PFML Employee Toolkit

Paid Family and Medical Leave, or PFML, is a benefit program for Massachusetts employees offered by the Commonwealth. This guide will help you understand the program and the application process.
Inside

01 What is PFML?
02 Who is covered under PFML, and who is not?
03 What can PFML be used for?
06 What do I need to do before I apply?
07 What documents do I need?
11 How do I apply for PFML?
14 What happens after I apply?
PFML is a Commonwealth program designed to give Massachusetts employees the resources to manage their own serious health condition, the serious health condition of a family member, the affairs of a family member on active duty, or to bond with a child.

You are eligible if you work in Massachusetts with an employer who is contributing to the program on your behalf and you need to take time off to care for yourself or a family member. Most Massachusetts employers must either participate in the state PFML plan or a private equivalent.

You can receive benefits for up to 26 weeks in a benefit year.

PFML benefits are funded by contributions on every dollar of wages earned by an employee who is covered by the program.
Who is covered under PFML, and who is not?

Generally, PFML coverage is available to all W-2 employees who work in Massachusetts, whether full-time, part-time, or seasonal, as well as some 1099-MISC contractors. If you have questions about your PFML eligibility, ask your employer.

You’re covered by the PFML law if:

- You’re an employee working for a Massachusetts business or a state agency.

- You’re a contractor who receives a 1099-MISC tax form from a business that issues 1099-MISC tax forms to more than 50% of its workforce.

- Your employer doesn’t have a private paid leave plan exemption that has been approved by the Department of Family and Medical Leave.

- You’re a former employee who has been unemployed for 26 weeks or fewer.

Earnings requirement

Additionally, you must meet DFML’s earning requirement. If you have earned at least $5,700 during the last 4 completed calendar quarters, and at least 30 times more than how much you are eligible to get each week in benefits, you meet the criteria. Use our calculator to see if you meet PFML’s earnings requirement.

Financial eligibility is determined using all wages during your base period, even if you have multiple jobs or worked for more than one employer. If you have more than one job and are approved for benefits, however, your actual benefit amount will be based on the wages you have received from the employer or employers from whom you are taking leave.

Opting-in if you are self-employed:

- If you are self-employed or a 1099-MISC contractor for a business that does not cover contractors for PFML because 1099-MISC contractors make up less than 50% of the business’s workforce, you can choose to opt-in to the PFML program through MassTaxConnect.

Municipalities, districts, political subdivisions, housing authorities, regional school districts, and regional planning commissions are types of employers that are excluded from PFML eligibility, but may opt-in through a vote of their governing body or committee. Charter schools are not considered municipalities and, therefore, are not excluded from PFML eligibility. Additionally, certain types of work are automatically excluded from PFML, including:

- Work performed for a son, daughter, or spouse
- If under 18 years old, work performed for one’s father or mother
- Work performed by inmates of penal institutions
- Independent contractors as defined by this three-part test
- Employment in the railroad industry
- Work provided by real estate brokers/salespeople and insurance agents/solicitors in commission-only jobs
- Newspaper sales and delivery by persons under 18
- Employment by churches and certain religious organizations
- Work done by work-study students, student nurses, and interns, or those in work trainee programs administered by non-profit or public institutions
What can PFML be used for?

Family leave to bond with a child

Family leave can be taken by a parent or legal guardian to bond with a child during the first 12 months after the child’s birth, adoption, or foster care placement.

Eligibility for family leave to bond with a child is limited to the child’s parents or legal guardians. Certain family members may be eligible to take family leave for caring for a child that has a serious medical condition.

As a parent or legal guardian, you can take up to 12 weeks of family leave to bond with a child per year. The annual 12-week maximum stays the same even if you have multiple childbirths, adoptions, or foster care placements in the same year. You and your partner may choose to take family leave to bond with the child at the same time, or separately. You must complete your leave before the child’s first birthday, or the one-year anniversary of their adoption or foster care placement. For example, if your child is born on February 1, 2022, you must complete your family leave to bond with a child before February 1, 2023.

Family leave to care for a family member with a serious health condition

For the purposes of leave to care for a family member with a serious health condition, family members include:

- Your spouse or domestic partner
- Your children
- Your parents
- Your spouse or domestic partner’s parents
- Your grandchildren
- Your grandparents
- Your siblings

Activities

When caring for a family member with a serious health condition, activities can include but are not limited to:

- Making financial or legal arrangements for a deployed family member
- Attending counseling
- Attending military events or ceremonies
- Spending time with a deployed family member during a rest or recuperation period
- Spending time with a family member when they return from deployment
- Making necessary arrangements following the death of a family member who had been deployed
-Making necessary arrangements following the death of a family member who had been deployed

Examples

You can take leave to care for a family member for a variety of situations. Examples include:

- If your mother is having a hip replacement and needs help getting to and from physical therapy, you can take reduced leave, and work fewer hours per day, or fewer days per week in order to help her.
- If your spouse is having surgery followed by extensive recuperation where they won’t be able to shower without assistance, you can take up to 12 weeks of continuous leave to help them out.
- If your child is undergoing chemotherapy and has bouts of nausea, weakness, and pain, you can take intermittent leave when you need to care for them.

Family leave to manage family affairs for active service members

You can take time off to manage any needs that take place immediately after a family member is deployed or has been notified of an upcoming deployment. These needs may include:

- Caring for a deployed family member’s child or other family member immediately before their deployment
**Leave schedules:**

**Continuous leave:**
A single time period of consecutive, uninterrupted days

**Reduced leave:**
A consistent but reduced schedule for multiple weeks

**Intermittent leave:**
Multiple episodes of time off, which may be irregular or unexpected

---

**Medical leave to manage your own serious health condition**

**What is a serious health condition?**

A serious health condition is a physical or mental condition that prevents you from doing your job for more than 3 consecutive full calendar days, and requires:

- 2 or more treatments by a health care provider (in-person or during telehealth visit) within 30 calendar days of an inability to perform your duties, or
- Overnight stay in a hospital, hospice, or medical facility, or
- At least 1 treatment by a health care provider within 30 days of an inability to perform your duties, with plans for continued treatment, including prescriptions

**Serious health conditions can include:**

- Chronic conditions, like asthma or diabetes, that stop you from working some of the time, go on for some time, and require going to the doctor more than twice a year
- Permanent or long-term conditions, like Alzheimer’s disease, stroke, or terminal cancer, that might not be curable and will need ongoing attention but will not necessarily require active treatment. For example, when a person is in hospice
- Conditions requiring multiple treatments, like chemotherapy, kidney dialysis, or physical therapy after an accident
- Conditions due to pregnancy or post-birth recovery that prevent you from working, as certified by a health care provider
- Complications related to a diagnosis of COVID-19 that prevent you from working, as certified by a health care provider
- Cosmetic surgery is not considered a serious condition and is not covered for family or medical leave unless inpatient hospital care is required or unless complications develop
- Substance Use Disorder may be considered a serious condition covered by family or medical leave if the patient is receiving treatment from a health care provider, by a provider of health care services on referral by a health care provider, or by a program licensed by the MA Department of Public Health

---

**Family leave to care for an active service member**

You can take up to 26 weeks of family leave per year to care for a family member who is a current member of the Armed Forces, including the National Guard and Reserves, who is:

- Undergoing medical treatment, recuperation, or therapy for a serious health condition that was received or aggravated while they were deployed
- In outpatient status for a serious health condition that was received or aggravated while they were deployed
- On the temporary disability retired list for a serious injury or illness that happened while deployed
- On the temporary disability retired list for a serious injury or illness that existed before the beginning of the member’s active duty, and was aggravated by service while deployed

---

**Medical leave to manage your own serious health condition**

**What is a serious health condition?**

A serious health condition is a physical or mental condition that prevents you from doing your job for more than 3 consecutive full calendar days, and requires:

- 2 or more treatments by a health care provider (in-person or during telehealth visit) within 30 calendar days of an inability to perform your duties, or
- Overnight stay in a hospital, hospice, or medical facility, or
- At least 1 treatment by a health care provider within 30 days of an inability to perform your duties, with plans for continued treatment, including prescriptions

**Serious health conditions can include:**

- Chronic conditions, like asthma or diabetes, that stop you from working some of the time, go on for some time, and require going to the doctor more than twice a year
- Permanent or long-term conditions, like Alzheimer’s disease, stroke, or terminal cancer, that might not be curable and will need ongoing attention but will not necessarily require active treatment. For example, when a person is in hospice
- Conditions requiring multiple treatments, like chemotherapy, kidney dialysis, or physical therapy after an accident
- Conditions due to pregnancy or post-birth recovery that prevent you from working, as certified by a health care provider
- Complications related to a diagnosis of COVID-19 that prevent you from working, as certified by a health care provider
- Cosmetic surgery is not considered a serious condition and is not covered for family or medical leave unless inpatient hospital care is required or unless complications develop
- Substance Use Disorder may be considered a serious condition covered by family or medical leave if the patient is receiving treatment from a health care provider, by a provider of health care services on referral by a health care provider, or by a program licensed by the MA Department of Public Health

---

**Family leave to care for an active service member**

You can take up to 26 weeks of family leave per year to care for a family member who is a current member of the Armed Forces, including the National Guard and Reserves, who is:

- Undergoing medical treatment, recuperation, or therapy for a serious health condition that was received or aggravated while they were deployed
- In outpatient status for a serious health condition that was received or aggravated while they were deployed
- On the temporary disability retired list for a serious injury or illness that happened while deployed
- On the temporary disability retired list for a serious injury or illness that existed before the beginning of the member’s active duty, and was aggravated by service while deployed
When taking PFML, you can choose three different ways to schedule your leave and also mix and match from these types to fit your needs.

You need to work with your employer to get approval for a period during which you plan to take intermittent leave. Once your application is approved and you go on leave, you will need to call the Contact Center at (833)-344-7365 each week to report the hours that you ended up using for intermittent leave.

Understanding the different ways you can schedule your leave

Continuous leave
This is when you’re taking leave from work completely for days or weeks at a time. For example, if you have surgery, you may need several continuous weeks of paid leave to recover.

Reduced leave
This is when you are working a reduced schedule. If you normally work 8am-5pm, Monday through Friday, and your partner recently had a baby, you may want to work 3 days per week, to bond with and care for your child.

Intermittent leave
This is when you need to take time off here and there, sometimes in unpredictable increments. If you are undergoing chemotherapy, you may want to take off for the days when you receive treatment, and for the 3 days afterwards, to recover. You may also find that some days you need to leave work early, or come in late.

You need to work with your employer to get approval for a period during which you plan to take intermittent leave. Once your application is approved and you go on leave, you will need to call the Contact Center at (833)-344-7365 each week to report the hours that you ended up using for intermittent leave.
What do I need to do before I apply?

Talk with your employer

You must notify your employer at least 30 days prior to your intended leave before you begin the application process.

Communicating with your employer is an important part of advancing your application. You should not start an application until you have talked to your employer.

• If you are applying to take paid family or medical leave for a planned event, like an elective surgery, you must give your employer at least 30 days’ notice before beginning your application.

• If you are taking leave for an unexpected or unplanned life event, you should notify your employer as soon as possible before beginning your application for paid leave.

• Make sure to not only communicate what type of leave you are taking (family or medical) but the type of leave schedule (continuous, reduced, or intermittent), and any other relevant details.

Confirm that your organization has a registered leave administrator with DFML:

• A leave administrator is the person responsible for reviewing and processing employee claims on behalf of an organization. If your employer did not register a leave administrator with DFML, this may cause delays in processing your application.

• When you communicate with your employer, ask who the leave administrator is so you can follow up with questions.
What documents do I need?

Tips to keep in mind:

01 When you apply for paid family or medical leave, you will need to provide some information about your situation so we can verify the details of your application. The verification documents will vary, depending on the type of leave you are taking.

02 Copies need to be legible. For identification, they need to be in color and the front and back copied.

03 Forms need to be filled out completely and accurately.

Proof of identity

When applying for paid family or medical leave, you'll be asked to upload proof of your identity to double-check that you are eligible, and to make sure that we send benefits to the right person.

1. You must include both the FRONT and BACK of the document for it to be accepted.

2. Document copies must be IN COLOR and ONLY PDF or .jpg, .jpeg, .png IMAGE FILES are accepted. We are not able to accept .heic (the default image file for iPhones) at this time.

3. Color documents must be uploaded or mailed as we cannot accept color faxes at this time.

4. Files must be smaller than 4.5 MB.

Learn more about document requirements and formatting for upload.

The easiest way to provide proof of identity is a color copy of your Massachusetts Driver's License or ID Card. If you don't have a Massachusetts Driver's License or ID Card, you will need to provide ONE of the following documents for ID proofing:

- A valid, unexpired U.S. State or Territory Real-ID License or ID Card
- A valid, unexpired U.S. State or Territory Standard License (also called a Standard Driver's License) or ID Card
- A valid, unexpired Massachusetts Junior Operating License
- A valid, unexpired Massachusetts Commercial Driver's License
- A valid, unexpired Massachusetts Limited Term License
- A valid, unexpired Massachusetts Not for Federal Use License
- A valid, unexpired Massachusetts Tribal ID Card
- A valid, unexpired U.S. Passport or Passport Card (the copy should include both the page with identifying information AND the signature page)
- A valid, unexpired Permanent Resident Card (Form I-551) issued by the U.S. Department of Homeland Security (DHS) or the U.S. Immigration and Naturalization Service
- An Employment Authorization Document (EAD) issued by DHS, Form I-766, or Form I-688B
- A valid, unexpired foreign passport
If you don’t have any of the options on page 7, you will need to provide valid, unexpired copies of TWO documents from the following categories:

You will need a color copy of any one of these documents:

- A certified copy of your birth certificate filed with a State Office of Vital Statistics or equivalent agency in your state of birth (a Puerto Rican birth certificate will only be accepted if it was issued on or after July 1, 2010. For more information on the Puerto Rican birth certificate law, visit the Puerto Rico Federal Affairs Administration).
- A certificate of Citizenship (Form N-560 or Form N-561)
- A certificate of Naturalization (Form N-550 or N-570) issued by DHS

And you will need to provide a black and white or color copy of one of these documents:

- SSN Card
- W-2 Form
- SSA-1099 Form
- Non-SSA-1099 Form
- Pay stub with your full name and SSN on it
- Authorization letter from the IRS displaying your 9-digit individual tax identification number

Remember, no matter which option or options you choose to use, document copies must include both the front and back, be in color, and be saved as a PDF or image file (.jpg, .jpeg, .png) to be accepted. Files must be smaller than 4.5 MB.

Color documents must be uploaded or mailed as we cannot accept color faxes at this time.

✅ Documentation for the different types of leave

Medical leave

Medical leave to care for your serious health condition

If you are taking continuous leave, you must provide either a Massachusetts DFML Certification of Your Serious Health Condition Form or FMLA’s Certification of Healthcare Provider for Employee’s Serious Health Condition filled out by your health care provider that includes the following information:

- A statement that you have a serious health condition
- A certification that you can’t work due to the serious health condition
- The probable duration of your serious health condition
- The date on which your serious health condition started

If you are taking intermittent or reduced paid leave in addition to continuous or instead of continuous leave, your health care provider should also include the items listed below:

- The probable duration of your serious health condition
Family leave

Family leave to bond with a newborn child
In order to be approved to take family leave to bond with a newborn child, we'll need to know the child’s date of birth. You can use copies of any of the documents below:

- The child’s government-issued birth certificate, OR
- A statement from the child’s health care provider stating the child’s birth date, OR
- A statement from the health care provider of the person who gave birth stating the child’s birth date, OR
- A statement or birth record from the hospital where the child was born indicating the child’s birth date and signed by the birth registrar

Family leave to bond with a newly adopted child or a child recently placed in foster care
To be approved to take family leave to bond with a newly adopted child or a child recently placed in foster care, we'll need to verify the child’s placement in your care and the date of their placement. You can use copies of any of these documents:

- A certificate from the child’s health care provider confirming both the placement of the child AND date of placement, OR
- A certification from an adoption or foster care agency involved in the placement confirming both the placement of the child AND date of placement, OR
- A certificate from the MA Department of Children and Families confirming both the placement of the child AND the date of the placement

Family leave to care for a family member with a serious health condition
Those applying for family leave to care for a family member with a serious health condition should include in their application a Massachusetts DFML Certification of Your Family Member’s Serious Health Condition Form or FMLA’s Certification of Healthcare Provider for Family Member’s Serious Health Condition that includes the following:

- A statement that your family member has a serious health condition and any other relevant details about your family member’s condition
- When your family member’s condition began
- That you, the employee, are needed to care for the family member and what kinds of care might be needed
- Information about how often and how long your family member needs you to care for them
- The name and address of your family member and their relationship to you

Family leave to care for a family member who is a covered service member with a serious medical condition
Those applying for family leave to care for a family member who is a covered service member should include in their application a Massachusetts DFML Certification of Your Family Member’s Serious Health Condition Form or FMLA’s Certification of Healthcare Provider for Family Member’s Serious Health Condition that includes the following:

- Attestation by the service member’s health care provider that the health condition is connected to the service member’s military service
- The date on which the covered service member’s serious health condition began
- That you, the employee, are needed to care for the covered service member and what kinds of care might be needed
- Information about how often and how long the covered service member needs you to care for them
- Your familial relationship with the covered service member
- The name and address of the covered service member
Family leave to manage affairs while a covered service member is or will be deployed

When applying to manage affairs when a family member who is a covered service member is being deployed, you should include copies of documents that prove the following:

- The dates or period of time for which your leave is required
- The underlying reason for your leave
- Your familial relationship with the service member
- The name and address of the family member being cared for
- Information as required by DFML proving identity of family member who is or will be deployed

And a copy of one of the following certification documents:

- A copy of the family member’s active duty orders
- A letter of Impending Activation from the family member’s Commanding Officer
- An FMLA WH-384 form
How do I apply for PFML?

Before you apply, make sure you’re aware of any reductions you may have:

- Unemployment insurance
- Workers’ compensation
- Social Security programs
- Sick time through your employer
- Temporary Disability or paid family or medical leave benefits through your employer
- Paid time off through your employer
- School breaks/vacation time for educators

Create an account
Once you have talked to your employer, you can apply for available PFML benefits online by creating a personal PFML account.

- **Helpful tip:** If you are applying for military-related paid family leave benefits, or if you are applying for paid family or medical leave benefits and you are currently self-employed or unemployed, please call PFML’s Contact Center at (833) 344-7365 to begin your application.

- **Helpful tip:** Depending on the situation, an expectant mother might be eligible to take medical leave during or directly after her pregnancy. See page 13 for more information if you are an expectant mother.

- **Helpful tip:** Be sure that you only create one account to avoid delays in processing your application.

Upload documents to prove your identity

- When applying for paid family or medical leave, you’ll be asked to upload proof of your identity to double-check that you are eligible, and to make sure that we send benefits to the right person.

- The easiest way to do this will be to provide a color copy of your Massachusetts Driver’s License or ID Card. If you don’t have a Massachusetts Driver’s License or ID Card, you can provide color copies of other documents to verify your identity. See more detail in the required documents section of the toolkit.
Select your leave details

- You can choose to apply for family or medical leave for a variety of reasons, each of which has its own eligibility and approval process. Once you know the type of leave you would like to apply for, we recommend you figure out if you are eligible and find out what documents you will need to provide in order to get approved before beginning your application.

Upload, fax, or mail documents to verify your leave

- See the documentation checklist in the previous section for specific documents that you will need to provide for your type of leave. We cannot accept color faxes at this time.

- Only PDF and image files (.jpg, .jpeg, .png) are accepted. Files must be smaller than 4.5 MB.

Enter your employment information

- We’ll need your employment status, including your current employer’s Employer Identification Number (EIN) in order to process your claim. We’ll also need to know when you informed your employer that you planned to apply for and take family or medical leave.

- If you are filing for paid leave from multiple employers, you will need to fill out a separate application for each individual employer.

Take note of any reductions

- The amount of benefits you receive during leave may be reduced based on your employer-sponsored benefits, any leave you have taken in the previous 12 months, and any other sources of income you may have. When you submit your application, any reductions to your weekly benefit amount will be automatically calculated based on the information DFML receives from your employer and the Department of Revenue during the review process.

Choose your payment method

- You can choose to receive your benefits through direct deposit or through check.

- DFML recommends direct deposit for quickest payments.
Expecting mothers using family and medical leave

Depending on the situation, an expectant mother might be eligible to take medical leave during or directly after her pregnancy. If she does, she can transition directly into family leave to bond with a child after the child’s birth if she wants to, or she can wait to take family leave to bond with a child some other time within the next 12 months as long as it is completed no later than the day before the child’s first birthday. In this scenario, be sure to apply for medical leave first, then family leave to bond with a child. To apply, follow these steps:

01
Begin a claim for medical leave first online or through the PFML Contact Center and answer “Yes” to the question, “Is this related to pregnancy?” This will automatically create a subcase for your future family leave to bond with a child.

02
Provide proof of your identity.

03
Complete the Massachusetts DFML Certification of Your Serious Health Condition Form or FMLA’s Certification of Healthcare Provider for Employee’s Serious Health Condition.

• NOTE: It is up to your health care provider to decide how much time you will be able to take for your pregnancy-related medical leave.

04
Once your case has been approved, call the PFML Contact Center at (833) 344-7365 to claim the family leave to bond with a child associated with your medical leave. This will ensure there is no disruption in your benefits payments and allow you to transition directly into family leave to bond with a child when your medical leave is complete.

05
If your baby has already been delivered, you can submit the proof of your child’s birth online at this time.

06
If your baby has not been delivered yet, provide your estimated delivery date and provide proof of birth once the child has been born.
What happens if I need to extend my leave?

- If you plan to **extend your leave**, you must notify DFML within **14 days of your leave end date** to avoid a second 7-day waiting period. You can do this by calling the PFML Contact Center at (833) 344-7365. You must also notify your employer at this time.

- **Legally**, you are required to report any relevant change in circumstances that may affect the duration of your leave, your eligibility for benefits, or the amount of your benefit payment within 7 days. You must do so by calling the PFML Contact Center at (833) 344-7365.

If you do not provide DFML with notice of a relevant change in circumstances that would reduce the amount of benefits you receive, you will be responsible for reimbursing DFML the amount overpaid within 30 calendar days of a request made by DFML.

- **If you have any questions about the notice or your claim, please visit DFML’s website at mass.gov/DFML. If your questions are not answered on the website, you may call the PFML Contact Center at (833) 344-7365.**

**Taxability**

- The IRS has not yet made a ruling on whether your PFML benefits are considered “taxable income.”

- **You will have the option when applying to have state and federal taxes withheld from your weekly benefit. If you choose this option, DFML will withhold 5% for state taxes and 10% for federal taxes.**

- If you’re unsure whether you want to withhold taxes, we recommend speaking with a tax professional about how IRS decisions could affect your personal tax liability. We cannot offer guidance or advice for individual tax situations.

Do not apply to PFML if your employer has a private plan exemption or you are not seeking benefits from DFML.

- **Job protections still exist for leave taken for a qualified reason.**