

Family Leave Insurance

Information for Employers

What is Family Leave Insurance?

Family Leave Insurance (FLI) provides benefits to workers who need to care for a seriously ill family member or bond with a newborn or newly adopted child. The FLI program complements the Temporary Disability Insurance program, which partially replaces wages during an employee's own injury, illness or other disability, including pregnancy. Claimants can collect FLI benefits for a maximum of 6 weeks in a 12-month period.

Bonding Claims

Individuals may be eligible for FLI benefits to bond with a child during the first 12 months after the child's birth or adoption. To bond with a newborn, your employee must be either the biological parent, or the biological parent's domestic partner or civil union partner.

Bonding leave must be for a period of more than 7 consecutive days. You may allow a new parent to take intermittent bonding periods. Each intermittent bonding must also be at least 7 consecutive days.

Medical documentation is not required for bonding claims.

Care Claims

An individual may be eligible for FLI benefits to care for a family member with a serious health condition. A health care provider must provide supporting certification. In the 12 months starting with the first date of the claim, claimants may take leave for

- 6 consecutive weeks, or
- intermittent weeks, or
- 42 intermittent days.

"Family member" means a claimant's child, spouse, domestic partner, civil union partner, or parent.

"Child" means a claimant's

- biological, adopted, or foster child, stepchild or legal ward, or
- domestic partner's or civil union partner's child.

The child must be

- less than 19 years old, or
- 19 years of age or older but incapable of self-care because of mental or physical impairment.

A "serious health condition" means an illness, injury, impairment, or physical or mental condition that requires inpatient care in a hospital, hospice, or residential health care facility, or continuing treatment or continuing supervision by a health care provider.

The Medical Professional's Role

The medical provider determines whether the patient's physical or mental health condition requires physical care or emotional support from a family member. In certain instances, more than one person may receive family leave benefits to care for the same family member.

Disclosure of Medical Information

When patients sign a Family Leave Insurance claim form, they authorize their doctor to share their medical information with their care givers and the Division of Temporary Disability Insurance. We cannot discuss your employee's family member's condition with or without their written authorization.

The Division of Temporary Disability Insurance is not a "covered entity" under the federal Health Information Portability & Accountability Act (HIPAA). All of a patient's medical records, except to the extent necessary to administer the Temporary Disability Benefits Law, are confidential and are not open to public inspection. We protect all records that may reveal the identity of the patient.

The Employer's Role

As the employer, you are required to provide information about your employee's duration and location of employment, the wages earned, and if the employee received any paid time off after the last day they worked (not including wages previously earned). Information you provide must agree with the claimant's statement, or additional questionnaires will be sent to clarify both of your statements. This can significantly delay the determination of the claim. Be sure to use exact dates, provide gross wages, use Saturday week-ending dates when providing the last 10 weeks of wages, and sign and date the form. Never attach payroll records in lieu of completing one of our forms.

Filing an Employer Statement

Our new online portal makes filing your employer statement simple. If your employee has filed their claim online, they will give you an instructional sheet with a form identification number. Use this number to enter your Employer Statement (Form E-01) on their specific claim by going to our website. The information you submit is encrypted, and the system meets all security standards mandated by the state of New Jersey. It's easy to use, and you'll get an immediate confirmation of your statement filing. It's safe, easy, and fast – file your statement online today.

Alternatively, you can supply the necessary information by completing every question on Part C of the application for Temporary Disability Insurance benefits (Form DS-1).

You may be required to provide information for any claimant who has been in your employ within the last six months. They may give you an instructional

sheet to complete the Form E-01 online or you may receive a Request for Information (Form E-15) from us. The wage information you provide is required to determine your former employee's benefit amount, so be sure to complete and return this form promptly. Failure to do so can result in substantial monetary penalties.

Integrity of the Family Leave Insurance Program

To protect the integrity of the Temporary Disability Benefits Fund, we verify claims and review diagnosis/ICD coding and the patient's estimated date of recovery to determine whether it is consistent with the normal expectancy for the claimed illness, injury, or other disability.

For More Information

Go online: nj.gov/labor

Call Customer Service: **609-292-7060**

Write: **Division of Temporary Disability Insurance**
P.O. Box 387
Trenton, NJ 08625-0387

*Remember: To receive **timely payments**, your employee depends on you to **promptly complete and return** the employer statement of the claim forms.*