**California State Disability Insurance (SDI)** 

State Department	
and Web Informatio	ı

#### Eligibility

# Employment Development Department (EDD)

Edd.ca.gov/disability

#### Disability insurance eligibility

- Must have earned at least \$300 from which SDI deductions were withheld during a previous period.
- Must have lost wages because of disability or, if unemployed, have been actively looking for work.
- Must be unable to do regular or customary work for at least eight consecutive days.
- Must be employed or actively looking for work at the time of becoming disabled – must be under the care and treatment of a licensed doctor or accredited religious practitioner during the first eight days of the disability.
- · Must complete a medical certification of disability.
- Must complete and mail a claim form within 49 days of the date of becoming disabled.

#### Paid Family Leave (PFL) eligibility

 Employees covered by State Disability Insurance are also covered for PFL insurance to take time off to care for a seriously ill child, parent, parent-in-law, grandparent, grandchild, sibling, spouse/ registered domestic partner, or to bond with a newborn following birth, or adopted child, or foster care child following placement in the home.

#### **Benefits**

70% for employees who earned less than 1/3 of the state's average quarterly wage during the prior four quarters or 60% for employees who earned 1/3 or more of the state's average quarterly wage during the prior four quarters.

Maximum: \$1,216/week Minimum: \$50/week

SDI benefits begin: 8th day

Duration: 52 weeks or 100% of total wages during the base period, whichever is less.

Successive periods of disability for the same or similar diagnosis separated by 60 days or less are considered the same disability claim.

PFL: Up to 6 weeks in a 12 month period.

### Waiting periods:

- SDI benefits: 7 days
- PFL benefits: None for claims with a start date of January 1, 2018.

## Employee Contribution

SDI tax rate (which includes disability and PFL insurance) is 1%.

SDI taxable wage limit is \$114,967 per employee, per year.

Maximum annual cost per employee is \$1,149.67.

#### Employer Cost

employee

amount.

## Private Plan Options

Optional, may elect to pay all or part of SDI plans may be administered externally or employer may choose to administer the plan in-house.

Private plan California Voluntary Plans must exceed the minimum requirements of the California statute in at least one respect.

A private plan must be approved by the director of the EDD. Also, a majority of employees must consent to private plan in writing.

NOTE: Cigna no longer offers a self-insured (ASO) California Plan for new business cases as of 1/1/18. Cigna will continue to service in-force cases sold prior to this date. For alternative options, please contact your account representative.



**Hawaii Temporary Disability Insurance (TDI)** 

**State Department** and Web Information

Department of Labor and Industrial Relations Disability Compensation Division

Hawaii.gov/labor/dcd

#### **Eligibility**

#### Disability insurance eligibility

 Must have at least 14 weeks of Hawaii employment during each of which the employee was paid for 20 hours or more and earned not less than \$400 in the 52 weeks preceding the first day of disability. The 14 weeks need not be consecutive nor with only one employer.

Employee must also meet the following conditions:

- The injury or illness is not work related; not caused by the employee's job.
- The injury or illness prevents the employee from performing regular duties.
- The disability is certified by, and the employee is under the care of, a licensed physician, surgeon, dentist, chiropractor, osteopath, naturopath, or an accredited practitioner of a faith-healing group.
- · Currently employed to qualify for benefits.

#### **Benefits**

For employees earning \$26 or more per week, 58% of the average weekly wage rounded to the next higher dollar, up to a maximum of \$620. For those earning less than \$26 per week, the benefit is equal to earnings but will not exceed \$14 per week.

Benefits begin: 8th day

Duration: 26 weeks

Maximum weekly wage base: \$1,068.62

## Employee Contribution

Not more than 0.5% of the employee's weekly wage with the maximum not to exceed \$5.34.

Employer may pay entire premium cost or share it with employee.

**Employer Cost** 

Employer is required to pay at least ½ of plan cost plus any additional costs not chargeable to employee.

### **Private Plan Options**

TDI plans may be administered externally or employer may choose to administer the plan in-house.

Employer must obtain coverage through an approved carrier/TPA (there is no state plan).

Private plan benefits must be actuarially equivalent to the mandated benefits.

Insured/self-insured plans are required to have claims offices situated in Hawaii to process claims and pay benefits.

NOTE: Cigna offers fully-insured Hawaii Temporary Disability Insurance.



**New Jersey Temporary Disability Benefits (TDB)** 

State Department
and Web Information

### Department of Labor, Division of Temporary Disability Insurance

Nj.gov/labor /tdi/tdiindex.html

#### **Eligibility**

#### Disability insurance eligibility

- Must have had at least 20 calendar weeks in covered New Jersey employment in which employee earned \$169 or more (called "base weeks") or have earned \$8,500 or more in such employment during the "base year" period.
- "Base year" is the 52 weeks prior to the week before the disability began. Only covered wages earned during the base year period can be used in determining the claim.

#### Paid Family Leave (PFL) eligibility

 Employees covered by State Disability Insurance are also covered for PEL insurance.

#### **Benefits**

66 3/4% to \$637/week.

Benefits begin: 8th day

Duration: 26 weeks

Seven-day waiting period with a roll back to day one if disability exceeds 21 days.

## **Employee Contribution**

Not more than 0.19% of first \$33,700 annual earnings to a maximum annual contribution of \$64.03/yr.

#### **Employer Cost**

Balance of plan costs not covered by employee or employer may pay entire cost.

#### **Private Plan Options**

TDB plans may be administered externally or employer may choose to administer the plan in-house.

Private plans must be as liberal as state plan in eligibility requirements, benefit amounts and duration.

NOTE: Cigna offers both fully-insured and self-insured (ASO) plans for New Jersey Temporary Disability Benefits.



**New York Disability Benefits Law (DBL)** 

## State Department and Web Information

#### Workers' Compensation Board, Disability Benefits Bureau

Wcb.ny.gov/content/main/ DisabilityBenefits/Employe r/introToLaw.jsp

#### **Eligibility**

#### Disability insurance eligibility

- An employer of one or more persons on each of 30 days in any calendar year becomes a "covered" employer four weeks after the 30th day of such employment.
- Employees or recent employees of a "covered" employer, who have worked at least four consecutive weeks.
- Employees of an employer who elects to provide benefits by filing an Application for Voluntary coverage.
- Employees who change jobs from one "covered" employer to another "covered" employer are protected from the first day on the new job.
   Generally, an eligible employee does not lose protection during the first 26 weeks of unemployment, provided they're eligible for and are claiming unemployment insurance benefits.
- Domestic or personal employees who work 40 or more hours per week for one employer.

#### **Benefits**

50% of the average weekly wage. Wage-based formula – the average weekly wage is based on the last eight weeks of employment. If counting the last week in which the disability began lowers the benefit rate, it is not included in determining average weekly wage.

The maximum benefit allowance for any disability is \$170 per week. Benefits paid by the employer or insurance carrier are subject to Social Security and withholding taxes.

Elimination period: Seven days Benefits begin: 8<sup>th</sup> day

Maximum benefit is 26 times the weekly benefit during a 52-week period. Weekly benefit depends on the wage-based formula.

Benefits paid on a 5-day week.

## Employee Contribution

0.5% of first \$120 of weekly wage to a maximum of \$0.60/week

### **Employer Cost**

Balance of plan costs not covered by employee or employer may pay entire cost.

### **Private Plan Options**

DBL plans may be administered externally or employer may choose to administer the plan in-house.

NOTE: Cigna offers both fully insured and self-insured (ASO) plans under New York DBL. If an employer has insured DBL they must purchase the PFL insurance from the same carrier – they are not allowed to self-insure the PFL when they insure DBL.



**New York Paid Family Leave (PFL)** 

## State Department and Web Information

#### Workers' Compensation Board, Disability Benefits Bureau

Ny.gov/programs/newyork-state-paid-familyleave

#### **Eligibility**

An employer of one or more persons on each of 30 days in any calendar year becomes a "covered" employer.

Provides job-protected, paid time off for an employee to:

- Bond with a newly born, adopted or foster child (also includes a leave for bonding with a child born/placed in 2017).
- Care for a family member\* with a serious health condition.
- Assist loved ones when a family member (spouse/domestic partner, child, or parent) is performing active military duty service (or impending call to active duty).

### Paid Family Leave (PFL) eligibility

Based on an employee's work schedule for:

- Working at least 20 hours per week: Eligible after working 26 consecutive weeks of employment.
- Working less than 20 hours per week: Eligible after working 175 days (do not need to be consecutive days worked).
- Employee must give 30 days advance notice for a foreseeable leave.

#### **Benefits**

In 2018: 50% of employee's average weekly wage

Elimination period: None

Maximum benefit duration in 2018: Eight weeks of leave

Maximum weekly benefit: 50% of the statewide average weekly wage of \$1,305.92.

Leave may be taken continuously or intermittently (in full day increments) with benefits paid on a weekly or daily basis.

## **Employee Contribution**

0.126% of an employee's weekly wage capped at 0.126% of the annualized New York State average weekly wage of \$1,305.92 (\$1.65).

#### **Employer Cost**

Plan cost is paid by employee. However, employer may choose to pay for coverage on behalf of their employees.

### **Private Plan Options**

New York's PFL law went into effect on 1/1/18.

PFL plans may be administered externally or an employer may choose to administer the plan inhouse.

NOTE: If an employer has insured DBL they must purchase the PFL insurance from the same carrier-they are not allowed to self-insure the PFL when they insure DBL.



<sup>\*</sup> Family member includes spouse/domestic partner, child, parent, parent-in-law, grandparent and grandchild.

Puerto Rico Seguro por Incapacidad No Ocupacional Temporal (SINOT)

State Department and Web Information	Eligibility	Benefits	Employee Contribution	Employer Cost	Private Plan Options
Department of Labor Bureau of Employment Security  www2.pr.gov/P ages/default.aspx	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).	<ul> <li>65% of regular weekly wage.</li> <li>Maximum weekly benefit: \$113 (\$55 for agricultural workers).</li> <li>Minimum weekly benefit: \$12 (includes agricultural).</li> <li>Maximum benefit is 26 times the weekly benefit.</li> <li>Benefits begin: 8th day</li> <li>1st day hospitalization.</li> <li>Additional benefits for AD&amp;D:</li> <li>Dismemberment benefit between U.S. \$2,000 and U.S. \$4,000 for a loss of any arm, foot, hand, fingers or loss of vision.</li> <li>Death benefit of U.S. \$4,000 for the worker's direct dependents, plus any incapacity benefits indebted.</li> </ul>	Shared cost: Employees may be charged up to 50% of the plan's costs, but not more than 0.3% of the first \$9,000 of the employee's annual wages.  Maximum annual employee cost is \$27.	Same as employee	SINOT plans may be administered externally or employer may choose to administer the plan in-house.  Puerto Rico permits only 7/1 effective dates.  Private plans must be as liberal as the state plan in eligibility requirements, benefit amounts and duration.  NOTES: Cigna offers fully-insured SINOT plans. Cigna's deadline for new business implementation requests is 4/15 to ensure we can meet PR's 4/30 submission deadline. Employers must continue full pay (100% of wages) during maternity leave, including leave taken for adoption. These benefits are provided under the Working Mothers Act, and are therefore outside of the SINOT law itself. Leave is granted for 6 to 10 weeks for pregnancy and childbirth without complications. Maternity leave may be extended both pre-and post-delivery, based on medical certification. Disability plans offset against amounts paid as wages by employer during maternity leave.



**Rhode Island Temporary Disability Insurance (TDI)** 

State Department
and Web Information

### Eligibility

### Department of Labor and Training Temporary Disability Insurance

Dlt.ri.gov/tdi/

#### Disability insurance eligibility

- Must have been paid at least \$12,120 in either the employee's Base Period or an Alternate Base Period.
   If this amount was not earned, an employee may still be eligible if all of the following conditions are met:
  - 1. Earned at least \$2,020 in one of the employee's base period quarters;
  - The total base period taxable wages are at least one and one-half times the employee's highest quarter of earnings;
  - 3. The employee's base period taxable wages equal at least \$4,040.
- To be medically eligible for TDI benefits, a Qualified Healthcare Provider (QHP) must certify that the employee is unable to work. Midwives, Nurse Practitioners, Physicians, Physician Assistants, Psychiatric Clinical Nurse Specialists, Licensed Clinical Social Workers (LCSW), and Licensed Independent Clinical Social Workers (LICSW) are Qualified Healthcare Providers. The QHP will advise the state as to the length of time he/she expects the employee to be unable to work.

#### **Benefits**

Weekly benefit rate: 4.62% of total high quarter wages in base period.

\$94 is the minimum and \$831 is the maximum benefit rate – this doesn't include dependency allowance.

For dependent children less than 18 years old, a dependency allowance may also be provided. The dependency allowance is limited to five dependents and is equal to the greater of \$10 or 7% of the benefit rate. The maximum weekly benefit with the maximum of five dependents is \$1,121.

There is no benefit waiting period, but the employee must be out of work at least seven days due to sickness.

The maximum benefit duration is 30 weeks.

Wage base period – The first four of the last five completed calendar quarters prior to claim; or last four completed quarters if needed to meet minimum earnings requirement.

## Employee Contribution

Financed entirely by employees.

Employers must deduct 1.1% of the first \$69,300 earned.

## Employer Cost Private Plan Options

None

required.

No private plans are permitted by Rhode Island. Employers must obtain coverage directly from the state.

