

MA Paid Family and Medical Leave

Your Rights and Obligations under the [Massachusetts Family and Medical Leave Law](#).

Simmons University	Christina Webber (employer contact)
300 The Fenway, Boston, MA 02115	EMPLOYER FEIN 04-2103629

EXPLANATION OF BENEFITS

- **As of January 1, 2021**, you may be entitled to up to:
 - 12 weeks of paid family leave in a benefit year for the birth, adoption, or foster care placement of a child, or because of a qualifying exigency arising out of the fact that a family member is on active duty or has been notified of an impending call to active duty in the Armed Forces;
 - 20 weeks of paid medical leave in a benefit year if they have a serious health condition that incapacitates them from work;
 - 26 weeks of paid family leave in a benefit year to care for a family member who is a covered service member undergoing medical treatment or otherwise addressing consequences of a serious health condition relating to the family member's military service.
- **As of July 1, 2021**, you may be entitled to up to:
 - 12 weeks of paid family leave in a benefit year to care for a family member with a serious health condition.
 - 26 total weeks, in the aggregate, of paid family and medical leave in a single benefit year.
- **Your weekly benefit amount** will be based on your earnings, with a maximum benefit of \$1,129.82 per week.

JOB PROTECTION, CONTINUATION OF HEALTH INSURANCE, NO RETALIATION

- **Job Protection:** Generally, if you take family or medical leave under the law you must be restored to your previous position or to an equivalent position, with the same status, pay, employment benefits, length-of-service credit, and seniority as of the date of leave.
- **Continuation of Health Insurance:** Your employer must continue to provide for and contribute to your employment-related health insurance benefits, if any, at the level and under the conditions coverage would have been provided if you had continued working

continuously for the duration of such leave. If your health insurance is continued during your leave, you must continue to submit payments equal to the contribution levels required while you are actively at work.

- **No Retaliation:** It is unlawful for any employer to discriminate or retaliate against you for exercising any right to which you are entitled under the paid family and medical leave law. An employee or former employee who is discriminated or retaliated against for exercising rights under the law may, not more than three years after the violation occurs, institute a civil action in the superior court.
- **Filing a claim:** Please reach out to Benefits@Simmons.edu for instructions on filing a claim for MA PFML. When able, you are required to provide 30 days’ notice of your need for leave. If you are unable to provide 30 days’ notice due to circumstances beyond your control, you must provide notice as soon as practicable, and in any event, before you file any application for benefits.

PRIVATE PLAN EXEMPTION

In accordance with M.G.L. c. 175M, an employer that offers paid leave with benefits that are at least as generous as those provided under the law may apply for an exemption from paying the Department of Family and Medical Leave Family and Employment Security Trust Fund contribution.

We have secured an **exemption for our Paid Medical Leave** plan, and it will be insured by Unum. Our Paid Family Leave plan will be insured by the State of MA.

PRIVATE PLAN RATES & EMPLOYEE CONTRIBUTIONS (PREMIUMS)

Family Leave Contribution	Medical Leave Contribution	Total Contribution Amount
0.11%	0.52%	0.63%
<p><i>Rates are effective January 1, 2023–December 31, 2023. Rates are subject to change annually.</i></p> <p><i>Contributions are calculated based on the above percentages of your W-2 and/or 1099 earnings in accordance with the law. Contributions are applied each pay period until wages meet, or exceed, the calendar year Social Security wage base. The Social Security Administration (SSA) has determined that the wage base subject to the tax will be \$160,200 in 2023.</i></p>		

COSTS FOR EMPLOYEES

Medical Leave Plan		
Employer Contribution	60% of the total Premium	Effective January 1, 2023
Employee Contribution	40% of the total Premium	

Family Leave Plan		
Employer Contribution	0% of the total Premium	Effective January 1, 2023
Employee Contribution	100% of the total Premium	

The costs outlined above are structured to comply with the regulations relative to the Massachusetts Family and Medical Leave Law, M.G.L. c. 175M. The amount you are required to pay is an amount that is equal to, or less than, the amount you would be required to pay if we chose to participate in the public program managed by the MA Department of Family and Medical Leave (DFML). The Department can be contacted at:

The Massachusetts Department of Family and Medical Leave

Charles F. Hurley Building
 19 Staniford Street, 1st Floor
 Boston, MA 02114
 617-626-6565
mass.gov/DFML