

Monday–Morning Checklist

Five moves you can make with what you already have, plus the disability & FMLA benchmarks to check your plans against.

Five moves, in priority order

TICK EACH ONE OFF

☐	1	Fix your PFML coordination Require state filing, run concurrent, and offset STD. The highest-ROI edits, with no benefit cut required.	85% vs 39% design for concurrency vs. require a state maternity claim
☐	2	Benchmark against the right set Compare durations to your actual talent competitors, not just the broad-market median.	6–18 wks is the whole parental-leave "market rate"
☐	3	Quantify your admin burden Tally the hours spent coordinating each leave: filings, top-ups, offsets. That total is the business case for expert administration.	40% of employers now seek outside help, up from 11% in 2023
☐	4	Open the white space Pilot caregiver, menopause and mental-health support. Low prevalence, high retention signal.	10% offer menopause support 30% offer caregiver leave
☐	5	Drive awareness and use Satisfaction, not offerings, drives retention. Make leave clear and visible, especially for newer staff.	50% vs 62% leave awareness, Gen Z vs. older generations

Quick reference: Disability & FMLA design benchmarks

DMEC / SPRING, 2024–2025

Element	Market benchmark	Your plan
STD prevalence	80% of employers offer short-term disability	
STD design	7-day elimination · 26-week max · 60% benefit rate	
STD funding	37% fully insured · 33% self-insured via a TPA	
LTD prevalence	94% of employers offer long-term disability	
LTD design	180-day elimination · 60% benefit · to SSNRA (57%)	
FMLA proxy	55–56% use STD approvals as an FMLA proxy	
Stay-at-work / RTW	Only 37% have a formal SAW/RTW program (50% at 10,000+). Budget & staffing cited as barriers.	

The Larkin perspective

Better leave rarely means more leave. It means less friction, for the person living it and the team running it.