

**STATE OF NEW YORK**  
**PAID FAMILY LEAVE NOTICE OF COMPLIANCE**

New York State Disability and Paid Family Leave Benefits Law

**Paid Family Leave Benefits For Employees**

1. If you need time off from work to bond with a new child (through birth, placement for adoption or foster care), to care for a family member with a serious health condition, or to help relieve family pressures when someone is called to active military duty, you may be entitled to job-protected paid leave from your employer, his or her insurance carrier, or from the Special Fund for Disability Benefits.
2. If you regularly work 20 or more hours per week, you must have been in employment for the employer for 26 consecutive weeks to take paid family leave (PFL). If you regularly work less than 20 hours per week, you must have worked 175 days.
3. If the leave is foreseeable, you must give your employer 30 days advance notice. If the leave is not foreseeable, you must notify your employer as soon as possible.
4. Use PFL-1 (Request for Paid Family Leave) plus the following forms:
  - For leave to bond with a child, use PFL-2 (Bonding Certification)
  - For leave to care for a family member with a serious health condition, have the care recipient use PFL-3 (Release of Personal Health Information) and the employee should use PFL-4 (Health Care Provider Certification)
  - For leave to relieve family pressures when a family member is called to active military service, use PFL-5 (Military Qualifying Event)
5. You may not take PFL at the same time as workers' compensation or disability benefits. The total amount of PFL and disability leave in a 52 week period cannot exceed 26 weeks.
6. You are entitled to be reinstated to the same or comparable job upon your return from PFL.
7. If your regular work schedule will never allow you to attain eligibility for PFL (for example, you are a seasonal worker only), you may have the option of filing a waiver of paid family leave benefits. Your employer can give you more information.
8. Other information, including copies of required forms, may be obtained by calling (844) 337-6303 or visiting [www.ny.gov/paidfamilyleave](http://www.ny.gov/paidfamilyleave).

Citizenship and immigration status do not impact a worker's eligibility for Paid Family Leave.

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Policy #: 11DBL8375100 Effective From: 1/1/2018 To: 12/31/2018

Statutory  Under a Plan or Agreement

Class(es) of Employees Covered:

All Employees

**NYS Paid Family Leave Benefit**  
**PFL Helpline: (844) 337-6303**  
[www.ny.gov/paidfamilyleave](http://www.ny.gov/paidfamilyleave)

**PRESCRIBED BY THE CHAIR, WORKERS' COMPENSATION BOARD**  
**THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.**  
Employers must post PFL-120 so that all classes of their employees know who will pay their benefits.