Oregon Employer FAQs

Oregon Paid Family and Medical Leave

OR PFML



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This document is meant to answer some of the questions that employers may have and provide them with a quick summary of information related to the law and the state-mandated plan as of January 1, 2022.

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OR Paid Family and Medical Leave (OR PFML) Basics

Is my business required to offer PFML benefits to employees?

Yes. Currently, private employers that employ one or more individuals are required to offer the new paid family and medical leave. Those who are self-employed or are sole proprietors are also eligible to opt-in to the program.

Is my business required to use the state-run paid leave program?

No, while private employers with one or more employee are required to offer PFML, they may choose to apply for an exemption through the Employment Department if they want to offer the same benefits or better to all employees through private insurance or a self-funded program.

How is the program funded?

The state-run program has a shared payroll-based contribution of no more than 1% of an employee's wages to fund the program. The final rate is expected in the summer of 2022.

- Employees will pay 60% of the contributions.
- Employers with more than 25 employees will pay up to 40%.
- Employers with less than 25 employees are not required to submit their employer portion.

How do you calculate PFML contribution amounts due for each employee in 2022?

Wages \times 60% = PFML employee payroll deduction for the 2023 calendar year. The illustrative table below shows an example if the rate is 1%.

Examples	Employee A	Employee B	Employee C
Annual salary	\$45,000	\$75,000	\$147,000
Total contribution rate for 2023 = 1% of employee wages	60% employee 40% employer	60% employee 40% employer	60% employee 40% employer
Total annual premium	\$450	\$750	\$1,470
Employer Pay*	\$180	\$300	\$588
Employee Pay	\$270	\$450	\$882
Weekly payroll deduction	\$5.19	\$8.65	\$16.96

The state will collect the contributions quarterly bases in arrears. Private plans contributions can be aligned to billing frequency of other coverages.

^{*} For employers with less than 25 lives using the state program, if they pay their portion of the contribution, they are eligible to receive assistance grants. Grants not applicable to private plan.

Private Plan Option

What are the private plan requirements?

Employers are required to participate unless the employer has an approved equivalent plan (or private plan). If it has such a plan, the employer and their employees will not pay into, nor receive benefits from, the state's program, but instead get benefits from the employer's plan.

OR PFML private plans can be self-insured or fully insured. They must be available to all covered workers under the OR PFML law and contain the same or better benefits and protections. A private plan must be for both paid family and medical leave coverages.

- Equivalent plans must be approved by the Employment Department.
- Employers are permitted, but not required, to deduct from employees' pay money to fund their equivalent program. The amount cannot exceed what employees would pay into the state's family and medical leave program and must be used only for plan expenses.
- Upon review by the state, if an employer does not provide family and medical leave plan benefits that are at least equal to those under the state's plan, the state may terminate approval of their plan.

What do I need for the state tax exemption?

The state of OR is still defining the rules. This document will be updated when rules are announced.

What are the planned annual changes?

Annual changes will be published in July of each year.

Do employers with private plans need to re-file or re-apply with the state?

Employers must apply for re-approval annually for three years after the initial approval, or if the plan changes.

MetLife's Private Plan Solution

What is MetLife's premium rate for fully insured or self-insured PFML coverages?

Fully Insured: OR PFML is underwritten based on the customer. Employee contributions match the state's and the employer funds the balance of the cost if there is any.

Self-Insured: MetLife's prices are based on a service fee for administering the program. Employee contributions cannot be used to pay the service fee. However, employers may collect employee contributions to help fund benefits payable under the PFML program.

How do I calculate MetLife's premium?

MetLife uses the Self Administer Premium Billing (SAP) method and can be aligned with the frequency of other coverages offered. Since OR requires the contribution to be assessed on every dollar earned, as premiums are collected, they should be submitted to MetLife. See the example above for payroll deduction.

How will MetLife coordinate employer-paid benefits?

Your MetLife service team can help you review your employer-paid benefit that may overlap with the state leave benefit. We document overlaps and your preferred contact and action when the overlap happens on a Claim Benefit Coordination Tip Sheet. The same Tip Sheet can be used for multiple states with paid leave programs.

OR PFML Benefit Details

Who is eligible for coverage?

All employees working for a covered employer are eligible for benefit

PFML

An employee** is covered if they:

- Work for a covered employer in the state of OR.
- Earn \$1,000 during the base year. (First 4 of the last 5 completed quarters or the 4 most recently completed quarters.) You can combine hours worked at more than one employer.
- People who are self-employed and tribal governments may opt into the program.

What are the state benefits and what life events can they be used for?

Eligible workers can receive wage replacement benefits for the below qualifying events, and job protection:









Paid Medical Leave	Safe Leave	Paid Family Leave		
Own Serious Health Employee's own medical need including organ or bone marrow donations and pregnancy	Family Violence When a covered employee is experiencing issues related to domestic violence, harassment, sexual assault, or stalking	Child Bonding Including newborn, adoption, and foster care placement	Family Caregiver When a covered family member has a serious health condition	

Benefit Duration

Up to 12 weeks in a 12-month period.

Extra 2 weeks if employee is pregnant.

Another extra 4 weeks of unpaid leave in some situations.

No waiting period.

The Oregon Family Leave Act (OFLA) and FMLA should run concurrent with PFML when applicable. The medical conditions covered under the PFML are similar to what is covered by the Oregon Family Leave Act (OFLA), but there are some differences.

How much of a benefit can an eligible employee receive?

Benefits are paid as a percentage of an employee's average weekly wage (AWW). Employees earning less than \$811 per week, can receive up to 100% of their AWW.

Maximum weekly benefit up to 120% of state AWW estimated benefit in 2023 is \$1,312					
Benefit calculation					
For AWW less than 65% of the statewide AWW: • 100% of a worker's AWW up to the cap.	For AWW greater than 65% of the statewide AWW: • The sum of (1) 65% of the statewide AWW plus (2) 50% of the employee's AWW that is more than 65% of the statewide AWW, up to the cap.				
	of the employee's AWW that is more than 65%				

^{**}Individual employees are not allowed to opt out of the program.

Leave Request Process

How do employees file for benefits?

The state is still defining the program, which will deploy in September 2023. We expect it to follow our standard process below.

1 Notify employer	2 Apply for benefits	3 Submit supporting documentation	4 Stay connected until return to work
At least 30 days prior if leave is foreseeable or as soon as the employee can if unforeseeable	 Contact claim administrator within 30 days prior or within 30 days after leave starts MetLife can accept claims via web, telephone, or paper claim. The method is dependent on an employer's coverage plan 	 Proof may be required before the claim decision can be made MetLife will make a claim decision within 10 calendar days of receiving all information (or the first day of leave, whichever is later) 	Employer and MetLife will need to have the employee's anticipated return to work date scheduled or an intermittent leave plan on file to efficiently manage the claim

Coordination with Other Benefits

Oregon Family Leave Act (OFLA) and Family Medical Leave Act (FMLA) can be taken at the same time and should be taken at the same time when applicable.

Can an employee qualify for more than one benefit?

Employees may qualify for more than one benefit based on the leave reason. Some common events are listed below:

Leave reason	OR PFML		Federal	Company	Other
	OR PML	OR PFL	FMLA		
Employee has complications due to pregnancy	Yes	No	Yes	STD	
Employee has a serious health condition requiring multiple days/weeks/months away from work (including acting as a bone/organ donor)	Yes	No	Yes	STD-continuous or reduced leave schedules with partial disability No intermittent leave	
Employee is injured at work	No	No	Yes	No	Workers Comp
Employee is bonding with newborn or fostering or adopting a child	No	Yes	Yes	Maybe (Parental/bonding leave)	
Employee needs to care for a family member parent, child, spouse with a serious health condition	No	Yes	Yes	Sick leave, PTO	

Leave reason	OR PFML		Federal	Company	Other
	OR PML	OR PFL	FMLA		
Employee needs to care for other family members: sibling, child-in-law, child of the worker's registered domestic partner, grandparent, grandchild, parent, parent-in-law or parent of the worker's registered domestic partner, or any individual related by blood or affinity whose close association with a covered individual is the equivalent of a family relationship with a serious health condition	No	Yes	No	Sick leave, PTO	
Former employee receiving unemployment has a qualifying event	No	No	No	No	Unemployment

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

OR PFML is a wage replacement benefit. If the employee is not losing wages, the PFML benefits may begin after the company paid leave ends. As part of our benefit coordination process, MetLife's claims team will reach out to you to coordinate dates of the company leave that directly overlap with the state leave (i.e., company's parental leave and PFL for child bonding).

If an employee takes a private plan benefit at a different time, can my company be reimbursed benefits?

At this time, reimbursement to the employer has not been defined.

What proof or supporting documentation is needed to support a claim?

The rules are being defined. At this time, we expect them to follow the below process.

For one's own serious health condition (when a claimant is sick or hurt and cannot work for an extended period of time):

- Certification of a Serious Health Condition form filled out by the claimant and their healthcare provider. It can take two weeks or more for the doctor's office to process this paperwork, so the claimant should be sure to submit it to them as soon as possible; or
- A doctor's note or Attending Physician Statement (APS). Please make sure it includes the same information as the Certification of Serious Health Condition form.

For child bonding for a newborn:

- A copy of the child's Birth Certificate, or
- · A statement from the child's health care provider stating child's date of birth, or
- A statement from the mother's health care provider stating child's date of birth.

For child bonding for adoption or foster care placement:

- A copy of court documents finalizing the adoption; or
- · Documentation from the child's healthcare provider; or
- Foster/adoption agency paperwork containing adoption or placement.
- Please note: If the claimant is not the parent named in the court documents, they may also be asked to provide proof verifying the relationship to the parent in locos named in the court documentation, such as, but not limited to, marriage certificate, civil union, or domestic partnership documentation.

For Safe Leave

Employees experiencing issues related to domestic violence, harassment, sexual assault, or stalking.

- Documents for a civil or criminal proceeding relating to family violence
- Other documentation to support your claim such as proof of care from a victim service organization or relocation due to safety
- · Signed written statement from applicant certifying that the applicant is taking leave for one of the following reasons:
 - To obtain services from a victim services organization,
 - To relocate due to such family violence, or
 - To participate in any civil or criminal proceedings related to or resulting from such family violence

For leave to care for a family member with a serious health condition, including medical events related to pregnancy or childbirth, the claimant must provide ONE of the following:

- Certification of a Serious Health Condition form filled out by the claimant and their healthcare provider. It can take two weeks or more for the doctor's office to process this paperwork, so the claimant should be sure to submit it to them as soon as possible, or
- A doctor's note. or Attending Physician Statement (APS). Please make sure it includes the same information as the Certification of Serious Health Condition form.
- Please note: In some cases, a statement confirming the relationship between the covered employee and the family member may also be requested.

Claims Processing

What happens if an employee is out on STD or an approved absence starting in 2022, which extends into 2023?

If STD, the employee may be eligible for Paid Medical Leave beginning September 3, 2023. Claimants are encouraged to discuss the new OR PML with their STD claim specialist.

If FMLA or OFLA, the employee may be eligible for paid leave beginning September 3, 2023 as these leaves should run concurrently when applicable.

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

Yes, OR PFML may be taken intermittently or on a reduced leave schedule, depending on the qualifying event. Employees may need proof of need for intermittent leave.

Can an employee who is out on maternity leave before the program start wait until September 2023 to take OR PFL for child bonding to get the paid benefits?

Yes, under OR PFML law, covered employees can take PFL for bonding with a new child at any time within the first 12 months of the child's birth, adoption, or foster care placement.

Why does the law say the employee must give a 30-day advance notice of foreseeable leave?

The 30-day advance notice requirement is for the employee to alert their supervisor/employer that they will be absent. This may help with staffing and identify back up training to cover while the employee is out for an extended period of time. There is no requirement for the insurance claim to be submitted early.

What if a claim is denied?

If a claim has been denied, the claimant may reach out to MetLife to have the claim reconsidered, especially if the claimant has new information to support their claim. If, after a second review and the claim is still denied, the claimant may file an appeal with the state. The denial letter will provide the appeal filing instructions.

Who is a covered family member?

Family member means spouse or registered domestic partner, sibling, child, child-in-law, child of the worker's registered domestic partner, grandparent, grandchild, parent, parent-in-law or parent of the worker's registered domestic partner, or any individual related by blood or affinity whose close association with a covered individual is the equivalent of a family relationship.

General Tax Questions

The rules are being defined. At this time, we expect them to follow the below processes outlined in these questions and answers.

Are benefits taxable?

Yes

Are taxes automatically withheld from benefits?

PFL: No. Taxes will not automatically be withheld from benefits, but employees can request voluntary tax withholding. You simply need to submit a W-4S tax form to the claims team and taxes can be withheld.

PML: Yes. Medical leaves are treated similar to disability income, and taxes are automatically withheld from benefits.

How do I report payroll contribution?

Employers should report employee contributions on Form W-2 using Box 14 – State disability insurance taxes withheld. The first W-2 reporting that will need to include this will be for the 2023 calendar year.

Resources



Need more information? Visit:

The MetLife PFML website regarding state mandated benefits.

For OR State PFML resources click here.

For details regarding your coverage, contact your MetLife Representative.

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