Program to be implemented and benefits payable beginning January 1, 2026, with contributions to the program beginning on the same date, January 1, 2026. 90% of an employee's wages that is equal to or less than 50% of Minnesota average weekly wage (currently \$1,372 in 2024).	Medical (including pregnancy disability) Leave 12 weeks (combined) Parental, Family Care, Qualifying Exigency, Safety Leave 12 weeks (combined) Maximum 20 weeks in a benefit year between all leave types.	Employee earned at least 5.3% of the state average annual wage, rounded down to the next lower \$100 (\$3,700 in 2025) during the base period, the last 4 completed quarters before the employee's application for benefits.	N/A	Employer Total premium rate is 0.88% for both family and medical leave (0.61% for medical, and 0.27% for family); the rate may increase annually, but not exceed 1.2% Large employer - More than 30 employees in MN: The minimum contribution rate will be 0.44% Small employer - 30 or fewer employees in MN: The minimum contribution rate will be 0.22%	Employee Employers must cover at least 50% of the premiums. Employees pay the remaining portion, if any, of the premiums not covered by the employer up to a maximum of 50% regardless of employer size. Contributions are capped at the Old-Age, Survivors, and Disability Insurance (OASDI) limit.
New Hampshire 2021 – Paid Family and Medical Leave (NH PFML) MetLife Customer Solution Center for NH PFML 1-866-595-PFML (7365) https://www.paidfamilymedicalleave.nh.gov/	- Employers (of any size) may purchase coverage from MetLife (state outsourced benefit provider) MetLife administers the claims. - Such employers are also permitted to source private PFML insurance from another carrier, and self-insured plans are permitted; must be as liberal as state plan in eligibility requirements, benefit amounts, and duration. - Employees may opt in as individual participants if their employers do not. NOTE: employers and employees may only opt in if the employer has an office in New Hampshire.	60% of average weekly wage, up to the current year's Social Security Cap (2024: \$1,945.38; \$2,031.92 in 2025)	Parental, family care, medical (including pregnancy disability and organ/tissue donation). injured service member, and military exigency leave. Employer Opt-Ins: employers have the option of purchasing a 6 or 12-week PFML insurance plan. Employee Opt-Ins: employees who opt in into PFML as individuals may receive 6 weeks of benefits.	Employers (of any size) may purchase coverage from MetLife (state outsourced benefit provider) MetLife administers the claims. OR Employees may opt in as individual participants if their employers do not. There is a 7-month waiting period after employees have opted in as individuals, before they can make a claim under the program. NOTE: employers and employees may only opt in if the employer has an office in New Hampshire.	1 week (7 calendar days)	Employer Employer Opt-Ins: Cost varies per employer; employers will be able to request a quote with MetLife. Employers may cover the cost of the benefit, share the cost with employees, or pass the cost onto employees. A 50% Tax credit is available for employers who cover a part of the cost (MetLife plans only). Employee opt-ins: employers are not required to contribute if employees opt in as an individual. They are, however, required to remit contributions on the employees behalf (if they have 50 + US employees).	Employees under private employer: Cost varies per employer Employees opting-in individually: The cost may vary by employee.

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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION	BENEFITS	BENEFITS	Eligibility	WAITING PERIOD	cc	OST
	Coverage allowed	Percentage & Maximums	Types & Duration			Employer	& Employee
New Jersey 1948 – Temporary Disability Benefits Law (TDI) 2009 – Family Leave Insurance (FLI) Benefits Department of Labor Division of Temporary Disability Insurance (609) 292-2700 http://www.state.nj.us/labor/	- State administers claims. - Private plans are permitted; must be as liberal as state plan in eligibility requirements, benefit amounts, and duration.	85% of average weekly wages earned during the eight weeks prior to start of disability. Maximum weekly benefit in 2024 is \$1,055. Beginning January 1, 2025, the maximum weekly benefit will increase to \$1,081.	Disability/ Medical Leave Maximum disability benefit is 26 times the weekly benefit. Family Leave (FLI) Maximum benefit in any 12- month period is 12 weeks for continuous leave and 8 weeks (56 days) for intermittent	Employee must work for a covered employer in NJ and either: - have worked at least 20 weeks during which they earned \$283 (\$303 in 2025) or more; or - earned at least \$14,200 (\$15,200 in 2025) in covered employment in the 52 weeks prior to the start of disability/PFL	Temporary Disability: Seven (7) day waiting period with a roll back to day one if disability exceeds twenty- one days. Paid Family Leave: N/A	Employer TDI - state plan contribution ranges from 0.1% to 0.75% of annual wage cap. See https: //www.nj. gov/labor/ea/employer- services/rate-info/ for details. The 2024 wage cap is \$42,300. The 2025 wage cap is \$43,300. FLI - only the employee contributes to the program. Private Plan Employers must pay any additional cost above Employee maximums.	Employee. 2024: TDI No TDI employee contributions in 2024. FLI Contribution is 0.09% of \$161,400 in taxable wages, with a maximum cost of \$145.26 2025: TDI Contribution is 0.23% of \$165,400 in taxable wages, with a maximum cost of \$380.42 FLI Contribution is 0.33% of \$165,400 in taxable wages, with a maximum cost of \$380.42
New York 1949 – Disability Benefits Law (NY DBL) 2018 – Paid Family Leave (NY PFL) Disability Benefits Bureau Workers' Compensation Board (800) 353-3092 (518) 474-6680 (844) 337-6306 PFL https://www.wcb.ny.gov/	- Employers may insure or self-insure. - Employer or 3rd party administrator must be incorporated in state of NY and plan must be approved by WCB.	Disability 50% of average weekly wage during the last four weeks prior to last day worked. Maximum weekly benefit of \$170 (annual \$4,420) Paid Family Leave 67% of State average weekly wage to a maximum weekly benefit of \$1,151.16 in 2024. Beginning January 1, 2025, the maximum weekly benefit will increase to \$1,177.32	Maximum disability benefit duration is 26 weeks in a 52- week period. Maximum PFL benefit duration is 12 weeks.	Disability. Full time employee must have worked at least 4 consecutive weeks. Part-time employees become eligible on the 25 day of such regular, part-time employment. Paid Family Leave Full-time employees are eligible after 26 consecutive weeks of employment. Part-time employees are eligible after working 175 days, which do not need to be consecutive.	Disability Leave Seven (7) day waiting period Paid Family Leave None	Employer Must pay any disability plan cost not covered by employee contributions PFL is 100% employee funded	Employee DBL 2024: Maximum cost is 0.5% of the first \$120 of the employee's weekly wages; maximum weekly employee cost is \$0.60 per week PFL 0.373% of employee's weekly wage capped at an annual cost of \$333.25 2025: 0.388% of employee's weekly wage capped at an annual cost of \$354.53

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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION Coverage allowed	BENEFITS Percentage & Maximums	BENEFITS Types & Duration	Eligibility	WAITING PERIOD	CO Employer 8	OST & Employee
Oregon 2023 – Paid Leave Oregon (PLO) Oregon Employment Department (833) 854-0166 https://paidleave.oregon.gov/	State administration or self- insured (Private Plan) is allowed.	Up to 65% of average weekly wage, up to \$1,523.63 per week (09/2023 through 07/06/2024). Beginning July 7, 2024, the maximum weekly benefit will increase to \$1,568.60. Claims that began before July 7, 2024 will not be affected.	12 weeks of paid leave (up to 2 additional weeks if pregnancy-related disability) Parental, family care, medical (including pregnancy disability), and safe leave. Effective 01/01/25, PLO will include leave to effectuate the legal process required for placement of a foster child or adoption.	Employees are eligible for benefits if they have earned \$1,000 or more in wages with any OR employer(s) during the base year prior to the leave. We generally advise that employees apply, and the state will make the determination of eligibility.	N/A	Employer Contribution rate - 1% capped at the Social Security Wage base. (\$168,600 in 2024; \$176,100 in 2025) Employer - 25 employees or more in the U.S: 40% (employers may also pay the employee portion fully if they wish). Employers with less than 25 employees are exempt from paying the employer share.	Employee Employees will be responsible for 60% of the contribution.
Puerto Rico 1968 - Temporary Non- occupational Insurance Program (SINOT) Department of Labor and Human Resources (787) 754-5353 https://www.trabajo.pr.gov/sinot. asp (Spanish)	- Puerto Rico Department of Labor administers claims directly. - Private plans are permitted; must be as liberal as the plan provided by Puerto Rico Department of Labor in terms of eligibility requirements, benefit amounts, and duration etc.	Approximately 65% of regular weekly wage; maximum weekly benefit of \$113 (\$55 for agricultural workers) (eff. 1/1/96). Maternity benefit of 100% pay for eight weeks to be paid by employer.	Maximum disability benefit duration is 26 weeks in a 52- week period.	Employee must have earned at least \$150 in wages during base year (in any one of the first four of last five consecutive calendar quarters immediately preceding date on which application for benefits is filed).	Seven (7) day waiting period or first day of hospitalization. Waiting period is waived for certain unemployed people or for maternity claims.	Employer Total cost: 0.6% of the first \$9,000 of each employee's annual wages. The employer may collect no more than half the cost (0.3% of the first \$9,000) from employees.	Employee The maximum annual employee cost is \$54.00

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Summary of Statutory Disability & Paid Family Leave Plans

STATE	ADMINISTRATION Coverage allowed	BENEFITS Percentage & Maximums	BENEFITS Types & Duration	Eligibility	WAITING PERIOD		OST & Employee
Rhode Island 1942 – Temporary Disability Insurance Act (RI TDI) 2014 – Temporary Caregiver Insurance Benefits (RI TCI) Department of Labor and Training-Temporary Disability Insurance Division (401) 462-8000 http://www.dlt.ri.gov/tdi/	- State administers claims only. - Private plans are not allowed. - Program rates & benefits updated annually on July 1st.	4.62% of total wages in the highest earning quarter of the base period Maximum weekly benefit is \$1,070 effective July 1, 2024 Maximum benefit amount is increased by 7% for each dependent child (Max 5) Maximum weekly benefit with 5 dependents is \$1,444 effective July 1, 2024	Maximum TDI (disability) benefit is 30 weeks Maximum TCI (family care) benefit is 6 weeks in the benefit year. (Maximum benefit will increase to 7 weeks effective 01/01/25, then to 8 weeks effective 01/01/2026) The combined maximum benefit for TDI & TCI is 30 weeks.	Employee must have earned at least \$15,600 in the base period OR earned at least \$2,600 in one of the base period quarters and total base period wages of at least 1.5 times the highest quarter of earnings AND earned total base period wages of at least \$5,200. Effective Jan 1, 2024 Employees must have earned at least \$16,800 in the base period OR earned at least \$2,800 in one of the base period quarters and total base period wages of at least 1.5 times the highest quarter of earnings AND earned total base period wages of at least \$5,600.	No waiting period, but employee must have been out of work for at least 7 days to be eligible for benefits	Employer 2024 No employer cost 2025 No employer cost	Employee 2024 Employee cost is 1.2% of taxable wage base of \$87,000 Maximum annual contribution is \$1,044 2025 Employee cost is 1.3% of taxable wage base of \$89,200 Maximum annual contribution is \$1,159.60
Vermont 2024 – Paid Family and Medical Leave Insurance (VT FMLI) The Hartford FMLI team 866-432-6744 https://www.thehartford.com/paid-family-medical-leave/vt Individual employees may opt in effective 07/01/25	- Employers with two or more employees may purchase coverage from The Hartford, the state outsourced benefit provider who administers the claims. - Employees may opt in as individual participants if their employers do not.	Up to 60-70% of average weekly wage, up to the current year's Social Security Cap (\$1,945.38 in 2024)	Parental, family care, medical (including pregnancy, disability), injured service member, and military exigency leave. 6-26 weeks of paid leave in a 12-month period.	Employees with two or more employees may purchase coverage from The Hartford, the state outsourced benefit provider who administers the claims. OR Their employer must be enrolled in the program* or the EE must opt into the program individually *Employers are able to set eligibility requirements with their unique plan.	Variations depending on employer plan (a short period of time, 7 calendar days, at the beginning of a leave that is unpaid)* *For employer plans that are 100% funded by employer contributions, a waiting period is required.	Employer Opt-Ins: Cost varies per employer; employers will be able to request a quote with The Hartford.	Employees Employees under private employer: Cost varies per employer Employees opting-in individually: Cost varies per employee.

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Summary of Statutory Disability & Paid Family Leave Plans

Statutory Disability & Paid Family Leave (PFL) benefits are required to be provided by employers or the State to employees working in the below states. Disability benefits provide short term wage replacement to employees to recover from their own medical condition. PFL is paid time away from work to bond with a new child, take care of a sick family member, or have a qualifying military exigency.

STATE	ADMINISTRATION Coverage allowed	BENEFITS Percentage & Maximums	BENEFITS Types & Duration	Eligibility	WAITING PERIOD		OST & Employee
Washington 2020 – Paid Family and Medical Leave (WAPFML) Employment Security Department (ESD) (360) 902-9500 Email: paidleave@esd.wa.gov www.paidleave.wa.gov	- State administers claims. - Voluntary Plans are allowed. Employers can offer a voluntary plan for either Paid Family Leave (PFL) or Paid Family Medical Leave (PFML) separately or both.	Up to 90% of average weekly wage, up to \$1,456 per week (2024) Beginning January 1, 2025, the benefit will increase to \$1,542.	Medical or Family Leave Maximum duration is 12 weeks in a benefit year. Additional 2 weeks allowed for pregnancy related complications. Combined Leaves Up to 16 weeks for family & medical leave in the same benefit year. Allows maximum 18 weeks if leave results from pregnancy complications.*	Employee is eligible after working at least 820 hours during the first four of the last five completed calendar quarters or the last 4 completed calendar quarters starting from the day the employee takes the leave.	"Waiting week" is up to seven (7) days. Waiting week begins Sunday and ends the following Saturday and may be less than a full week. Ex. If medical leave starts Friday then "waiting week" is met on Saturday, and claim starts Sunday. No waiting period required for leave for the birth or placement of a child.	Employer 2024 Employer* must contribute 28.57% of the total premium 2025 Employer* must contribute 28.48% *Employers with fewer than 50 employees are not required to pay the employer portion of premium.	Employee 2024: Contribution rate is 0.74% up the current Social Security wage base (\$168,600 in 2024) Employees will cover 71.43% of the overall contribution and employers will cover 28.57%. Maximum Annual Employee Contribution: \$891.19 2025: Contribution rate is 0.92% up the current Social Security wage base (\$176,100 in 2025) Employees will cover 71.52% of the overall contribution and employers will cover 28.48%. Maximum Annual Employee Contribution: \$1,158.71

Upcoming Statutory State Programs:

Delaware (see above)

Employee deductions began January 1, 2025 Benefits begin January 1, 2026

Maine (see above)

Employee deductions began January 1, 2025 Benefits begin May 1, 2026.

Minnesota (see above)

Employee deductions begin January 1, 2026 Benefits begin January 1, 2026

Maryland (see above)

Employee deductions begin January 1, 2027. Previously, the effective date was scheduled for July 1, 2025. Benefits begin January 3, 2028. Previously, the effective date was scheduled for July 1, 2026.

The Larkin Company has taken reasonable steps to ensure the accuracy of the information on this page, however we make no representation or warranty of any kind as to its accuracy or completeness. These resources should not be construed or substituted for legal advice. Accordingly, before taking any actions based upon such information provided herein, we encourage you to seek competent legal advice from a licensed attorney or appropriate professionals.