



Caring for a family member

What is Paid Family Leave?

New York State Paid Family Leave is employee-funded insurance that provides job-protected, paid time off to:

- **BOND** with a newly born, adopted, or fostered child,
- **CARE** for a family member with a serious health condition, or
- **ASSIST** loved ones when a spouse, domestic partner, child or parent is deployed abroad on active military service.

You may also be able to take leave in situations when you or your minor dependent child are under an order of quarantine or isolation due to COVID-19. See [PaidFamilyLeave.ny.gov/COVID19](https://www.paidfamilyleave.ny.gov/covid19) for full details.

How can Paid Family Leave help you and your family member with a serious health condition?

Taking Paid Family Leave to care for a family member with a serious health condition, physical or mental, allows you to be there in times of need.

Family members you can care for:	Care can include providing:
Spouse/domestic partner	Necessary physical care
Child/stepchild	Emotional support
Parent/stepparent/parent-in-law	Visitation
Grandparent	Assistance in treatment
Grandchild	Transportation
Sibling (New in 2023!) Check with your employer's insurance carrier for details on when this goes into effect for your policy.	Help arranging for a change in care
	Assistance with essential daily activities
	Personal attendant services

Before you apply for Paid Family Leave

Check the eligibility requirements. Visit [PaidFamilyLeave.ny.gov/eligibility](https://www.paidfamilyleave.ny.gov/eligibility).

- Most employees who work for private employers in New York State are covered under Paid Family Leave.
- Public employees may be covered if their employer has opted in to provide the benefit. Union-represented public employees may be covered if the benefit has been negotiated through collective bargaining.
- Citizenship and/or immigration status is not a factor in employee eligibility.

Plan your leave.

- Leave can be taken all at once or intermittently, but must be taken in full-day increments.
- Notify your employer at least 30 days in advance, if foreseeable, or as soon as possible.

[PaidFamilyLeave.ny.gov](https://www.paidfamilyleave.ny.gov) — Visit the website for complete details and resources in multiple languages.
(844) 337-6303 — This toll-free Helpline is available Monday through Friday, 8:30 a.m. to 4:30 p.m.



How do you apply for NYS Paid Family Leave?

1

COLLECT YOUR FORMS AND DOCUMENTATION

You can get Paid Family Leave forms from your employer, your employer's insurance carrier or directly from: PaidFamilyLeave.ny.gov/forms

REQUIRED FORMS

To request leave for family care, you'll need the following forms:

- *Request for Paid Family Leave (Form PFL-1)*
- *Release of Personal Health Information Under the Paid Family Leave Law (Form PFL-3)*
- *Health Care Provider Certification for Care of Family Member with Serious Health Condition (Form PFL-4)*



2

COMPLETE & ATTACH

FORM PFL-1

Form PFL-1 has sections that need to be completed by you and by your employer. Fill out your section, make a copy and give the form to your employer to fill out *Part B*.

Your employer is required to return *Form PFL-1* to you within three business days. If there is a delay, you do not have to wait to proceed. Send the *Form PFL-1* that you have filled out, along with the rest of your request package, directly to your employer's insurance carrier.

FORM PFL-3

Your family member (the care recipient) completes *Form PFL-3* and submits the form to their health care provider to keep on file.

This form authorizes a health care provider to release information regarding your family member's serious health condition to your employer's insurance carrier.

Do not send this form to the insurance carrier.

FORM PFL-4

Form PFL-4 has sections that need to be completed by you and by your family member's health care provider.

Fill out your section, make a copy and give the form to the health care provider. Ask the provider to complete their portion of the form and return it to you in a timely manner.

3

SUBMIT WITHIN 30 DAYS

You must submit your completed request package to your employer's insurance carrier within 30 days after the start of your leave to avoid losing benefits.

Mail or fax your *Form PFL-1* and *Form PFL-4* to your employer's insurance carrier.

To find out who your employer's insurance carrier is, you can:

- Look for the Paid Family Leave poster in your workplace.
- Ask your employer.
- Look it up using the employer coverage search application on wcb.ny.gov.

If you cannot find your employer's insurance carrier, call the Paid Family Leave Helpline for assistance: **(844) 337-6303**

The Helpline is available Monday through Friday, 8:30 a.m. to 4:30 p.m.

In most cases, the insurance carrier must pay or deny benefits within 18 days of receiving your completed request or your first day of leave, whichever is later. Your request cannot be considered incomplete solely because your employer did not fill out *Part B* of *Form PFL-1* within three business days.

It is YOUR responsibility to submit the forms to the insurance carrier. It is NOT your employer's responsibility.

CLAIM-RELATED DISPUTES: If the carrier denies or fails to timely pay your benefits, or you have any other claim-related dispute, you may request to have the carrier's actions reviewed. More information can be found at nyspfpla.namadr.com.

PROTECTION AGAINST DISCRIMINATION OR RETALIATION: Complaints about employer discrimination or retaliation are resolved by a Workers' Compensation Board Law Judge after a hearing. If you believe that your employer has discriminated or retaliated against you for taking or requesting Paid Family Leave, visit PaidFamilyLeave.ny.gov/protections or contact **(844) 337-6303**.

For more information, visit PaidFamilyLeave.ny.gov or call **(844) 337-6303**.



**Paid Family
Leave**