PROPOSED SUBSTITUTE HB 1073 (H-0750.2/21) By Rep. Berry

Original bill

- Expands the definition of a family member to include any individual of close association equivalent to a family member.
- Modifies the employee eligibility threshold from minimum hours worked to minimum earnings of \$1,000.
- Expands applicability of the PFML job protection provisions by:
 - Removing the employer size threshold;
 - o Revising the employment length threshold from 12 months to 90 days; and
 - Removing the hours worked threshold.
- Requires employers to maintain the health coverage of employees covered by the job protection provisions for the duration of PFML leave.

Proposed substitute compared to original bill

- Adds an intent section.
- Modifies the definition of family member beginning September 1, 2021 to include housemates or relationships with expectations of and dependency on care.
- Removes:
 - The modified employee eligibility threshold of \$1,000; and
 - The expanded the job protection and health benefit continuation provisions.
- Provides limited alternate eligibility, applicable to claims with effective dates from January 1, 2021 to June 30, 2022, for employees not meeting the existing hours worked threshold for 2020 or the first calendar quarter of 2021 through:
 - Two alternate lookback qualifying periods across 2019 and the first calendar quarter of 2020; and
 - o One alternate qualifying period of 520 hours worked in the first quarter of 2020.
- Adds a null & void clause if funding is not appropriated.
- Adds an emergency clause and immediate effective date, applicable to the alternate eligibility sections.

Labor and Workplace Standards Committee Lily Smith Office of Program Research Revised February 2, 2021, 4:25 pm

BILL REQUEST - CODE REVISER'S OFFICE

BILL REQ. #: H-0750.2/21 2nd draft

ATTY/TYPIST: RB:akl

BRIEF DESCRIPTION: Expanding coverage of the paid family and medical

leave program.

- AN ACT Relating to expanding coverage of the paid family and medical leave program; amending RCW 50A.05.010, 50A.15.010, and 50A.30.020; adding a new section to chapter 50A.15 RCW; creating new sections; providing an effective date; and declaring an emergency.
- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 6 NEW SECTION. Sec. 1. (1)The legislature finds that many 7 who have paid into the paid family and medical leave workers 8 insurance program have suffered job losses, reductions in hours, or an inability to reenter the workforce due to the effects of the 9 10 COVID-19 pandemic. These workers are unable to access their family 11 and medical leave benefits under the existing hours worked threshold 12 through no fault of their own.
 - (2) The legislature intends to temporarily adjust the qualifying periods for these adversely impacted workers to restore access to family and medical leave benefits.
- 16 (3) In the temporary adjustment of the qualifying period for 17 these workers, the legislature intends to prevent impacts to the 18 family and medical leave insurance account through the provision of 19 separate funding. In so doing, the legislature intends to avoid any 20 premium rate increases or the application of a solvency surcharge.

- Sec. 2. RCW 50A.05.010 and 2020 c 125 s 1 are each amended to read as follows:
- 3 Unless the context clearly requires otherwise, the definitions in 4 this section apply throughout this title.
 - (1) (a) "Casual labor" means work that:
 - (i) Is performed infrequently and irregularly; and
- 7 (ii) If performed for an employer, does not promote or advance 8 the employer's customary trade or business.
 - (b) For purposes of casual labor:

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- 10 (i) "Infrequently" means work performed twelve or fewer times per 11 calendar quarter; and
- 12 (ii) "Irregularly" means work performed not on a consistent 13 cadence.
 - (2) "Child" includes a biological, adopted, or foster child, a stepchild, a child's spouse, or a child to whom the employee stands in loco parentis, is a legal guardian, or is a de facto parent, regardless of age or dependency status.
- 18 (3) "Commissioner" means the commissioner of the department or 19 the commissioner's designee.
- 20 (4) "Department" means the employment security department.
- 21 (5)(a) "Employee" means an individual who is in the employment of 22 an employer.
- 23 (b) "Employee" does not include employees of the United States of 24 America.
 - (6) "Employee's average weekly wage" means the quotient derived by dividing the employee's total wages during the two quarters of the employee's qualifying period in which total wages were highest by twenty-six. If the result is not a multiple of one dollar, the department must round the result to the next lower multiple of one dollar.
- 31 (7)(a) "Employer" means: (i) Any individual or type organization, including any partnership, association, trust, estate, 32 joint stock company, insurance company, limited liability company, or 33 corporation, whether domestic or foreign, or the receiver, trustee in 34 35 bankruptcy, trustee, or the legal representative of a deceased 36 person, having any person in employment or, having become employer, has not ceased to be an employer as provided in this title; 37 (ii) the state, state institutions, and state agencies; and (iii) any 38 unit of local government including, but not limited to, a county, 39

- city, town, municipal corporation, quasi-municipal corporation, or 1 2 political subdivision.
 - (b) "Employer" does not include the United States of America.
 - (8)(a) "Employment" means personal service, of whatever nature, unlimited by the relationship of master and servant as known to the common law or any other legal relationship performed for wages or under any contract calling for the performance of personal services, written or oral, express or implied. The term "employment" includes an individual's entire service performed within or without or both within and without this state, if:
 - (i) The service is localized in this state; or
- (ii) The service is not localized in any state, but some of the service is performed in this state; and 13
 - (A) The base of operations of the employee is in the state, or if there is no base of operations, then the place from which such service is directed or controlled is in this state; or
 - (B) The base of operations or place from which such service is directed or controlled is not in any state in which some part of the service is performed, but the individual's residence is in this state.
 - (b) "Employment" does not include:
 - (i) Self-employed individuals;
- (ii) Casual labor; 23

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- (iii) Services for remuneration when it is shown to the 24 25 satisfaction of the commissioner that:
 - (A)(I) Such individual has been and will continue to be free from control or direction over the performance of such service, both under his or her contract of service and in fact; and
 - (II) Such service is either outside the usual course of business for which such service is performed, or that such service is performed outside of all the places of business of the enterprises for which such service is performed; and
 - (III) Such individual is customarily engaged in an independently established trade, occupation, profession, or business, of the same nature as that involved in the contract of service; or
 - (B) As a separate alternative:
- (I) Such individual has been and will continue to be free from 37 control or direction over the performance of such service, both under 38 his or her contract of service and in fact; and 39

- (II) Such service is either outside the usual course of business for which such service is performed, or that such service is performed outside of all the places of business of the enterprises for which such service is performed, or the individual is responsible, both under the contract and in fact, for the costs of the principal place of business from which the service is performed; and
- (III) Such individual is customarily engaged in an independently established trade, occupation, profession, or business, of the same nature as that involved in the contract of service, or such individual has a principal place of business for the work the individual is conducting that is eligible for a business deduction for federal income tax purposes; and
- (IV) On the effective date of the contract of service, such individual is responsible for filing at the next applicable filing period, both under the contract of service and in fact, a schedule of expenses with the internal revenue service for the type of business the individual is conducting; and
- (V) On the effective date of the contract of service, or within a reasonable period after the effective date of the contract, such individual has established an account with the department of revenue, and other state agencies as required by the particular case, for the business the individual is conducting for the payment of all state taxes normally paid by employers and businesses and has registered for and received a unified business identifier number from the state of Washington; and
- (VI) On the effective date of the contract of service, such individual is maintaining a separate set of books or records that reflect all items of income and expenses of the business which the individual is conducting; or
- (iv) Services that require registration under chapter 18.27 RCW or licensing under chapter 19.28 RCW rendered by an individual when:
- (A) The individual has been and will continue to be free from control or direction over the performance of the service, both under the contract of service and in fact;
- (B) The service is either outside the usual course of business for which the service is performed, or the service is performed outside of all the places of business of the enterprise for which the service is performed, or the individual is responsible, both under

- the contract and in fact, for the costs of the principal place of business from which the service is performed;
- (C) The individual is customarily engaged in an independently established trade, occupation, profession, or business, of the same nature as that involved in the contract of service, or the individual has a principal place of business for the business the individual is conducting that is eligible for a business deduction for federal income tax purposes, other than that furnished by the employer for which the business has contracted to furnish services;
- (D) On the effective date of the contract of service, the individual is responsible for filing at the next applicable filing period, both under the contract of service and in fact, a schedule of expenses with the internal revenue service for the type of business the individual is conducting;
- (E) On the effective date of the contract of service, or within a reasonable period after the effective date of the contract, the individual has an active and valid certificate of registration with the department of revenue, and an active and valid account with any other state agencies as required by the particular case, for the business the individual is conducting for the payment of all state taxes normally paid by employers and businesses and has registered for and received a unified business identifier number from the state of Washington;
- (F) On the effective date of the contract of service, the individual is maintaining a separate set of books or records that reflect all items of income and expenses of the business that the individual is conducting; and
- (G) On the effective date of the contract of service, the individual has a valid contractor registration pursuant to chapter 18.27 RCW or an electrical contractor license pursuant to chapter 19.28 RCW.
- 32 (9) "Employment benefits" means all benefits provided or made 33 available to employees by an employer, including group life 34 insurance, health insurance, disability insurance, sick leave, annual 35 leave, educational benefits, and pensions.
- 36 (10) "Family leave" means any leave taken by an employee from 37 work:
- 38 (a) To participate in providing care, including physical or 39 psychological care, for a family member of the employee made 40 necessary by a serious health condition of the family member;

(b) To bond with the employee's child during the first twelve months after the child's birth, or the first twelve months after the placement of a child under the age of eighteen with the employee; or

- (c) Because of any qualifying exigency as permitted under the federal family and medical leave act, 29 U.S.C. Sec. 2612(a)(1)(E) and 29 C.F.R. Sec. 825.126(b)(1) through (9), as they existed on October 19, 2017, for family members as defined in subsection $((\frac{10}{10}))$ (11) of this section.
- (11) "Family member" means a child, grandchild, grandparent, parent, sibling, or spouse of an employee, and also includes any individual who regularly resides in the employee's home or where the relationship creates an expectation that the employee care for the person, and that individual depends on the employee for care.
 - (12) "Grandchild" means a child of the employee's child.
 - (13) "Grandparent" means a parent of the employee's parent.
- (14) "Health care provider" means: (a) A person licensed as a physician under chapter 18.71 RCW or an osteopathic physician and surgeon under chapter 18.57 RCW; (b) a person licensed as an advanced registered nurse practitioner under chapter 18.79 RCW; or (c) any other person determined by the commissioner to be capable of providing health care services.
- (15) "Medical leave" means any leave taken by an employee from work made necessary by the employee's own serious health condition.
- (16) "Paid time off" includes vacation leave, personal leave, medical leave, sick leave, compensatory leave, or any other paid leave offered by an employer under the employer's established policy.
- (17) "Parent" means the biological, adoptive, de facto, or foster parent, stepparent, or legal guardian of an employee or the employee's spouse, or an individual who stood in loco parentis to an employee when the employee was a child.
- (18) "Period of incapacity" means an inability to work, attend school, or perform other regular daily activities because of a serious health condition, treatment of that condition or recovery from it, or subsequent treatment in connection with such inpatient care.
- (19) "Premium" or "premiums" means the payments required by RCW 50A.10.030 and paid to the department for deposit in the family and medical leave insurance account under RCW 50A.05.070.
- 39 (20) "Qualifying period" means the first four of the last five 40 completed calendar quarters or, if eligibility is not established, Code Rev/RB:akl 6 H-0750.2/21 2nd draft

- the last four completed calendar quarters immediately preceding the application for leave.
 - (21) (a) "Remuneration" means all compensation paid for personal services including commissions and bonuses and the cash value of all compensation paid in any medium other than cash.
- (b) Previously accrued compensation, other than severance pay or payments received pursuant to plant closure agreements, when assigned to a specific period of time by virtue of a collective bargaining agreement, individual employment contract, customary trade practice, or request of the individual compensated, is considered remuneration for the period to which it is assigned. Assignment clearly occurs when the compensation serves to make the individual eligible for all regular fringe benefits for the period to which the compensation is assigned.
- (c) Remuneration also includes settlements or other proceeds received by an individual as a result of a negotiated settlement for termination of an individual written employment contract prior to its expiration date. The proceeds are deemed assigned in the same intervals and in the same amount for each interval as compensation was allocated under the contract.
 - (d) Remuneration does not include:
 - (i) The payment of tips;

- (ii) Supplemental benefit payments made by an employer to an employee in addition to any paid family or medical leave benefits received by the employee; or
 - (iii) Payments to members of the armed forces of the United States, including the organized militia of the state of Washington, for the performance of duty for periods not exceeding seventy-two hours at a time.
- 30 (22)(a) "Serious health condition" means an illness, injury, 31 impairment, or physical or mental condition that involves:
 - (i) Inpatient care in a hospital, hospice, or residential medical care facility, including any period of incapacity; or
 - (ii) Continuing treatment by a health care provider. A serious health condition involving continuing treatment by a health care provider includes any one or more of the following:
- 37 (A) A period of incapacity of more than three consecutive, full 38 calendar days, and any subsequent treatment or period of incapacity 39 relating to the same condition, that also involves:

- (I) Treatment two or more times, within thirty days of the first day of incapacity, unless extenuating circumstances exist, by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services, such as a physical therapist, under orders of, or on referral by, a health care provider; or
 - (II) Treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment under the supervision of the health care provider;
- 10 (B) Any period of incapacity due to pregnancy, or for prenatal 11 care;
 - (C) Any period of incapacity or treatment for such incapacity due to a chronic serious health condition. A chronic serious health condition is one which:
 - (I) Requires periodic visits, defined as at least twice a year, for treatment by a health care provider, or by a nurse under direct supervision of a health care provider;
 - (II) Continues over an extended period of time, including recurring episodes of a single underlying condition; and
 - (III) May cause episodic rather than a continuing period of incapacity, including asthma, diabetes, and epilepsy;
 - (D) A period of incapacity which is permanent or long term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider, including Alzheimer's, a severe stroke, or the terminal stages of a disease; or
 - (E) Any period of absence to receive multiple treatments, including any period of recovery from the treatments, by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for: (I) Restorative surgery after an accident or other injury; or (II) a condition that would likely result in a period of incapacity of more than three consecutive, full calendar days in the absence of medical intervention or treatment, such as cancer, severe arthritis, or kidney disease.
 - (b) The requirement in (a)(i) and (ii) of this subsection for treatment by a health care provider means an in-person visit to a health care provider. The first, or only, in-person treatment visit must take place within seven days of the first day of incapacity.

(c) Whether additional treatment visits or a regimen of continuing treatment is necessary within the thirty-day period shall be determined by the health care provider.

- (d) The term extenuating circumstances in (a)(ii)(A)(I) of this subsection means circumstances beyond the employee's control that prevent the follow-up visit from occurring as planned by the health care provider. Whether a given set of circumstances are extenuating depends on the facts. For example, extenuating circumstances exist if a health care provider determines that a second in-person visit is needed within the thirty-day period, but the health care provider does not have any available appointments during that time period.
- (e) Treatment for purposes of (a) of this subsection includes, but is not limited to, examinations to determine if a serious health condition exists and evaluations of the condition. Treatment does not include routine physical examinations, eye examinations, or dental examinations. Under (a)(ii)(A)(II) of this subsection, a regimen of continuing treatment includes, but is not limited to, a course of prescription medication, such as an antibiotic, or therapy requiring special equipment to resolve or alleviate the health condition, such as oxygen. A regimen of continuing treatment that includes taking over-the-counter medications, such as aspirin, antihistamines, or salves, or bed rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider, is not, by itself, sufficient to constitute a regimen of continuing treatment for purposes of this title.
- (f) Conditions for which cosmetic treatments are administered, such as most treatments for acne or plastic surgery, are not serious health conditions unless inpatient hospital care is required or unless complications develop. Ordinarily, unless complications arise, the common cold, the flu, ear aches, upset stomach, minor ulcers, headaches other than migraines, routine dental or orthodontia problems, and periodontal disease are examples of conditions that are not serious health conditions and do not qualify for leave under this title. Restorative dental or plastic surgery after an injury or removal of cancerous growths are serious health conditions provided all the other conditions of this section are met. Mental illness resulting from stress or allergies may be serious health conditions, but only if all the conditions of this section are met.
- (g) (i) Substance abuse may be a serious health condition if the conditions of this section are met. However, leave may only be taken Code Rev/RB:akl 9 H-0750.2/21 2nd draft

- for treatment for substance abuse by a health care provider or by a licensed substance abuse treatment provider. Absence because of the employee's use of the substance, rather than for treatment, does not qualify for leave under this title.
- (ii) Treatment for substance abuse does not prevent an employer 5 6 from taking employment action against an employee. The employer may 7 not take action against the employee because the employee has exercised his or her right to take medical leave for treatment. 8 However, if the employer has an established policy, applied in a 9 nondiscriminatory manner that has been communicated to all employees, 10 11 that provides under certain circumstances an employee may be terminated for substance abuse, pursuant to that policy the employee 12 may be terminated whether or not the employee is presently taking 13 14 medical leave. An employee may also take family leave to care for a covered family member who is receiving treatment for substance abuse. 15 16 The employer may not take action against an employee who is providing 17 care for a covered family member receiving treatment for substance 18 abuse.
 - (h) Absences attributable to incapacity under (a)(ii)(B) or (C) of this subsection qualify for leave under this title even though the employee or the family member does not receive treatment from a health care provider during the absence, and even if the absence does not last more than three consecutive, full calendar days. For example, an employee with asthma may be unable to report for work due to the onset of an asthma attack or because the employee's health care provider has advised the employee to stay home when the pollen count exceeds a certain level. An employee who is pregnant may be unable to report to work because of severe morning sickness.
- 29 (23) "Service is localized in this state" has the same meaning as described in RCW 50.04.120.
- 31 (24) "Spouse" means a husband or wife, as the case may be, or 32 state registered domestic partner.
 - (25) "State average weekly wage" means the most recent average weekly wage calculated under RCW 50.04.355 and available on January 1st of each year.
 - (26) "Supplemental benefit payments" means payments made by an employer to an employee as salary continuation or as paid time off. Such payments must be in addition to any paid family or medical leave benefits the employee is receiving.
 - (27) "Typical workweek hours" means:

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- 1 (a) For an hourly employee, the average number of hours worked 2 per week by an employee within the qualifying period; and
- 3 (b) Forty hours for a salaried employee, regardless of the number of hours the salaried employee typically works.
 - (28) "Wage" or "wages" means:

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- (a) For the purpose of premium assessment, the remuneration paid by an employer to an employee. The maximum wages subject to a premium assessment are those wages as set by the commissioner under RCW 50A.10.030;
- 10 (b) For the purpose of payment of benefits, the remuneration paid
 11 by one or more employers to an employee for employment during the
 12 employee's qualifying period. At the request of an employee, wages
 13 may be calculated on the basis of remuneration payable. The
 14 department shall notify each employee that wages are calculated on
 15 the basis of remuneration paid, but at the employee's request a
 16 redetermination may be performed and based on remuneration payable;
 17 and
- 18 (c) For the purpose of a self-employed person electing coverage 19 under RCW 50A.10.010, the meaning is defined by rule.
- 20 **Sec. 3.** RCW 50A.15.010 and 2019 c 13 s 2 are each amended to 21 read as follows:
- ((Employees)) Except as provided in section 4 of this act, employees are eligible for family and medical leave benefits as provided in this title after working for at least eight hundred twenty hours in employment during the qualifying period.
- NEW SECTION. Sec. 4. A new section is added to chapter 50A.15 RCW to read as follows:
- 28 (1) For claims with an effective start date of January 1, 2021 29 through June 30, 2022, employees that do not meet the hours worked 30 threshold for eligibility under RCW 50A.15.010 or 50A.30.020(1) in 31 calendar year 2020 or the first calendar quarter of 2021 are eligible 32 for family and medical leave benefits as provided under subsection 33 (2) of this section.
- 34 (2) An employee seeking eligibility under this section may use 35 one of the following alternate qualifying periods:
- 36 (a) Eight hundred twenty hours worked in employment during the 37 first through fourth calendar quarters of 2019;

- (b) If the employee does not meet the hours worked threshold under (a) of this subsection, 820 hours worked in employment during the second through fourth calendar quarters of 2019 and first calendar quarter of 2020; or
- (c) If the employee does not meet the hours worked threshold under (a) or (b) of this subsection, 520 hours worked in the first calendar guarter of 2020.
- (3) (a) Subsections (1) and (2) of this section do not apply to an employee who does not meet the hours worked threshold for eligibility under RCW 50A.15.010 or 50A.30.020(1) because of an employment separation due to misconduct or a voluntary separation unrelated to the COVID-19 pandemic.
- (b) An employee seeking eligibility under this section must attest, in a manner prescribed by the department, that their failure to meet the hours worked threshold for eligibility under RCW 50A.15.010 or 50A.30.020(1) is not due to the reasons specified in (a) of this subsection.
- (4) For purposes of determining their weekly benefit amount under RCW 50A.15.020(4), the average weekly wage of an employee qualifying for benefits under subsection (2)(c) of this section is the quotient derived by dividing the employee's total wages during the first calendar quarter of 2020 by 13. If the result is not a multiple of \$1, the department must round to the next lower multiple of \$1.
- Sec. 5. RCW 50A.30.020 and 2019 c 13 s 57 are each amended to read as follows:
 - (1) $(({\mathbb T} \Theta))$ Except as provided in section 4 of this act, to be eligible for any family and medical leave, an employee must be in employment for eight hundred twenty hours during the qualifying period, by an employer with a voluntary plan or an employer utilizing the state family and medical leave plan. An employee qualifies for benefits under an employer's voluntary plan after the employee works at least three hundred forty hours for the current employer.
 - (2) An employer with an approved voluntary plan may waive the requirements in subsection (1) of this section, in whole or in part, to allow an employee to be immediately eligible for coverage under the employer's voluntary plan.
- 37 (3) An employee who had coverage under the state plan retains 38 coverage under the state plan until such time as the employee is 39 qualified for coverage under the new employer's voluntary plan.

- 1 (4) An employee who was eligible for benefits under a voluntary 2 plan is immediately eligible for benefits under a new employer's 3 voluntary plan.
- NEW SECTION. Sec. 6. If specific funding for the purposes of this act, referencing this act by bill or chapter number, is not provided by June 30, 2021, in the omnibus appropriations act, this act is null and void.
- 8 <u>NEW SECTION.</u> **Sec. 7.** Section 2 of this act takes effect 9 September 1, 2021.
- NEW SECTION. Sec. 8. Sections 1, 3, 4, and 5 of this act are necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and take effect immediately.

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