

**FAMILY LEAVE INSURANCE AND
TEMPORARY DISABILITY INSURANCE
COMBINED ANNUAL ACTIVITY REPORT
2024**

New Jersey Department of Labor and
Workforce Development
Office of Research and Information
December 2025

HIGHLIGHTS

Temporary Disability Insurance and Family Leave Insurance are wage replacement programs that work together to provide increased economic security to working families in New Jersey. Enacted in 1948, the Temporary Disability Insurance program provides cash benefits to New Jersey workers suffering a non-work-related physical or mental illness, injury, or other disability that prevents them from working. The Family Leave Insurance program was enacted in 2009 and provides cash benefits for New Jersey workers who need to take short-term leave, to bond with a newborn, newly adopted, or newly placed foster child, provide care for an ill or injured family member, or cope with domestic or sexual violence. Both programs are operated by the Division of Temporary Disability and Family Leave Insurance at the New Jersey Department of Labor and Workforce Development.

The report provides a summary of workload activity and other data during 2024 for the Family Leave Insurance (FLI) and State Plan for the Temporary Disability Insurance (TDI) programs, with comparative information from prior years. While this analysis is primarily concerned with data movements during the past five years, any significant longer-term trends are also noted. The data are derived from New Jersey's Disability Automated Benefits System (DABS), which was developed in 1989.

Key Findings:

For the Family Leave Insurance (FLI) program, new claims received and initial dispositions both increased in 2024, continuing the trend experienced in the past six years. About 83 percent of eligible FLI claims were filed to bond with a newborn, newly adopted child, or newly placed foster child, with the remainder of claims to care for an ill family member.

FLI gross benefit payments for 2024 claims totaled \$511.5 million, with an average weekly benefit amount for all claims of \$911. Gross benefits paid rose by slightly more than seven percent compared with 2023.

FLI Claims processing times in 2024 increased when compared with 2023 for both the 14-day time lapse performance measure (26.7%) and the 28-day measure (90.3%). About 68 percent of total eligible family leave claims were initiated by women. Data by type of claim for education level and race/ethnicity showed that the highest number of claims in 2024 were for individuals with an associate or bachelor's degree, followed by high school graduates. Over half of all claimants were Caucasian (55.0%), with Hispanic/Latino (19.5%), African American (12.1%) and Asian (10.4%) individuals comprising the next largest reported groups.

Temporary Disability Insurance (TDI) program data show that during 2024, new TDI claims received and initial dispositions both increased compared with 2023. Gross benefit payments rose by 9.6 percent in 2024.

TDI claims processing times increased in 2023. The 14-day and the 28-day time lapse performance measures were 20.0 and 51.9 percent, respectively. Medical evidence not submitted was again the most frequently cited reason for denial, comprising 26.2 percent of all denials. Females comprised 72 percent of total eligible disability claims. Data by type of claim for educational level and race/ethnicity showed that the highest number of TDI claims in 2024 were for high school graduates (50.4%) and for Caucasian claimants (48.0%). Claims for benefits due to pregnancy and complications of pregnancy and childbirth continued to be the largest single category for both new eligible claims (31.1%) and completed cases (30.4%). These percentages have been consistent since 2001 when morbidity data (type of injury or illness) for eligible claims and completed cases became available.

FAMILY LEAVE INSURANCE PROGRAM – 2024

Overview

The enactment of P.L. 2008, chapter 17 on May 2, 2008 created the New Jersey Family Leave Insurance Program. This report provides a summary of workload activity for the State Plan for Family Leave Insurance (FLI) during calendar year 2024, with comparative information from calendar years 2020 - 2023. The data are derived from New Jersey's Disability Automated Benefits System (DABS), which was developed in 1989.

The report tables for 2024 incorporate the data elements required by the enactment of P.L. 2019, chapter 37 on February 19, 2019. Table 1 provides data on claims received, initial dispositions and benefits paid for family leave claims. Tables 2 and 3 contain information on the time it takes to process claims and reasons for denial, respectively. Claim statistics by type of claim including sex, education and race/ethnicity can be found in Table 4. A list of definitions for key workload items is included on page 12 of this report.

Background

With the enactment of P.L. 2008, chapter 17, on May 2, 2008, New Jersey extended the Temporary Disability Insurance program to provide family leave insurance benefits, a monetary benefit (not a leave entitlement), for covered individuals bonding with newborn or newly adopted children or caring for ill family members.

Beginning July 1, 2009, claimants became eligible for up to six weeks of family leave benefits per 12-month period. Workers could receive weekly family leave benefits equal to two-thirds of their average weekly wage, up to a maximum weekly benefit determined annually. Leave could be taken either for six consecutive weeks, for intermittent weeks or for up to 42 intermittent days per 12-month period.

With the enactment of P.L. 2019, chapter 37 on February 19, 2019, New Jersey expanded the family leave program in a number of ways. In the beginning of the program, a family member was defined as the claimant's child, spouse, domestic partner, civil union partner or parent. For claims after February 19, 2019, the definition of child was expanded to include the claimant's biological or adopted child, foster child, stepchild, legal ward, the child of the claimant's domestic or civil union partner or the child of a gestational carrier, with a writer agreement in place. Family leave was also expanded to cover coping with a domestic or sexual violence situation. Claimants could provide care for themselves, a victim/survivor or a family member of a victim/survivor.

The definition of family member was expanded for claims after February 19, 2019 to also include parent-in-law, sibling, grandparent, grandchild, domestic partner and any other individual related by blood to the employee or any other individual who has a close association with the employee which is equivalent of a family relationship.

P.L.2019, c.37 also established and required annual reporting on new goals to make timely determinations and prompt payments of benefits to claimants who meet eligibility criteria. These new goals were based on the premise the Division would be modernizing their claims processing system.

Those goals for the Family Leave Insurance program are as follows:

Timely determination and prompt payment of:

- 80% within 7 days
- 85% within 14 days
- 90% within 21 days
- 95% within 28 days

Funding Structure

The family leave program is funded entirely through worker contributions, which were equal to 0.09 percent of taxable wages in 2024, compared with the rate of 0.06 percent in 2023. Worker contributions were based on a taxable wage base equal to 107 times the statewide average weekly wage (SAWW). The worker contribution rate is adjusted annually to a rate sufficient to maintain an account balance needed to pay benefits.

For 2024, claimants were eligible for family leave benefits equal to 85 percent of their average weekly wage, up to a maximum weekly benefit rate in 2024 of \$1,055. The maximum FLI benefit period was 12 consecutive weeks and the maximum intermittent FLI leave was 56 intermittent days per 12-month period.

All New Jersey employers covered by the Unemployment Compensation Law are also subject to the Family Leave Insurance provisions of the Temporary Disability Benefits Law, including certain government entities (for example, school districts and municipalities) which are not automatically covered by temporary disability insurance. Federal government employers, as well as faith-based organizations, are exempt from the provisions of this law. A subject employer is automatically covered under the State Plan for family leave insurance unless it has covered its workers under an approved FLI private plan. Estimated State Plan covered employment for family leave insurance averaged 4,165,400 workers in 2024 and 4,127,100 in 2023. Private plan covered employment averaged 37,303 workers in 2024 and 33,549 in 2023.

Claims and Benefits

During calendar year 2024, new claims received and initial dispositions both increased, continuing the upward trend of recent years (see Table 1). The number of claims initiated online increased for the ninth consecutive year, exceeding the number of paper claims received. The number of paper claims received annually decreased slightly from 2023.

Eligible dispositions comprised about 79 percent of total dispositions in 2024, compared with 77 percent in 2023, 79 percent in 2022, 88 percent in 2021, and 83 percent in 2020.

P.L. 2019 requires a reporting of the number and percentage of ineligible claims received with insufficient information; the portion of those claims that were deemed ineligible because of failure of claimants to provide sufficient information; and the portion of those claims that were deemed ineligible because of failures of medical providers of claimants to provide sufficient information. This information can be found in Table 1. The law also requires reporting of those claims deemed ineligible because of failures of employers to provide sufficient information. These data are not available or collected in the DABS system, as claims for this program are not deemed ineligible due to lack of employer information.

Gross benefit payments made in 2024 rose to \$511.5 million, an increase of 7.3 percent from 2023 when benefit payments totaled \$476.5 million. The average weekly benefit amount also increased, rising from \$878 in 2023 to \$911 in 2024.

Time Lapse Data

The percentage of initial determinations made within two weeks of receipt of the claim decreased to 26.7 percent in 2024 from 60.2 percent in 2023 (see Table 2). The annual number of cases increased from 69,367 in 2023 to 73,075 in 2024 (+5.3%). In 2020, the percentage of initial determinations made within two weeks was 70.9 percent with a lower number of cases of 52,982.

The percentage of initial determinations that occurred within four weeks was 90.3 percent, a decrease from the level attained in 2023 of 92.6 percent, but was a small increase compared with 2020 when it was 89.5 percent. The service goal for processing initial determinations within four weeks is 95 percent.

The goals set forth by law for the original determination of Family Leave Insurance (FLI) claims have not met the specified thresholds. The Division's progress towards achieving these goals continues to be a top priority. The primary focus includes a multi-year commitment to modernizing the DABS claims processing system, which was developed in 1989. The limitations of the system impact processing time since it requires staff to complete additional manual processes to address processing needs that cannot be handled or updated in the system itself.

Reasons for Denial

The primary reasons for denial of a family leave claim at the time of initial determination are shown in Table 3. Lack of medical evidence was the most frequently cited reason for denial in 2024, comprising 13.3 percent of all reasons for denial. For caregiving claims, medical certification is required from the patient's medical provider.

"Other" reasons were cited in 81.2 percent of denials in 2024, compared with 80.3 percent in 2023. "Other" reasons include late filing and employment by an uncovered governmental agency.

Claimant Characteristics

Table 4 includes data on the number of eligible claims by sex, education level and race/ethnicity for all eligible family leave claims, bonding claims, claims for bonding with a newborn, claims for bonding with an adopted child, family care claims, claims for care of a sick child, claims for care of an ill spouse and claims for care of other sick family members. Table 4 also includes claimant characteristics totals for all eligible Family Leave claims. The ineligible claims data were not available for calendar year 2024.

There were 63,554 eligible family leave claims in 2024, of which approximately 83 percent of eligible claims were for bonding (53,030); the remaining 17 percent were for care of ill family members (10,524).

Females comprised 67.7 percent of eligible family leave claims, while males totaled 32.3 percent of all eligible claims. For claimants taking leave to bond with a newborn or newly adopted child, females comprised 67.4 percent of eligible claimants. The majority of FLI claimants taking leave to care for an ill family member also were female (69.5%). Males comprised 30.5 percent of family care claimants, and 32.6 percent of bonding claimants.

Individuals with an associate or bachelor's degree accounted for 38.4 percent of eligible family leave claims, followed by high school graduates (32.3%) and claimants with graduate degrees (24.0%). Individuals taking leave to care for a sick family member were more likely to be high school graduates (42.9%), followed by those with an associate or bachelor's degree (33.4%). The percentages of bonding claimants by educational level were similar to those for all eligible family leave claimants.

The largest group of family leave claimants by race/ethnicity were Caucasian (55.0%), followed by Latino/Hispanic (19.5%), African American (12.1%), Asian (10.4%), Undefined (2.4%), American Indian/Alaskan Native (0.4%), and Native Hawaiian/Pacific Islander (0.3%).

Of the \$446.9 million paid for total family leave claims filed in 2024, \$399.9 million was for bonding claims (89.5%) while \$47.0 million was paid to family care claimants (10.5%). The average weekly benefit amount for all claims in 2024 was \$917 with bonding claims averaging \$925 per week and family care claims averaging \$881 per week. Average days paid per claim were higher for bonding claims (69 days) compared with family care claims (45 days). Claims for all types of family leave averaged 65 days.

FLI Revenues, Benefits and Administrative Expenses

Table 5 contains a summary of revenues, benefits and administrative expenses during 2023 and 2024. It should be noted that State Plan benefit totals in Table 5 are reported on a cash basis and do not match the benefit payment data in Table 1, which are compiled by type of claim from monthly disability workload reports.

The State Plan for FLI is financed entirely through worker contributions, which totaled \$241.2 million in 2024 and \$212.1 million in 2023. The worker contribution rate was 0.06 percent of taxable wages in 2023; the rate was 0.06 percent in 2023. The worker contribution rate is calculated annually and adjusted as necessary based on the balance in the fund and expected benefits and expenses for the upcoming year.

Total FLI State Plan benefits during 2024 were \$548.7 million, which was an increase from 2023 when benefits were \$497.1 million. Benefit payments for family leave during unemployment were \$2.9 million in 2023 and \$4.0 million in 2024. FLI administrative expenses increased to \$20.0 million in 2024 from \$18.8 million during 2023.

The total number of personnel in the division is 192. The total cost of salaries and benefits for those personnel in fiscal year 2024 was approximately \$29,312,161. The number of personnel processing family leave claims is 24 with an approximate budgeted cost of salaries and benefits of \$8,160,341¹.

The personnel cost of staff who are solely processing FLI claims is 12.5% of the Division's total administrative cost, which in fiscal year 2024 was \$64,414,621. The maximum administrative amount permitted is \$10 million over the appropriated budgeted administrative amount per fiscal year, but this amount is subject to the approval of the Director of the Division of Finance and Accounting.

¹ This amount accounts for staff assigned to the direct processing of FLI claims. Personnel in other units assist in the claims processing system indirectly and are therefore not included in this total.

TEMPORARY DISABILITY INSURANCE PROGRAM – 2024

The enactment of P.L. 1948, chapter 110 created the New Jersey Temporary Disability Program. Provided in this report is a summary of workload activity and other data during 2024 for the State Plan for Temporary Disability Insurance (TDI), with comparative information from prior years. While this analysis is primarily concerned with data movements during the past five years, any significant longer-term trends are also noted. The data are derived from New Jersey's Disability Automated Benefits System (DABS), which was developed in 1989.

The report tables for 2024 incorporate the data elements required by the enactment of P.L. 2019, chapter 37 on February 19, 2019. Tables 6, 7 and 8 provide data from 2020 through 2024 on workload activity, time lapse statistics and reasons for denial of disability claims. Information on the sex, education level and race/ethnicity of claimants for 2024 can be found in Table 9. Morbidity data for eligible claims and completed cases in 2024 are contained in Tables 10 and 11. A list of definitions for key workload items is included on page 12 of this report.

Background

Since its enactment in 1948, the New Jersey Temporary Disability Benefits Law has provided benefits to workers affected by non-work-related injuries or illnesses.

With the enactment of P.L. 2019, chapter 37 on February 19, 2019, New Jersey expanded the Temporary Disability Insurance program. P.L.2019, c.37 also established and required annual reporting on new goals to make timely determinations and prompt payments of benefits to claimants who meet eligibility criteria. These new goals were based on the premise that the Division would be modernizing its claims processing system. Those goals for the Temporary Disability Insurance program are as follows:

Timely determination and prompt payment of:

- 40% of claims within 7 days
- 75% within 14 days
- 85% within 21 days
- 90% within 28 days

Funding Structure

All employers except local government, for which coverage is optional, are subject to the provisions of this law when their quarterly payrolls are at least \$1,000. Federal government employers, as well as faith-based organizations, are exempt from the provisions of this law. Employers may choose the State's insurance plan or obtain private coverage equal to or better than the State Plan. The temporary disability program is funded by a combination of employer and worker contributions. Employer contribution rates vary from 0.0 percent to 0.75 percent of taxable wages, depending on the employer's disability experience rating.

For 2024, the worker contribution rate was 0.0 percent, matching the rate of 0.0 percent in 2023. Since 2012, the worker contribution rate has been adjusted annually based upon a legislative formula.

In 2024, the number of State Plan employers increased to 261,209 from the 2023 level of 253,917. In addition, 606 employers were covered by a combination of state and private plans, while private plan employers totaled 6,515. State Plan covered employment increased by 0.2 percent in 2024, averaging

2,797,488 in 2024 and 2,755,802 in 2023.² Private plan covered employment decreased by 0.1 percent in 2023, averaging 880,261 in 2024 and 891,600 in 2023.

Claims and Benefits

The number of new claims received and initial dispositions both increased in 2024, from 2023 levels (see Table 6). The number of web claims received also rose compared with 2023 and surpassed the number of paper claims received for the fifth consecutive year. The number of paper claims received annually continued to decline.

Eligible dispositions comprised 54 percent of total dispositions in 2024, compared with 52 percent in 2023 and 67 percent in 2020.

P.L. 2019 requires a reporting of the number and percentage of ineligible claims received with insufficient information, the portion of those claims that were deemed ineligible because of failure of claimants to provide sufficient information and the portion of those claims that were deemed ineligible because of failures of medical providers of claimants to provide sufficient information. This information can be found in Table 6. The law also requires reporting of those claims deemed ineligible because of failures of employers to provide sufficient information. These data are not available or collected in the DABS system, as claims for this program are not deemed ineligible due to lack of employer information.

P.L. 2019 also requires a reporting of the number and percentage of claims for which determinations were delayed because of employer failure to make the notifications or disclosures to employees and the division within the required amount of time; the number of complaints received related to employer noncompliance with those requirements; and the number of employers which have been, because of the failures, required, pursuant to section 31 of P.L.1948, c.110 (C.43:21-55), to pay fines or penalties to the division or added amounts to claimants; the total amount of payments to the Division; and the total amount of payments to claimants. However, due to changes made to the law, which provided the Division the ability to use wage data already available to DOL, this issue has largely ceased to exist. If wage data is not available, the Division will ask for paystubs from the claimant to prove wages earned during a certain timeframe.

Gross benefit payments increased by 9.6 percent in 2024 compared with 2023. The increase was largely due to the increase in the maximum weekly benefit rate.

The average weekly benefit amount (AWBA) for all TDI eligible claims during 2024 was \$820, an increase of 4.2 percent compared with 2023 (\$787). The AWBA is not available separately for pregnancy and other claims.

Time Lapse Data

The percentage of initial determinations made within two weeks of receipt of the claim fell to 20.0 percent in 2024 from 46.8 percent in 2023. The two-week time lapse measure dropped below the Disability Insurance Service performance goal of 75 percent for processing initial determinations within two weeks (see Table 7).

The percentage of initial determinations that occurred within four weeks also decreased over the year to 51.9 percent from 78.5 percent in 2023. This second performance measure was below the Disability Insurance Service goal of 90 percent for processing initial determinations within four weeks of receipt of claim.

² Actual data for State Plan and private plan covered employment and employers became available again beginning with the third quarter of 2011 due to the development of a new reporting methodology.

The goals set forth by law for the original determination of Temporary Disability Insurance (TDI) claims have not met the 14-day and 28-day performance thresholds. The Division’s progress towards achieving these goals continues to be a top priority. The primary focus includes a multi-year commitment to modernizing the DABS claims processing system, which was developed in 1989. The limitations of the system impact processing time since it requires staff to complete additional manual processes to address processing needs that cannot be handled or updated in the system itself.

Reasons for Denial

The primary reasons for denial of a claim at original disposition from 2020 to 2024 are shown in Table 8. As in past years, lack of medical evidence was the most frequently cited reason for denial in 2024, comprising 26.2 percent of all reasons for denial.

The next most frequently cited reason for denial was eligibility for benefits under the Disability During Unemployment Program (4(f)).³ This reason was cited in 12.7 percent of all denials. Coverage of a disability by the Workers’ Compensation program and coverage by a private plan were given as reasons for denial in 2.5 percent and 10.2 percent, respectively, of all reasons for denial. Coverage under these three programs comprised about 25 percent of reasons for denial in 2024, increasing slightly from about 22 percent in 2023.

“Other” reasons were cited in 45.4 percent of denials in 2024, compared with 41.3 percent in 2023. “Other” reasons include late filing, employment by an uncovered political subdivision, disability that is the result of committing a crime, disability with duration of less than seven days and state government employment when the individual has accrued sick time available.

Claimant Characteristics

Table 9 highlights claimant characteristics data, including sex, education level and race/ethnicity, for eligible disability claims, pregnancy-related disabilities and non-pregnancy related disabilities. The ineligible claims data were not available for calendar year 2024.

Females represented 72.0 percent of eligible disability claims and 59.3 percent of non-pregnancy related disabilities.

High school graduates were the largest group of claimants by educational level for eligible claims (45.9%) and for non-pregnancy related disabilities (50.4%). For pregnancy related disabilities, high school graduates and individuals with either an associate or bachelor’s degree accounted for 36.1 and 36.5 percent of claims, respectively.

The largest group of total eligible claimants for all claim categories was Caucasian (49.8%), followed by Latino/Hispanic (21.2%), African American (15.2%), Asian (6.6%), Undefined (6.5%), American Indian/Alaskan Native (0.5%) and Native Hawaiian/Pacific Islander (0.2%).

Eligible Claims by Morbidity

The distribution of eligible claims by morbidity (type of injury or illness) has remained fairly stable since 2001 (the first year these data were produced). Table 10 contains data for 2024, along with revised data for 2023.

³ Persons who become disabled while unemployed may be eligible for up to 26 weeks of benefits under the disability during unemployment provisions of the State’s Unemployment Compensation Law (R.S.43:21-4(f)). Individuals also eligible for regular unemployment benefits in a benefit year may receive benefits for up to 39 weeks for the two claims combined.

Claims for benefits due to pregnancy and complications of childbirth were the largest single category of claims again in 2024 out of the 17 major morbidity groups, comprising 31.1 percent of all eligible claims, compared with 30.5 percent in 2023. As in prior years, disabilities related to bones and organs of movement and disabilities resulting from accidents, poisoning and violence were the next most frequently reported categories, based on the physician's initial diagnosis, constituting 16.7 and 11.6 percent, respectively, of all eligible claims in 2024.

Claims for disabilities due to infectious and parasitic diseases (2.7%) comprised slightly lower percentages of total eligible claims in 2024 compared with 2023.

Completed Cases by Morbidity, Duration and Benefits

Table 11 contains a summary of average claim duration and average benefit payment data by major morbidity group for cases which were completed in 2024. Completed cases include those claims formally closed in the TDI database, as well as those with no payment activity for 90 days.

The distribution of completed cases by morbidity has been stable from year to year and there are only minor differences in the percentages of completed cases by morbidity compared with the percentages of eligible claims by morbidity (Table 10). As with eligible claims, pregnancy and complications of childbirth were the largest single category of completed cases in 2024 (30.4%), followed by disabilities related to bones and organs of movement (17.2%) and disabilities resulting from accidents, poisoning and violence (11.7%).

For all morbidities, the average number of days paid per completed case was 70 days in 2024. Average duration has fluctuated between 66 and 71 days since 2001 when the data were first computed. Average gross benefits paid in 2024 increased to \$8,245 from \$7,928 in 2023.

TDI Revenues, Benefits and Administrative Expenses

Table 12 contains a summary of State Plan revenues, benefits and administrative expenses during 2024 and 2023. The State Plan for TDI is financed by a combination of worker and employer contributions, which in 2024 totaled \$1.3 and \$327.7 million, respectively. During 2024, worker contributions decreased by \$42.8 million compared with 2023. The worker contribution rate was set at 0.0 percent during 2024 and 2023. The State Disability Fund had \$37.7 million in other income during 2024, including interest income.

Total TDI State Plan benefits paid during 2024 were \$671.0 million, with benefit payments for disability during unemployment of \$24.7 million. TDI administrative expenses were \$44.4 million during 2024.

The total number of personnel in the division is 192. The total cost of salaries and benefits for those personnel in fiscal year 2024 was approximately \$29,312,161. The number of personnel who are processing TDI claims is 48 with an approximate budgeted cost of salaries and benefits of \$14,908,428.

The personnel cost of staff who are solely processing TDI claims is 25% of the Division's total administrative cost, which in fiscal year 2024 was \$64,414,620. The maximum administrative amount permitted is \$10 million over the appropriated budgeted administrative amount per fiscal year, but this amount is subject to the approval of the Director of the Division of Finance and Accounting.

Strategic Plan and Outreach for the Temporary Disability and Family Leave Insurance Program

NJDOL continues our commitment to provide timely and accessible program information to claimants. Building on initiatives launched since 2018, we continue to simplify and clarify the claims process through updated forms, enhanced information on webpages, and incorporating stakeholder feedback.

In early 2023, the Division contracted with a third-party vendor to supply a much-needed call center to improve the availability of live agents to connect with customers. Simultaneously, the Division is improving its current Interactive Voice Response (IVR) to direct callers to a live agent or, if possible, automated services. In 2024, the contract with the third-party vendor continued as wait times had been dramatically decreased due to systematic changes made within the IVR and the claims processing system. Wait times were consistently over 45 minutes; these were reduced to 1-2 minutes in 2024.

In 2023, the Division began the process of modernizing the current, nearly 40-year-old claims processing system. As anticipated, this modernization is a multi-year endeavor and continued throughout 2024. The complete overhaul and replacement of the current claims processing system, DABS, is expected to allow the Division to continue to improve the speed at which claims are processed to meet legislative expectations.

[MyLeaveBenefits.nj.gov](https://myleavebenefits.nj.gov) provides comprehensive information on Temporary Disability and Family Leave Insurance, along with guidance on the application process. With the New Jersey Office of Innovation, NJDOL has integrated digital tools and resources using a human-centered design approach to aid users during the application process. The fully revamped [Claim Status Tool](#) was launched in early May 2024, followed by a second wave of upgrades in early August 2024, which boosted user satisfaction by 30% and attracted an average of 23,000 visitor sessions per week by December 2024. Building on this partnership, NJDOL and the New Jersey Office of Innovation continue to make iterative improvements to the claim status tool and other aspects of the application experience and benefit service delivery, guided by customer feedback.

Between January 1, 2024 and December 31, 2024, the website metrics were as follows:

Website Metrics

Page Visits/Page Views from January 1st, 2024 – December 31st, 2024		
Page	Audience	Views
Main MyLeaveBenefits,nj.gov webpage	General	2,464,519
Temporary Disability Insurance Information	Workers	1,442,413
Family Leave Insurance Information	Workers	937,961
Maternity Coverage Information	Workers	869,034
Maternity Leave Timeline Tool Welcome Page	Workers	96,931
What Happens After I Apply	Workers	147,826
How to Apply Application Video: TDI	Workers	40,311
How to Apply Application Video: FLI	Workers	29,912
Information for Victims/Survivors of Domestic and Sexual Violence	Workers	3,000
Employer Toolkit	Employers	12,639

Early in 2022, the Division established an Outreach Team that provides information to employees and employers through engagement events and speaking requests. The team also presents to medical providers and other stakeholders on ways to support patients applying for benefits.

In 2024, the Outreach Team continued to attend events which were targeted towards healthcare providers and those who provide support through the maternity leave process. The team also proactively engaged with healthcare providers, such as OB/GYNs, to assist them in providing much needed information to those who are pregnant or planning to have a child soon. They also focused on employers/community-based support to provide the same information to help them understand the current TDI/FLI claim process.

As mandated under P.L. 2019, chapter 37, in June 2024 (Fiscal Year 2024) NJDOL awarded \$800,000 in grant funds to community-based organizations to conduct culturally relevant and language-specific outreach and education on TDI/FLI to workers, employers, and service providers, through the Cultivating Access Rights and Equity (CARE) program. The grant aims to increase equitable awareness of and access to TDI/FLI and develop community feedback loops to improve these programs.

For the Fiscal Year 2024 grant, which ended June 30, 2025, grantees made over 63,000 direct contacts with workers and over 2,200 with employers through outreach, education and technical assistance.

Organizations establish their deliverables based on their specific outreach and technical assistance (TA) methods, community needs, and capacity. Direct outreach tactics varied widely, including sharing information at community events, hosting workshops, conducting text campaigns, and phone banking. Grantees reached hundreds of thousands more with social media, advertising and mass messaging, including radio and newspaper ads in language-specific local outlets. They provided support to individuals completing TDI/FLI applications, through translation and other troubleshooting support.

Over 280 staff members at CARE grant organizations received training in TDI/FLI. These trainings prepare community-based organizations to sustain paid leave, outreach and education. Grantees provided information and/or services to NJ residents in Arabic, Bengali, Chinese, English, French, Gujarati, Haitian Creole, Hebrew, Hindi, Korean, Portuguese, Spanish, Tagalog, Urdu, Vietnamese, and Yiddish, as well as American Sign Language.

Definitions of Terms

Completed Cases – Includes those claims formally closed during the year, as well as those with no payment activity for 90 days.

Formally Closed Claims – Those claims that have been paid to benefit exhaustion, to the 180-day maximum claim duration, or until the claimant recovered, returned to work or died. If notification of recovery, return to work or death is not received, then the claim is not formally closed.

Maximum Weekly Benefit Amount – For disability claims prior to July 1, 2020, the maximum weekly benefit amount was set each year at 53 percent of the statewide average weekly wage (SAWW) in the second preceding calendar year. Beginning July 1, 2020, the maximum weekly benefit amount was set at 70 percent of the SAWW. The maximum weekly benefit amount for 2024 was \$1,055.

State Plan Covered Employees – Employee coverage is the average of covered jobs in the last month of each of the four quarters in the year and includes all workers covered by the State Plan as well as the State Plan portion of combination plans.

State Plan Covered Employers – Employer coverage is the annual average and excludes firms with a combination of State and private plans.

Table 1
FAMILY LEAVE INSURANCE SUMMARY REPORT
Calendar Years 2020 - 2024

	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Total New Claims Received	61,486	68,421	70,991	77,090	77,723
Paper Claims Received (FL1)	17,918	16,977	14,383	13,850	12,975
Web Claims Received (WF1)	32,328	38,015	42,007	46,844	46,767
Web Claims Received (FL2) *	11,240	13,429	14,601	16,396	17,981
Total Initial Dispositions	50,677	52,577	67,252	69,377	73,089
Eligible	41,833	46,160	52,931	53,338	57,458
Ineligible	8,844	6,417	14,321	16,039	15,631
Initial Claims Determined Ineligible Due to Missing Information					
Missing Both Claimant and Medical Information	8,927	11,965	16,177	17,457	18,190
Missing Claimant Information	6,256	4,150	2,654	2,866	3,405
Missing Medical Information	3,009	1,795	2,349	3,009	2,891
Gross Benefit Payments (millions)**	\$187.1	\$334.8	\$417.1	\$476.5	\$511.5
Average Weekly Benefit Amount	\$659	\$782	\$841	\$878	\$911
Maximum Weekly Benefit Amount***	\$667/\$881	\$903	\$993	\$1,025	\$1,055
Number of Claimants with both TDI & FLI Claims in Same Year	12,725	16,269	21,533	24,076	24,422

* FL2 claims are now correctly reported as web claims and not as part of paper claims as in prior reports.

** Gross Benefit Payments for 2024 include any payments from 2023 claims that were made in 2024.

*** Maximum weekly benefit rate for January 1 - June 30, 2020 calculated as 53% of Statewide Average Weekly Wage.

*** Maximum weekly benefit rate for July 1 - December 31, 2020, Calendar Years 2021 - 2024 is calculated as 70% of Statewide Average Weekly Wage.

Table 2
FAMILY LEAVE INSURANCE SUMMARY REPORT
TIME LAPSE CLAIM DISTRIBUTION
Eligible and Ineligible Decisions
Calendar Years 2020 - 2024

<u>Number of Days</u>	<u>2020</u>		<u>2021</u>		<u>2022</u>		<u>2023</u>		<u>2024</u>	
	<u>Number</u>	<u>Cumulative Percent</u>								
7 or less	22,069	41.7%	18,088	31.8%	17,492	26.1%	23,371	33.7%	15,380	21.0%
8 - 14	15,498	70.9	20,013	67.0	11,321	43.0	18,408	60.2	4,157	26.7
15 – 21	6,685	83.5	9,638	83.9	16,990	68.4	17,683	85.7	35,159	74.8
22 – 28	3,184	89.5	3,794	90.6	7,580	79.7	4,775	92.6	11,303	90.3
29 – 35	3,705	96.5	2,768	95.4	6,179	89.0	2,661	96.4	2,800	94.1
36 – 43	856	98.1	1,719	98.4	3,507	94.2	1,537	98.7	2,367	97.4
44 – 49	510	99.1	558	99.4	2,175	97.5	554	99.5	1,156	99.0
50 – 56	214	99.5	192	99.8	718	98.5	227	99.8	419	99.5
57 or more	261	100.0	135	100.0	980	100.0	151	100.0	334	100.0
TOTAL CASES	52,982		56,905		66,942		69,367		73,075	

Table 3
FAMILY LEAVE INSURANCE SUMMARY REPORT
REASONS FOR DENIAL
Calendar Years 2020 - 2024

<u>Reason for Denial</u>	<u>2020</u>		<u>2021</u>		<u>2022</u>		<u>2023</u>		<u>2024</u>	
	<u>Number</u>	<u>Percent</u>								
4 (f) Family Leave During Unemployment	1,085	3.1%	1,093	3.4%	1,540	4.0%	1,698	3.9%	1,883	4.4%
Insufficient Weeks or Wages	303	0.9	362	1.1	506	1.3	363	0.8	345	0.8
Medical Evidence Not Submitted	5,822	16.5	4,730	14.8	5,590	14.5	6,330	14.7	5,703	13.3
Workers' Compensation Coverage	15	0.0	23	0.1	13	0.0	22	0.1	30	0.1
Private Plan Coverage	21	0.1	25	0.1	43	0.1	53	0.1	79	0.2
Receipt of Continuation Pay from Employer	13	0.0	18	0.1	11	0.0	17	0.0	26	0.1
Other Reasons*	28,121	79.5	25,628	80.4	30,904	80.0	34,676	80.3	34,765	81.2
TOTAL CASES	35,380	100.0	31,879	100.0	38,607	100.0	43,159	100.0	42,831	100.0

*Other reasons include late filing and employment by an uncovered governmental agency.

**Table 4
FAMILY LEAVE INSURANCE SUMMARY REPORT
ELIGIBLE CLAIM STATISTICS BY TYPE OF CLAIM
Calendar Year 2024**

	Bonding Newborn	Bonding Adopted Child	Total Bonding Claims		Care of a Sick Child	Care of a Sick Spouse	Care of Other Sick Family Members	Total Family Care Claims		Total Eligible**** Family Leave Claims	
	Number	Number	Number	Percent	Number	Number	Number	Number	Percent	Number	Percent
Number of Claims*	52,845	185	53,030	100.0%	2,441	2,862	5,221	10,524	100.0%	63,554	100.0%
Number of Intermittent Claims**	20,062	102	20,164		1,614	1,842	3,347	6,803			
Sex											
Male	17,237	55	17,292	32.6	408	1,338	1,463	3,209	30.5	20,501	32.3
Female	35,608	130	35,738	67.4	2,033	1,524	3,758	7,315	69.5	43,053	67.7
Education											
Did Not Graduate High School	770	2	772	1.5	117	155	156	428	4.1	1,200	1.9
High School Graduate/GED	15,964	71	16,035	30.2	1,032	1,397	2,081	4,510	42.9	20,545	32.3
Associate/Bachelor Degree	20,813	61	20,874	39.4	815	851	1,845	3,511	33.4	24,385	38.4
Graduate Degree	13,754	45	13,799	26.0	354	286	831	1,471	14.0	15,270	24.0
Undefined	1,544	6	1,550	2.9	123	173	308	604	5.7	2,154	3.4
Race/Ethnicity											
Caucasian	30,217	103	30,320	57.2	1,017	1,465	2,143	4,625	43.9	34,945	55.0
African American	6,040	43	6,083	11.5	424	335	841	1,600	15.2	7,683	12.1
Latino/Hispanic	9,986	28	10,014	18.9	661	559	1,129	2,349	22.3	12,363	19.5
Asian	5,100	7	5,107	9.6	253	376	887	1,516	14.4	6,623	10.4
Native Hawaiian/Pacific Islander	136	0	136	0.3	13	5	16	34	0.3	170	0.3
American Indian/Alaskan Native	235	0	235	0.4	7	9	10	26	0.2	261	0.4
Undefined	1,131	4	1,135	2.1	66	113	195	374	3.6	1,509	2.4
Gross Benefits Paid (millions)***	\$398.7	\$1.2	\$399.9		\$10.2	\$13.0	\$23.8	\$47.0		\$446.9	
Average Days Paid Per Claim	69	62	69		42	46	46	45		65	
Average Weekly Benefit Amount	\$924	\$938	\$925		\$857	\$885	\$890	\$881		\$917	

*Claims for domestic/sexual violence are submitted by paper only and data are not available.
**Number of Intermittent Claims include both Eligible and Ineligible.
***Gross Benefits Paid for Total Family Leave Claims includes only 2024 claims and payments made on the 2024 claims.
**** Total All Family Leave Claims, including Ineligible Claims data, were not available for Calendar Year 2024.

TABLE 5
FAMILY LEAVE INSURANCE SUMMARY REPORT – STATE PLAN
REVENUES, BENEFITS AND EXPENSES
(Millions)
Calendar Years 2023 and 2024

	<u>2023</u>	<u>2024</u>
<u>FLI Income</u>		
FLI Worker Contributions	\$212.1	\$241.2
Other Income (including interest)	\$16.2	\$4.7
Total FLI Income	\$228.3	\$245.9
<u>FLI Benefits and Expenses</u>		
FLI State Plan Benefit Payments	\$497.1	\$548.7
Benefit Payments for Family Leave During Unemployment	\$2.9	\$4.0
FLI Administrative Expenses	\$18.8	\$20.0
Total FLI Benefits and Expenses	\$518.8	\$572.7

Table 6
TEMPORARY DISABILITY INSURANCE SUMMARY REPORT
Calendar Years 2020 - 2024

	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Total New Claims Received	136,401	160,119	138,666	131,109	138,838
Paper Claims Received (DS1)	60,139	56,849	46,026	41,378	41,475
Web Claims Received (WD1)	76,262	103,270	92,640	89,731	97,363
Total Initial Dispositions	102,989	122,907	125,661	109,768	129,677
Eligible	69,038	81,844	56,441	56,632	70,340
Ineligible	33,951	41,063	69,220	53,136	59,337
Initial Claims Determined Ineligible Due to Missing Information					
Missing Both Claimant and Medical Information	25,206	27,637	29,251	28,918	30,090
Missing Claimant Information	6,010	12,612	12,611	12,005	12,391
Missing Medical Information	7,557	9,354	9,802	8,997	9,455
Gross Benefit Payments (millions)	\$432.9	\$533.7	\$567.1	\$615.0	\$674.1
Average Weekly Benefit Amount	\$562	\$701	\$750	\$787	\$820
Maximum Weekly Benefit Amount*	\$667/\$881	\$903	\$993	\$1,025	\$1,055
Number of Claimants with both TDI & FLI Claims in Same Year	12,725	16,269	21,533	24,076	24,422

* Maximum weekly benefit rate for January 1 - June 30, 2020 calculated as 53% of Statewide Average Weekly Wage.
* Maximum weekly benefit rate for July 1 - December 31, 2020 calculated as 70% of Statewide Average Weekly Wage.
* Maximum weekly benefit rate for Calendar Year 2021-2024 calculated as 70% of Statewide Average Weekly Wage.

Table 7
TEMPORARY DISABILITY SUMMARY REPORT
TIME LAPSE CLAIM DISTRIBUTION
Eligible and Ineligible Decisions
Calendar Years 2020 - 2024

<u>Number of Days</u>	<u>2020</u>		<u>2021</u>		<u>2022</u>		<u>2023</u>		<u>2024</u>	
	<u>Number</u>	<u>Cumulative Percent</u>								
7 or less	26,850	24.0%	36,783	29.1%	23,488	18.7%	11,905	11.0%	5,157	4.0%
8 - 14	47,348	66.4	49,988	68.6	39,505	50.1	38,542	46.8	20,788	20.0
15 - 21	18,857	83.3	17,232	82.3	36,561	79.2	22,083	67.3	12,653	29.8
22 - 28	5,743	88.4	10,437	90.5	12,067	88.8	12,137	78.5	28,666	51.9
29 - 35	5,078	93.0	7,707	96.6	7,961	95.2	8,926	86.8	25,917	71.9
36 - 43	2,910	95.6	1,646	97.9	2,964	97.5	6,738	93.0	15,535	83.8
44 - 49	2,192	97.6	897	98.6	1,391	98.6	4,248	97.0	10,473	91.9
50 - 56	969	98.4	571	99.1	781	99.2	1,821	98.7	4,852	95.7
57 or more	1,767	100.0	1,185	100.0	944	100.0	1,434	100.0	5,636	100.0
TOTAL CASES	111,714		126,446		125,662		107,834		129,677	

Table 8
TEMPORARY DISABILITY INSURANCE SUMMARY REPORT
REASONS FOR DENIAL
Calendar Years 2020 - 2024

<u>Reason for Denial</u>	<u>2020</u>		<u>2021</u>		<u>2022</u>		<u>2023</u>		<u>2024</u>	
	<u>Number</u>	<u>Percent</u>								
4 (f) Family Leave During Unemployment	12,441	12.6%	16,835	15.0%	11,242	10.4%	10,113	11.9%	11,603	12.7%
Insufficient Weeks or Wages	1,914	1.9	2,555	2.3	3,224	3.0	1,940	2.3	2,168	2.4
Medical Evidence Not Submitted	30,784	31.2	35,879	32.0	33,121	30.6	28,257	33.4	23,985	26.2
Workers' Compensation Coverage	3,310	3.4	3,154	2.8	2,176	2.0	1,465	1.7	2,254	2.5
Private Plan Coverage	7,053	7.1	8,249	7.4	9,224	8.5	7,312	8.6	9,325	10.2
Receipt of Continuation Pay from Employer	987	1.0	991	0.9	747	0.7	602	0.7	708	0.8
Other Reasons*	42,252	42.8	44,387	39.6	48,379	44.7	34,989	41.3	41,668	45.4
TOTAL REASONS FOR DENIAL	98,741	100.0	112,050	100.0	108,113	100.0	84,678	100.0	91,711	100.0

*Other reasons include late filing, state government employment when the individual has accrued sick time available, employment by an uncovered political subdivision, disability resulting from commission of a crime and disability with duration of less than 7 days

Table 9
TEMPORARY DISABILITY INSURANCE SUMMARY REPORT
ELIGIBLE CLAIM STATISTICS BY TYPE OF CLAIM
Calendar Year 2024

	<u>Total Eligible Disability Claims*</u>		<u>Pregnancy Related Disabilities</u>		<u>Non-Pregnancy Related Disabilities</u>	
	Number	Percent	Number	Percent	Number	Percent
Total Number of Claims	82,497	100.0%	25,844	100.0%	56,653	100.0%
Sex						
Male	23,072	28.0	42	0.2	23,030	40.7
Female	59,425	72.0	25,802	99.8	33,623	59.3
Education						
Did Not Graduate High School	3,882	4.7	468	1.8	3,414	6.0
High School Graduate/GED	37,891	45.9	9,330	36.1	28,561	50.4
Associate/Bachelor Degree	24,662	29.9	9,437	36.5	15,225	26.9
Graduate Degree	10,098	12.2	5,639	21.8	4,459	7.9
Undefined	5,964	7.2	970	3.8	4,994	8.8
Race/Ethnicity						
Caucasian	41,066	49.8	13,851	53.6	27,215	48.0
African American	12,504	15.2	3,155	12.2	9,349	16.5
Latino/Hispanic	17,524	21.2	5,412	20.9	12,112	21.4
Asian	5,406	6.6	2,037	7.9	3,369	5.9
Native Hawaiian/Pacific Islander	189	0.2	66	0.3	123	0.2
American Indian/Alaskan Native	420	0.5	210	0.8	210	0.4
Undefined	5,388	6.5	1,113	4.3	4,275	7.5

*Total All Temporary Disability Claims, including Ineligible Claims data, were not available for Calendar Year 2024.

Table 10
TEMPORARY DISABILITY INSURANCE SUMMARY REPORT
MORBIDITY DATA FOR ELIGIBLE NEW CLAIMS
Calendar Years 2023 and 2024

<u>Major Morbidity Group (code)</u>	<u>2023</u> (REVISED)		<u>2024</u>	
	<u>Number of Cases</u>	<u>Percent of Cases</u>	<u>Number of Cases</u>	<u>Percent of Cases</u>
Infectious and parasitic diseases (01)	2,478	3.1%	2,370	2.7%
Neoplasms (02)	5,754	7.3	6,257	7.2
Allergic, endocrine, metabolic and nutritional (03)	1,658	2.1	1,695	2.0
Diseases of blood and blood forming organs (04)	210	0.3	207	0.2
Mental, psychoneurotic and personality disorders (05)	5,579	7.1	6,228	7.2
Nervous system and sense organs (06)	2,820	3.6	2,976	3.4
Circulatory system (07)	3,717	4.7	3,814	4.4
Respiratory system (08)	1,425	1.8	1,443	1.7
Digestive system (09)	4,305	5.5	4,763	5.5
Genitourinary system (10)	1,776	2.3	2,027	2.3
Pregnancy and complications of childbirth (11)	24,085	30.5	27,024	31.1
Skin and cellular tissue (12)	568	0.7	657	0.8
Bones and organs of movement (13)	13,216	16.7	14,510	16.7
Congenital malformations (14)	58	0.1	80	0.1
Hysterectomy (15)	799	1.0	944	1.1
Accidents, poisoning and violence (17)	8,863	11.2	10,067	11.6
Other ill-defined and unknown causes (16 & 18)	1,606	2.0	1,817	2.1
Total	78,917	100.0%	86,879	100.0%
Total non-pregnancy/childbirth	54,832	69.5%	59,855	68.9%

Table 11
TEMPORARY DISABILITY INSURANCE SUMMARY REPORT
MORBIDITY DATA FOR COMPLETED CASES
Calendar Year 2024

<u>Major Morbidity Group (code)</u>	<u>Number of Cases*</u>	<u>Percent of Cases</u>	<u>Average Duration (days)</u>	<u>Average Gross Benefits</u>	<u>Total Gross Benefits (Millions)</u>
Infectious and parasitic diseases (01)	2,538	2.8%	65	\$7,805	\$19.8
Neoplasms (02)	6,778	7.4	79	9,483	64.3
Allergic, endocrine, metabolic and nutritional (03)	1,789	1.9	57	6,504	11.6
Diseases of blood and blood forming organs (04)	215	0.2	72	8,255	1.8
Mental, psychoneurotic and personality disorders (05)	6,711	7.3	76	9,326	62.6
Nervous system and sense organs (06)	3,144	3.4	70	8,228	25.9
Circulatory system (07)	4,137	4.5	88	10,429	43.1
Respiratory system (08)	1,499	1.6	49	5,551	8.3
Digestive system (09)	4,914	5.3	46	5,418	26.6
Genitourinary system (10)	2,114	2.3	54	6,177	13.1
Pregnancy and complications of childbirth (11)	28,023	30.4	61	7,075	198.3
Skin and cellular tissue (12)	680	0.7	57	6,725	4.6
Bones and organs of movement (13)	15,840	17.2	86	10,069	159.5
Congenital malformations (14)	90	0.1	104	11,937	1.1
Hysterectomy (15)	967	1.0	49	5,456	5.3
Accidents, poisoning and violence (17)	10,820	11.7	81	9,133	98.8
Other ill-defined and unknown causes (16 & 18)	1,949	2.1	69	8,006	15.6
Total	92,208	100.0%	70	\$8,245	\$760.2
Total non-pregnancy/childbirth	64,185	69.6%	75	\$8,755	\$561.9

* Completed cases include those claims formally closed in the TDI database in 2024, as well as those with no payment activity for 90 days.

TABLE 12
TEMPORARY DISABILITY INSURANCE SUMMARY REPORT – STATE PLAN
REVENUES, BENEFITS AND EXPENSES
(Millions)
Calendar Years 2023 and 2024

	<u>2023</u>	<u>2024</u>
<u>TDI Income</u>		
TDI Worker Contributions	\$44.1	\$1.3
TDI Employer Contributions	\$318.4	\$327.7
Other Income (including interest)	\$59.5	\$37.7
Total TDI Income	\$422.0	\$366.7
<u>TDI Benefits and Expenses</u>		
TDI State Plan Benefit Payments	\$610.6	\$671.0
Benefit Payments for Disability During Unemployment	\$22.4	\$24.7
TDI Administrative Expenses	\$36.5	\$44.4
Total TDI Benefits and Expenses	\$669.5	\$740.1