1	L.D. 1333
2	Date: (Filing No. H-)
3	LABOR
4	Reproduced and distributed under the direction of the Clerk of the House.
5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	132ND LEGISLATURE
8	FIRST SPECIAL SESSION
9 10	COMMITTEE AMENDMENT " " to H.P. 868, L.D. 1333, "An Act to Make Changes to the Paid Family and Medical Leave Benefits Program"
11 12	Amend the bill by striking out everything after the enacting clause and inserting the following:
13 14	'Sec. 1. 26 MRSA §850-A, sub-§9, as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
15	9. Covered individual. "Covered individual" means a person who:
16 17 18	A. Earned at least 6 times the state average weekly wage in wages subject to premiums under this subchapter during the individual's base period or elects coverage and meets the requirements of section 850-G; and
19 20 21	B. Meets the administrative requirements outlined in this subchapter and any rules adopted pursuant to this subchapter and files an application for family leave benefits or medical leave benefits-; and
22 23	C. Has been employed for at least 120 days by the employer from whom the employee is taking leave.
24 25	Sec. 2. 26 MRSA §850-B, sub-§5, as amended by PL 2023, c. 643, Pt. ZZZ, §4, is further amended to read:
26 27 28 29 30 31 32 33	5. Intermittent leave requirements. Leave permitted by this section may be taken by an employee intermittently in increments equaling not less than one work day, or on a reduced leave schedule otherwise unless a lesser increment is agreed to by the employee and the employer, except that the employee and employer may not agree for to leave under this section to be taken in increments of less than one hour. The taking of leave intermittently or on a reduced leave schedule pursuant to this subsection may not result in a reduction in the total amount of leave to which the covered individual is entitled under this subchapter.
34	Sec. 3. 26 MRSA §850-B, sub-§7, as enacted by PL 2023, c. 412, Pt. AAA, §7, is

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amended to read:

- 7. Notice to employer. Absent an emergency, illness or other sudden necessity for taking leave, an employee shall give reasonable notice to the employee's supervisor of the employee's intent to use leave under this subchapter. Use of such leave must be scheduled to prevent undue hardship on the employer as reasonably determined by the employer. If an employer fails to provide notice as required under section 850-I, the employee's obligation to provide notice under this subsection is waived. For purposes of this subsection, the conditions that constitute undue hardship include, but are not limited to:
 - A. The employer employs fewer than 15 employees;
 - B. When, during the period between 3 days before Memorial Day until Labor Day, the employer is experiencing a labor shortage;
 - C. The employer generates at least 60% of the employer's annual revenue or production during a 5-month period, and it is during that 5-month period; or
 - D. When more than 25% of the employer's employees are already on leave or have requested and been approved for leave, including, but not limited to, vacation or medical or family leave.
- An employer may determine additional conditions that constitute undue hardship based on an individualized assessment of the effect of the leave request on that employer's operations.
- A decision of an employer to deny the requested scheduling of leave based on undue hardship as determined under paragraphs A to D is not reviewable by the department or subject to appeal pursuant to section 850-K. A decision of an employer to deny the scheduling of leave based on undue hardship for any condition other than those listed in paragraphs A to D is reviewable by the department and subject to appeal pursuant to section 850-K. This subsection may not be construed to prevent an employer from granting leave despite a determination of undue hardship by the employer.
- **Sec. 4. 26 MRSA §850-B, sub-§10, ¶D,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
 - D. Require a public employer, as defined in section 962, subsection 7, or employee of a public an employer that is a party to a collective bargaining agreement in existence on the effective date of this subchapter October 25, 2023 to apply any of the rights and responsibilities under this subchapter until the existing collective bargaining agreement expires.
- **Sec. 5. 26 MRSA §850-B, sub-§11,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
- 11. Concurrent with leave under state and federal law. Leave taken under this subchapter runs concurrently with leave taken under the federal Family and Medical Leave Act of 1993, 29 United States Code, Section 2611, et seq., and under subchapter 6-A. Employees may take leave under this subchapter while ineligible for leave under the federal Family and Medical Leave Act of 1993 in the same benefit year. An employee may not take leave under this subchapter unless leave available to the employee under the federal Family and Medical Leave Act of 1993 is taken concurrently.
 - Sec. 6. 26 MRSA §850-B, sub-§13 is enacted to read:

	COMMITTEE AMENDMENT " " to H.P. 868, L.D. 1333
1 2 3 4 5 6 7 8	13. Bureau of Paid Family and Medical Leave; responsibilities of commissioner. Except as otherwise provided in this subchapter, the Commissioner of Labor shall administer this subchapter through the Bureau of Paid Family and Medical Leave. The commissioner may employ persons, make expenditures, require reports, make investigations, impose assessments, coordinate with other departments and bureaus and take other actions the commissioner determines necessary or suitable to administer this subchapter. The commissioner shall determine methods of operational procedures in accordance with the provisions of this subchapter.
9 10	Sec. 7. 26 MRSA §850-C, sub-§2, as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
11 12 13 14	2. Determination of weekly benefit amount. The weekly benefit amount paid to employees and an employee or self-employed individuals individual on family leave or medical leave is ealculated as follows: 65% of that employee's or self-employed individual's average weekly wage.
15 16	A. The portion of the covered individual's average weekly wage that is equal to or less than 50% of the state average weekly wage must be replaced at a rate of 90%; and
17 18 19	B. The portion of the covered individual's average weekly wage that is more than 50% of the state average weekly wage must be replaced at a rate of 66% up to the maximum weekly benefit.
20 21	Sec. 8. 26 MRSA §850-D, sub-§2, as enacted by PL 2023, c. 412, Pt. AAA, §7, is repealed and the following enacted in its place:
22 23	2. Filing of application. The filing of an application for family leave and medical leave benefits is governed by this subsection.
24 25 26	A. An individual may file an application for family leave benefits or medical leave benefits no more than 60 days before the anticipated start date of family leave and medical leave.
27 28	B. An individual may file an application for family leave benefits no more than 15 days after the start date of family leave.
29 30 31	C. An individual may file an application for medical leave benefits no more than 30 days after the start date of medical leave. The administrator shall waive the 30-day filing deadline for good cause.
32 33	The administrator shall institute forms and procedures that are not unduly burdensome to an individual claiming benefits.
34 35	Sec. 9. 26 MRSA §850-F, sub-§5, as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
36	5. Employers. The following provisions govern employers.
37 38	A. An employer with 15 or more employees may deduct up to 50% of the premium required for an employee by subsection 3 from that employee's wages and shall remit

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by subsection 3 from that employee's wages.

100% of the combined premium contribution required by subsection 3 to the fund. The employee shall pay 50% of the premium amount as required by subsection 3, unless

the employer chooses to deduct up to 50% of the premium required for an employee

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- B. An employer with fewer than 15 employees may deduct up to 50% of the premium required for an employee by subsection 3 from that employee's wages and shall remit 50% of the premium required by subsection 3 to the fund. The employee shall pay 50% of the premium amount as required by subsection 3, unless the employer chooses to deduct up to 50% of the premium required for an employee by subsection 3 from that employee's wages.
- **Sec. 10. 26 MRSA §850-F, sub-§9,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
- 9. Failure or refusal to make premium contributions. An employer that fails or refuses to make premium contributions as required in this section must may be assessed 1.0% of its total annual payroll for each year it so failed to comply in addition to any amounts previously owed, or fraction thereof, in addition to the total amount of family leave benefits and medical leave benefits paid to covered individuals for whom it failed to make premium contributions. The rate of assessment imposed by this subsection must be adjusted annually consistent with subsection 3, paragraph B. The department shall exercise discretion to waive, in whole or in part, the amount of any such payments if the recovery would be against equity and good conscience.

Sec. 11. 26 MRSA §850-F, sub-§11 is enacted to read:

- 11. Enforcement to collect delinquent premium contributions, penalties and assessments. If an employer fails to make a payment in whole or in part of premium contributions, including penalties or assessments imposed, and the employer has exhausted all rights to an appeal, the department may enforce collection by:
 - A. Filing a civil action to collect unpaid premium contributions, penalties and assessments in the name of the commissioner, and the employer may be ordered to pay the costs of that action; and
 - B. Collecting by levy on a 3rd party that has possession or control of property in which the employer may have an interest the amount owed to the department for delinquent premium contributions, penalties and assessments consistent with section 1233.
 - Sec. 12. 26 MRSA §850-F, sub-§12 is enacted to read:
- 12. Liability of successor for delinquent premium contributions, penalties and assessments. An individual or organization that acquires an employer's organization, trade or business or a substantial part of the assets of that organization, trade or business is liable to the department for any premium contributions, penalties and assessments unpaid by the employer in the amount owed. The individual's or organization's liability under this subsection may not exceed the reasonable value of the organization, trade or business or assets acquired. Upon written request, the department shall provide the successor individual or organization with information about the amount owed and other information as determined necessary.
 - **Sec. 13. 26 MRSA §850-H, sub-§2,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
 - **2.** Additional requirements. In Except as provided in subsection 2-A, in order to be approved as meeting an employer's obligations under this subchapter, a private plan must also comply with the following provisions:

- A. If the private plan is in the form of self-insurance, the employer must furnish a bond to the State with a surety company authorized to transact business in the State, in the form, amount and manner required by the department;
 - B. The plan must provide coverage for all employees of the employer throughout the employee's period of employment with that employer; and
 - C. If the plan is in the form of a 3rd party that provides for insurance, the forms of the policy must be issued by an insurer authorized to do business in the State.

Sec. 14. 26 MRSA §850-H, sub-§2-A is enacted to read:

- 2-A. Self-insurance when member of group self-insurance trust. If the private plan is in the form of self-insurance in which the employer is a member of a group self-insurance trust, the employer is not required to furnish a bond as required by subsection 2 if the group self-insurance trust meets the following criteria as determined by the Superintendent of Insurance:
 - A. The group self-insurance trust guarantees the obligation of the employer to meet its obligations under this subchapter;
 - B. Each employer that is a member of the group self-insurance trust is jointly and severally liable for the obligations of those employers under this subchapter; and
 - C. The financial assets of the group self-insurance trust are sufficient to meet the obligations of the employers that are members of the group self-insurance trust.
- **Sec. 15. 26 MRSA §850-H, sub-§6,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
- **6. Violations.** Employers offering private plans that violate this section are subject to a fine of \$100 per violation. If an employer's private plan benefit coverage is found to have lapsed during a period of a private plan substitution approved under this section, the employer may be assessed a fine equal to the amount of the premiums the employer would owe to the fund pursuant to section 850-F for the time period in which coverage was not provided plus a penalty of 1.0% of that employer's total payroll for the same period. An employer may not deduct any employee portion of the premiums to pay this fine. The department shall transfer any fines collected pursuant to this subsection to the fund. The department by rule shall establish a process for the assessment and appeal of fines under this subsection.
- **Sec. 16. 26 MRSA §850-H, sub-§7,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
- 7. Cost of administration. The department shall annually determine the total amount expended by the department for costs arising out of the administration of private plans. An employer offering a private plan pursuant to this section shall reimburse the department for the costs arising out of the private plan in the amount, form and manner determined by the department by rule. The department may recover reasonable expenses incurred by the department for the oversight of private plans by assessing a renewal fee on each employer offering a private plan. The renewal fee may not exceed \$250 for an employer with fewer than 50 employees and \$500 for an employer with 50 or more employees. The department shall transfer payments received pursuant to this subsection to the fund. The department

shall report to the authority annually the amount of money collected pursuant to this subsection in the preceding year.

Sec. 17. 26 MRSA §850-H, sub-§9 is enacted to read:

9. Refund of premium contributions. Premium contributions may be refunded pursuant to this subsection.

A. An employer that remitted premium contributions to the fund on or after January 1, 2025 and that received approval to substitute a private plan pursuant to this section before January 1, 2026 is entitled to reimbursement of all premium contributions made to the fund, together with any interest earned thereon, upon written request submitted by mail to the department. Within 30 days of receipt of an employer's written request for reimbursement of premium contributions under this paragraph, the department shall refund the employer's premium contributions to the employer, together with any interest earned thereon from the date of receipt of the request. For purposes of this paragraph, an employer's request for reimbursement is deemed to be received by the department on the date on which the employer's request for reimbursement was mailed to the department.

B. An employer that elected to deduct any portion of its premium contribution from its employees' wages as permitted by section 850-F, subsection 5 shall refund its employees for their portion of premium contributions, together with any interest earned thereon, within 30 days of receipt of the refund from the department under paragraph A.

Sec. 18. 26 MRSA §850-H, sub-§10 is enacted to read:

- 10. Time limit for processing applications. When the department receives a completed application for approval of a private plan, the department shall make a determination within 30 days of the date of receipt. If the department approves the private plan, the effective date for the purposes of a refund of any premiums paid to the department is the date the application was received by the department.
- **Sec. 19. 26 MRSA §850-J, sub-§1,** as enacted by PL 2023, c. 412, Pt. AAA, §7, is amended to read:
- 1. Restoration to position upon return to work. Except for an employee who has not been employed for at least 120 days, an An employee who exercises the right to family leave or medical leave under this subchapter is entitled, upon return from that leave, to be restored by the employer to the position held by the employee when the leave commenced or to be restored to an equivalent position with equivalent employment benefits, pay and other terms and conditions of employment. This subsection does not apply to an employee who is absent from work for more than 10 days without providing notice to the employer.

Sec. 20. 26 MRSA §850-M, sub-§1-A is enacted to read:

- 1-A. State tax. An individual filing a new claim for family leave benefits or medical leave benefits under this subchapter may elect to have the administrator deduct and withhold state income tax from the individual's payment of benefits at the rate of 5%. The department shall advise an individual filing a new claim, at the time the individual files the claim, that:
 - A. The benefits are subject to state income tax;

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1	B. Requirements exist pertaining to estimated tax payments;
2 3	C. The individual may elect to have state income tax deducted and withheld from the individual's payment of benefits at the rate of 5%; and
4	D. The individual is permitted to change a previously elected withholding status.
5 6	Sec. 21. 26 MRSA §1401-A, sub-§2, as amended by PL 2017, c. 110, §10, is further amended to read:
7 8 9 10 11 12	2. Commissioner; entities incorporated. The department consists of a Commissioner of Labor, referred to in this chapter as "the "commissioner," appointed by the Governor and subject to review by the joint standing committee of the Legislature having jurisdiction over labor matters and to confirmation by the Legislature, to serve at the pleasure of the Governor, and the following entities as previously created or established are incorporated into the Department of Labor:
13	A. The Bureau of Unemployment Compensation;
14	B. The Bureau of Employment Services;
15	C. The Bureau of Labor Standards;
16	D. The Bureau of Rehabilitation Services;
17	F. The Center for Workforce Research and Information; and
18	I. The State Workforce Board-; and
19	J. The Bureau of Paid Family and Medical Leave.
20	Sec. 22. 36 MRSA §5122, sub-§1, ¶QQ is enacted to read:
21 22 23 24	QQ. For each taxable year beginning on or after January 1, 2026, an amount equal to the amount of family leave benefits or medical leave benefits paid pursuant to Title 26, section 850-C, to the extent those benefits are not included in the taxpayer's federal adjusted gross income.
25	Sec. 23. 36 MRSA §5122, sub-§2, ¶AAA is enacted to read:
26 27 28 29	AAA. For each taxable year beginning on or after January 1, 2026, an amount equal to the amount of any family leave benefits or medical leave benefits that were repaid by the taxpayer pursuant to Title 26, section 850-L, subsection 2 that have been previously taxed under this Part.
30	Sec. 24. 36 MRSA §5255-D is enacted to read:
31	§5255-D. Withholding on paid family and medical leave benefits
32 33 34 35 36 37	When an individual receiving family leave benefits or medical leave benefits under the paid family and medical leave benefits program established in Title 26, section 850-B makes an election pursuant to Title 26, section 850-M, subsection 1-A, the administrator of the paid family and medical leave benefits program shall deduct and withhold state income tax at the rate of 5% from the family leave benefits or medical leave benefits paid to the individual pursuant to Title 26, sections 850-B and 850-C.
38	Sec. 25. Rules establishing expedited refund process and waiver of payroll

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premiums by November 1, 2025. Pursuant to its rule-making authority under the

1 2 3	Maine Revised Statutes, Title 26, section 850-Q, the Department of Labor shall amend 12-702 C.M.R. Chapter 1: Rules governing the Maine Paid Family and Medical Leave Program to:		
4 5 6 7	1. Implement a specified timeline for decisions on applications for substitution of private plans that meet the requirements of Title 26, section 850-H, not to exceed 30 days from the department's receipt of an employer's application for substitution of a private plan; and		
8 9	2. Conform to the provisions of Title 26, section 850-H, subsection 9 as provided in this Act.		
10	The rules must be in effect no later than November 1, 2025.		
11 12	Sec. 26. Appropriations and allocations. The following appropriations and allocations are made.		
13	ADMINISTRATIVE AND FINANCIAL SERVICE	S, DEPARTMENT C	F
14	Revenue Services, Bureau of 0002		
15	Initiative: Provides one-time funding for computer programming costs.		
16 17 18	GENERAL FUND All Other	2025-26 \$0	2026-27 \$12,844
19 20	GENERAL FUND TOTAL	\$0	\$12,844
21 22 23 24	ADMINISTRATIVE AND FINANCIAL SERVICES, DEPARTMENT OF DEPARTMENT TOTALS	2025-26	2026-27
25 26	GENERAL FUND	\$0	\$12,844
20 27	DEPARTMENT TOTAL - ALL FUNDS		\$12,844
28	LABOR, DEPARTMENT OF		
29	Paid Family and Medical Leave Insurance Fund Z3	83	
30 31 32	Initiative: Allocates one-time funds for the cost to calculate and refund contributions paid by employers that had a private plan in place before January 1, 2026 that is approved by the Department of Labor.		
33 34 35	PAID FAMILY AND MEDICAL LEAVE INSURANCE FUND All Other	2025-26	2026-27 \$0
36	All Other	\$20,000	\$0
37 38	PAID FAMILY AND MEDICAL LEAVE INSURANCE FUND TOTAL	\$20,000	\$0
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40 41	LABOR, DEPARTMENT OF DEPARTMENT TOTALS	2025-26	2026-27

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1			
2	PAID FAMILY AND MEDICAL LEAVE	\$20,000	\$0
3	INSURANCE FUND	•	
4			
5	DEPARTMENT TOTAL - ALL FUNDS	\$20,000	\$0
6			
7	SECTION TOTALS	2025-26	2026-27
8			
9	GENERAL FUND	\$0	\$12,844
10	PAID FAMILY AND MEDICAL LEAVE	\$20,000	\$0
11	INSURANCE FUND		
12			
13	SECTION TOTAL - ALL FUNDS	\$20,000	\$12,844
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Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

17 **SUMMARY**

> This amendment is the minority report of the committee. The amendment replaces the bill. The amendment makes the following changes to the paid family and medical leave benefits program.

- 1. It requires an employee to be employed with an employer for 120 days before being eligible to take leave.
- 2. It clarifies that intermittent leave of an employee of less than one work day may not be taken unless it is agreed to by the employee and the employer.
- 3. It provides examples of what type of conditions constitute undue hardship for an employer and allows an employer to determine other conditions, based on that employer's specific business, that constitute undue hardship. It also provides that the decision of an employer to deny the requested scheduling of leave based on the examples provided is not reviewable by the Department of Labor. It clarifies that a decision of an employer to deny the scheduling of leave based on undue hardship for any condition other than the examples is reviewable by the department.
- 4. It applies the same delay of implementation to private employers with collective bargaining agreements as currently applies to public employers.
- 5. It prohibits the taking of paid leave unless the employee simultaneously takes any available unpaid leave.
- 6. It establishes in statute the Bureau of Paid Family and Medical Leave within the Department of Labor to administer the paid family and medical leave benefits program.
- 7. It establishes a benefit amount, regardless of income, of 65% of an employee's average weekly wage.

- 8. It requires an employee to file an application for family leave benefits no more than 15 days after the start of family leave and to file an application for medical leave benefits no more than 30 days after the start of the medical leave.
- 9. It provides that it is the obligation of the employee to pay premiums unless the employer chooses to deduct premiums from the employee's wages.
- 10. It changes the applications of penalties against employers from mandatory to discretionary.
- 11. It establishes remedies for the Department of Labor to enforce the collection of delinquent premium contributions, penalties and assessments on employers that fail to make payments required by the program.
- 12. It establishes liability for individuals or organizations with respect to premium contributions, penalties and assessments owed by employers acquired by those individuals or organizations.
- 13. It provides that an employer that provides a private plan in the form of self-insurance in which the employer is a member of a group self-insurance trust that meets specific criteria does not have to furnish a bond to the State.
- 14. It establishes penalties for employers that allow private plan benefit coverage to lapse during a period of an approved private plan substitution.
- 15. It allows an employer whose private plan is approved by the Department of Labor to request a refund of the premiums paid if that employer had a substantially equivalent private plan in place before January 1, 2026. The department, after verifying the amount paid by the employer, is required, within 30 days of receipt of the refund request, to refund the employer the premiums paid, plus interest that accrues to the date the refund payment is issued. It requires the employer to reimburse any employee from whom a premium was collected and submitted to the department.
- 16. It establishes that the Department of Labor must determine approval of a private plan within 30 days of receipt of an application and requires the department to update its rules.
- 17. It clarifies that the provision that provides that an employee who takes leave is entitled to be restored to the employee's former position does not apply to an employee who is taking retroactive paid leave and who did not notify the employer for more than 10 days of the employee's absence.
- 18. It provides that benefits paid from the program are subject to state income tax to the extent those benefits are not included in the taxpayer's federal adjusted gross income. It also provides that a taxpayer's federal adjusted gross income may be reduced by the amount subject to repayment that has been previously taxed by the State. It also allows individuals filing a new claim for family leave benefits or medical leave benefits to elect to have the administrator of the program deduct and withhold state income tax from the individual's payment of benefits at the rate of 5% and requires the administrator of the program to deduct and withhold state income tax. It also requires the department to advise individuals filing a new claim for benefits that the benefits are subject to state income tax.

COMMITTEE AMENDMENT " to H.P. 868, L.D. 1333

1	19. It places limits on the fees charged for private plan substitutions.
2	FISCAL NOTE REQUIRED
3	(See attached)

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COMMITTEE AMENDMENT