

NOTICE OF EMPLOYEE RIGHTS

UNDER THE CONNECTICUT FAMILY AND MEDICAL LEAVE ACT (CTFMLA)
AND CONNECTICUT PAID LEAVE ACT (CTPL)

LEAVE ENTITLEMENT AND ELIGIBILITY

The CTFMLA provides eligible employees, after 3 consecutive months on the job, up to 12 weeks of unpaid, job-protected leave during a 12-month period for qualifying family or medical leave reasons. Employees are entitled to return to their same job at the end of leave. Income replacement benefits under your employer's CTPL private plan, administered by The Hartford, are provided to eligible employees who are unable to work for the same leave reasons. These leave options may run at the same time as job protected unpaid leave under the CTFMLA.

- ▶ Qualifying reasons for leave include:
- ▶ The birth of a child and care within the first year after birth;
- ▶ The placement of a child with an employee for adoption or foster care and care for a child within the first year after placement;
- ▶ To care for a family member with a serious health condition. Family includes spouse (the person to whom one is legally married), sibling, son or daughter, grandparent, grandchild or parent, or an individual related to the employee by blood or affinity;
- ▶ Because of the employee's own serious health condition;
- ▶ To serve as an organ or bone marrow donor;
- ▶ To address qualifying exigencies arising from a spouse, son, daughter or parent's active duty service in the armed forces; or

- ▶ To care for a spouse, son, daughter, parent or next of kin with a serious injury or illness incurred on active duty in the armed forces.

CTFMLA and CTPL also allow eligible employees to receive two extra weeks of leave (up to a total of 14 weeks) in connection with an incapacity that occurs during pregnancy. CTFMLA further allows eligible employees to take up to 26 weeks of leave in a single 12-month period to care for a covered service member with a serious injury or illness.

Employees may also take up to 12 days of leave to deal with the effects of family violence separate from leave time available under state or federal law. While this is not protected under CTFMLA, it is protected under the Connecticut Family Violence Leave Act and an employee can apply for benefits under the employer's CTPL private plan, administered by The Hartford, in connection with these absences.

Leave does not have to be taken all at once. Employees may take leave intermittently (in separate blocks of time) or to reduce their work schedule.

CTFMLA leave is unpaid. However, an employer may require, or an employee may request to use their accrued, paid time off. An employee may choose to preserve up to 2 weeks of their accrued, paid time off. This accrued, paid time off is in addition to the income-replacement benefits available to employees under the employer's CTPL private plan administered by The Hartford.



APPLYING FOR INCOME-REPLACEMENT BENEFITS UNDER YOUR EMPLOYER'S CTPL PRIVATE PLAN

Wage replacement benefits under your employer's CTPL private plan, administered by The Hartford, may also be available for other CTFMLA absences as described above. For a complete list of CTFMLA/CTPL leave reasons, see The Hartford's [CT page](#) in our Paid Family and Medical Leave Resource center at www.TheHartford.com/paid-family-medical-leave.

Your employer has received approval from the CT Paid Leave Authority to provide CTPL benefits through a private plan, administered by The Hartford, instead of through the state's CTPL program.

For claims-related questions, call the Claims Center at 1-800-549-6514, Monday-Friday, 8am-8pm ET. Please have The Hartford CT PFML policy number and your Social Security number available when you call. You can submit a claim by emailing: GBClaimCentralizedServicesNewClaim@thehartford.com, you can mail your claim to: The Hartford Claims Center P.O. Box 14303 Lexington, KY 40512-4303 or you can fax your claim to 866-411-5613.

CTPL benefits are available for up to 12 weeks in a 12-month period, with an additional two weeks available to an employee for incapacity or medical treatment during pregnancy. Benefits are limited to 12 days for leave to deal with the effects of family violence.

EMPLOYER NOTIFICATION FOR CTFMLA LEAVE

Employees should provide at least 30-days advance notice to their employer of the need to take CTFMLA leave if they can. If they are unable to because they do not know they need leave, the employee must provide notice as soon as they can. An employer may require a medical certification to support a request for leave.

WHAT IS PROHIBITED?

The CTFMLA prohibits employers from:

- ▶ Interfering with or denying any rights provided by the CTFMLA or CTPL. Examples include, but are not limited to, improperly refusing to grant CTFMLA leave or discouraging employees from using CTFMLA leave or applying for CTPL benefits.
- ▶ Disciplining, terminating, discriminating against or retaliating against any individual for taking CTFMLA leave or applying for CTPL benefits, for opposing or complaining about any unlawful practice or being involved in any proceeding related to the CTFMLA.

If you believe that your CTFMLA rights have been violated, you can either file a complaint directly in Superior Court or with the Connecticut Department of Labor.

To file a CTFMLA complaint with the Connecticut Department of Labor, complete and submit the appropriate CTFMLA complaint form found on the Department's website at [the Connecticut Family & Medical Leave Act and CT Paid Leave Appeals](#).

More information about the CTFMLA is available at [the Connecticut Family & Medical Leave Act and CT Paid Leave Appeals](#) and CTPL at <https://ctpaidleave.org/>.

FOR MORE INFORMATION SPECIFIC TO YOUR PRIVATE PLAN WITH THE HARTFORD

Please refer to your employer's CT PFML policy or plan document or contact your representative from The Hartford.



THE HARTFORD

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CT Paid Family & Medical Leave Form Series includes GBD-1855 PFML, or state equivalent.

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