

# **Time to Care - Senate.pdf**

Uploaded by: Allen, Laura

Position: FAV

January 26, 2021

The Honorable Delores G. Kelley, Chair  
Senate Finance Committee  
Three East  
Miller Senate Office Building  
Annapolis, MD 21401

RE: Testimony in **Support of SB 211** – *Labor and Employment – Family and Medical Leave Insurance Program – Establishment (Time to Care Act of 2021)*

Dear Chair Kelley:

I am writing in support of SB 211, the Time to Care Act of 2021. As a working mother, caregiver, and nurse, I clearly understand the importance of paid family leave to my patients' economic security and health. Marylanders should not have to choose between losing their employment and caring for a newborn, adopted child, or sick family member. Most Marylanders do not have paid family leave through their jobs and more than half of our workers do not have access to unpaid family leave. Everyone should have time to care for loved ones who have health care needs, disabilities, or are affected by the military deployment of a loved one.

My own family would have benefitted from having paid family leave. Last year, right before the pandemic hit, my mother, age eighty-seven, could no longer afford to stay at her assisted living facility because her care level increased, so she had to move in with one of my sisters. My mother had several health conditions, including congestive heart failure. She had been managing well in the assisted living facility, where she received nursing care, help with her medications, opportunities for socialization, and even limited physical activity. Once she left the facility, however, and moved in with my sister, she spent her days mainly in front of a television with little social interaction other than with my sister and her husband. My sister had to work a full-time job in addition to running a restaurant that she and her husband were trying to keep afloat despite Covid-19 restrictions. Though her heart was in the right place, my sister was incapable of giving my mother the care she needed. As a nurse, I was the obvious choice to step in and manage my mother's health care, but I could not take time away from my job to travel out of state and spend several weeks putting in place the supports my mother needed or even be there to care for her myself. I could not take the time to care for my mother and I deeply regret it. She passed away on Christmas Eve 2020.

According to the Pew Research Center, of 41 developed countries, the United States is the only nation that does not have paid family leave. Our citizens face difficult choices and economic hardship, stress, and other burdens because they choose to leave employment to care for family members, but it does not have to be this way. A Harvard Business Review analysis shows that paid family leave would provide greater economic security for families, more workplace equality for women, and healthier families and businesses. Smaller businesses would be better able to compete with larger businesses, and Maryland companies would be more attractive to employees and more competitive in the national and global marketplace.

A poll commissioned by Maryland Family Network shows that 86% of all Maryland voters favor creation of a family and medical leave insurance program. The program has strong bipartisan support and would only cost workers three to five dollars a week in payroll deductions. Workers should have the right to partial wage replacement for up to 12 weeks to care for a new child, a sick loved one, or their own illness. Maryland should join other states who have passed paid family leave legislation and give its citizens the time to care. Thank you.

Sincerely,

*Laura Allen, RN*

Laura Allen, MA, MS, RN  
803 Count Flame Court  
Westminster, MD 21157  
240-893-5920  
lauralallen27@outlook.com

# **SB 211 FAV to Finance Jan 28.pdf**

Uploaded by: Bogdan, Henry

Position: FAV

January 28, 2021

**Testimony on Senate Bill 211**  
**Labor and Employment - Family and Medical Leave Insurance Program –**  
**Establishment (Time to Care Act of 2021)**  
**Senate Finance Committee**

**Position: Favorable**

Maryland Nonprofits is a statewide association of more than 1100 nonprofit organizations and institutions. We strongly urge you to support Senate Bill 211.

Under this legislation, employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves.

The weekly benefit level is calculated based on the employee's weekly wage and the State's average weekly wage. In general, the amount received by low-income employees reflects a higher percentage of their total wages. Wage replacement benefits are drawn from a fund pool into which employers and employees contribute. Contributions are mandatory and are calculated based on the employee's wages.

Millions of Americans aren't able to be there to comfort a dying parent, to care for a newborn child during those fragile first weeks, to help a family member injured in an accident, or even to care for themselves during an unexpected illness. Twenty-five percent of American women, for example, take 10 or fewer days of parental leave. This puts them and their children at risk physically and emotionally.

We urge you to **support Senate Bill 211** and give it a favorable report.

At the same time however, we must take notice of concerns being expressed to us by nonprofit service providers. Because of inadequate state reimbursement rates or underfunded grants and contracts, they are often forced to either limit their services or over-stress existing staff to accommodate the terms of important and reasonable employee benefits such as the use of family leave as proposed by Senate Bill 211.

This dilemma cannot be resolved in the pending legislation, but action must be taken to provide adequate funding for these services through contract or rate-setting reforms.

Henry Bogdan  
Director of Public Policy  
hbogdan@mdnonprofit.org

# **sb 211 Family and Medical Leave Insurance Program.**

Uploaded by: Bresnahan, Tammy

Position: FAV



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**SB 211 Labor and Employment – Family and Medical Leave Insurance Program –  
Establishment  
SUPPORT  
Senate Finance Committee  
January 28, 2021**

Good Afternoon Chairwoman Kelley and members of the Senate Finance Committee. I am Tammy Bresnahan. I am the Director of Advocacy for AARP MD. AARP Maryland is one of the largest membership-based organizations in Maryland, encompassing over 850,000 members. **AARP MD overwhelmingly supports SB 211 Labor and Employment – Family and Medical Leave Insurance Program – Establishment.** We thank Senator Hayes for sponsoring SB 211.

AARP is a nonpartisan, nonprofit, nationwide organization that helps people turn their goals and dreams into real possibilities, strengthens communities and fights for the issues that matter most to families such as healthcare, employment and income security, retirement planning, affordable utilities and protection from financial abuse.

SB 211 establishes a Family and Medical Leave Insurance (FAMLI) program through which employees may take up to 12 weeks of paid leave from their jobs to care for new child or other family members with serious health conditions or disabilities, or themselves. The program provides wage replacement during the leave period ranging from \$50 to \$1000 per week. The benefit level is calculated based on the employee's weekly wage and the State's average weekly wage. In general, the amount received by low-income employees reflects a higher percentage of their total wages.

Wage replacement benefits are drawn from a fund pool into which employers and employees contribute. Contributions are mandatory and are calculated based on the employee's wages. The FAMLI program is supervised by the State Department of Labor (DLR) and administered by Division of Unemployment Insurance (UI). (FAMLI and UI are conceptually and administratively similar.) The rates of employee and employer contributions to the FAMLI insurance pool must be sufficient to fund the benefits and administer the program. Experience from other states suggests that the shared contribution will total approximately 0.5% of the employee's wages. An employee is eligible for FAMLI benefits if the employee:

- Is caring for a newborn child or child newly placed for adoption or foster care;
- Is caring for a family member with a serious health condition or disability;
- Has a serious health condition that makes the employee unable to perform his or her job;
- Is caring for a military service member who is next of kin; and

AARP  
Real Possibilities

- Has a specified need resulting from the military deployment of a family member.

SB 211 also specifies that the definition of "family member" mirrors the definition in the Maryland Healthy Working Families Act of 2017 and includes: a child, parent, spouse, grandparent, grandchild, or sibling. (Adoptive, foster, guardianship, in loco parentis, and step-relationships are included in these categories.)

According to AARP Public Policy, only 1 in 7 workers in the private sector has employer-provided paid family leave, according to the Labor Department. Among caregivers who left the workforce, just over half say they quit their jobs because they did not have the flexibility to keep working and provide elder care. Whether giving or receiving care, older workers are likely to need the time, access to health benefits, and job security that the Family Leave Act provides.

AARP believes Maryland has made strides in supporting Maryland's 770,000 family caregivers, however, we still have work to do to enable workers to take care of themselves and their loved ones—passing the Maryland Family Leave Act is one way to provide these protections to more workers and the broader range of family members who are taking on caregiving responsibilities.

What we know, the absence of paid leave in the Family and Medical Leave Act has led a number of state and local governments to step in to fill some of the gap. California, New Jersey, New York, Rhode Island, Washington State and Washington, D.C., require some form of paid family leave.<sup>1</sup>

Current labor force trends of an aging workforce are especially pronounced for older working women—those most likely to also be family caregivers. The percentage of women ages 55 and older who work is expected to increase from 28.5 percent in 2013 to 35.1 percent in 2022. During the same period, the percentage of working women over age 64—those most likely to be caring for a spouse—is expected to increase from 14.4 percent to 19.5 percent.

These shifts toward older women in the labor force can add to family incomes and greater savings for retirement as well as contribute to overall economic growth. Yet, as women work outside the home to make ends meet and contribute to the economy, the demands and pressures of working families to balance work, caregiving, and other family responsibilities have grown.<sup>2</sup>

The economic consequences of reducing work hours, quitting a job to provide care, or taking an unplanned early retirement can be significant. Research shows that family caregivers who disrupt their careers or leave the labor force entirely to meet full-time caregiving demands can face substantial economic risk and short-term and long-term financial consequences by losing salary, personal retirement savings, eventual Social Security and retirement benefits, career opportunities, and overall financial well-being.<sup>3</sup>

Paid Family Leave offers (PFL) a solution to many of the pitfalls associated with unpaid leave. PFL helps workers remain at their jobs and continue as family caregivers—benefiting workers, employers, and the economy. For workers who take on family caregiving responsibilities but cannot afford adequate time off to do so, PFL can provide peace of mind when they need to take a period

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<sup>1</sup> [Paid Family Leave: States With Laws to Help](#)

<sup>2</sup> [Breaking New Ground: Supporting Employed Family Caregivers](#)

<sup>3</sup> Ibid



of time away from work. For employed family caregivers, PFL can also promote economic security—a key component of social determinants of health.<sup>4</sup>

Research shows that PFL is an important factor in employment recruitment and retention, which can improve productivity and reduce absenteeism. Experiences of businesses in the first three states to enact PFL laws—California, New Jersey, and Rhode Island—show that once employers have implemented PFL benefits, they are generally supportive of paid leave, and indicate that PFL laws have had negligible to positive impacts on worker productivity, turnover, and morale. In a California study, small and medium businesses (those with fewer than 50 employees and those with 50 to 99 employees, respectively) reported the most positive outcomes—even more than large companies. About two in three of the companies reported that they dealt with employee leave-taking by assigning work temporarily to other workers; one-third said they hired temporary replacements. Research suggests a relationship between paid leave and job retention. Higher retention rates usually mean saved separation costs when an employee leaves the job.<sup>5</sup>

Managing paid work alongside providing care for an adult or aging family member with a serious health condition or disability can be stressful for employed caregivers when their needs are not being met by existing workplace policies. Because most family caregivers now hold paying jobs too, employed caregivers need access to workplace leave benefits that enable them to fulfill both their caregiving and paid work responsibilities.

Workers should not have to choose between keeping their jobs and providing care to a seriously ill family member when they need it the most. Without a paycheck to cover the basic costs of living while providing care, low-wage workers are particularly vulnerable. They tend to have the least access to paid time off for caregiving needs and cannot afford to take unpaid family leave. States are leading the way.

Given the aging of the population and the workforce, caregiver-friendly policies—such as PFL and paid sick days—are important for maintaining both economic growth and a worker’s own economic security. Workplace leave policies are a sound investment for employers and for America’s working families with caregiving responsibilities.

AARP recommends that states should take the lead and implement policies that strengthen financial security for employed family caregivers. We encourage a FAVORABLE report on SB 211. If you have questions please contact Tammy Bresnahan at [tbresnahan@aarp.org](mailto:tbresnahan@aarp.org) or by calling 410-302-8451.

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<sup>4</sup> Ibid

<sup>5</sup> Ibid

# **MD BUSINESSES IN SUPPORT OF SB0211.pdf**

Uploaded by: Brock-Cancellieri, Jen

Position: FAV

SB0211-Labor and Employment - Family and  
Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)  
SUPPORT  
Finance Committee

January 28, 2021

Dear Chair Dolores G. Kelley and Finance Committee Members,

Thank you and your committee for your consideration of this important issue that will mean so much to Maryland workers and their families.

We are Maryland business owners and we are joining a coalition of diverse businesses to support the Time to Care Act so that families can have the financial security to care for themselves and their loved ones after the birth of a child or in the case of serious illness.

Marylanders face impossible choices when new children are born or adopted and when serious personal or family health needs arise. The Time to Care Act would make paid leave available to Maryland workers for up to 12 weeks following the birth or adoption of a child, and when needed to provide care for a family member or oneself. The leave would be funded through an insurance pool, into which workers and their employers contribute.

As small businesses, paid family leave is good for our business and our employees because programs like Paid Family Leave, strengthen employee loyalty and morale.

When Paid Family Leave is administered through an insurance program, small businesses benefit because the cost is shared. As many of us have experienced through offering these benefits, first-time moms who take paid leave are more likely to return to the same employer. For these reasons, I am signing on in support of the Time to Care Coalition to urge the Maryland Legislature to pass legislation establishing a Family and Medical Leave Insurance Program.

Aaron Seyedian, Well-Paid Maids  
Dr. Laura Dover, Dover Chiropractic  
Joi Gaddy, Therapy LLC  
Flora Gee, GCC, Inc dba Greenbelt Children's Center  
Gina Schaefer, Ace Hardware Stores  
Josie Rhodes, Red Canoe Cafe  
Kevin Mullaney, Soup's On Baltimore  
Bernardo Vigil, Baltimore Bicycle Works  
Ned Atwater, Atwater's  
Lisa Hawks, Chop Shop  
Lauren Miller, GAP self storage  
Lavonne Taylor, Forest Hill Nature Preschool  
Caitlin Duffy, Amalgamated Bank

# **SB211 Time to Care.pdf**

Uploaded by: Cantori, Renee

Position: FAV

Testimony in Support of SB 211 “Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)” - Sen. Hayes

I support SB 211, which establishes a Family and Medical Leave Insurance (FAMLI) program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves.

Most all of us have either personally experienced having to give care for a child or another family member, or to take care of ourselves during a serious illness. Or, we know those who have. I am one of those people. I was fortunate in that I was able to use my job’s FMLA to help me do this. I wish it were extended to all those in Maryland. Not just because it is a ‘nice’ thing to do, but because for many families, it’s almost essential, in order to allow them to continue to make a living, pay the bills, feed and care for their families.

I know so many people, friends and neighbors who literally have to choose between continuing to work and giving care. And many of those people cannot afford that choice, as not working would place them in an untenable position financially. This is indeed a basic quality of life issue. We are the only industrialized nation that does not afford this type of FMLA supports this assertion. We have to ask ourselves what kind of a country, state, are we to not provide this basic safety net, a net that allows people not to fall when making these important decisions to care for their families.

Respectfully,

Renee Cantori  
Annapolis

# **SEIU Testimony in Favor of SB 211 TIME TO CARE ACT**

Uploaded by: Cavanagh, Terry

Position: FAV



## **SEIU MARYLAND & DC STATE COUNCIL**

1410 Bush Street, Suite F  
Baltimore, Maryland 21230

Testimony in FAVOR of SB 211  
The Time to Care Act  
Senate Finance Committee  
January 28, 2021  
1:00 PM

SEIU Maryland & DC State Council urges a **Favorable Report to SB211.**

With over two million members, SEIU is the largest union in North America. We are focused on uniting workers in health care, public services, including in public education, and property services to improve lives and the services we provide. In the Maryland, Washington, DC, and Virginia area, we represent over 50,000 workers.

We are thousands of essential workers in nursing homes, hospitals, schools and public buildings. We are the broad working class. Most of members experience economic insecurity. Feeding, clothing and housing themselves and their families is a challenge they face every day. If, or when, illness or injury strikes, the impact on their families can be devastating.

The **Time to Care Act** is a sensible approach to an issue which, directly or indirectly, affects the vast majority of Maryland families. Most probably don't know what risks they face. By relatively small contributions from workers and employers, the fear of losing one's home and facing economic catastrophe is significantly lessened. None of us are free of the danger of being struck down by a debilitating disease or having a family member becoming disabled. Which of us are able to take the time away from work to nurture a newborn child? Most of us are not able to take time off of work and lose pay. This legislation would provide hundreds of thousands of Maryland families greater security and our communities greater stability.

Several other states have adopted this approach. Now is the time for Maryland to count itself among the leading states by passing the Time to Care Act.

**We ask a Favorable Report on SB 211.** Thank you.



# **SB\_211\_Time\_to\_Care\_Act\_Support.pdf**

Uploaded by: Celentano, Matthew

Position: FAV



Testimony  
for the Senate Finance Committee  
In **SUPPORT** of

**Senate Bill 211 – Time to Care Act of 2021**

**January 28, 2021**

The American Council of Life Insurers (“ACLI”) and the League of Life and Health Insurers of Maryland (“League”) support Senate Bill 211 and urge the committee to give the bill a favorable report.

In circumstances such as childbirth, adoption, a family health crisis, or a person’s own health emergency, workers shouldn’t have to choose between their paycheck and caring for the ones they love or themselves. Helping workers care for their families and themselves is one of the most critical missions of life and health insurers in Maryland, and the COVID-19 pandemic has only further highlighted the need for a paid family and medical leave program. Life insurers provide paid family medical leave options to employers and support private-sector solutions across the country, and the benefits provided through employer-insurer partnerships are vital to the health of workers and the financial security of their families.

The League and ACLI believe that one of the best ways to ensure that Maryland workers and their families are properly protected during the uncertain times of simultaneous economic and public health crises is the creation of a paid family medical leave program. The need for paid family medical leave has never been clearer for caregivers and their families.

Workers shouldn’t be penalized for taking time off to care for their families when needed. ACLI and the League members believe that we must work to find viable solutions that meet this fundamental need across Maryland. We thank the sponsors for including our suggested language that allows proactive companies that exceed the parameters of the paid family leave program as proposed to continue to care for their employees in an appropriate manner. For these reasons, we urge the committee to give Senate Bill 211 a favorable report.

Respectfully Submitted,

Matthew Celentano  
American Council of Life Insurers  
The League of Life and Health Insurers of Maryland

**SB211\_FAV\_AlzheimersAssociationMD.pdf**

Uploaded by: Colchamiro, Eric

Position: FAV

Testimony of the Alzheimer's Association Greater Maryland and National Capital Area Chapters  
**SB 211 - Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)**  
**Position: Favorable**

Chair Kelley and Vice Chair Feldman,

The Alzheimer's Association writes to issue its strong support for HB 211, legislation which establishes a family and medical leave insurance program.

This legislation provides temporary benefits to a covered individual who is taking leave from employment; establishes the Family and Medical Leave Insurance Fund; requires, beginning January 1, 2022, certain employees, employers, and self-employed individuals to pay certain contributions; authorizes, beginning July 1, 2023, a covered individual taking certain leave from employment to submit a claim for benefits; and authorizes the establishment of private employer plans; etc.

Unpaid family leave can create hardships and disincentives for many working families. Taking unpaid leave for caregiving duties can be costly, which often results in reduced work hours. As a result, family caregivers of working age may turn to retirement savings to support their everyday needs and to help defray caregiving expenses, which can also affect future economic security.

In addition to the financial hardships associated with unpaid leave, there is also a need for paid leave that can be used for family caregiving. For many years, the focus of the paid leave debate has been in the context of maternity leave, but paid leave can be used for much more than maternity leave. Providing workers with some type of paid family leave for caregiving may be the single most important policy for employers to consider when designing a caregiver-friendly workplace. However, the majority of private-sector paid leave is currently limited to parental leave to bond with a newborn or adopted child.

This limited view of family caregiving runs counter to today's family roles and composition. For example, almost three in four millennial family caregivers are employed and provide care for an adult with a disability or an older adult with chronic care needs. About 22% of millennial caregivers provide care for a grandparent, but grandparents are generally not considered qualifying family members under employer-sponsored PFL policies. Paid family leave policies should recognize the evolving definition of "family" and allow employees to provide care for those that they consider family.

We urge a favorable report on this legislation

**AACCW SB 211 support 1.28.21.pdf**

Uploaded by: Commission for Women, Anne Arundel County

Position: FAV

## **TESTIMONY OF JESSICA GORSKI**

**Commissioner, Anne Arundel County Commission for Women**

**IN SUPPORT OF SB 211**

**“Labor and Employment - Family and Medical Leave Insurance Program  
- Establishment (Time to Care Act of 2021)”**

**Submitted to the Senate Finance Committee January 28, 2021**

### **Position: SUPPORT**

Chairwoman Kelley and members of the Senate Finance Committee thank you for the opportunity to testify in support of SB 211 – The Time to Care Act. My name is Jessica Gorski and I currently serve as a Commissioner on the Anne Arundel County Commission for Women. The Commission has identified this as part of our priority legislation for 2021 and we strongly encourage a favorable report for SB 211 which establishes a Family and Medical Leave Insurance (FAMLI) program through which employees may take up to 12 weeks of leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves.

The vast majority of working people in the United States do not have paid family leave through their jobs. In Maryland, even unpaid leave under the federal Family and Medical Leave Act is inaccessible for 56 percent of working people. Marylanders need a real policy solution to address the nation’s paid leave crisis. Paid family and medical leave means greater economic security, stronger families and businesses, greater equity regardless of a person’s job or health status and more workplace equality for women.

In 76 percent of all Maryland households with children – more than 970,000 homes – all parents have paying jobs. In addition, Women’s wages support many of their households. In Maryland, 80 percent of Black mothers, 51 percent of Latina mothers and 50 percent of white mothers are key family breadwinners. Women make up nearly half of Maryland’s labor force (49 percent) and one-third of its business owners (33 percent). With the passage of this legislation, people – especially women – aren’t forced to leave the labor force to care for their families or health, reducing turnover for employers and boosting the economy.

Thank you for your consideration. The Anne Arundel County Commission for Women urges a favorable vote on SB 211.

**CPMC - SB211 - TimtoCare - Support.pdf**

Uploaded by: CPMC, Coalition to Protect Maryland's Children

Position: FAV

# THE COALITION TO PROTECT MARYLAND'S CHILDREN

*Our Mission: To combine and amplify the power of organizations and citizens working together to keep children safe from abuse and neglect. We strive to secure the budgetary and public policy resources to make meaningful and measurable improvements in safety, permanence, and well-being.*

Senate Finance Committee

## **SB 211 – Labor and Employment – Family Medical Leave Insurance Program – Establishment (Time to Care Act of 2021) Support**

January 28, 2021

The Coalition to Protect Maryland's Children (CPMC) is a consortium of Maryland organizations and individuals formed in 1996 to promote meaningful child welfare reform. As SB 211 establishes a the Family and Medical Leave Insurance Program which would allow Maryland's workers to access wage replacement when they need to take time off to care for themselves or a family member, CPMC urges a favorable report on this bill. <sup>1</sup>

Preparing Maryland for a prosperous future begins with recognizing that our youngest residents must get what they need today to become the adults who will strengthen our communities and build our economy.

Fortunately, what our children need is not a mystery. Recent advances in the science of early childhood development tell us that the early years are a time when the brain is literally building itself from the ground up, in much the way a house is constructed. And, it is the relationships and experiences children have early in life that are the building blocks for the skills they need to remain healthy, and to succeed in school, in relationships, and in the workforce. **When children have stable, responsive relationships with caring adults at home and in the community, they get off to a good start with a strong foundation to become healthy, productive and caring members of our communities.**

Paid family leave allows parents to create those responsive relationships – whether it is with a biological child, an adopted child or a foster child. In all three instances, it is imperative that a strong bond form in those early days promoting attachment. Additionally, research has shown that paid family leave reduces cases of abusive head injuries in children under the age of 2.<sup>2</sup> A 2016 study published in *Injury Prevention* examined California's paid family leave program. It compared California's data against other states including Maryland's as it related to deliberately inflicted head injuries. This type of head injury is most prevalent between the ages of 9 and 20 weeks. The research team determined that "strengthening the bond of the parent-child relationship by spending time together is the best way to prevent child abuse."<sup>3</sup>

For those reasons stated above we urge a favorable committee report on SB 211.

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<sup>1</sup> The following members have signed onto this testimony: Advocates for Children and Youth, Associated Catholic Charities, Board of Childcare, Child Justice, Inc., Citizens Review Board for Children, Court Appointed Special Advocates, The Family Tree, Maryland Chapter of the American Academy of Pediatrics, Maryland Chapter of the National Association of Social Workers, Diana Philip, the State Council on Child Abuse and Neglect.

<sup>2</sup> "Stopping Child Abuse: Paid Family Leave Reduced the Number of Child Abuse Cases in California." *Medical Daily*. By Justin Caba. 25 February 2016. Accessed at <https://www.medicaldaily.com/paid-family-leave-stopping-child-abuse-375161>.

<sup>3</sup> Ibid.



# **MCYD Testimony in Support of SB 211-Paid Family Le**

Uploaded by: DeLong, Michael

Position: FAV



## Montgomery County Young Democrats Testimony to Senate Finance Committee in Support of SB 211-Time to Care Act-Paid Family and Medical Leave 1/28/2021

Chair Kelley, Vice-Chair Feldman, members of the Senate Finance Committee:

Thank you for receiving our testimony. We are an organization of young Democrats ages 14-34 who are working to make Montgomery County and Maryland better places to live, with freedom, opportunity, and justice for all. Our testimony is in support of SB 211 (the Time to Care Act of 2021), sponsored by Senator Hayes, which would establish paid family leave for Maryland workers.

The Time to Care Act is a welcome and long overdue piece of legislation. It would establish a Family and Medical Leave Insurance Program that would provide benefits for Maryland workers who are taking leave from their jobs. Workers would have partial wage replacement for up to twelve weeks away from work so they can care for their newly born child, or sick or disabled family members, or care for themselves if they have a serious health condition.

The bill works as follows: Employers and employees would each contribute a small amount from each paycheck, an 0.75% mandatory contribution of each payroll. The State Family and Medical Leave Insurance Program would administer this fund, and Marylanders will apply for the benefit when they need to take leave from work for the birth, adoption, or fostering of a new child, for illness, or for caring for themselves or a loved one. Benefits would be approved for up to twelve weeks for eligible Marylanders. The payments would range from \$50 to \$1,000 per week, depending on a person's income. Lost wages are not replaced dollar for dollar, but lower wage workers will receive a higher percentage of their income.

Currently Marylanders, especially Marylanders who work in low wage jobs, are frequently caught between their work and their family responsibilities. Often they have to work at the expense of their health, and when sick workers are at their jobs, diseases can easily spread

from person to person. The COVID-19 pandemic has demonstrated how paid family and medical leave is badly needed, from moral, financial, and public health standpoints.

This proposal will benefit everyone. It will ensure: 1) Maryland workers can afford to care for their family members when they need to, 2) these benefits will help companies recruit and retain employees, and improve morale and increase productivity in the workplace, 3) help the state government and taxpayers through reduced Medicaid spending, less reliance on social services, and fewer people needing unemployed benefits, and 4) prevent the spread of diseases, including COVID-19, and improve public health.

People should not be forced to choose between the jobs they need to survive and taking care of their family members-especially during a pandemic. Over 40 million Americans provide unpaid care for their family members and relatives each year, and most of them have to juggle caregiving and their work schedules. When workers can't get paid family leave, they can't bond with their children, they often miss critical doctors' appointments, their family members get sick and suffer alone, and families face financial hardship. In recent years nine states and the District of Columbia have enacted paid family leave; Maryland should follow in their footsteps and be the tenth state.

Paid family leave is also extremely popular. An overwhelming majority of Marylanders support the creation of a paid family and medical leave program. The Maryland General Assembly should lead the way and pass the Time to Care Act to benefit workers and families, and show that you care about family values.

The Montgomery County Young Democrats urge you to favorably report SB 211, vote for it, and ask your colleagues to vote for it as well.

Please contact us at [mocoyoungdems@gmail.com](mailto:mocoyoungdems@gmail.com) or [michaeldelong94@gmail.com](mailto:michaeldelong94@gmail.com) if you have any questions.

Sincerely,

Michael DeLong, President  
Teresa Woorman, Vice President  
Stephen Schiavone, Treasurer  
Kathleen Bender, Political Advocacy Director  
Keyna Anyiam, Membership Director  
Margie Delao, Communications Director  
Steven Cename, Secretary

**SB211\_FAV\_JOTF.pdf**

Uploaded by: Dews, Christopher

Position: FAV

# JOTF JOB OPPORTUNITIES TASK FORCE

*Advocating better skills, jobs, and incomes*

**TESTIMONY IN SUPPORT OF SENATE BILL 211:**  
**Labor and Employment - Family and Medical Leave Insurance Program -  
Establishment (Time to Care Act of 2021)**

TO: Hon. Delores Kelley, Chair, and Members of the Finance Committee

FROM: Christopher Dews, Policy Advocate

DATE: January 28, 2020

The Job Opportunities Task Force (JOTF) is an independent, nonprofit organization that advocates for better jobs, skills training, and wages for low-income workers and job seekers in Maryland. JOTF strongly supports Senate Bill 211 as a means to ensure that hardworking Marylanders can take family and medical leave without having to risk their job, paycheck or financial security.

According to the U.S. Bureau of Labor Statistics, nationally, in 2018, 16% of workers in private-industry businesses had access to paid family leave. Family leave is granted to an employee to care for a family member and includes paid maternity and paternity leave. Low-wage workers or those who worked in small businesses were less likely to receive paid family leave.

The Pew Research Center performed a study on paid family and medical leave based on two nationally representative online surveys conducted in 2016. The study found that 27% of adults employed in the previous two years reported taking parental, family, or medical leave during that period, while 16% said they needed or wanted to take these types of leave during that period but were unable to do so. The Pew Research Center reports blacks and Hispanics, those without a bachelor's degree, and those with annual household incomes of less than \$30,000 are more likely than whites and those with more education or higher incomes to say they were not able to take leave when they needed or wanted to. According to the 2016 survey, employees that received only some pay or no pay when they took family or medical leave did the following: 78% reduced spending; 41% shortened their leave duration; 37% took on debt; 33% delayed paying their bills, and 17% went on public assistance.

This lack of paid family and medical leave drives families below the poverty level. Too often, the pay gap that occurs when a new mother must take unpaid leave after giving birth, combined with the increasing expenses of child care, sets families back for years to come. One study found that a significant share of bankruptcies follow a worker missing two or more weeks of work due to illness, or the illness of a family member. The lack of paid family and medical leave threatens the employment security of millions of workers because it reduces the chances that an individual will stay employed at their current job. The reality is that most workers have caregiving responsibilities at one time or another, but lack the workplace support to balance these obligations with work. The benefits of paid family and medical leave would be largest for those with limited education and lower incomes, as these workers currently have the lowest levels of access to any form of leave, paid or unpaid.

# JOTF JOB OPPORTUNITIES TASK FORCE

*Advocating better skills, jobs, and incomes*

Paid family leave has been very successful in other states, most notably, California. For workers in low-quality jobs, PFL increased job retention and financial security, and workers reported a positive effect on their ability to care for a new child. Since California's success, eight states plus the District of Columbia have enacted legislation to create state paid family and medical leave insurance programs. It is time for Maryland to join these states.

Senate Bill 211 seeks to do just this, by establishing a Family and Medical Leave Insurance Fund under the supervision of the Secretary of the Division of Unemployment Insurance at MDL. When taking unpaid or partially paid family or medical leave, the fund would provide a weekly benefit of up to 50% of wages (not to exceed \$ 1,000) for a maximum of 12 weeks per year. The fund would be fully funded by both employee and employer contributions, placing no additional financial burden on employers.

We urge a favorable report of Senate Bill 211, as it would ensure that millions of hard-working Marylanders, in particular low-income workers who are least able to lose even a single paycheck, are able to take necessary time off for family and medical life events without the risk of falling into poverty. This bill brings us one step closer to a more prosperous and vibrant economy in Maryland, where all workers have the necessary workplace supports to thrive and successfully balance work and life.

# **Amalgamated Duffy Paid Family Leave Testimony Janu**

Uploaded by: Duffy, Caitlin

Position: FAV



**Testimony in Support of SB 211 “Labor and Employment - Family and Medical  
Leave Insurance Program - Establishment (Time to Care Act of 2021)”  
Submitted to the Senate Finance Committee on January 28, 2021**

**Position: Support**

My name is Caitlin Duffy. I’ve been a resident of Montgomery County, Maryland since 2014. I work with Amalgamated Bank, a national socially responsible bank that serves clients across 50 states. We are a financial institution that proudly supports workers’ rights and an inclusive economy that works for all.

We understand that working families can’t seize economic opportunity if they don’t have access to paid leave for serious family and medical needs, which is why we support Maryland’s Time to Care Act. The proposed program would enable workers to earn a portion of their pay when they need to take time off to care for a new child, an ill or disabled family member, or their own serious health condition.

Legislation such as this simply makes sense. It’s good for families, which is ultimately good for business. As an employer, we’ve seen the advantages of paid family leave in action. The policy helps us retain good workers who are able to give us 100% while they’re on the job, while allowing them to meet their health needs and caregiving responsibilities.

We believe that employers should provide a level of economic security to their employees and enable them to be their best at work and at home. Given how tight budgets are in this region, we know that most workers in this country can’t afford to miss a paycheck for a health or family issue. For us, the benefits could outweigh the costs.

Amalgamated Bank supports legislation in our home state of New York, across the country, and at the federal level to ensure that our customers, and all Americans, have the paid family leave they need to ensure financial security. We urge your favorable consideration.



**Support - SB 211 UULM-MD Craig Beyler 2021 -.pdf**

Uploaded by: Egan, Ashley

Position: FAV



**TESTIMONY IN SUPPORT OF SB 211:  
Labor and Employment - Family and Medical Leave Insurance Program -  
Establishment (Time to Care Act of 2021)**

TO: Senator Delores Kelley, Chair, and members of the Finance Committee  
FROM: Craig Beyler, Chair, Task Force for Economic Justice, Unitarian Universalist  
Legislative Ministry of Maryland

DATE: January 28, 2020

As a community of faith, Unitarian Universalists affirm the dignity and worth of all people. It's a bedrock principle that we hold dear and promote throughout the community. There is a dignity that arises out of caring for one's family.

All workers should be able to take paid leave for newborn children and family illness. Existing law calls for leave but does not provide for paid leave. For many Marylanders, taking unpaid leave is simply not possible. They live paycheck to paycheck. Family and Medical Leave should be for every Marylander, not just the affluent. We don't want Marylanders to face impossible choices between job and family.

The bill provides for paid Family and Medical Leave through an insurance program administered by the state and funded by the employer and the employee. This is a common-sense approach that has worked for other forms of statewide insurance (like unemployment insurance).

This is a common-sense solution to a statewide problem and supports families throughout the State of Maryland. Please support SB211 "Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)."

# **Legislative Testimony 211.pdf**

Uploaded by: Elliott, Richard DeShay

Position: FAV

Legislative Testimony:  
SB211

I support Senator Hayes' Senate Bill 211 to expand leave opportunities for Maryland workers, as they greatly deserve.

**RICHARD  
ELLIOTT**  
**FOR MARYLAND**

By Authority: Rich Elliott For Maryland Keanu Smith-Brown, Campaign Chair Christian Hillian, Treasurer

# **Comptroller testimony on SB 211.pdf**

Uploaded by: Ford, Sean

Position: FAV



Peter Franchot  
Comptroller

## TESTIMONY OF COMPTROLLER PETER FRANCHOT

### Support - Senate Bill 211 - Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)

*Finance Committee*

*January 28, 2021*

Chairman Kelley, Vice Chairman Feldman and members of the Committee, it is my pleasure to provide testimony in **support** of **Senate Bill 211 - Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)**. I would like to thank Senator Antonio Hayes for sponsoring this important legislation, and the Committee for providing the opportunity for my testimony to be heard.

One of the many inequities that the COVID-19 pandemic has revealed is our country's lack of paid family and medical leave policies. The measure before you today is vitally important to correct that inequity and ensure that workers can care for themselves and loved ones in times of illness without jeopardizing their financial security or employment.

It shouldn't take a global pandemic for us to recognize that all workers deserve the freedom and peace of mind that comes with having a paid family and medical leave program. Maryland should declare that it is both good public health policy and good economics to give workers the ability to stay home when they are sick, or care for family members when they need help.

For the reasons stated above, I respectfully request a **favorable report** for Senate Bill 211. Thank you for your time and consideration.

###

# **GCC Paid Family Leave SB0211.pdf**

Uploaded by: Gee, Flora

Position: FAV



**SB0211- SUPPORT**

Flora Gee  
GCC, Inc Greenbelt Children's Center

flora@greenbeltchildrenscenter.com

**SB0211- Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)- SUPPORT**

*Finance Committee  
January 28, 2021*

Dear Chair Dolores G. Kelley and Finance Committee Members,

Thank you and your committee for your consideration of this important issue that will mean so much to Maryland workers and their families.

I'm a Maryland business owner and I am joining a coalition of diverse businesses to support the Time to Care Act so that families can have the financial security to care for themselves and their loved ones after the birth or adoption of a child or in the case of serious illness.

Marylanders face impossible choices when new children are born or adopted and when serious personal or family health needs arise. The Time to Care Act would make paid leave available to Maryland workers for up to 12 weeks following the birth or adoption of a child, and when needed to provide care for a family member or oneself. The leave would be funded through an insurance pool, into which workers and their employers contribute.

As a Children's Center, paid family leave is good for our business and our employees. When Paid Family Leave is administered through an insurance program, small businesses benefit because the cost is shared. As many of us have experienced through offering these benefits, first-time moms who take paid leave are more likely to return to the same employer. All families should have this safety net.

For these reasons, I am signing on in support of the Time to Care Coalition to urge the Maryland Legislature to pass legislation establishing a Family and Medical Leave Insurance Program.

Flora Gee, M.Ed.  
President/Director  
Greenbelt Children's Center 7600 Hanover Parkway, Suite 100, Greenbelt, Maryland 20770  
301-345-8830 Office [www.greenbeltchildrenscenter.com](http://www.greenbeltchildrenscenter.com)



**SB 211 testimony.pdf**

Uploaded by: Goldsmith, Tami

Position: FAV



Moving Forward • Advocating for Change

**Testimony in Support**  
**Labor and Employment – Family and Medical Leave Insurance Program Establishment**  
**(Time to Care Act of 2021)**

**Finance**  
**January 28, 2021**  
**By Ken Capone**

Hello committee members. I am the Public Policy Director for People On the Go which is Maryland's statewide self-advocacy organization. We are here to testify in support of SB211 The Family and Medical Leave Insurance Program.

As you be aware, nearly all of us will need to take leave at some point, whether to care for a family member's or our own serious medical condition or disability, or the joyous occasion of welcoming a new child. Without access to paid leave, workers often face a difficult and unnecessary decision, health and family, or work and making ends meet. Not now but in the past, my mother had to take off work to care for me if I got sick or my support needs intensified, or even longer when I had surgery, I know it was a hardship for us. It would have been nice to have something like this back then. More than 70% of family members caring for a person with Intellectual and or Developmental Disabilities report that caregiving interfered with their work and the odds of an employee losing income increases by 48% if the person lives with a child with disabilities and by 29% if the person lives with and supports an adult with disabilities. That is a significant amount of people experiencing economic hardship. When people having access to dedicated paid family leave, it reduces the odds of losing income by 30%.

As more people with intellectual and or developmental disabilities are supported to work, these additional benefits are important. People with disabilities need leave for the same reasons as all other workers and in the US addressing one's own health condition or disability makes up 55% of all leave taken. People with disabilities are more likely to be employed in low-wage, part-time jobs that provide fewer supports. Access to paid leave increases opportunities for people with disabilities so that we can be supported when needs intensify Just like I did from time to time. The benefits to people with disabilities and their families are clear. Both the person that is sick and the person that is caring for them have time they need to be together and get or give support. They will be less stressed which in turn speeds up the healing process. In conclusion, SB211 gives people with disabilities the comfort of knowing that they shouldn't feel guilty anymore because they may need extra care from a family member from time to time and it won't be a hardship on the family.

Thank you

**Time to Care WISE Support letter 2021.pdf**

Uploaded by: Gorski, Jessica

Position: FAV

**TESTIMONY OF JESSICA GORSKI**

**Maryland WISE Women, Healthcare Huddle Facilitator**

**IN SUPPORT OF SB 211**

**“Labor and Employment - Family and Medical Leave Insurance Program**

**- Establishment (Time to Care Act of 2021)”**

**Submitted to the Senate Finance Committee January 28, 2021**

**Position: SUPPORT**

Chairwoman Kelley and members of the Senate Finance Committee thank you for the opportunity to testify in support of SB 211 – The Time to Care Act. My name is Jessica Gorski and I am the Healthcare Huddle Facilitator for Maryland WISE Women, an organization of over 800 women in Anne Arundel County. I also serve on the WISE Leadership Committee. In addition, I represent WISE as a member organization of the Maryland Legislative Coalition (MLC), a group of grassroots organizations consisting of over 30,000 Marylanders statewide. We strongly encourage a favorable report for SB 211 which establishes a Family and Medical Leave Insurance (FAMLI) program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves.

The vast majority of working people in the United States do not have paid family leave through their jobs. In Maryland, even unpaid leave under the federal Family and Medical Leave Act is inaccessible for 56 percent of working people. Marylanders need a real policy solution to address the nation’s paid leave crisis. Paid family and medical leave means greater economic security, stronger families and businesses, greater equity regardless of a person’s job or health status and more workplace equality for women. People – especially women – aren’t forced to leave the labor force to care for their families or health, reducing turnover for employers and boosting the economy.

Thank you for your consideration. WISE urges a favorable vote on SB 211.

# Hay-Chatterjee SB0211.pdf

Uploaded by: Hay-Chatterjee, Priya

Position: FAV

Priya Hay-Chatterjee, Montgomery County Resident

**Testimony for SB0211, “Time to Care Act”**

**Position: Support**

It is time for Maryland to guarantee workers the paid family leave they deserve—not limited to, but especially during a global pandemic that has made family and care so vital and precarious.

Since politicians so often point to small businesses as reasons to deny their constituents paid family leave, it’s important to note that according to the Maryland Center on Economic Policy, 61% of small business owners support establishing state paid family and medical leave programs. Supporting paid family leave is the right thing to do. For these reasons, I urge a favorable report on SB0211.

**Time to Care Act Testimony 2021 (1).pdf**

Uploaded by: Hayes, Antonio

Position: FAV

ANTONIO HAYES  
Legislative District 40  
Baltimore City

Finance Committee



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Antonio.Hayes@senate.state.md.us

THE SENATE OF MARYLAND  
ANNAPOLIS, MARYLAND 21401

January 28, 2021

**Testimony of Senator Antonio Hayes in Support of SB 211:  
Family and Medical Leave Insurance Program**

Chairman Senator Kelley and Members of the Finance Committee,

It is with great pleasure that I reintroduce the Time to Care Act this session because I believe that almost all Marylanders, whatever their circumstances, will at some point in their lives, need extended time away from work to provide necessary care for a family member or for themselves. Despite this, only 17% of U.S. workers have access to paid family leave, and fewer than 40% have paid personal leave for short-term disabilities. Unpaid leave forces too many Americans, especially those whose needs are the greatest, to choose between the job they need and the family they love. Nearly 25% of women, for example, take 10 or fewer days of maternity leave, potentially putting themselves and their children at risk physically and emotionally. Families endure financial hardships, mental and physical distress. People suffer needlessly, none of which is helpful to employers either.

Covid-19 has brought to light the harsh realities that far too many face in deciding if they are able to afford caring for a loved one. Nearly 350,000 Marylanders have contracted Covid-19 since the start of this pandemic and this has brought real hardship to families across the state. It is truly a shame that people are forced to choose between economic security and caring for their family. This pandemic has only heightened the need for a sensible paid family leave program and that is what the Time to Care Act provides.

The Time to Care Act (**SB 211**), by establishing a Family and Medical Leave Insurance Program (FAMLI), would make paid leave available to Maryland workers for up to 12 weeks following the birth or adoption of a child and when needed to provide care for a family member or oneself. Support for this legislation crosses party lines and reaches all corners of the state. A state-wide poll of 1,011 Maryland registered voters was conducted December 11-26, 2020 and identified extremely strong support for a proposed family and medical leave program. Eighty-eight percent of voters favor this proposal, while only 8% oppose it.

**SB 211**, administered by the state's Division of Unemployment Insurance, allows for time away from work with partial wage replacement to care for new babies/children, elderly dependents, other family members with health/(dis)ability needs, or to take care of ourselves. The definition of "family member" mirrors the definition in the newly amended Maryland Healthy Working



Families Act of 2017 and includes: a child, parent, spouse, grandparent, grandchild, or sibling. Adoptive, foster, guardianship, in loco parentis, and step-relationships are all included in these categories. Individuals filing claims must provide certification supporting the claim, for example from a doctor.

The program provides wage replacement during the leave period ranging from \$50 to \$1000 per week. The benefit level is calculated based on the employee's weekly wage and the State's average weekly wage. In general, the amount received by low-income employees reflects a higher percentage of their total wages. Costs associated with start-up and ongoing administration of the program are borne by the program fund itself. The fund will collect contributions for 18 months before providing payouts to recipients. Collections are to start January 2022, while benefits will not start to be distributed until July 2023.

**SB 211** establishes a 50/50 split for employee and employer contributions. The legislation allows for employers' family and medical leave benefits to use a private program as long as it provides benefits equal to or exceeding those in the legislation. There is a combined contribution rate of no more than 0.75% of total wages. It also increases the salary ceiling for the 90% wage replacement level from 50% to 65% of state weekly wage. The self-employed can also enroll, and individuals can take intermittent leave, if necessary, meaning they could take their time off on non-consecutive days. However, employees may not take leave under this legislation and leave under FMLA consecutively, ie. leave "stacking" is not allowed. Based on experiences elsewhere, the average payroll deduction from each employee would be in the neighborhood of \$3 to \$4 a week.

A total of 9 other states and our neighbors in Washington DC have already enacted similar programs. California, New Jersey, and Rhode Island's programs have been established the longest.

It is important to note that allowing individuals an opportunity to care for a newborn or sick relative without losing their job or facing bankruptcy is a benefit that touches all of us. It's good for employers. It's good for families. It's good for keeping health care affordable. It's good for society at large. Paid family and medical leave means a stronger economy, healthier families and businesses, greater equity regardless of a person's job and more workplace equality for women.

**I strongly urge a favorable report on SB 211.**

Respectfully,



Senator Antonio L. Hayes  
40<sup>th</sup> Legislative District - MD

# **Time to Care Act Testimony.pdf**

Uploaded by: Hicks, Myles

Position: FAV



**Bill No.:** SB211

**Title:** Time to Care Act— Family and Medical Leave Insurance Program

**Committee:** Finance

**Hearing Date:** January 28, 2021

**Position:** Support

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Dear Chair Kelley,

I am writing to you in support of SB211/HB375 - the Time to Care Act, which would establish a paid family leave insurance program. Since the start of 2021 I have had the pleasure of serving as Executive Director of Maryland Rise and working with the Time to Care Coalition as campaign manager. The numerous stories and data that have been presented to me displays the positive impact that a paid family leave insurance program will have to Marylanders.

Maryland Rise works to ensure that our state government and economy work for the majority of residents. The Time to Care Act will help address the economic hardship, stress, and other burdens that come into play when caring for new babies, loved ones with serious health conditions, or yourself. Employees' ability to take up to 12 weeks of paid leave will help Maryland families meet their caregiving, employment, and financial needs and commitments while caring for their family.

An OpinionWorks study conducted from December 11-26, 2020, showed overwhelming support that crosses all partisan and geographic lines for paid family leave in Maryland. Results showed 88% of Maryland voters specifically favor creation of “a family and medical leave insurance program that would provide workers with partial wage replacement for up to 12 weeks when they need time away from work to care for a new child, seriously ill family member, or their own serious health condition.”

No Marylander should have to choose between the job they need and the family they love. Every Marylander deserves a secure and prosperous life for themselves and their families, and paid family leave will get us one step closer.

Thank you,

Myles Hicks  
Executive Director  
Maryland Rise  
410-404-2170  
myles@marylandrise.org

# **SB 211.pdf**

Uploaded by: Honesto, Meghan

Position: FAV

Meghan Honesto

Odenton, MD  
honestlymegs@gmail.com

January 26, 2021

Senator Antonio Hayes  
222 James Senate Office Building  
11 Bladen Street  
Annapolis, MD 21401

Testimony in Support of SB 211 “Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)

Submitted to the Senate Finance Committee  
Position: SUPPORT

Good Afternoon!

My name is Meghan Honesto. I am a commissioner with the Anne Arundel County Commission for Women. I reside with my family in Odenton, Maryland, Anne Arundel County, District 21.

I am writing in support of the SB 211 bill, which establishes a Family and Medical Leave Insurance (FAMLI) A program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves.

If the last nine months have taught us anything it is that we should not have to choose between our work and caring for our loved ones. I lost my job in April due to the Covid-19 pandemic, but prior to that my husband and I had to make some tough decisions about who would care for our children with schools and daycare closings. Women need to know that our elected officials see them as equals in the home and in the workforce. This bill would help hardworking Marylanders, and couples have options and not choose between their sense of duty to work and to care for their families. I thank you for your consideration and urge a favorable vote on SB 211.

Regards,

Meghan Honesto, Commissioner

Anne Arundel County Commission for Women

# MAP - SB 211 - Time to Care - Support.pdf

Uploaded by: Jefferson , Stacey

Position: FAV



## TESTIMONY IN SUPPORT OF SB 211

### Labor and Employment – Family and Medical Leave Insurance Program – Establishment

*Senate Finance Committee*

**January 28, 2021**

*Submitted by Stacey Jefferson and Julia Gross, Co-Chairs*

#### **Member Agencies:**

Advocates for Children and Youth  
Baltimore Jewish Council  
Behavioral Health System Baltimore  
CASH Campaign of Maryland  
Catholic Charities  
Episcopal Diocese of Maryland  
Family League of Baltimore  
Fuel Fund of Maryland  
Health Care for the Homeless  
Homeless Persons  
Representation Project  
Job Opportunities Task Force  
League of Women Voters of Maryland  
Loyola University Maryland  
Maryland Catholic Conference  
Maryland Center on Economic Policy  
Maryland Community Action  
Partnership  
Maryland Family Network  
Maryland Hunger Solutions  
Paul's Place  
Public Justice Center  
St. Vincent de Paul of Baltimore  
Welfare Advocates

#### **Marylanders Against Poverty**

Stacey Jefferson, Co-Chair  
P: 410-637-1900 ext 8578  
C: 443-813-9231

E: [stacey.jefferson@bhsbaltimore.org](mailto:stacey.jefferson@bhsbaltimore.org)

Julia Gross, Co-Chair  
P: 410-528-0021x6029

E: [jgross@mdhungersolutions.org](mailto:jgross@mdhungersolutions.org)

**Marylanders Against Poverty (MAP) strongly supports SB 211**, which establishes a Family and Medical Leave Insurance (FAMLI) program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, family members with serious health conditions or disabilities, family members who are leaving for deployment, or for their own health conditions.

**The overwhelming majority of employees in the United States cannot afford to take time away from work when their families need them most.** According to a report by the Center for American Progress, low-wage families are the ones most in need of financial support when illness strikes or when a child is born—and the most likely to take on the care of a family member because they cannot afford a professional caregiver.<sup>1</sup> Too often, out of economic necessity, new parents are forced to go back to work within days of welcoming a new child, forgoing precious bonding and recovery time. Lack of paid leave – which is concentrated in low-wage jobs – exacerbates economic inequality.<sup>2</sup> Implementing a paid family leave program, especially with a progressive pay structure as proposed in SB 211, increases the health and financial security of Marylanders living in or near poverty.

**Paid Leave is good for families, good for public health, and good for Maryland's economy.** Access to paid leave improves the health and wellbeing of children, parents, and caregivers. Studies show paid leave can reduce depressive symptoms for new mothers, boost maternal and child health outcomes, and promote parent-child attachment. Additionally, paid leave allows people to recover from serious illness, and creates opportunities for caregivers to tend to their family members and help them fulfill treatment plans, which reduces complications and hospital readmissions.<sup>3</sup> Ultimately, broadening the scope of who can access paid leave reduces the likelihood that low-income Marylanders will need to access state-funded safety-net programs, which benefits Maryland's economy.

In the richest state in the country, it is unacceptable that families can fall into debt, poverty, and homelessness due to lost income from illness, deployment, or welcoming a new child. No one should have to choose between treating a serious health problem, caring for a family member, and meeting their basic needs.

**MAP appreciates your consideration, and strongly urges a favorable report on SB 211.**

**Marylanders Against Poverty (MAP) is a coalition of service providers, faith communities, and advocacy organizations advancing statewide public policies and programs necessary to alleviate the burdens faced by Marylanders living in or near poverty, and to address the underlying systemic causes of poverty.**

<sup>1</sup> Center for American Progress. (2019). *Paid Family and Medical Leave Must Be Comprehensive to Help Workers and Their Children*. <https://www.americanprogress.org/issues/women/reports/2019/07/16/472026/paid-family-medical-leave-must-comprehensive-help-workers-children/>

<sup>2</sup> CLASP. (2014). *Access to Paid Leave: An Overlooked Aspect of Economic & Social Inequity*. [https://www.clasp.org/sites/default/files/public/resources-and-publications/publication-1/2014-04-09-Inequities-and-Paid-Leave-Brief\\_FINAL.pdf](https://www.clasp.org/sites/default/files/public/resources-and-publications/publication-1/2014-04-09-Inequities-and-Paid-Leave-Brief_FINAL.pdf)

<sup>3</sup> National Partnership for Women & Families. (2019). *The Family and Medical Insurance Leave (FAMILY) Act*. <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/family-act-fact-sheet.pdf>

**SB 211 for AAUW MD.pdf**

Uploaded by: King, Roxann

Position: FAV





**Testimony of American Association of University Women of Maryland**

to the

**Maryland General Assembly  
Senate Finance Committee**

in support of

**Senate Bill 211: Labor and Employment – Family and Medical Leave Insurance Program -  
Establishment (Time to Care Act of 2021)**

Submitted by Roxann King, Vice President, Public Policy

The American Association of University Women of Maryland (AAUW Maryland) strongly supports 2021 SB 211. Founded in 1881, AAUW's approximately 170,000 members and 1,000 branches nationwide are leaders in gender equity research, advocacy, and philanthropy. In Maryland, we have over 4,000 members and supporters and 24 college and university partners. Our Maryland members are strong advocates for laws that promote the well-being of women and children.

Too many Marylanders must choose between work or family when illness strikes, babies arrive or aging or disabled family members require their care. Pre-pandemic, 79% of mothers were in the work force. Women's disproportionate loss of jobs during the pandemic to meet family needs emphasizes how important support is in more normal times for family stressors. When family health crises arrive, women may suffer wage losses in order to care for family. The lack of paid family and medical leave leads to economic instability, particularly for women, and contributes to the wage gap between women and men and women's financial vulnerability as they age.

The Time to Care Act of 2021 establishes a Family and Medical Leave Insurance Program that allows employees to take up to 12 weeks of paid leave to care for themselves or their families during family emergencies. This bill builds on the legislation passed in 2018 granting parental leave for state employees and the work of the Task Force to Study Family and Medical Leave Insurance. It has been a legislative priority for the Maryland Legislative Agenda for Women (MLAW) and for AAUW Maryland in both their 2019 and 2020 legislative agendas.

AAUW Maryland urges that you provide a favorable report of SB 211 – the Time to Care Act of 2021.

# **WA- SB211 - Paid Family Leave - Support.pdf**

Uploaded by: Klingenmaier, Lisa

Position: FAV



# Welfare Advocates

Founded 1979

228 W. Lexington Street — Suite 220 • Baltimore, Maryland 21201-3432  
Phone: 667.600.3356 • Fax: 410.889.0203

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## Senate Bill 211 Labor and Employment- Family and Medical Leave Insurance Program- Establishment

Senate Finance Committee  
January 28, 2021

### Support

Welfare Advocates is a statewide coalition of social service organizations, advocacy groups, faith communities, and community members, whose mission it is to educate ourselves, and the wider community and to advocate for an adequate safety net and public policies that support families moving towards economic stability.

**Welfare Advocates supports SB 211, which would establish a Family and Medical Leave Insurance (FAMLI) program in Maryland.** This program allows families to take up to 12 weeks of paid leave to care for new children, family members with serious health conditions or disabilities, family members who are leaving for military deployment, or for their own health conditions.

**The need to take time off is universal, but the ability to do so is not.** The vast majority of employees in the U.S. do not have access to paid family leave.<sup>i</sup> SB 211 would be particularly beneficial for low-wage workers who disproportionately lack access to this vital benefit. For low-income families, just a few days of lost pay is equivalent to an entire month's grocery budget or rent payment. Implementing a paid family leave program – especially with a progressive pay structure as proposed in SB 211 – increases the health and financial security of Marylanders living in or near poverty.

**No one should have to choose between caring for a loved one or paying the bills.** FAMLI provides a safety-net for workers in unexpected circumstances. This bill would allow workers to comfort a dying parent, care for a newborn or adoptive child, or care for themselves during an unexpected illness. Low-wage workers typically have to face tradeoffs by forgoing wages and job security to take time off to care for their families. Broadening the scope of who can access this benefit also reduces the likelihood that low-income Marylanders will need to access safety-net programs – such as TCA or SNAP – if they are able to access paid leave.

**Access to paid leave is a racial justice issue.** People of color on average earn significantly less than white workers<sup>ii</sup> and women of color in particular are more likely to be the breadwinner as well as caregiver for their families<sup>iii</sup>. Economic disparities make it harder for families to absorb financial emergencies, which in turn magnify their need for paid family leave. SB 211 presents an opportunity to take a tangible step in the effort to dismantle the inequities born of structural racism and oppression in the workforce and in our communities.

**For the reasons stated above, we respectfully urge a favorable report on SB 211.**

Submitted by Lisa Klingenmaier, Chair of Welfare Advocates

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<sup>i</sup> U.S. Bureau of Labor Statistics. (2018, September). *National Compensation Survey: Employee Benefits in the United States, March 2018*. <https://www.bls.gov/ncs/ebs/benefits/2018/employee-benefits-in-the-united-states-march-2018.pdf>;

<sup>ii</sup> The Center for Law and Social Policy (CLASP). [https://www.clasp.org/sites/default/files/publications/2018/12/2018\\_pfmliscriticalfor\\_0.pdf](https://www.clasp.org/sites/default/files/publications/2018/12/2018_pfmliscriticalfor_0.pdf)

<sup>iii</sup> National Partnership for Women and Families. <http://www.nationalpartnership.org/our-work/resources/workplace/paid-leave/paid-family-and-medical-leave-racial-justice-issue-and-opportunity.pdf>

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**MD Catholic Conference\_FAV\_SB0211.pdf**

Uploaded by: Kraska, MJ

Position: FAV



ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

**January 28, 2021**

**SB 211**

**Labor and Employment – Family and Medical Leave Insurance Program – Establishment  
(Time to Care Act of 2021)**

**Senate Finance Committee**

**Position: Support**

The Maryland Catholic Conference (“Conference”) represents the public policy interests of the three Roman Catholic (arch) dioceses serving Maryland: the Archdiocese of Baltimore, the Archdiocese of Washington, and the Diocese of Wilmington.

Senate Bill 211 establishes a Family and Medical Leave Insurance program in the state, through which employees may take up to twelve weeks of paid leave from their jobs when they are:

- Welcoming a new child from birth, adoption, or foster care placement;
- Suffering serious health conditions or disabilities;
- Involved in a relative’s military deployment or caring for a wounded service member; or
- Caring for aging parents or family members with critical needs.

The Conference supports efforts that increase the dignity of a person’s work as well as expand opportunities to care for themselves and their families during times of critical need, from the welcoming of a new child into the family through caring for aging parents, and every stage in between. In Maryland, only seventeen percent of working individuals have access to paid family leave, causing those who don’t to bear the devastating burden of whether to prioritize going to work or taking critically-necessary time to care for themselves or their families. Low-income workers are particularly harmed by this lack of leave, though the problem effects workers in every industry across the state.

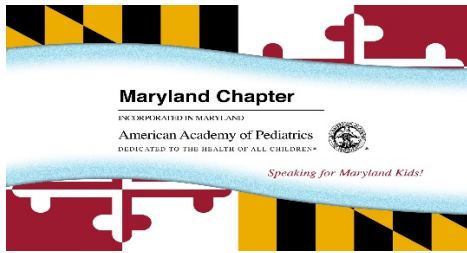
Taking necessary time to care for one’s family in times of incredible importance and need is crucial in developing healthy families that can grow and prosper, without concerns about losing a paycheck.

The Conference appreciates your consideration and, for these reasons, respectfully requests a favorable report on Senate Bill 211.

**SB0211\_FAV\_MDAAP\_Family & Medical Leave Ins. - Est**

Uploaded by: Lane, Wendy

Position: FAV



TO: The Honorable Delores G. Kelley, Chair  
Members, Senate Finance Committee  
The Honorable Antonio Hayes

FROM: Wendy Lane, M.D., MPH, Chair, Child Maltreatment and Foster Care Committee, Maryland Chapter  
of the American Academy of Pediatrics

DATE: January 28, 2021

RE: **SUPPORT** – Senate Bill 211 – *Labor and Employment – Family and Medical Leave Insurance Program – Establishment (TIME TO CARE ACT OF 2021)*

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The Maryland Chapter of the American Academy of Pediatrics is a statewide association representing more than 1,100 pediatricians and allied pediatric and adolescent healthcare practitioners in the State and is a strong and established advocate promoting the health and safety of all the children we serve. On behalf of MDAAP, we submit this letter of support for Senate Bill 211 – *Labor and Employment – Family and Medical Leave Insurance Program – Establishment (TIME TO CARE ACT OF 2020)*

Senate Bill 211 will establish Family and Medical Leave Insurance for Marylanders. It will provide employees up to 12-weeks paid leave to care for new children, family members with serious health conditions or disabilities, or themselves.

The first few months and years of a child’s life are vital to his or her physical and emotional development. Allowing a parent time to stay home with that child during the first months of life provides a myriad of benefits to the child and family. These include:

- Effective maternal-child and paternal-child bonding
- Attention to child health care needs, particularly if a baby is born premature, at low birth weight, or with birth defects.
- Strong establishment of breastfeeding, and longer duration of breastfeeding. This can reduce respiratory track and ear infections, and reduce the risk of sudden infant death syndrome. It may also reduce rates of childhood obesity, type 2 diabetes, allergies, and asthma.<sup>1</sup>
- Increased involvement of fathers in children’s care.<sup>2</sup>
- Improved vaccination completion.<sup>3</sup>
- Increased placement in high quality, stable child care.<sup>4</sup>

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<sup>1</sup> <https://www.nichd.nih.gov/health/topics/breastfeeding/conditioninfo/benefits>

<sup>2</sup> Nepomnyaschy L, Waldfogel J. Paternity leave and fathers’ involvement with their young children: Evidence from the American ECLS-B. *Community, Work, and Family*. 2017;104(4):427-453

<sup>3</sup> Skinner & Ochshorn, “Paid Family Leave”; Mark Daku, Amy Raub, & Jody Heymann, “Maternal leave policies and vaccination coverage: A global analysis,” *Social Science & Medicine* 74(2012): 120-124.

<sup>4</sup> National Partnership for Women & Families, 2018. <http://www.nationalpartnership.org/our-work/resources/an-agenda-for-progress-for-women-and-families.pdf>

- Reduced rates of abusive head trauma (shaken baby syndrome).<sup>5</sup>
- Decreased infant mortality<sup>6</sup>
- Reduced rates of maternal post-partum depression<sup>7</sup>

Family leave policies ensure that all parents have the opportunity to stay home with their newborn or sick child, to develop a strong family bond, and to improve health outcomes. For all of these reasons, MDAAP strongly urges a favorable report.

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<sup>5</sup> Klevens J, Luo F, Xu L, Peterson C, Latzman NE. Paid family leave's effect on hospital admissions for pediatric abusive head trauma. *Injury Prevention*. 2016;22(6):442-445.

<sup>6</sup> M. Rossin, "The effects of maternity leave on children's birth and infant health outcomes in the United States," *Journal of Health Economics* 30(2011): 221-239; S. Tanaka, "Parental leave and child health across OECD countries," *The Economic Journal* 115(2005): F7-F28.

<sup>7</sup> Kornfeind KR, Sipsma HL. Exploring the link between maternity leave and postpartum depression. *Women's Health Issues*. 2018;28(4):321-326.



# **SCCAN SB211 Time to Care Act 2021 Written Testimon**

Uploaded by: Lane, Wendy

Position: FAV



## **State Council on Child Abuse and Neglect (SCCAN)**

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**[Claudia.Remington@maryland.gov](mailto:Claudia.Remington@maryland.gov)**

SCCAN is an advisory body required by Maryland Family Law Article (Section 5-7A) “to make recommendations annually to the Governor and General Assembly on matters relating to the prevention, detection, prosecution, and treatment of child abuse and neglect, including policy and training needs.”

### **TESTIMONY IN SUPPORT OF SB 211:**

#### **Labor and Employment—Family and Medical Leave Insurance Program—Establishment (Time to Care Act of 2021)**

TO: Hon. Delores G. Kelley, Chair, and members of the Senate Finance Committee

FROM: Wendy Lane, MD, MPH, Chair, State Council on Child Abuse & Neglect (SCCAN)

Claudia Remington, Executive Director, State Council on Child Abuse & Neglect (SCCAN)

DATE: January 28, 2021

The State Council on Child Abuse and Neglect (SCCAN) strongly supports SB 211 which would establish a paid family and medical leave program to the benefit of Maryland’s children and their families. It will provide employees up to 12-weeks paid leave to care for new children, family members with serious health conditions or disabilities, or themselves. Primary prevention of child maltreatment is a critical focus of the Council. Investing in the healthy development of the next generation is critical to reducing child maltreatment in Maryland.

#### **Maryland’s Future Needs Paid Family Leave**

- In Maryland, we take seriously our role as stewards of the next generation, and know that our ability to raise healthy children who will lead tomorrow’s communities requires smart and innovative thinking today. The good news is that the science of the developing brain and the Adverse Childhood Experience (ACE) Study are clear about what children need to thrive.
- The time after the birth or adoption of a baby is an essential time of development for babies and families. Because early relationships nurture early brain connections that form the foundation for all learning and relationships that follow, parents and caregivers are on the front line of preparing our future workers, innovators, and citizens.
- Most working parents do not have access to paid family leave. Many parents must make the impossible choice between unhurried time to bond with their babies and losing their jobs or economic security.
- Now is the time for policymakers to secure the best beginnings for children and the best future for our country by supporting a comprehensive paid family and medical leave program.

**Paid Family Leave Supports Babies' Health & Development** – Newborns reap the benefits of paid family leave, including:

- Better bonding with parents<sup>i</sup>
- Increased breastfeeding, including the health benefits for mother and child<sup>ii</sup>
- Improves vaccination completion<sup>iii</sup>
- Decreased infant mortality<sup>iv</sup>
- Increased placement in high quality stable childcare<sup>v</sup>

**Paid Family Leave has been Shown to Reduce Child Abuse<sup>vi</sup>**

- Research published in the journal *Injury Prevention* has shown that paid family leave is linked with fewer cases of abuse head trauma (AHT) in infants. AHT, including shaken baby syndrome, was shown to occur less in California, a state with paid family leave, as compared with seven states without the policy. AHT declined in California while other states' numbers actually rose during 2007-2009, during the "Great Recession".
- AHT is a leading cause of fatal child maltreatment in young children.
- According to lead researcher Joanne Klevens, M.D., Ph.D., M.P.H., of the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention (CDC), the study found that California's 2004 paid family leave policy was associated with decreased rates of AHT admissions in children under two years old compared to the states without this policy. The national average of AHT cases is 50 per 100,000 children. The California policy was associated with a fall of 5.1 cases per 100,000 children under one. As current prevention efforts have not been proven consistently effective in reducing AHT, this finding is significant.
- What's the connection between AHT and paid family leave? Parental stress and maternal depression are risk factors for child maltreatment. AHT is often a reaction to a baby's incessant crying and can result in long-term damage and even death of the infant. Paid family leave is associated with a
  - Reduction in parental stress, including financial stress
  - Reduction in maternal depression<sup>vii</sup>

***For these reasons, the Maryland State Council on Child Abuse & Neglect (SCCAN) respectfully urges a favorable report on SB 211, the Time to Care Act of 2021.***

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<sup>i</sup> Curtis Skinner & Susan Ochshorn, "Paid Family Leave: Strengthening Families and Our Future," (January 2014): accessed September 1, 2016, <http://bit.ly/1M7HrRv>

<sup>ii</sup> M. Baker & K. Milligan, "Maternal employment, breastfeeding, and health: Evidence from maternity leave mandates," *Journal of Health Economics* 27(2008): 871-887; R. Huang & M. Yang, "Paid maternity leave and breastfeeding practice before and after California's implementation of the nation's first paid leave program," *Journal of Economics & Human Biology* 16(2015): 45-59.

<sup>iii</sup> Skinner & Ochshorn, "Paid Family Leave"; Mark Daku, Amy Raub, & Jody Heymann, "Maternal leave policies and vaccination coverage: A global analysis," *Social Science & Medicine* 74(2012): 120-124.

<sup>iviv</sup> M. Rossin, "The effects of maternity leave on children's birth and infant health outcomes in the United States," *Journal of Health Economics* 30(2011): 221-239; S. Tanaka, "Parental leave and child health across OECD countries," *The Economic Journal* 115(2005): F7-F28.

<sup>v</sup> National Partnership for Women & Families, "Expecting Better." (2016).

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<sup>vi</sup> Joanne Klevens, Feijun Luo, Likang Xu, Cora Peterson, & Natasha E Lutzman, "Paid family leave's effect on hospital admissions for pediatric abusive head trauma," *Injury Prevention* (2016): Doi: 10.1136/injuryprev-2015-041702

<sup>vii</sup> "But our study showed that women who return to work sooner than six months after childbirth have an increased risk of postpartum depressive symptoms." The study is published in the *Journal of Health Politics, Policy, and Law*. Maternity Leave Duration and Postpartum Mental and Physical Health: Implications for Leave Policies Rada K. Dagher Patricia M. McGovern Bryan E. Dowd

*J Health Polit Policy Law* (2014) 39 (2): 369-416.

<https://doi.org/10.1215/03616878-2416247> April 2014

# **SB211 - Anita Lampel.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

Anita Lampel

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**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

My name is Anita Lampel. I live in Bethesda, in District 16. This testimony is in support of SB211/HB375, the Time to Care Act.

In the middle of this COVID pandemic my eight-year-old grandson had a medical emergency. His symptoms increased at home over a week's time until his parents decided they had to take him to the emergency room. There, one parent waited overnight with him until he could be seen by a specialist, while the other parent stayed with my five-year-old granddaughter. My grandson was admitted to the hospital, then transferred to another hospital by ambulance, then released home because that hospital could not help even though he tested positive for an active infection. His recovery at home, still ongoing, has lasted over a month.

My son and daughter-in-law are working parents with two school-age children. This situation crippled my self-employed daughter-in-law's ability to manage her business and employees. It crushed my son's ability to respond to the needs of his clients at his law firm.

Families must have a financial safety net and a guarantee that a job still waits for them when they must take time off to care for themselves or an ill family member. If COVID teaches us anything, it teaches us that we are all responsible for each other—wear a mask, keep your distance—and that serious illness can come to any door and devastate the emotional, social, and economic lives of those impacted.

I ask you to act ethically for Marylanders. **I respectfully urge a favorable report on SB211**

# **SB211 - Carol Stern.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

Carol Stern

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**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Carol Stern

My name is Carol Stern, and I am testifying in favor of SB211/HSB375, the Time to Care Act, as a resident of Montgomery County's District 16.

The Jewish text that shapes my religious and moral conviction that every employee in the state of Maryland should have access to paid family and medical leave explains that *pikuach nefesh*, the saving of a life, supersedes all other commandments. This assures us that we have a moral obligation to pursue life at any cost. Offering paid leave to employees is an act of *pikuach nefesh* since it prioritizes people's health and well-being. This is a directive for us to secure the wellness of the labor force, which passing the Time to Care Act can help to do.

I have used employer sponsored paid family leave during three crucial times of my life - the birth of my two children, the major illness of my spouse, and during the last weeks of my mother's life. I was one of the fortunate Americans who worked for a Fortune 500 Company that offered this benefit. I know personally how invaluable this paid time off was for me and my family. It is a benefit that all employees should have when these life events occur.

Maryland needs to pass a comprehensive paid family and medical leave law that allows workers to care for themselves and family members without sacrificing their livelihood. We know that caregiving now spans the life cycle of all families from the care of a newborn, to a sick loved one, an aging family member, and the employee's own health. Giving people 12 weeks of paid leave will remove the stress and burden of taking an unpaid day off, which might mean job termination. No one should ever be asked to make that choice, yet too many workers who need time off often do so at the expense of their own financial well-being. Especially during this time of the unprecedented pandemic when so many are caring for family members, the need is even more crucial for this coverage.

**I respectfully urge a favorable report on SB211.**



# **SB211 - Debra Band.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

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**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Debra Band

My name is Debra Band. I live in Potomac, in District 15. I am submitting this testimony in support of SB211/HB375, the Time to Care Act.

Paid family leave is essential to enable family members to maintain their careers, earning ability and psychological health in the case of family illnesses that require their constant availability. The ability to be constantly available for the needs of a sick loved one, which is generally denied to employed persons in Maryland has been very important in my own life.

I am a self-employed artist and writer, with a regular schedule of commissions with many months lead-time and publishing deadlines; I have the ability to accept and schedule my work largely at will, and always have the flexibility to shape the extent and hours of my work activities around family needs. This flexibility had already proven valuable during our children's typical childhood illnesses, but took on far greater importance from the date of my forty-fifth birthday. That evening, a few months after my family moved to Maryland in 2001, my late first husband, David Band, an astrophysicist employed by UMBC for work at Goddard Space Flight Center, who had had several months of strange back-aches, was diagnosed with what turned out to be a unique spinal cord cancer. His diagnosis initiated a 7.5 year train of intensive medical treatment that included the following: day-long visits for consultations at the NIH Clinical Center, many surgeries and hospitalizations, often for weeks at a time (and each hospitalization required my frequent presence to advocate for him) followed by weeks of recuperation at home, trips out of town for additional treatments, and regular periods when he was medically fragile from complex, sometimes experimental chemotherapy and needed careful monitoring, and finally, a demanding two-week home-hospice period prior to his passing in March 2009.

As David's wife it was my responsibility to coordinate much of his care out of the home, and often provide full-time care for him in our home. Managing my work during his periods of greatest need became increasingly complicated (including even setting up an impromptu art studio in some of his hospital rooms at the NIH, and writing whole sections of books waiting for consultations with doctors) and I was able to cancel or reschedule out-of-town speaking engagements as necessary. I realized exactly how fortunate – being self-employed provided the flexibility to take the time off, or reorganize my work to mesh with family and caregiving responsibilities.

A far lesser period of such family demands would have been devastating had I been employed in a more traditional way. At several points early in David's illness I seriously considered re-training for other more conventional (and remunerative) employment, but no sooner did I take a step in any of those directions, than he suffered yet another medical crisis, and it became clear that I needed to maintain my flexibility. Few people are fortunate enough to have the kind of flexibility to balance the expectations of their job with their absolute responsibilities within their families. Family illnesses far less lengthy than my husband's could well result in firing, or lengthy periods without income, which would cripple a caregiver's ability to continue supporting themselves and their families—just because they are struggling to meet fundamental human responsibilities thrust unhappily upon them, often with no time to plan at all. Paid family and medical leave would enable caregivers to strike a reasonable balance between work and the health and wellbeing of their families, maintaining their income as well as their psychological health as they struggle to meet their obligations to those they love and to their employers.

**I respectfully urge a favorable report on SB211.**

# **SB211 - Heidi Rhodes.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

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**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and members of the Finance Committee

**FROM:** Heidi Rhodes

My name is Heidi Rhodes and I live in Colesville, District 14. I am providing this testimony in support of SB211/HB375, the Time to Care Act.

Rabbi Hillel teaches us that we can't separate ourselves from our community; we all have a responsibility for each other's wellbeing and care. We must make sure that all people can take time to be with their families and attend to their own health. This teaching from Jewish tradition drives my support of this legislation.

Nobody should have to choose between their job and caring for themselves or their family. Nearly everyone needs time away from work at some point to care for a relative, deal with a serious personal illness, or welcome a baby, but many Marylanders do not receive paid leave benefits from their employers and can't afford to take unpaid leave.

This dilemma of choosing to be paid or to care for a sick family member was common in my community of single parents. I was lucky to have a limited amount of leave working for the federal government and I made the moral decision to use this to watch a neighbor's sick child rather than see them not going to work and not getting paid for that day.

Also, when I got married and knew I wanted children I began saving all my annual and sick leave. Although I was lucky to have this leave, in order to have money coming in after the birth of my child, I had to use almost all of this leave for the 6 weeks I took off. Thus, when I returned to work, I had no leave available for doctor's appointments or any emergencies at day care.

These two personal examples have taught me the incredible importance of paid family and medical leave. As such, **I respectfully urge a favorable report on SB211.**

# **SB211 - Jo Shifrin - Jews United for Justice.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

Jo Shifrin  
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THINK JEWISHLY. ACT LOCALLY.

**TESTIMONY IN SUPPORT OF SB0211/HB0375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Jo Shifrin, on behalf of Jews United for Justice (JUFJ)

My name is Jo Shifrin. I live in Bethesda in District 16 and I am writing on behalf of Jews United for Justice in support of SB211/HB375, the Time to Care Act. JUFJ organizes more than 5,500 Jewish Marylanders and allies in support of local campaigns for social, racial, and economic justice.

**The lack of paid family and medical leave has impacted my husband and me twice in the last 22 years.** In 1998, we discovered that my husband's mother, who was 86 years old, living alone, and diabetic, could not manage herself or her home. Shortly thereafter, she was diagnosed with Alzheimer's. She was adamant about not wanting to move to an assisted living community or a nursing home. So we found a house that could be adapted for two families, and moved the 3 of us into it. Her health began to quickly decline and I realized that I couldn't continue to work full-time. My employer didn't have a paid family and medical leave policy, so I was forced to leave the paid workforce and became a full time caregiver. We were very fortunate that my husband had a good paying job and we were able to take care of my mother-in-law and all of our bills. However, I am very aware that many are not that fortunate and have to make a decision between working to pay their bills and taking care of themselves or a loved one.

Fifteen years later, I was working as an independent contractor when I was diagnosed with breast cancer. The chemotherapy I received every two weeks made me sick for the first 11 or 12 days, so that it was nearly impossible for me to work for several months. A paid family and medical leave law would have reduced a great deal of the stress associated with being sick by lessening the financial burden.

At the same time I was dealing with my breast cancer, a single mother who lived nearby was suffering with the same diagnosis. She continued to work through her treatment because she didn't have the support she needed to take time off from work. Consequently, she never had the chance to rest and recover. A few months later, as I was getting back on my feet and returning to work, I learned that she had died. I wonder if things might have been different for her if she had had access to paid family and medical leave.

Nearly every one of us will face a situation where we need to take off an extended period of time from work, whether to bond with a new child, take care of a loved one whose health is in peril, or take care of ourselves when an unexpected injury or illness strikes. Please make 2021 the year in which we pass the Time to Care Act and finally recognize the universal needs of Maryland workers.

**I respectfully urge a favorable report on SB211.**

# **SB211- Laura Richman.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV



January 28, 2021

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**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Laura Richman

My name is Laura Richman. I live in Ellicott City in District 9A. This testimony is in support of SB211/HB375, the Time to Care Act of 2021.

The problem of taking leave for family health obligations is particularly acute in my mind because I recently dealt with managing the palliative care, and ultimately the death, of a very elderly parent who lived in another state. I was fortunate that I was able to do so without jeopardizing my income and financial stability, but for too many people this would not have been at all possible.

Not every employee has the luxury of telling their employer that they will be out for a few days, weeks, or months, especially if they work on an hourly basis, or for minimum wage. They shouldn't have to fear job loss because they have family or personal health and well-being obligations or needs that cannot be avoided. In fact, in many instances, people's jobs are terminated for just those reasons, which is cruel and unfair. I want my neighbors and all the employees with whom I interact at local businesses to be able to take necessary time off without going into debt or risking job loss.

Rabbi Hillel, one of Judaism's greatest formative leaders, sages, and scholars, taught that we cannot separate ourselves from our community and that we all bear responsibility for each other's well-being and care. I agree with Hillel that we must make sure that all people are able to take time to be with their families and attend to their own and their family members' health without fear of losing their jobs and source of income

**I respectfully urge a favorable report on SB211.**

# **SB211 - Lisa Firnberg.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

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**TESTIMONY IN SUPPORT OF SB211/HB375**  
**Labor and Employment - Family and Medical Leave Insurance Program - Establishment**  
**(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and members of the Finance Committee

**FROM:** Lisa Firnberg

My name is Lisa Firnberg, and I have lived and voted in Baltimore City since I moved to Maryland for college 18 years ago. I live in District 43. I have established my family roots here, and I submit this testimony in support of SB211/HB375, the Time to Care Act.

When I gave birth to my daughter three years ago, I was relatively lucky. I had an easy pregnancy, an uncomplicated c-section, and my daughter spent just a few hours in the NICU to ensure her steady breathing. I was also lucky professionally. My employer supported my taking maternity leave, and assured me that my job would be waiting for me when I returned. It's a good thing, because I was the primary breadwinner for my family.

But what income would I have while I cared for my newborn baby? First, I made a claim to my short term disability policy, the premium for which I paid myself. That got me a few weeks to recover from major surgery. Then I used up most of my paid vacation and sick time. That got me a few more weeks. Then I dug into my savings and took a few weeks of unpaid time, which I was lucky to be able to afford.

I did okay. But too many other parents' stories are much, much different. **Someone's ability to care for their newborn baby during their first few months of life, a period often called "the fourth trimester," should not be subject to the generosity of their employer's leave policies, or their socioeconomic status.** The waitress working shifts at three different restaurants, the custodian cleaning office buildings at night, and the childcare worker who devotes her career to caring for all of our children, also need Time to Care - but for them, it is too often out of reach. I am horrified to know that they don't have the same choices, the same privilege, that I had when my child needed me.

This bill will benefit all of us who, at some point in our lives, will need to care for our children, ourselves, or other loved ones. No one should have to choose between caring for their family and keeping a roof over their heads and food on the table. We must debunk the myth that businesses cannot afford this. An insurance fund means that employees taking time off are paid by the fund, so employers can afford to pay others overtime or bring in temporary workers while their employee is out. Everybody wins: employers keep their experienced employees on staff, which reduces turnover costs; children and other ailing family members get the care they need; and most importantly, families don't fall apart.

Nine other states and the District of Columbia have passed Paid Family and Medical Leave programs. **The United States is one of two countries in the world without any paid maternity leave** policy - and we have worse health outcomes to show for it. You can make Maryland a place that honors the importance of family, while also doing what's right for our economy and the health of everyone who lives here.

**I respectfully urge you to support SB211.**

# **SB211 - Robert Singer.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

Dr. Robert Singer

Rockville, MD

singraym@comcast.net | (617) 823-0803

**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Robert Singer, MD

My name is Robert Singer MD. I live in Rockville in District 17. This testimony is in support of SB211/HB375, the Time to Care Act of 2021.

I have worked for four decades as a family physician. I have seen first hand the courageous resilience of families responding to sudden illness and to chronic debilitating disease. Often a choice has to be made between working or caring for a family member. So often family members make the difficult and selfless choice of leaving work to do what must be done to care for a loved one in need. This noble call to service is wrenching for many. Jobs can be lost. Even if it is possible to return to work, income is forfeited. Just at the time of greatest need financial resources are stretched to the breaking point.

It has been said in Maryland that "we take care of our neighbors." As family members care for their loved ones, our community has to do its part. Paid family and medical leave allows families to stay together in tough times. It strengthens families. It encourages return to work by keeping the light on and the job still there. It is less expensive than paying for skilled and unskilled help to support the care for loved ones. Close family members often can reach their loved relatives in ways that strangers cannot. We want to encourage this kind of family cohesiveness, so we need to support it.

Jobs should mean a living wage with protections for illness and family needs. Such communities are stronger, more compassionate, and such support encourages a faster return to health. Since we already care for each other, let such times of extra need not be complicated by loss of income and employment. A fair society sets expectations of care and this legislation would provide much needed support, especially for workers who would be most impacted by the loss of financial stability.

**For these reasons, I respectfully urge a favorable report of SB211.**

# **SB211- Anna Levy.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

Anna Levy  
Rockville, MD 20852  
anna\_levy@verizon.net | (240) 515-6475

**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Anna Levy

My name is Anna Levy. I am a resident of Rockville, MD, District 16. I am submitting this testimony in support of SB211/HB375, the Time to Care Act of 2021.

**As a working mother and as an adult daughter of an aging parent, I have experienced first-hand, the importance of having access to paid leave for the birth of a child and to care for family members.** In the 1980's, I was pregnant with my second child and working full time. We were fortunate that I was working for a forward-thinking non-profit organization that carried disability insurance covering 6 weeks of maternity leave at 60% salary for all staff members. This was exceptional at that time when most workplaces, including the federal government, did not provide assurances of a position to return to, much less paid leave for the birth of a child. We were prepared for that time off at a lower salary, but not that I would need to go on bed rest for 6 weeks prior to my expected due date to prevent a premature birth. The disability insurance kicked in early, but I then needed to take additional time off without pay following our son's healthy birth. Fortunately, my position awaited me upon my return and we were able to manage without my paycheck for those additional weeks.

Later, while still employed by the same family friendly organization, one of my sons required lifesaving cardiac surgery. Medical appointments, hospitalization, and recovery required many days of leave. Again, my employer allowed me to use accumulated sick and vacation leave to care for our son. When that was exhausted, they forwarded leave to me, which I paid back over time as I returned to work and earned leave. What would we have done if I had not had even that support, the assurance of a position to return to, and some, albeit diminished, income?

Fast forward to the 2010's when my 90+ year old mother needed me to be there at medical appointments, hospitalizations, and the transition from fully independent to wheelchair bound due to debilitating arthritis. Again, I was fortunate to work, now as a federal employee, in an agency that granted the use of accrued sick leave to care for ailing family members and flexible workplace options. How could I have made the choice between being present to advocate for my mother's care when she was hospitalized for 6 weeks or being at work and earning my paycheck and paying bills? How does someone make the choice of caring for their sick child, spouse, or parent when their job is not amenable to working remotely on a laptop in a hospital



room or leaving work early or coming in late? Or face the loss of a job that might come with the health insurance coverage that is critical to their loved one's care?

It is our responsibility to ensure that every member of our community has the ability to take time to care for their own health and that of their family members. Paid family and medical leave will give families more stability, and less to worry about so that they can focus on giving new parents and infants a positive start, or on critical health needs. **No one should have to choose between putting food on the table or paying the rent and caring for themselves or a loved one.** Healthy employees that are able to care for their families make healthy and productive workplaces that contribute to healthy communities.

**I respectfully urge a favorable report for this important bill, SB211.**

# **SB211- Jeffrey Rubin.pdf**

Uploaded by: Lloyd, Rianna

Position: FAV

January 28, 2021

Dr. Jeffrey Rubin  
Potomac, MD 20854  
jeff535@verizon.net | (301) 448-0464

**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment – Family and Medical Leave Insurance Program – Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and members of the Finance Committee

**FROM:** Dr. Jeffrey Rubin

My name is Jeffrey Rubin. I live in Potomac, MD in District 15. I am writing to express my strong support for SB211/HB375, the Time to Care Act of 2021. Family responsibility, care for the sick, and concern for the needs of the wider community are all important Jewish values to me. Paid family and medical leave upholds each of these values.

Nobody should have to choose between their job and caring for their health or the health of a family member. Rabbi Hillel teaches us that we can't separate ourselves from our community; we all have a responsibility for each other's well-being and care. The General Assembly must make sure that all people can take time to attend to their own health and the needs of their family.

I have two personal stories to share with you that clearly illustrate the benefit of paid family and medical leave.

1. Several years ago when my father was living by himself in Florida he became very ill. I took time off from work, spent one week with him in the hospital, and then brought him back to Maryland for additional medical attention. He required months of around the clock care to recover from his newly diagnosed cancer. I was his primary caregiver. This was an intense, stressful time. It would have been much worse had I not benefited from paid family and medical leave. I was able to focus on what it took for my dad to get better, without worrying about job security or income.

2. About eighteen months ago, my daughter gave birth to her first child – and my first grandchild. Fortunately, her employer provided maternity leave that allowed her to take four months off from work without sacrificing pay. I saw firsthand the profound value of this benefit, which enables parents to cope with the life-changing, new challenges of caring for newborns in their early months of life.

We were lucky because our employers provided this essential resource for us. I believe everyone who works in Maryland should have the benefit of paid family and medical leave. **That is why I respectfully urge a favorable report for SB211.**

# **SB 221 Time to Care Act DD Council Support.pdf**

Uploaded by: London, Rachel

Position: FAV



## Maryland Developmental Disabilities Council

EMPOWERMENT • OPPORTUNITY • INCLUSION

### Senate Finance Committee

January 28, 2021

### SB 211: Labor and Employment – Family and Medical Leave Insurance Program – Establishment (Time to Care Act of 2021)

Position: Support

**Workers with disabilities and their families need to a broad array of supports to address their needs, lead independent lives and to contribute and participate fully in their communities and the economy. Access to paid family and medical leave is an important part of the range of supports people with disabilities and their families need.** This is true for the estimated 26.3 million working age adults with disabilities, along with the 36 million working age adults with family members with disabilities living in the US, and the 11% of Marylanders with a disability and their families.<sup>i</sup>

#### **WHY is this legislation important to people with disabilities and their families?**

- **Paid leave can increase economic security and stability for people with disabilities and their families.** Maintaining the balance of work and care for oneself or a family member is a challenge for anyone, but is particularly challenging for people who provide that care to family members with disabilities. The effects of disability are intrinsically tied to issues of economic insecurity and instability. The Center for American Progress notes that **“disability or illness can lead to job loss and reduced earnings, barriers to education and skills development, significant additional expenses, and many other challenges that can lead to economic hardship.”**<sup>ii</sup>
- One survey found that **more than 70% of family members providing care for people with intellectual and developmental disabilities reported that caregiving interfered with their work.**<sup>iii</sup>
- Another study found that the odds of a worker losing income increase by 48% if the worker lives with a child with disabilities and special health care needs and by 29% if the worker is caring for an adult with disabilities or health issues. **Having access to dedicated paid family leave reduces the odds of losing income by 30%.**<sup>iv</sup>
- **Paid leave increase opportunities for workers, including people with disabilities, to take time off if they experience a serious health condition or if their needs intensify due to their disability.** People with disabilities are more likely to be employed in low-wage, part-time jobs which typically provide fewer benefits.

#### **WHAT does this legislation do?**

SB 211 establishes a Family and Medical Leave Insurance Program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves. An employee is eligible for the wage replacement benefits if the employee:

- Is caring for a newborn child or child newly placed for adoption or foster care;

- Is caring for a family member with a serious health condition or disability;
- Has a serious health condition that makes the employee unable to perform his or her job;
- Is caring for a military service member; or
- Has a specified need resulting from the military deployment of a family member.

#### **WHAT is different this year?**

- The definition of family member aligns with the Healthy Working Families Act of 2018, yet still captures the demands of all working families.
- The amount of contribution is specifically stated and requires a 50/50 split between employees and employers.

The Council understands the ongoing concern expressed by people with developmental disabilities who self-direct their services as well as the providers who support people with developmental disabilities. Specifically that the required contribution by employers – in this case those organizations that provide support to people with developmental disabilities – is another unfunded mandate. **While the contributions ensure a solvent system of necessary supports, and preliminary data shows offering paid family and medical leave may help with recruitment and retention of direct support professionals,** it may prove too difficult to find a direct support professional to provide the support when another takes leave.

**Paid leave means all employees can give and get the support they need – to their children, their families, or themselves. For people with disabilities and their families, access to paid leave means increased opportunity, flexibility, and financial resources.**

For these reasons, the Maryland Developmental Disabilities Council supports SB 211.

Contact: Rachel London, Executive Director: [RLondon@md-council.org](mailto:RLondon@md-council.org)

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<sup>i</sup> American Community Survey estimates.

<sup>ii</sup> January 2015. Center for American Progress, *A Fair Shot for Workers with Disabilities*.

<sup>iii</sup> May 2011. The Arc. *2010 FINDS National Survey: Family and Individual Needs for Disability Support*.

<sup>iv</sup> June 2015. AARP. *Caregiving in the US*.

# **SB0211 Family and Medical Leave Insurance WDC Test**

Uploaded by: Macomber, Virginia

Position: FAV



MONTGOMERY COUNTY, MARYLAND  
WOMEN'S DEMOCRATIC CLUB

P.O. Box 34047, Bethesda, MD 20827

[www.womensdemocraticclub.org](http://www.womensdemocraticclub.org)

**Senate Bill 0211  
Labor and Employment - Family and Medical Leave Insurance Program -  
Establishment (Time to Care Act of 2021)  
Finance Committee – January 28, 2021  
SUPPORT**

Thank you for this opportunity to submit written testimony concerning an important priority of the **Montgomery County Women's Democratic Club (WDC)** for the 2021 legislative session. WDC is one of the largest and most active Democratic Clubs in our County with hundreds of politically active women and men, including many elected officials.

**WDC urges the passage of SB0211 - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021).** This bill will establish an insurance fund pool beginning January 1, 2022, to provide up to twelve weeks of paid leave to an individual who is taking leave to care for a newborn or newly adopted child, a family member with a serious health condition, themselves if they have a serious health condition, a military service member who is next-of-kin, or has a specified need because of the military deployment of a family member. Benefits range up to 90 percent of the employee's average weekly wage, depending on the employee's income. Each employee and employer must contribute to the insurance fund in equal and sufficient amounts to fund and administer the program (estimated at .67 percent of an employee's wages). A self-employed individual has the option to participate. A covered individual may submit a claim beginning July 1, 2023. The fund will be administered by the State Department of Labor, Division of Unemployment Insurance.

This legislation is important to ensuring that all working Marylanders can afford to take leave when they need time to care for family members or themselves. According to the US Census Bureau, in 76 percent of Maryland households with children – more than 970,000 homes – all parents have paying jobs. Further, according to the Institute for Women's Policy Research, 80 percent of Black mothers, 51 percent of Latina mothers, and 50 percent of White mothers in Maryland are the breadwinners for their families. Simply stated: paid family and medical leave in Maryland will mean an employee will not have to choose between job and family, will help keep qualified workers in the labor force, and will reduce employee turnover.

WDC has a particular interest in this bill because women make up nearly 50 percent of Maryland's labor force, are 33 percent of its business owners, and by and large, are the individuals in our society who take the primary caretaking role for our families – a role so critical that our society cannot function without it. Unpaid leave for many families translates to women oftentimes not taking the leave they are entitled to take. Nearly 25 percent of women take 10 or fewer days of their unpaid parental leave because they simply cannot afford to go without pay.

**We ask for your support for SB0211 and strongly urge a favorable Committee report.**

Respectfully,

Diana Conway  
President



# **Progressive Maryland Testimony Time to Care Act.pd**

Uploaded by: Marguerite, Christianne

Position: FAV



# PROGRESSIVE MARYLAND

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[@Progressive\\_MD](https://twitter.com/Progressive_MD)

## Testimony on Maryland Senate Bill 211

### Labor and Employment – Family and Medical Leave Insurance Program – Establishment (Time to Care Act of 2021)

TO: Sen. Kelley, Chair, and members of the Senate Finance Committee  
FROM: Jennifer Mendes Dwyer, Deputy Executive Director, Progressive Maryland  
DATE: January 26, 2021  
POSITION: Support

Thank you for the opportunity to offer testimony on SB 211. Progressive Maryland is a grassroots, nonprofit organization with 9 chapters from Frederick to the Lower Shore and more than 100,000 members and supporters who live in nearly every legislative district in the state. In addition, there are dozens of affiliated community, faith, and labor organizations across the state that stand behind our work. Our mission is to improve the lives of working families in Maryland. Please note our strong support for this bill.

It's clearly unacceptable that in 2021 our state and nation force so many women to have to choose between money and the health of their families. Maryland currently only guarantees (some) workers up to 5 days of paid sick leave, and as anyone who has ever welcomed a child into their family knows, it's completely absurd to expect that a woman, especially if she's recovering from giving birth, is going to be ready and able to return to work on that timeline. Almost every other country on the entire planet has figured out how to implement some form of paid family leave, so of course we can as well.

Paid family leave is not just ethical, it's economically smart. Without paid family leave, Marylanders are forced to leave the labor force to care for their family's or their own health. This sets them back in terms of career advancement, salaries and total earnings, retirement savings, and, because we still don't have a single payer healthcare system, ability to stay healthy, all of which have negative impacts on Maryland's economy. Women are breadwinners in a majority of Maryland's households, so even a period of unpaid family leave places families in financial jeopardy. Paid family leave creates greater economic security for Marylanders and also benefits employers by reducing turnover, saving them the costs of seeking out and training new employees and empowering them to retain skilled, committed workers.

We urge a favorable report on SB 211.

# **MSCAN - SB211 - Paid Family Leave.pdf**

Uploaded by: Miicke , Sarah

Position: FAV



# Maryland Senior Citizens Action Network

**MSCAN**

*AARP Maryland*

*Alzheimer's  
Association,  
Maryland Chapters*

*Baltimore Jewish  
Council*

*Catholic Charities*

*Central Maryland  
Ecumenical Council*

*Church of the Brethren*

*Episcopal Diocese of  
Maryland*

*Housing Opportunities  
Commission of  
Montgomery County*

*Jewish Community  
Relations Council of  
Greater Washington*

*Lutheran Office on  
Public Policy in  
Maryland*

*Maryland Association of  
Area Agencies on Aging*

*Maryland Catholic  
Conference*

*Mental Health  
Association of Maryland*

*Mid-Atlantic LifeSpan*

*National Association of  
Social Workers,  
Maryland Chapter*

*Presbytery of Baltimore*

*The Coordinating  
Center*

*MSCAN Co-Chairs:  
Carol Lienhard  
Sarah Müicke  
410-542-4850*

## **SB 211**

### **Labor and Employment – Family and Medical Leave Insurance Program – Establishment (Time to Care Act 2021)**

**Senate Finance Committee  
January 28, 2021**

#### **Support**

*MSCAN is a statewide coalition of advocacy groups, service providers, faith-based and mission-driven organizations that supports policies that meet the housing and care needs of Maryland's low and moderate-income senior citizens.*

**MSCAN supports SB 211**, which establishes a Family and Medical Leave Insurance (FAMLI) program. Through this program, employees may take up to 12 weeks of paid leave from their jobs to care for new children, elderly family members, family members being deployed, or for themselves. SB 211 is especially important for Maryland's senior community because it allows older adult workers to address their own health needs and enable caregivers of older adults to balance their work and caregiving responsibilities.

**Older workers need paid leave to manage their own health while continuing to work.** Labor force participation rates for both men and women over 65 have climbed in recent years, especially after the Great Recession.<sup>1</sup> At the same time, older adults are more likely to suffer from serious health conditions that require regular care.<sup>2</sup> In order for older workers to stay healthy and productive, they need to be able to take paid time away from work to manage their health.

**As our population ages and life expectancy increases, more workers will take on caregiving roles for older family members.** Family caregivers need paid leave to care for elderly parents and relatives that may be facing serious health conditions, such as stroke or cancer. In less than 15 years, the number of Marylanders who are 65 and older will grow by almost 30%, increasing the need for a paid family leave policy that addresses the needs of older adults in Maryland. SB 211 will increase the health and wellbeing of older adults and their caretakers.

**Caring for an older family member can negatively impact an employee's work situation and health.** Of caregivers who take time off, 48 percent report losing income.<sup>3</sup> In addition, caregivers experience elevated levels of stress, depression, and chronic disease. Older adults and caregivers should not have to choose between treating a serious health condition or caring for a family member and maintaining their economic security.

**For these reasons, MSCAN urges a favorable report on SB 211.**

<sup>1</sup> US Census. 2018. American Community Survey.

<sup>2</sup> National Partnership for Women & Families. (2017, June). Our Aging, Caring Nation: Why a U.S. Paid Leave Plan Must Provide More Than Time to Care for New Children. Retrieved 20 December 2018, from <http://www.nationalpartnership.org/caregivingreport>

<sup>3</sup> Families and Work Institute. [http://familiesandwork.org/site/research/reports/elder\\_care.pdf](http://familiesandwork.org/site/research/reports/elder_care.pdf)

# **SB 211- Labor and Employment - Family and Medical**

Uploaded by: Moore, Tonaeya

Position: FAV



**SB 211 Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)**  
**Senate Finance Committee**  
**January 28, 2021**  
**SUPPORT**

Chairwomen Kelley, Vice Chair and members of the committee, thank you for the opportunity to testify in support of Senate Bill 211. This bill would establish a leave program, so employees will have access to paid leave in order to care for themselves or family members.

The CASH Campaign of Maryland promotes economic advancement for low-to-moderate income individuals and families in Baltimore and across Maryland. CASH accomplishes its mission through operating a portfolio of direct service programs, building organizational and field capacity, and leading policy and advocacy initiatives to strengthen family economic stability. CASH and its partners across the state achieve this by providing free tax preparation services through the IRS program 'VITA', offering free financial education and coaching, and engaging in policy research and advocacy. **Almost 4,000 of CASH's tax preparation clients earn less than \$10,000 annually. More than half earn less than \$20,000.**

Family and Medical Leave (FMLA) is a federal program that provides insurance to employees that work for a covered employer. However, this is not an option for many employees in Maryland. This means that they have limited or no options when it comes to taking paid leave. Some employees have access to unpaid leave, while others risk being fired for taking leave. Maryland has partially addressed limited aspects of this issue through the Flexible Leave Act and Parental Leave Act.<sup>1</sup>

When employees encounter health related hardships they experience high levels of mental, emotional, and physical stress. This stress is increased by the demands of work and the inability to stop working to appropriately address concerns. Decision making, healing, and financial stability are compromised when employees do not have adequate options to navigate difficult times.

Families have been battling a global pandemic since early 2020. Maryland has had over 300,000 confirmed cases<sup>2</sup> of COVID-19. Some of the families affected were able to take an appropriate time away from work without fear of losing their jobs or losing crucial income. Many families were not. The need has increased to protect worker's ability to care for themselves and their families. There are new strands of COVID-19, which have a higher transmission rates<sup>3</sup>. This can lead to more COVID-19 cases and lengthen the duration of the pandemic. Also, there are long term effects of surviving COVID-19<sup>4</sup>. This can leave people with serious short and long term complications. The Time to Care Act will provide protection to address immediate concerns, and it will provide a safety net for future medical complications. COVID-19 not only threatens the health of Marylanders, but it also threatens the financial security of those directly and indirectly affected. Having a state level FMLA program would shield some of the financial burden.

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<sup>1</sup> <http://dls.maryland.gov/pubs/prod/HHS/2017-Report-of-the-Task-Force-to-Study-Family-and-Medical-Leave-Insurance.pdf>

<sup>2</sup> <https://coronavirus.maryland.gov/>

<sup>3</sup> <https://www.cdc.gov/coronavirus/2019-ncov/transmission/variant.html>

<sup>4</sup> <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects.html>



SB 211 will help alleviate stress by supporting:

- Parents caring for a newborn child or child newly placed for adoption or foster care.
- Workers caring for a family member with a serious health condition or disability.
- Workers caring for a military service member who is next of kin or those who have specified a need resulting from the military deployment of a family member.
- Workers who have a serious health condition that makes them unable to do their job.

A Family and Medical Leave Insurance program would benefit individuals and families by protecting workers who need to stay home to care for themselves or family members. They would not lose vital income, which could leave low to moderate income families to face housing instability, accumulation of debt, and inability to build long-term wealth and assets. Ensuring that employees can safely take time off, will ensure that Maryland employees will not have to choose between their own or their family's health and maintaining their economic security.

*For these reasons, we encourage you to return a favorable report on SB 211.*

# **SB211 - MLAW Testimony.pdf**

Uploaded by: Morgan, Jessica

Position: FAV





Bill No: SB211  
Title: Labor and Employment – Family and Medical Leave Insurance Program – Establishment (Time to Care Act of 2021)  
Committee: Finance  
Hearing: January 28, 2021  
Position: SUPPORT

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The Maryland Legislative Agenda for Women (MLAW) is a statewide coalition of women’s groups and individuals formed to provide a non-partisan, independent voice for Maryland women and families. MLAW’s purpose is to advocate for legislation affecting women and families. To accomplish this goal, MLAW creates an annual legislative agenda with issues voted on by MLAW members and endorsed by organizations and individuals from all over Maryland. **SB211 a priority on the 2021 MLAW Agenda and we urge your support.**

SB211 establishes a Family and Medical Leave Insurance (FAMLI) program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves. New York, Washington, Rhode Island, New Jersey, Massachusetts, Washington D.C. and California have similar programs. Similar legislation was recently signed into law in Connecticut and Oregon. Here in Maryland, this concept builds on legislation that passed in the 2018 Session which established a parental leave benefit for state employees and the work of the Task Force to Study Family and Medical Leave Insurance. The Time to Care Act was introduced in 2019 as HB 341 and SB 500 and in 2020 as HB 839/SB 539 and was a priority on both the 2019 and 2020 MLAW Agendas.

Many Marylanders can’t take time to care because they lack paid family leave. The Federal Family and Medical Leave Act (FMLA) provides unpaid leave and job protection to employees who work for businesses that employ 50 or more individuals who need to take up to 12 weeks of leave. In Maryland, even unpaid leave under the federal Family and Medical Leave Act is inaccessible for 56 percent of working people.

Unpaid leave forces too many Americans, especially those whose needs are the greatest, to choose between income and family when illness strikes, when new babies arrive, or when the needs of a family member with a disability intensify.

Families are dependent on working women. In Maryland, 79% of mothers are in the workforce. Nearly 25% of women take 10 or fewer days of parental leave, potentially putting themselves and their children at risk physically and emotionally. Both women and men are responsible for caregiving for elderly and ill relatives (although this burden disproportionately falls on women).

~ continued ~

The lack of a paid family and medical leave system leads to economic instability, particularly for women, and is also a major contributor to the wage gap between women and men, and women's financial vulnerability as they age. In our 2021 poll, 78% of participants said they "like a lot" the fact that the program would allow women--who are disproportionately affected by the COVID-19 pandemic--to take the leave they need without having to worry about their jobs.

**For these reasons, MLAW strongly urges the passage of SB211.**

MLAW's 2021 Agenda is supported by the following organizations:

AAUW Anne Arundel County  
AAUW Easton Branch  
AAUW Kensington Rockville Branch  
AAUW Kensington-Rockville  
American Association of University Women (AAUW) Maryland  
Annapolis Alumnae Chapter, Delta Sigma Theta Sorority, Inc.  
Anne Arundel County NOW  
Baltimore County Alumnae Chapter or Delta Sigma Theta Sorority, Inc.  
Baltimore Metropolitan Alumnae Chapter Delta Sigma Theta Sorority, Inc  
Baltimore NOW (National Organization for Women)  
Bound for Better, advocates for Domestic Violence  
Business and Professional Women Maryland  
Calvert County Commission for Women  
Cambridge Alumnae Chapter of Delta Sigma Theta Sorority, Inc.  
Charles County Commission for Women  
Childway Early Learning Center  
Delta Sigma Theta Sorority, Inc., Kappa Phi Chapter  
For All Seasons, Inc.  
Fort Washington Alumnae Chapter, Delta Sigma Theta Sorority, Inc.  
Frederick County Alumnae Chapter Delta Sigma Theta Inc  
Harford County Alumnae Chapter of Delta Sigma Theta Sorority, Inc.  
Hug Don't Shoot  
Human Trafficking Prevention Project, University of Baltimore School of Law  
Kappa Psi Chapter of Delta Sigma Theta Sorority, Inc.  
League of Women Voters of Prince George's County (LWVPGC)  
Lee Law, LLC  
Maryland Coalition Against Sexual Assault  
Maryland Justice Project  
Maryland NOW  
Maryland Women's Heritage Center  
Mission 50  
MoCoWoMen  
Montgomery County Commission for Women  
Montgomery County MD Alumnae Chapter Delta Sigma Theta Sorority, Inc.  
Montgomery County Women's Democratic Club  
Montgomery County Young Democrats  
NARAL Pro-Choice Maryland  
National Coalition of 100 Black Women., Inc. Anne Arundel County Chapter  
National Coalition of 100 Black Women-Prince George's  
North Arundel County Alumnae Chapter-Delta Sigma Theta Sorority, Inc.  
Potomac Valley Alumnae Chapter, Delta Sigma Theta Sorority, Inc.  
Prince George's County Alumnae Chapter, Delta Sigma Theta Sorority, Inc.  
Prince George's County Drug Policy Coalition, Inc.  
Reproductive Justice Inside  
Stella's Girls Inc.  
The Rest Of A Life (TROAL)  
Top Ladies of Distinction  
Top Ladies of Distinction, Inc.- Patuxent River Chapter  
Top Ladies of Distinction, Prince George's County Chapter  
UAW Local 1183  
WISE  
Women's Equality Day 2020 Celebration Coalition  
Women's Law Center of Maryland

Maryland Legislative Agenda for Women

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# **A Nahley Time to Care Act.pdf**

Uploaded by: Nahley, Amy

Position: FAV

January 26, 2021

The Honorable Delores G. Kelley, Chair  
Senate Finance Committee  
Three East  
Miller Senate Office Building  
Annapolis, MD 21401

RE: Testimony in **Support of SB 0211** – *Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)*

Dear Chair Kelley:

I am writing in support of **SB 0211**, the *Time to Care Act*. I believe that this legislation is of extreme importance to all Marylanders. The *Time to Care Act* would establish a Family and Medical Leave Insurance Program, similar to unemployment insurance. This legislation would provide workers up to 12 weeks of leave with partial wage replacement when a critical need arises. No one should have to choose between the job they need and the family they love.

As an oncology nurse, I have seen many of my patients struggle with the financial toxicity of cancer care. For some of the more fortunate individuals Short Term Disability or FMLA offers a safety net as they recover from chemotherapy, radiation and surgery. For others, they have to live with the constant threat and stress of possibly losing their jobs, homes and cars. I once had a patient who was forced to choose between buying necessary medicines and buying oil to heat her old farmhouse. While she had a few months of emergency support to cover her heating bill, her financial stress was unending. Caregivers of cancer patients also face this toxic stress with trying to juggle being present for their loved ones and keeping their jobs and often their health insurance.

As a daughter, I too faced stress related to caring for my father as he faced a two year battle with kidney cancer. As a nurse in Baltimore, I had one category of “paid time off.” This was for vacation time, sick time and FMLA. My dad was able to stay at home during his final weeks, however, I returned back to work with zero hours of “paid time off.” This meant if one of my children had gotten sick or we had another family emergency, I would have had to take unpaid leave.

The U.S. is the only industrialized country that does not guarantee some form of paid family leave for workers. Maryland should join with the nine other states and Washington, DC that offer or will offer paid family leave by passing the *Time to Care Act*.

Thank you for your consideration.

Sincerely,

Amy Nahley, MS, RN, OCN  
1024 St. Albans Road  
Idlewylde, MD 21239  
anahley@gmail.com

# **Labor and Employment.pdf**

Uploaded by: O'Connor, Monica

Position: FAV



**Labor and Employment – Family and Medical Leave Insurance program –  
Establishment (Time to Care Act) HB 375/SB 211**

**Favorable**

January 25, 2021,

Dear members of the Committee,

The U.S. is the only industrialized country that does not guarantee some form of paid family leave for workers, forcing many to choose between the job they need and the family they love when critical needs arise. Time to Care would allow workers to care for a new child, an ill or disabled family member, family needs related to a service member's deployment, or their own serious health condition. This is not the same as FMLA. The Family and Medical Leave Act is a federal law that provides job-protected, unpaid leave from work to care for certain family members and one's own serious medical reasons. The most significant differences are that FMLA applies only to businesses that employ 50 or more employees, and the leave is unpaid. Paid family leave would provide partial wage replacement to leave takers. It is also not the same thing as paid sick days from work either. Paid family and medical leave is for longer-term absences from work, whereas sick leave is used for short illnesses. Maryland's Healthy Working Families Act requires that Maryland employers with 15 or more employees provide up to 40 hours of annual paid sick leave to eligible employees, and employers with 14 or fewer employees must provide up to 40 hours of unpaid annual sick/safe leave to eligible employees.

Monica O'Connor  
WISE

**SB0211 MD NARAL SUPPORT.docx.pdf**

Uploaded by: Philip, Diana

Position: FAV





**SB0211 - Labor and Employment- Family and Medical Leave Insurance Program- Establishment  
(Time to Care Act of 2021)**

Presented to the Honorable Delores Kelley and Members of the Finance Committee  
January 28, 2021 1:00 p.m.

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**POSITION: SUPPORT**

NARAL Pro-Choice Maryland urges the Senate Finance Committee to issue a **favorable report on SB0211- Labor and Employment- Family and Medical Leave Insurance Program Establishment**, sponsored by Senator Antonio Hayes. Marylanders should be able to parent with dignity and not be penalized at work for being caregivers

Our organization is an advocate for reproductive health, rights, and justice. As part of our efforts to protect the reproductive freedom of all Marylanders, we believe that employees should have access to paid family and medical leave to be able to care for their reproductive lives, as well as care for any children that have in a parenting role. The inability to access paid family and medical leave has a particular impact on women, who often take on the majority of responsibility for caring for children, disabled relatives, and ailing older family members, and who make up almost two-thirds of minimum wage workers.

According to the 2018 Employment Characteristic of Families by the Bureau of Labor Statistics, 65.1% of mothers with children under the age 6 participate in the workforce less than mothers with children ages 6 to 17 at a rate of 76.4%.<sup>i</sup> In contrast, employed fathers with children under the age of 6 and fathers with children between the ages 6 and 17 work equally in the workforce. Workplace paid leave is crucial for Marylanders with children to be able to parent with dignity - to financially, emotionally, and physically support a child's basic needs.<sup>ii</sup> Nurturing children when they are born, adopted, or fostered, as well as caring for children that become ill, are essential to a holistic and comprehensive vision of reproductive health, rights, and justice.

SB0211 calls for the creation of a state-run insurance fund that would pay employees wages for up to 12 weeks to cover time off to address significant healthcare needs, among them include adding a new child to one's family or caring for a child with a serious medical condition. Revenue for the fund would be provided via a payroll deduction required of employers to withhold from an employee's paycheck. This bill is the culmination of many years work in identifying what it the best and most feasible model for Maryland. Providing paid family leave would help more Marylanders keep their jobs and receive the necessary income on which they rely to adequately care for their families during both planned and unplanned medical situations. The ability to remain employed while addressing significant healthcare issues reduces the risk of crisis resulting in dependence on costlier public assistance and public health programs. The bill is designed to meet the needs of those who must take short-term family and medical leave, but also be supportive to the concerns of the business community. Along with improving health outcomes for working families, access to this type of paid leave reduces poverty, prevents unemployment, reduces employee turnover, and increases employee morale.

The Family and Medical Leave Fund will be particularly helpful to new mothers, allowing the time to recover properly and care for their newborns without worrying about affording basic needs. With some women experiencing postpartum depression after labor, paid family and medical leave will provide them with both time and continuing financial support to seek treatment. Because of workplace demands, nearly one in four new mothers return to their jobs in less than two weeks after giving birth because they cannot afford to take unpaid leave. Locating adequate childcare has proven problematic for these families as Maryland bans placing newborns under 6 weeks of age in licensed childcare facilities. It is also important to note research suggesting that paid family leave can reduce stress and depression for new mothers and contribute to meaningful bonding between parent and child, which improves children's responses to external pressures and reduces risk factors for child abuse. In fact, a new study determining whether paid family leave has any impact found a lower hospital admission rate for babies suffering from deliberately inflicted head injuries in California since passing its paid family leave law in 2004, when compared with seven states that do not have paid family leave, including Maryland. <sup>iii</sup>

Access to paid family and medical leave is a privilege that shouldn't be a privilege — *it should be a right*. Paid workplace leave is crucial for all people, but especially for low-income workers and those in communities of color seeking to become parents and have healthy families—a right to which we are all entitled. Historically, though, some parenting has been privileged at the expense of others, and not everyone has been able to exercise this right. Policies at work that affect pay and leave also influence family formation and pregnancy decision-making.

Furthermore, it is important to recognize that the issue of paid family and medical leave is not only a matter of wage and reproductive justice, but also an important issue of LGBTQ rights - as workplace policies have been historically developed within the heteronormative, nuclear family framework. For example, we need to acknowledge that cisgender men have the responsibility as fathers to care for their children as do the mother of their child. When Maryland families, no matter how they are formed, are left to leave their sick babies at home so that they can make enough money to afford housing and food, they are not functioning in a positive and productive work environment.

If we want to ensure that everyone has control of when and how they become parents—and to best support parents in caring for themselves and their families—we need to ensure they have flexibility in navigating their health choices. Access to paid family and medical leave upholds reproductive justice and gender equity for these workers. It means not having to decide between addressing a significant healthcare need and keeping the job that is crucial to your family's wellbeing.

The vast majority of all people will have to care for a sick relative, a new baby, or a medical issue of their own at some point during their years of employment. We strongly support all Maryland families to have the economic stability to ensure their health and medical needs are met. Therefore, **we urge a favorable report on SB0211**. Thank you for your time and consideration.

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<sup>i</sup> "Employment Characteristics of Families—2018." Bureau of Labor Statistics. U.S. Department of Labor. (2019).

<sup>ii</sup> Center for American Progress "[More than a Choice: A Progressive Vision for Reproductive Health and Rights](https://cdn.americanprogress.org/wp-content/uploads/issues/2006/09/more_than_a_choice.pdf)", 2006 [https://cdn.americanprogress.org/wp-content/uploads/issues/2006/09/more\\_than\\_a\\_choice.pdf](https://cdn.americanprogress.org/wp-content/uploads/issues/2006/09/more_than_a_choice.pdf)

<sup>iii</sup> Klevens Jj et al. "Paid family leave's effect on hospital admissions for pediatric abusive head trauma" *Injury Prevention*. February 2016.

# **TESTIMONY FOR SB0211 Family and Medical Leave - Ti**

Uploaded by: Plante, Cecilia

Position: FAV



**TESTIMONY FOR SB0211  
LABOR AND EMPLOYMENT – FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM –  
ESTABLISHMENT (TIME TO CARE ACT OF 2021)**

**Bill Sponsor:** Senator Hayes

**Committee:** Finance

**Organization Submitting:** Maryland Legislative Coalition

**Person Submitting:** Cecilia Plante, co-chair

**Position:** FAVORABLE

I am submitting this testimony in favor of SB0211 on behalf of the Maryland Legislative Coalition. The Maryland Legislative Coalition is an association of individuals and grassroots groups with members in every district in the state. We have over 30,000 members across the state.

All of us have been in a position where we had to take leave without pay, or lose vacation time, or put our jobs at risk because of our own illness or medical condition or that of a family member. The struggles of those with loved ones who have a family member who has Covid are even more poignant. Family is important. Health is important. We should not have to choose.

This bill establishes a program that both employees and employers make small contributions to each pay period. Those contributions become a bank of funds that would allow an individual employee take up to 12 weeks of paid leave without causing financial harm to the employer.

Being able to take the time to care for yourself or your loved ones helps everyone in the long term. Because so many people are living paycheck to paycheck these days, this would make many individuals far less likely to go bankrupt over an illness or a medical condition. It would help businesses retain their skills, rather than have them drop out entirely.

This is a problem that has been in need of a solution for a long time. We believe this solution would benefit the state tremendously and would make our state a more attractive place to work.

The Maryland Legislative Coalition supports this bill and we recommend a **FAVORABLE** report in Committee.

**Main Street Alliance MD\_PFML\_1pager\_1.21.21.pdf**

Uploaded by: Procopio, Dominic

Position: FAV



# Paid Family & Medical Leave in Maryland

Family and Medical Leave Insurance allows employees to care for themselves and their loved ones. For many, taking unpaid time off to meet their family needs is inconceivable. As a result, **Marylanders have to make an impossible choice: forgoing caring for their loved ones during times of medical need, or leaving their jobs and risking severe economic uncertainty.**

By creating an **employee & employer-funded** paid family and medical leave insurance program, we can help families get ahead – but the benefits don't end there. **Employers whose employees have access to leave report decreased turnover and improved morale.**



*Aaron Seyedian is the Owner of Well-Paid Maids, a cleaning service that operates across Maryland, Virginia and Washington, DC.*

Owning a small business doesn't exempt you from realities of everyday life. If anything, you are keenly aware of them. People get sick or injured. They start families. Ignoring the inevitable only puts our business at risk, jeopardizing our livelihoods and those of our employees. Paid Leave shouldn't depend on where you live or who you work for, it should be as commonplace as the life events that necessitate it.

— **Aaron Seyedian, Owner, Well-Paid Maids**

**More than 1.1 million people - 50.2% of Maryland's workforce - work in small businesses.** But many small businesses generally lack the capital and the scale to provide earned benefits like paid family and medical leave, even when business owners want to provide those benefits.

**Only 17 percent of the U.S. workforce have access to paid family leave through an employer,** and less than 40 percent have access to personal medical leave.

Among working mothers, only about half are able to take any kind of paid leave – including sick or vacation time – when their children are born. And, most strikingly, **more than 40 percent of bankruptcies in the U.S. are a result of lost income when the employee or a family member falls ill.**

## TIME TO CARE ACT

**Self-Funded** - small contributions from both the employer & the employees makes the PFML Act fund self-funded. Similar policies in WA, MA, CA, NJ & RI cost on average less than \$2.00 per employee per week.

**Wage-Replacement** - replaces wages on a progressive scale, meaning it is actually useful for low-income earners.

**Easy-Admin** - MD Department of Labor would handle payments & admin, leaving business owners to focus on running their business.

**Eligibility** - all working Marylanders, including small business owners & those self-employed would be eligible for up to 12 weeks of medical leave & up to 12 weeks of family leave.

**Good for Business** - Small businesses that could not afford to offer paid leave to their employees would now be able to offer the benefit, helping businesses attract the best and brightest employees & enjoy increased productivity.

## Studies have shown...

When mothers take longer leaves, their babies are **MORE LIKELY** to be seen for regular check ups and immunizations.

Breastfeeding mothers, who take part in paid leave programs, continue breastfeeding for **TWICE** as long as those without access to paid leave.

Children's hospital stays are shortened by **31%** when parents have access to paid leave.

**9** months after the leave is taken, fathers who take at least two weeks off for the birth of a child are more involved in direct care than those who do not.

In NJ, CA & RI, the vast majority of employers reported that paid family leave **POSITIVE** had a or no noticeable effect on productivity, profitability, turnover or morale.



# Paid Family & Medical Leave in Maryland

*The U.S. is one of the only countries in the world to not offer any kind of paid family or medical leave.*

**MD**  
*can lead the way to do better.*

## **A Win-Win-Win: Good for business, employees and Maryland**

### **The Covid-19 pandemic has only underscored the need to have a robust plan.**

This pandemic shows we must help small businesses and workers navigate the times we need to take away from work to recover from illness or care for a sick loved one. Studies have shown that states with paid leave programs have fared better during the pandemic. In addition to state programs, the paid leave options provided by the federal Families First Coronavirus Response act gave business owners across the country an important tool to confront the pandemic.<sup>1</sup> For the first time in our history, business owners could count on a nationwide paid leave program and they found it enormously useful.<sup>2</sup>

But the emergency federal paid leave provisions have expired, meaning Maryland businesses are once again left to cope on their own. Businesses need support with paid leave as the pandemic lengthens and beyond. The Time to Care Act is exactly the support our small businesses need.

### **The PFML Act is an affordable and responsible way for small businesses to support and retain employees when serious family and medical needs arise.**

The contributions would go into an insurance fund, to ensure program stability for employees, employers, and the state. Contributions would cover both benefits and administrative costs. This spreads the cost of leave, reducing the burden on individual employers without creating significant new administrative requirements. When an employee or small business owner needs to take time away from work, they can draw income from the fund to get by until they're back on their feet. Employers can use the salary of their on-leave employees as they see fit; they can use it to hire a temporary replacement, invest it in their business or save it for another use.

### **Paid family and medical leave laws help level the playing field between small businesses and large corporations, allowing small businesses to compete on more equal footing.**

With modest bottom lines small businesses often have trouble matching more generous paid leave benefits offered by larger employers (including 84 percent of businesses surveyed by Main Street Alliance) – resulting in a hiring disadvantage.<sup>3</sup> In the current labor market, that means losing talented employees to larger employers, which wield the market power to provide paid leave to top managers but are squeezing everyone else with low-wage, uncertain jobs.

### **Paid Family Medical Leave provides critical financial security for small business owners themselves.**

Small business owners themselves need paid family and medical leave. They, too, have new babies and ailing partners or parents, and often cannot afford to take unpaid leave. Their cushion maybe razor thin, and a single accident or a medical emergency could jeopardize the health of a small business and throw a business owner into financial ruin. Under the Paid Family & Medical Leave Act, small business owners would have a guaranteed revenue source while out on leave allowing them to take care of themselves and their family without risking their business.

### **Paid Family Medical Leave goes right back into the local economy, boosting consumer demand at small businesses, as working Marylanders spend their increased earnings to cover the basics.**

When individuals do not have access to paid leave it impacts their spending and consumption patterns. Americans lose over to \$20 billion annually in wages because of lack of paid leave.<sup>4</sup> When they take unpaid leave, employees give up income they need to pay bills, buy groceries and support their families.

Working Marylanders who take unpaid or partially paid leave reported putting off spending, resulting in hardship for families and lost income to small businesses. Business owners cite weak sales as the biggest problem for their business and the economy, and ensuring that employees have their consistent wages means that consumer demand won't go lax with each illness or family event or emergency.<sup>5</sup>

1. [https://www.urban.org/sites/default/files/publication/102325/state-paid-family-and-medical-leave-programs-helped-a-surge-of-workers-affected-by-the-covid-19-pandemic\\_0.pdf](https://www.urban.org/sites/default/files/publication/102325/state-paid-family-and-medical-leave-programs-helped-a-surge-of-workers-affected-by-the-covid-19-pandemic_0.pdf)

2. <https://www.smallbusinessforpaidleave.org/covid19-emergency-paid-leave-resources>

3. <https://bit.ly/2DQwCX6>

4. <https://www.americanprogress.org/issues/women/reports/2016/09/22/143877/the-cost-of-inaction/>

5. [http://asbcouncil.org/sites/default/files/files/Regulations\\_Poll\\_Report\\_FINAL.pdf](http://asbcouncil.org/sites/default/files/files/Regulations_Poll_Report_FINAL.pdf)

**SB0211 Time to Care Act\_MHAMD Support.pdf**

Uploaded by: Quinlan, Margo

Position: FAV



**Senate Bill 211 Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)  
Senate Finance Committee  
January 28, 2021  
Position: Support**

The Mental Health Association of Maryland is the state's only volunteer, nonprofit citizen's organization that brings together consumers, families, professionals, advocates and concerned citizens for unified action in all aspects of mental health and mental illness. We appreciate this opportunity to submit testimony in support of Senate Bill 211.

SB 211 seeks to establish a Family and Medical Leave Insurance program which would entitle employees to take up to 12 weeks of paid leave from work in order to care for themselves, new children, or other family members with serious health conditions or disabilities. The program would also provide wage replacement during the period of leave, drawn from a fund pool into which employers and employees contribute.

The Centers for Disease Control and Prevention (CDC) state that one in five Americans will experience a mental illness in a given year, and one in five children, "either currently or at some point during their life, have had a seriously debilitating mental illness."<sup>1</sup> The COVID-19 pandemic is only further taxing the mental and behavioral health of many Marylanders: the Baltimore Sun has reported that around 40% of Marylanders have experienced anxiety or depression as a result of the pandemic, and Black and Brown communities have endured disproportionately higher rates of job loss and higher infection and mortality rates due to COVID-19.<sup>2</sup> An August report by the CDC states, "younger adults, racial/ethnic minorities, essential workers, and unpaid adult caregivers reported having experienced disproportionately worse mental health outcomes, increased substance use, and elevated suicidal ideation."<sup>3</sup>

Allowing Maryland workers time to care for themselves and their families during long-term mental or behavioral health treatment or recovery is critical to supporting a strong economy. The

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<sup>1</sup> Centers for Disease Control and Prevention, 2018. <https://www.cdc.gov/mentalhealth/learn/index.htm>

<sup>2</sup> Wenger, Y., Sept. 29, 2020. *As coronavirus rolls on in Maryland, mental health toll surges, with experts fearing spike in suicides.* <https://www.baltimoresun.com/features/bs-hs-mental-health-covid-20200929-yzjfdfc2ijb4vab7o3v4g7q25a-story.html>

<sup>3</sup> Czeisler MÉ, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69:1049–1057.

DOI: [http://dx.doi.org/10.15585/mmwr.mm6932a1external\\_icon](http://dx.doi.org/10.15585/mmwr.mm6932a1external_icon)

*For more information contact:*

*Margo Quinlan, Director of Youth & Older Adult Policy: 410-236-5488 / [mquinlan@mhamd.org](mailto:mquinlan@mhamd.org)*

Maryland Department of Health has cited<sup>4</sup> studies which indicate that depression and anxiety disorders alone cost the global economy \$1 trillion annually in lost productivity.<sup>5</sup> At a time when our national economy is weathering one of the worst public health crisis of a generation, it is increasingly critical that we support a healthy and sustainable Maryland workforce.

For these reasons, the Mental Health Association of Maryland supports the Time to Care Act and urges a favorable report on Senate Bill 211.

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<sup>4</sup> Maryland Department of Health. *Mental Health Promotion*.  
<https://health.maryland.gov/suicideprevention/Pages/Mental-Health-Promotion.aspx#:~:text=Data%20from%20the%20Substance%20Abuse,by%20the%20state%20Mental%20Health>

<sup>5</sup> The Ripple Effect of Mental Illness. *National Alliance on Mental Illness*. <https://www.nami.org/NAMI/media/NAMI-Media/Infographics/NAMI-Impact-Ripple-Effect-FINAL.pdf>

**SB 211 - FAV\_ACY.pdf**

Uploaded by: Rock, Melissa

Position: FAV



To: The Honorable Chair, Senator Delores Kelley, and members of the Finance Committee  
From: Melissa S. Rock, Interim Managing Director & Director, Birth to Three Strategic Initiative  
Re: **SB 211: Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)**  
Date: January 28, 2021  
Position: **SUPPORT**

Extensive research has been developed that shows how critical the first three months are for the development of a baby's brain.<sup>1</sup> In fact, 85% of a person's brain development happens in a baby's first three years. A strong attachment to a caretaker ensures that this brain development stays on track even for young children experiencing the toxic stress that living in poverty causes. Yet too often, economic realities prevent parents from opting to stay home with their newborn rather than immediately returning to work post-partum. These early years are also a critical time for parents to learn to care for their child, a transition that is often difficult and stressful even when the parent can stay home. Balancing work and parenthood, especially in those first few months, causes stress and anxiety for parent and child alike, and interrupts the critical bonding period.

According to the National Partnership for Women and Families, "In Maryland, there is an 11% gap in labor force participation between men and women, in part because the United States lacks family friendly policies."<sup>2</sup> (Internal citations omitted.) The COVID-19 pandemic caused such significant financial hardship on Maryland's families that between November 25, 2020 and December 21, 2020, almost half of Maryland's families reported barely being able to pay for their usual household expenses in the previous week.<sup>3</sup> Without paid leave, there is no way these families can afford to miss work, even when their families members need them most.

It is important to note that the bill is written inclusively, as there are many situations in which a parent may need to take time to welcome or care for a child. This includes not just birth and adoption but also foster placement and informal care placement. Ensuring a welcoming and secure transition into a new home for an older child, who often will be coming from a traumatic situation, is critical for providing the stable support that will help the child transition and succeed in his or her new home. **Senate Bill 211 would ensure that parents can afford to take the time they need to focus on their child, when that child needs them most. We urge a favorable report.**

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<sup>1</sup> <https://www.zerotothree.org/resources/204-the-child-development-case-for-a-national-paid-family-and-medical-leave-program>

<sup>2</sup> <https://static1.squarespace.com/static/5f9877a3f28da201f50f6006/t/5fa1ae7439a10f3d57d410bb/1604431477070/Paid-Leave-Means-Maryland.pdf>

<sup>3</sup> <https://datacenter.kidscount.org/data/tables/10896-adults-living-in-households-with-children-who-had-difficulty-paying-for-usual-household-expenses-in-the-past-week?loc=22&loct=2#detailed/2/22/false/2047,2042,2034,2033,2032,2028,2027,2002/any/21185>

# **PJC Support of SB 211 Time to Care Act.pdf**

Uploaded by: Rodwin, David

Position: FAV



Sally Dworak-Fisher  
Public Justice Center  
201 North Charles Street, Suite 1200  
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## SB 211

### Labor and Employment

### Family and Medical Leave Insurance Program – “Time to Care Act”

Hearing of the Senate Finance Committee, January 28, 2021

### Position: FAVORABLE

The Public Justice Center (PJC) is a not-for-profit civil rights and anti-poverty legal services organization which seeks to advance social justice, economic and racial equity, and fundamental human rights in Maryland. Our Workplace Justice Project works to expand and enforce the right of low-wage workers to receive an honest day’s pay for an honest day’s work. The PJC **SUPPORTS SB 211** and requests a **FAVORABLE** report.

### Marylanders Need Time to Care for Serious Health Issues and Major Life Events.

We all need time to care—for new babies, for aging parents, for loved ones with serious health needs or disabilities, or for ourselves. While many Marylanders can now earn short-term earned leave under the Healthy Working Families Act (HWFA), that law does not help the thousands of Marylanders with longer-term health issues or with major life events, such as birth or adoption. In fact, in Maryland, even *unpaid* leave under the federal Family and Medical Leave Act is inaccessible for 56 percent of working people.<sup>1</sup> Moreover, without paid leave, many of those covered by FMLA cannot afford to take it. Marylanders need a paid family leave program.

### SB 211 represents a common-sense solution to the very real struggles of working families.

SB 211 is a common-sense solution that would allow Maryland workers up to 12 weeks of leave following the birth or adoption of a child and when needed to provide care for a family member or oneself. The leave would be funded through an insurance pool, into which both workers and their

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<sup>1</sup> Nat’l Partnership for Women and Families, “Paid Leave Means a Stronger Maryland” Fact Sheet (2020), <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/paid-leave-means-a-stronger-maryland.pdf>.

*The Public Justice Center is a 501(c)(3) charitable organization and as such does not endorse or oppose any political party or candidate for elected office.*

employers would contribute. Unlike unemployment insurance, the cost of SB 211 would be shared equally by employees, and not be borne exclusively by employers.

**SB 211 Appropriately Recognizes that Low-Wage Workers Need Maximum Wage Replacement.** In addition to sensibly splitting contributions between employers and employees, SB 211's graduated wage replacement recognizes that lower-wage employees would be unable to afford to take leave absent nearly full wage replacement. Allowing up to 90% wage replacement for the lowest-paid Marylanders will ensure that the program is accessible to those who could otherwise not afford to participate.

**Paid Family Leave is Good for the Economy and Good for Business.** Paid family leave is not just good for families. Employees who know that they don't have to worry about taking time to care for a new child or a loved one with a serious illness are more productive and more loyal. And businesses thrive when employees are more productive.

For the foregoing reasons, the PJC **SUPPORTS SB 211** and urges a **FAVORABLE** report. Should you have any questions, please call Sally Dworak-Fisher at 410-625-9409 ext. 273.

**NCADD-MD - SB 211 FAV - Time to Care Act.pdf**

Uploaded by: Rosen-Cohen, Nancy

Position: FAV





**Senate Finance Committee  
January 28, 2021**

**Senate Bill 211  
Labor and Employment - Family and Medical Leave Insurance Program -  
Establishment (Time to Care Act of 2021)**

**Support**

NCADD-Maryland supports Senate Bill 211 – the Time to Care Act of 2021. The creation of a Family and Medical Leave Insurance (FAMLI) program in Maryland would allow families to take up to 12 weeks of paid leave to care for the birth or adoption of a child, family members with serious health conditions or disabilities, family members who are leaving for military deployment, or for their own health conditions.

For families dealing with substance use disorders, this bill would allow people who are in treatment or supporting a family member in treatment to take time off from work and focus on beginning the recovery process. People may need time off of work in order to take part in a residential program, or even an intensive outpatient program. People may need time off to support a family member in intensive treatment. The family member may need assistance with transportation and keeping track of appointments with counselors, case managers, and other health care providers.

With only one in ten people with a substance use disorder accessing treatment, policies like FAMLI will help people keep their jobs, keep their incomes, and find recovery. We urge a favorable report on Senate Bill 211.

*The Maryland Affiliate of the National Council on Alcoholism and Drug Dependence (NCADD-Maryland) is a statewide organization that works to influence public and private policies on addiction, treatment, and recovery, reduce the stigma associated with the disease, and improve the understanding of addictions and the recovery process. We advocate for and with individuals and families who are affected by alcoholism and drug addiction.*

# **Charm paid.docx.pdf**

Uploaded by: Rothschild, Amanda

Position: FAV



## **SB0211- SUPPORT**

Amanda Rothschild  
Charmington's Cafe

cafe@charmingtons.com

**SB0211-** Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)-  
**SUPPORT**

*Finance Committee*

*January 28, 2021*

Dear Chair Dolores G. Kelley and Finance Committee Members,

Thank you and your committee for your consideration of this important issue that will mean so much to Maryland workers and their families.

I'm a Maryland business owner and I am joining a coalition of diverse businesses to support the Time to Care Act so that families can have the financial security to care for themselves and their loved ones after the birth of a child or in the case of serious illness.

Charmington's is a small cafe in Baltimore City that has served its community since 2010, providing food and communal space for neighbors, and good jobs for our employees--which has included paid sick leave from day one. Providing paid leave for our employees has been an important aspect of employee retention, which translates into better service for our customers and overall long-term health for our employees and the business as a whole.

As our business has grown, we've found that in order to provide **equitable job opportunities** in the city, we need to provide adequate support for those with family obligations or less than perfect health. This is the reality for so many Marylanders, even more so now as the COVID-19 pandemic has shown that nobody is immune to health emergencies. Still, this equity goal is not fully achievable as a small business on our own. SB0211 would provide the infrastructure needed for employers and employees alike at a minimal cost.

Marylanders face impossible choices when new children are born or adopted and when serious personal or family health needs arise. The Time to Care Act would make paid leave available to Maryland workers for up to 12 weeks following the birth or adoption of a child, and when needed to provide care for a family member or oneself. The leave would be funded through an insurance pool, into which workers and their employers contribute.

When Paid Family Leave is administered through an insurance program, small businesses benefit because the cost is shared. As many of us have experienced through offering these benefits, first-time moms who take paid leave are more likely to return to the same employer.

For these reasons, I am signing on in support of the Time to Care Coalition to urge the Maryland Legislature to pass legislation establishing a Family and Medical Leave Insurance Program.

**Testimony SB 311 Time to Care Act 1.25.2021.pdf**

Uploaded by: Rubin, Diana

Position: FAV

**COMMISSION FOR WOMEN**

January 25, 2021

The Honorable Delores G. Kelley, Chair  
Senate Finance Committee  
Miller Senate Office Building  
11 Bladen Street  
Annapolis, MD 21401

The Honorable Brian J. Feldman, Vice Chair  
3 East Wing  
James Senate Office Building, Room 223  
11 Bladen St., Annapolis, MD 21401

RE: Letter in Support of SB 311 – Labor and Employment -  
Family and Medical Leave Insurance Program -  
Establishment (Time to Care Act of 2021)

Dear Chairman Kelley, Senator Feldman and Members of the Committee:

On behalf of the Montgomery County Commission for Women (“Commission”), we write to express our strong support for SB 311, the Time to Care Act of 2021, and urge this Committee to issue a favorable report on this bill. This bill establishes a Family and Medical Leave Insurance Program through which employees may take up to 12 weeks of paid leave from their jobs to care for new children, other family members with serious conditions or disabilities, or themselves.

Our Commission is appointed by the County Executive to represent the interests of women in Montgomery County, who constitute more than half of its residents. Assuring the financial security of Montgomery County women throughout their lives is one of the Commission’s top strategic priorities. That is why paid family and medical leave is of such critical importance.

At some point, nearly everyone will need to time off from work to deal with a serious personal or family illness, or to care for a new child or elderly or

ailing parents. Yet many Marylanders and other Americans are unable to take this time off because they lack paid and medical family leave, forcing them to choose between their jobs, their paychecks and taking care of serious personal or family illnesses or family needs. In fact, in 2019, [more than 32 million people in the country – 27% of private sector workers](#) – lacked access **to a single paid sick day** to recover from an illness like COVID-19 or to care for a sick family member without losing their job or their paycheck.

Lack of paid leave especially hurts working mothers. In Maryland, 79% of mothers are in the workforce and families depend on them (and men) for caregiving. The lack of a paid family and medical leave system negatively affects women’s ability to work and, to advance their careers. **Nearly 25% of women take 10 or fewer days of parental leave, potentially putting them and their children at risk physically and emotionally.** Women also bear a disproportionate burden of caregiving for elderly and ill relatives. It is a major contributor to the wage gap between women and men, and to women’s financial vulnerability and poverty as they age.

As events of the last year have shown, lack of paid sick leave is risky to public health, especially during pandemics like COVID-19, which are increasingly common. Workers go to work sick because they can’t afford to lose pay, spreading contagion. A [survey of workers](#) found that those without paid sick leave were 1.5 times more likely to go to work when they have a contagious illness than workers with the benefit. [One study](#) of workers lacking sick leave found up to 3 million workers go to work sick every week, mostly low-wage workers, mothers with young children, or both. When workers go to work sick, contagious illnesses spread more quickly and widely.

Low-income and service-sector workers—who are disproportionately women—and Latinx workers -- are the least likely to have access to paid sick leave and are disproportionately represented in front-line industries where they face higher risks of exposure to the coronavirus, are least likely to have access to paid leave. Nearly 80 percent of low wage workers lack the ability to earn paid sick days.

New York, Washington, Rhode Island, New Jersey, Massachusetts, Washington, D.C. and California have similar programs. Similar legislation was recently signed into law in Connecticut and Oregon.

The Commission urges the Committee to issue a favorable report on the bill and ease the plight of working families in Maryland.

Sincerely,



Nicole Y. Drew, Esq.  
President  
Montgomery County Commission for Women

Commissioners:

Donna Rojas – First Vice President  
Diana Rubin – Second Vice President  
Tiffany Boiman – Recording Secretary  
Tazeen Ahmad  
Isabel Argoti  
Mona-Lee Belizaire  
Tonia Bui  
Arlinda Clark  
Ijeoma Enendu  
Patricia Maclay  
Chai Shenoy  
Patricia Swanson  
Angela Whitehead Quigley  
Meredith Weisel

Executive Director  
Jodi Finkelstein

**MDAEYC SB 211 testimony FAV.pdf**

Uploaded by: Schaefer, Stephanie

Position: FAV





Maryland Association for the Education of Young Children

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**Testimony in Support of SB 211**  
**“Labor and Employment - Family and Medical Leave Insurance Program -**  
**Establishment (Time to Care Act of 2021)”**  
**Submitted to the House Appropriations Committee**  
**January 28, 2021**

**Position: Support**

The Maryland Association for the Education of Young Children (MDAEYC) supports SB 211, which would establish a Family and Medical Leave Insurance (FAMLI) Program that will enable employees to take up to 12 weeks of partially paid leave to care for new children, family members with serious illnesses or disabilities, or themselves.

MDAEYC is a professional association of early childhood educators, allied professionals, and families. We know that early childhood educators, like all workers, need to be able to take time off from work periodically to care for their family members. And the families that educators serve also need paid leave time so that they can care for their infants or ill family members when the need arises.

As early childhood educators, we also know that the earliest years of a child’s life have a profound influence on their development. All infants need and deserve attentive care from a caring adult; providing paid family leave enables more parents the option to provide that attentive care themselves for several weeks or months. Allowing parents more time to care for their infant or newly adopted child helps family members build loving relationships and form attachments. Secure parent-infant attachments are the cornerstone of emotional well-being and healthy relationships. Healthy early relationships allow young children to develop confidence and be ready to learn.

SB 211 would enable workers to provide attentive care to their newborns or ill family members, so employees don’t have to choose between being paid and taking care of a family member. We urge your support of this legislation.

*If you have any questions, please contact: Stephanie Schaefer, Program Coordinator, at [stephanie.schaefer@mdaeyc.org](mailto:stephanie.schaefer@mdaeyc.org) or 240-441-3280.*

**SB 211\_MDCEP\_FAV.pdf**

Uploaded by: Schumitz, Kali

Position: FAV

# Paid Family and Medical Leave Promotes a Healthier and More Effective Workforce

## Position Statement in support of Senate Bill 211


*Given before the Senate Finance Committee*

Ensuring Maryland workers can afford to take time off to care for a new child or a family member dealing with a serious illness would benefit families, communities, and Maryland's economy. Credible research and evidence from other states show that guaranteeing family and medical leave to most workers brings significant and wide-ranging benefits, including improved infant health and reduced employee turnover. Ensuring workers can take needed time off to deal with major life events is especially vital amid the public health and economic upheaval caused by the coronavirus pandemic. For these reasons, the Maryland Center on Economic Policy supports Senate Bill 211.

Maryland's current failure to guarantee paid family and medical leave causes significant harm to workers and our economy. Although the federal Family and Medical Leave Act enables many workers to take up to 12 weeks of job-protected leave to care for a new child or a loved one with a serious health condition, or to recover from their own serious health condition, carve-outs exclude large numbers of workers from these protections. Moreover, a large majority of Americans are not guaranteed any paid leave from their employers for such circumstances, including 94 percent of low-wage workers. Taking significant time off without pay is not an affordable choice for many Marylanders.

As a result, many workers either forgo needed time off work or take less leave than the amount they need:

- About 16 percent of workers nationwide needed to take family or medical leave in the last two years but were unable to, according to a 2016 survey by the Pew Research Center.<sup>i</sup> Another 12 percent took less time off than they needed.
- The Pew survey found that one in five women needed leave but were unable to take any. Latinx workers were more likely than white workers to forgo needed time off, and Black workers were twice as likely as their white counterparts to do so. Workers taking home less than \$30,000 per year were more than twice as likely as those making at least \$75,000 to need leave but not take any.
- Among workers with unmet need for time off, more than two-thirds said they could not afford to take the leave they needed and about half said they were afraid that doing so could cost them their job.
- Some workers who took leaves received full or partial pay during their time off—generally out of accrued paid time off, sick days, or vacation days—but 37 percent received no pay at all. Half of Latinx workers and three out of five low-wage workers received no pay at all during their time off.
- Among workers who received partial pay or none at all, half dealt with the loss of income by dipping into



savings intended for another purpose, 41 percent cut their leave short, 37 percent took on debt, and 33 percent put off paying bills.

Senate Bill 211 would enable most Maryland workers to take up to 12 weeks of partially paid leave to care for a new child, to care for a family member with a serious health condition, or to treat their own serious health condition. The bill also extends job protections to workers who are currently left out of the federal Family and Medical Leave Act, ensuring they can take time off without fear of losing their job. Altogether, Senate Bill 211 could extend access to paid family leave to about 1.4 million private-sector workers who currently lack it and extend access to paid medical leave to 1 million workers who currently lack it.<sup>ii</sup>

Similar to unemployment insurance, employers and employees would share the cost of benefits through payroll contributions. Previous analysis by the Institute for Women's Policy Research has found that contributions of 0.67 percent of wages, up to the Social Security contribution cap, would cover the cost of benefits. For a worker earning the FY 2019 average weekly wage of \$1,080, this would mean that employers and employees would each contribute \$3.62 per week.

Evidence from states that guarantee paid family and medical leave shows that small and large businesses alike fare well under these programs:

- Most businesses in states that today offer paid leave report positive or neutral impacts on their bottom line. Owners of small businesses are equally or more likely to report positive or neutral impacts than others.
- 61 percent of small business owners support establishing state paid family and medical leave programs.
- Peer-reviewed research finds that businesses fare well when workers can take paid leave, with little impact on their bottom line and an increased chance that workers will return to their previous job after taking leave.

Credible academic research, as well as the experience of other states with similar programs, shows that paid family and medical leave brings significant and wide-ranging benefits:<sup>iii</sup>

- **Public health benefits:** Evidence links paid leave guarantees to a decline in infant mortality, improvements in mothers' mental health, a 33 percent drop in upper respiratory complications among infants, and increased ability for aging adults to live at home. Research shows that children in low-income families see especially large health benefits.
- **Economic benefits:** A study found that California's paid leave guarantee decreased the number of mothers of young children with family income below the federal poverty line (currently about \$26,000 for a family of four). While paid leave enables parents to take more time off during the first few weeks of a child's life, research shows that it can also enable mothers to return to the paid workforce sooner. Studies have linked paid leave to improvements in productivity and declines in turnover.

If we want to foster broadly shared prosperity across our state, we should create a Maryland where workers can keep their jobs and their livelihoods while dealing with some of life's most significant events. If working Marylanders cannot take off from work to deal with important family matters without risking their economic stability, we are all worse off. Ensuring hardworking Marylanders have financial support and flexibility during their times of need is essential to a thriving Maryland.

**For these reasons, the Maryland Center on Economic Policy respectfully requests that the Finance Committee make a favorable report on Senate Bill 211.**

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## Equity Impact Analysis: Senate Bill 211

### *Bill summary*

Senate Bill 211 would guarantee partially paid, job-protected family and medical leave to Maryland workers who have worked at least 680 hours in the last year, regardless of employer size. Benefits would be equal to 90 percent of wages for a worker who takes home less than 65 percent of the average weekly wage (\$702 per week in FY 2019), with wages in excess of this amount replaced at a rate of 50 percent. Benefits would be a minimum of \$50 per week and a maximum of \$1,000 per week. To fund these benefits, employers and employees would equally share payroll contributions on wages and salaries up to the Social Security cap (currently \$142,800 per year, or \$2,746 per week).

### *Background*

The federal Family and Medical Leave Act enables certain workers to take up to 12 weeks of unpaid, job-protected leave to care for a new child, care for a family member's serious health condition, or recover from one's own serious health condition. To qualify for these protections, an employee must have worked at the same employer for at least 12 months, have at least 1,250 hours of employment in the last 12 months, and work for an employer with 50 or more employees within a 75-mile radius.


California enacted the first paid family and medical leave law in the United States, in 2004. Seven other states have since followed suit. However, as of 2019 only 18 percent of private-sector workers nationwide have paid family leave at their job.

### *Equity Implications*

Maryland's current lack of a paid family and medical leave guarantee poses significant equity concerns:

- Sixteen percent of workers nationwide needed to take family or medical leave in the last two years but were unable to do so, according to a 2016 survey by the Pew Research Center. This group includes 19 percent of women, 23 percent of Latinx workers, 26 percent of Black workers, and 30 percent of workers with less than \$30,000 in annual income.
- Workers with unmet need for leave were more likely to cite inability to afford the lost income as a reason for taking no leave or less than they needed than any other factor (72 percent of those taking no leave, 69 percent of those taking less leave than they needed).
- While some workers received full or partial pay during their time off, Latinx workers and workers with annual income under \$30,000 were least likely to receive any pay.
- Many workers who took a pay cut during their time off work dealt with the loss of income by dipping into savings intended for another purpose, cutting their leave short, taking on debt, or putting off paying bills.
- Research suggests that parents who take no leave, insufficient leave, or unpaid leave may face a higher risk of experiencing mental health problems; their children may face a higher risk of health problems or even death. Workers who face barriers to taking the leave they need—who are disproportionately workers of color or low-wage workers—are especially likely to face these risks.

Senate Bill 211 would mitigate—though not eliminate—these equity concerns by guaranteeing partially paid, job-protected family and medical leave to the majority of Maryland workers.



## *Impact*

Senate Bill 211 would likely **improve racial, gender, and economic equity** in Maryland.

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<sup>i</sup> Juliana Horowitz, Kim Parker, Nikki Graf, and Gretchen Livingston, “Americans Widely Support Paid Family and Medical Leave, but Differ over Specific Policies,” Pew Research Center, 2017, <https://www.pewsocialtrends.org/2017/03/23/americans-widely-support-paid-family-and-medical-leave-but-differ-over-specific-policies/>

<sup>ii</sup> MDCEP analysis of 2016–2018 IPUMS American Community Survey microdata, 2016–2018 IPUMS Current Population Survey Annual Social and Economic Supplement microdata, 2019 Employee Benefits Survey. Assumes Maryland private-sector workers are equally likely as private-sector workers nationwide to have access to paid family leave (18 percent) and short-term disability insurance (42 percent).

<sup>iii</sup> Heather MacDonagh, “Family and Medical Leave Insurance,” Department of Legislative Services, 2019, [http://dls.maryland.gov/pubs/prod/BusTech/Family\\_and\\_Medical\\_Leave\\_Insurance.pdf](http://dls.maryland.gov/pubs/prod/BusTech/Family_and_Medical_Leave_Insurance.pdf)

Worker's Average Weekly Wage	Annualized	Weekly Contribution (Assume 0.67% Rate)		Weekly Contribution (0.75% Maximum Allowable Rate)		Weekly Wage Replacement	Notes
		Total	Worker's Share (50% of Total)	Total	Worker's Share (50% of Total)		
\$100	\$5,200	\$0.67	\$0.34	\$0.75	\$0.38	\$90	
\$150	\$7,800	\$1.01	\$0.50	\$1.13	\$0.56	\$135	
\$200	\$10,400	\$1.34	\$0.67	\$1.50	\$0.75	\$180	
\$250	\$13,000	\$1.68	\$0.84	\$1.88	\$0.94	\$225	
\$470	\$24,440	\$3.15	\$1.57	\$3.53	\$1.76	\$423	\$11.75/h, 40h/wk (2021 min. wage)
\$500	\$26,000	\$3.35	\$1.68	\$3.75	\$1.88	\$450	
\$600	\$31,200	\$4.02	\$2.01	\$4.50	\$2.25	\$540	\$15.00/h, 40h/wk (2025 min. wage, most wkrs)
\$702	\$36,504	\$4.70	\$2.35	\$5.27	\$2.63	\$632	90% / 50% Replacement rate threshold
\$750	\$39,000	\$5.03	\$2.51	\$5.63	\$2.81	\$656	
\$1,000	\$52,000	\$6.70	\$3.35	\$7.50	\$3.75	\$781	
\$1,080	\$56,160	\$7.24	\$3.62	\$8.10	\$4.05	\$821	FY 2019 average weekly wage*
\$1,250	\$65,000	\$8.38	\$4.19	\$9.38	\$4.69	\$906	
\$1,438	\$74,797	\$9.64	\$4.82	\$10.79	\$5.39	\$1,000	Maximum benefit
\$1,500	\$78,000	\$10.05	\$5.03	\$11.25	\$5.63	\$1,000	
\$1,750	\$91,000	\$11.73	\$5.86	\$13.13	\$6.56	\$1,000	
\$2,000	\$104,000	\$13.40	\$6.70	\$15.00	\$7.50	\$1,000	
\$2,250	\$117,000	\$15.08	\$7.54	\$16.88	\$8.44	\$1,000	
\$2,500	\$130,000	\$16.75	\$8.38	\$18.75	\$9.38	\$1,000	
\$2,746	\$142,800	\$18.40	\$9.20	\$20.60	\$10.30	\$1,000	Social Security contribution cap
\$3,000	\$156,000	\$18.40	\$9.20	\$20.60	\$10.30	\$1,000	
\$3,500	\$182,000	\$18.40	\$9.20	\$20.60	\$10.30	\$1,000	
\$4,000	\$208,000	\$18.40	\$9.20	\$20.60	\$10.30	\$1,000	
\$5,000	\$260,000	\$18.40	\$9.20	\$20.60	\$10.30	\$1,000	

\* For illustration, this table uses the FY 2019 average weekly wage of \$1,080 as reported in the fiscal and policy note for HB 839/SB 539 of 2020.

**Aaron Seyedian SB211 Remarks 1\_28\_21.pdf**

Uploaded by: Seyedian, Aaron

Position: FAV



My name is Aaron Seyedian, I live in Montgomery County, and I'm the owner of Well-Paid Maids, a living-wage home cleaning company that operates in the DC area. As a small business owner who employs and serves Marylanders, I am eager to see paid family and medical leave enacted in our state. After having provided paid family and medical leave to my employees for over three years, I can tell you that in addition to being moral, logical, and practical, that paid leave is affordable and beneficial to businesses.

First things first, let's talk cost. As this bill is debated one thing everybody should know is that what we are talking about is not expensive. I have dozens of different costs that I am constantly trying to control as a business owner but paid leave is not one of them. It doesn't even rate. I don't stress about it. I don't even feel it. My business participates in the DC Paid Family and Medical Leave program, which is entirely employer-paid, and it costs me .62% of payroll. Given the fiscal projections for this bill, and the structure of splitting it between employees and the employer, I would not let anybody convince you that this proposal is anything but affordable.

And before we leave the topic of cost, let me just say that for two of the three years that I provided paid leave, the public program we participated in did not exist. I used to purchase private STD on the open market and the cost was 3x as high as what I pay now for a worse plan, meaning skimpier wage replacement and no family leave. So please know that the private sector alternatives to a public social insurance program are inferior and more costly for business owners.

To recap, this is cheap. But it's not just cheap, it's a deal, because as a business owner you get so much bang for your buck. My employees do hard work. Bending, scrubbing, lugging, scraping – u name it. If someone gets injured or gets sick, I need them to rest for every single day the doctor recommended in order for them to be able to come back safely.

Now, we have a generous paid time off policy – 20 days per year – but PTO does not and cannot cut it. There are so many illnesses and injuries and life events that we know just take longer. So by being able to use paid family and medical leave, my employees can actually take the time they need when it's a situation that would otherwise be financially impossible for me cover via PTO or one that they'd try to work through, risking their health and safety, ruining their job performance, and increasing the likelihood that they'd quit.

To sum it up, paid family and medical leave is a negligible cost for businesses that provides tremendous benefits and I would be skeptical of any business or business group that claims this proposal is burdensome for employers. What's burdensome, not just for employers, but employees and the community, is not having a state program.

**SEIU Local 500 - SB 211 - Time to Care Act 2021.pd**

Uploaded by: Simon, Travis

Position: FAV



**Hearing Testimony January 27, 2021**  
**Senate Finance Committee**  
**Service Employees International Union, Local 500, CtW, CLC**

**SB 211 – Labor and Employment – Family and Medical Leave Insurance Program – Establishment**

**SUPPORT**

SEIU Local 500 is made up of over 20,000 working people in Maryland, Washington D.C., and Virginia. Our union represents the support staff at the Montgomery County Public School system, Family Child Care Providers, faculty and staff at institutions of higher education, staff at non-profits and many other working people across the region. Our members have been on the front lines since the beginning of the COVID-19 pandemic, which is why today we submit this testimony in favor of Senate Bill 211 The Time to Care Act. SEIU Local 500 believes that every Marylander deserves the time to care for new babies, aging parents, and loved ones with disabilities or other health needs.

We believe that caring for a family member is a basic responsibility we all share, not a privilege reserved for only those who can afford to do so. Everyone, from part-time workers to full-time employees and management, deserves dignity when balancing the responsibilities of work and family. Yet many Marylanders cannot take time to care because they lack paid family leave. Unpaid leave forces too many Marylanders to choose between income and family. If passed, SB 211 will alleviate an already stressful situation of our residents.

The coronavirus pandemic has only served to exacerbate already existing racial, ethnic, economic and gender inequalities. These inequalities further erode the financial stability of Maryland's working families. According to the Center for American Progress, Low-wage workers and workers of color are less likely than higher-wage and white workers to have access to paid leave. Communities of color are already feeling the economic and emotional strain from the pandemic. The lack of paid family and medical leave only deepens the impact.

Additionally, even before the pandemic started, polling conducted by Opinion Works found that nearly 80% of voters in Maryland support this legislation, even after they are told about the minimal contribution from workers. It is supported by a vast majority of Marylanders, and if passed, all Marylanders will benefit. It's time to ensure that all working people in our state are able to contribute to the economy and care for their families, when needed, with the security that comes with paid leave. We ask for your support for SB 211 and strongly urge a favorable committee report.

**Service Employees International Union, Local 500, CtW, CLC**  
**Pia Morrison, President**  
12 Taft Court, Rockville, MD 2085  
301-740-7100 [www.seiu500.org](http://www.seiu500.org)

# **SB 211 - Labor and Employment - Family and Medical**

Uploaded by: Siri, Michelle

Position: FAV

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BILL NO: Senate Bill 211  
TITLE: Labor and Employment – Family and Medical Leave Insurance Program –  
Establishment (Time to Care Act)  
COMMITTEE: Finance Committee  
HEARING DATE: January 28, 2021  
POSITION: **SUPPORT**

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The Women's Law Center of Maryland is dedicated to ensuring the physical safety, *the economic security*, and the autonomy of women throughout the State. One way we work towards this goal is by supporting systemic changes to our current economic policies and practices that disproportionately affect women. Senate Bill 211 would establish the Family and Medical Leave Insurance (FAMLI) Program. The bill's purpose is to provide income replacement during what would otherwise be unpaid leave taken under the Family and Medical Leave Act or for employees not entitled to benefits under that act. The bill would provide a continuity of income for persons needing to take time off to care for themselves, for a family member with a serious health condition, or for a newborn or newly placed adopted or foster child, or to take time needed for enumerated reasons related to a relative being deployed by the armed services.

This bill would create a structure for income replacement benefits similar to the well-established unemployment benefit system. It would contribute to the financial stability of Maryland workers and families, and because it spreads the risk of paying such benefits among all employers, it would tend to reduce discrimination against employees who themselves are, or who have family members who are, disabled, ill, injured, pregnant, or in the military. The funds will be sourced by contributions made by both employers and employees, for a shared contribution total of .67% of wages. Additionally, the bill provides an exemption for employers offering equal or greater benefits.

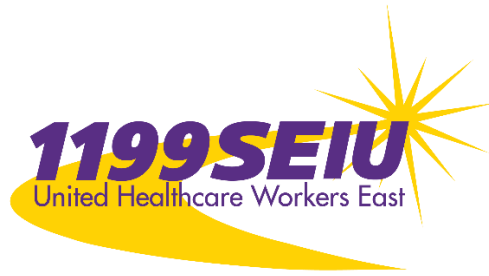
The Women's Law Center supports SB 211 because it furthers the purposes of the FMLA and the state laws extending similar protections, including the more recently enacted Pregnancy Leave Act. Many employees have been assisted by the passage of laws allowing them to take leave to care for their own or a close family member's serious health condition, or to care for a new child, without losing their job. Yet the ability to take leave is often accompanied by a reduction or elimination of the employee's regular wages. This is of particular concern to the Women's Law Center as women continue to be the primary caregivers for children and family members. Yet at the same time, the number of women entering the workforce has continued to grow. Unfortunately, while women now make up nearly half the workforce, and two-thirds of Maryland families have women as the sole, primary, or co-breadwinner, women are disproportionately represented in low-wage jobs. Indeed, while only 18% of workers in general are covered by paid leave, that number is reduced to 6% for low wage workers – the workers who can least afford to go without a paycheck. As such, it should not be surprising that 15% of working women who have a child without paid leave end up on public assistance. But this legislation would benefit the workforce as a whole, as women with paid leave are 70% more likely to return to work, thus saving employers time and money that would otherwise need to be spent on recruiting, hiring, and training new staff.

Senate Bill 211 is a reasonable and modest effort that demonstrates Maryland's commitment to working families by helping to protect their health, stability and wellbeing. Therefore, the Women's Law Center urges a favorable report on SB 211.

# **Testimony-SB211-Family and Medical Leave Insurance**

Uploaded by: Stevenson, Christopher

Position: FAV



**Testimony on SB211**  
***Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)***  
**Position: FAVORABLE**

Dear Ms. Chair and Members of the Finance Committee,

My name is Ricarra Jones, and I am the Political Director with 1199SEIU- the largest healthcare union in the nation, where we represent over 10,000 healthcare workers in Maryland. Given the need to provide family and medical leave to hardworking employees in Maryland, we are supportive of HB0375- Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021).

The current family and medical leave systems in Maryland are broken and the pandemic has worsened the status quo. No person should have to choose between caring for an aging family member with COVID-19 and paying their electricity bill. No person should have to worry about how to afford the next meal while healing from a traumatic medical experience. Unfortunately, unpaid leave forces too many Marylanders, especially those whose needs are the greatest, to choose between income and family, as well as self needs. Employees are often reduced to dangerously balancing limited days off and pressing family and medical needs particularly with families that have children. Establishing a Family and Medical Leave Insurance Program would ease the burden of taking time off work for urgent needs. At an estimated employee payroll dedication of \$3 to \$6 a week, the cost of the program is minimal, but the benefits are plenty. Now is the time to establish security for families and medical leave, particularly while we deal with a deadly pandemic.

For 1199SEIU members who are our everyday healthcare workers fighting on the frontlines of COVID-19, this Act is vital to help them manage treating the hundreds of thousands that are sick in this state, while also maintaining their very sanity and livelihoods at the workplace. We must remember that despite healthcare workers being our heroes during this pandemic, they are people as well and they need paid leave to juggle the everyday struggles and realities of life. Not only would this Act help our members during this pandemic, but it would also create a fallback system for all future emergency family and medical needs for workers.

For this reason, we believe that this Act will create the necessary structure in place to improve overall family and medical leave structure in Maryland and ask that you support the Time to Care Act of 2021.

Respectfully,

Ricarra Jones  
Maryland/DC Political Director  
1199SEIU United Healthcare Workers- East  
Cell: [443-844-6513](tel:443-844-6513)

**CC-SB211-TimeToCare.pdf**

Uploaded by: Vaughan, Regan

Position: FAV



## **Senate Bill 211 Labor and Employment – Family and Medical Leave Insurance Program – Establishment**

Senate Finance Committee  
January 28, 2021

### **Support**

Catholic Charities of Baltimore strongly supports SB 211, which provides wage replacement for Maryland workers who need to take time to care for themselves or a loved one.

Inspired by the gospel to love, serve and teach, Catholic Charities provides care and services to improve the lives of Marylanders in need. As the largest human service provider in Maryland working with tens of thousands of Marylanders each year, and an employer of over 2,000 people, we recognize the dignity of the worker and as part of that the need to take time to care for oneself and loved ones.

Each day, Catholic Charities staff interact with Marylanders facing challenges and difficulties. Whether it is a parent seeking job training, a youth experiencing a behavioral crisis or a senior who needs a safe place to live we work to meet the individual's needs and help them meet their goals. It is through these interactions that we have come to strongly support SB 211.

Shakira Hardy's story is just one example of the need we see every day. This excerpt is from our Winter 2020 *Blessings* newsletter.

THREE YEARS AGO, Shakira Hardy and her two children were a month away from homelessness. After her husband was incarcerated, her then-7-year-old son, Anthony, began acting out in ways that confounded educators and mental health professionals. He was suspended from school and hospitalized multiple times. She struggled to keep her job, focused on his needs and those of her then-10-year-old daughter, Aaliyah.

A year ago, Shakira was wrapping small Christmas presents in the cafeteria of a homeless shelter where she and Aaliyah were staying. She had lost her job – and then their home – and they had been kicked out of other shelters because of Anthony's behavior. But, after months of trying, she had secured a spot for him at St. Vincent's Villa – Catholic Charities' residential center for children with significant emotional and behavioral needs. As Anthony received comprehensive treatment, she concentrated on carving out a more stable path for her family...

...Through Baltimore City services, Shakira found Catholic Charities' Project REACH, which offers permanent housing and a path to independence. On June 1, she and Aaliyah moved into a three bedroom home in Baltimore, and Anthony joined them after finishing treatment at St. Vincent's. The holidays offer a chance for renewal, and Shakira pauses when asked about Christmas. "It's going to be the meaning behind it," she said, glancing at her children. "We're going to have our own house and put up our own tree the way we want it. But I'm just elated we'll be all together."

Paid family leave may not have solved all of the problems the Hardy family faced, but if Shakira had been able to take the time her family needed, they would have had a better chance of maintaining financial stability, kept their home, and prevented the family from experiencing the toxic stress associated with homelessness.

As individuals, we do not know if we will need to access family leave in the future. But as a society, we know that infants do better when a parent are present during their first 12 weeks, that seniors are more likely to age in place if their caregiver has access to leave, and that individuals have better health outcomes if they can take the

time to heal. And as an employer, we know that paid leave leads to improved morale and reduced turnover. It is time for Maryland to adopt a paid family and medical leave program.

**On behalf of the families and all the individuals we work with, Catholic Charities of Baltimore appreciates your consideration, and urges the committee to issue a favorable report for SB 211.**

Submitted By: Regan K. Vaughan, Director of Advocacy

**SB 211 - SUPPORT.pdf**

Uploaded by: Wallerstedt, Anne

Position: FAV

**Bill:** Senate Bill 211

**Title:** Labor and Employment – Family and Medical Leave Insurance Program – Establishment (Time to Care Act of 2021)

**Committee:** Senate Finance Committee

**Date:** January 28, 2021

Members of the Senate Finance Committee:

I strongly support SB 211, the Time to Care Act. I write as a person who has spent her professional career working within the Maryland General Assembly in various roles, a resident of District 17 in Montgomery County, and a new mother.

It is time for Maryland to implement a paid family leave program. This pandemic has smashed wide open any cracks that existed in the country's and state's lack of support for working families. There are many vulnerabilities that have been exposed and brought to the forefront of conversation – which is great – yet the lack of paid family leave has been noted consistently for many years prior to this crisis.

By the grace of a kind and supportive boss, I was able to take an appropriate amount of time after the birth of my daughter to recover from labor and delivery and bond with my newborn. Regardless of my good fortune, women and families should not have to be at the whim of their employers. My husband works for a large company and was promised four weeks of paid parental leave, to be taken within the first six months. However, three months before our daughter was born, the company unilaterally and without notice changed their policy to one week. He found out when he contacted his HR department on the day our daughter was born. Upon the announcement of a pregnancy, one of the first things my friends and I discuss is how much leave the – typically mother only – is able to access. I will tell you that it varies drastically among industries and different areas of the state.

I ask any parent to think back to when their child(ren) was born. How difficult those first few weeks and months were. What an adjustment to a new life revolving around feeding and sleep, or the lack thereof. How needed and *medically necessary* time to rest and recover from childbirth was. Beyond the multitude of new parents who would benefit from this program, the Time to Care Act would honestly likely touch every single person in the state. Our parents are aging rapidly and living longer, thus necessitating more expensive and often unattainable care at the end of their life. What about caring for a family member unable to care for themselves? Families face an impossible choice in such a situation. The stress of a decision between starting a family or caring for a family member and a job and paycheck is cruel and unfair. Yet the solution is outlined in SB 211.

Maryland has the opportunity to show the rest of the nation that working families are a priority and the foundation for a healthy and functional economy. On behalf of my young family, I respectfully request a favorable report on SB 211, the Time to Care Act.

Anne Zmuda Wallerstedt  
Rockville, MD

**SB 211\_MFN\_FAV\_Weeldreyer\_TTC.pdf**

Uploaded by: Weeldreyer, Laura

Position: FAV



**Testimony Concerning SB 211**  
**“Labor and Employment - Family and Medical Leave Insurance Program –**  
**Establishment (Time to Care Act of 2021)”**  
**Submitted to the Senate Finance Committee**  
**January 28, 2021**

**Position: Support**

Maryland Family Network (MFN) strongly supports SB 211, which would establish a Family and Medical Leave Insurance (FAMLI) program through which employees could take up to 12 weeks of partially paid leave from their jobs to care for new children, other family members with serious health conditions or disabilities, or themselves.

MFN has worked since 1945 to improve the availability and quality of child care and other supports for children and their families. We have been active in state and federal debates on policies that address the needs of working families and are strongly committed to ensuring that they have the supports they need to care for their children while meeting the demands of their jobs.

For many Maryland employees, the ability to take time away from work following the birth or adoption of a child is simply unaffordable. And yet we know that benefits to children, to parents, and to society as a whole are profound. Parental leave demonstrably improves child and maternal health, and it helps address some of the most critical opportunities for child development.

Nearly 25% of women return to work after taking 10 or fewer days of parental leave, potentially putting themselves and their children at risk physically and emotionally. New mothers who take paid leave are more likely to breastfeed and less likely to suffer from maternal depression. Their children are more likely to attend their well-baby visits, to receive their immunizations, and to thrive. Fathers who take time off after the birth of a child are more likely to remain involved in the child’s life. Parents with paid leave are better able to balance work and family responsibilities, and they have greater economic security than parents without access to paid leave.

Families have to juggle many demands on their time, but none are more important than their responsibilities to their children. SB 211 gives parents time to care for their families during a critical window of child development. We urge your favorable consideration.

# **SB211\_StrongFutureMaryland\_FAV.pdf**

Uploaded by: Wilkerson, Alice

Position: FAV



**Testimony in Support of Senate Bill 211 (Senator Hayes)  
Time to Care Act of 2021**

January 28, 2021

On behalf of Strong Future Maryland, we write in strong support of Senate Bill 211. Strong Future Maryland works to advance bold, progressive policy changes to address systemic inequality and promote a sustainable, just and prosperous economic future for all Marylanders. We urge you to support this legislation that guarantees a paid family and medical leave insurance fund. While the United States is the only industrialized country that does not mandate paid family leave, nine other states such as New York, California, Rhode Island and the District of Columbia have enacted [policies](#) to provide paid leave to employees. It is clear that the Federal Family and Medical Leave Act alone does not suffice as a solution, but requires complementary state legislation.

Paid family leave should not be viewed as a privilege amongst economically developed countries and progressive states, but a right for our Maryland citizens, especially in the midst of a pandemic that has taken over 400,000 lives across the US. The refusal to pass policies for paid family and medical leave is an explicit declaration from elected legislators, that Marylanders who have compromised health or individuals who are managing family responsibilities and demands will not be protected; single mothers in particular during the pandemic have experienced this strain. Many face the possibility of losing the ability to pay for basic needs if they need to take leave to support themselves or their families.

Senate Bill 211 encompasses all Marylanders, including self-employed individuals, employees of small business, and employees earning lower wages and thus will receive benefits and job protection through the [FAMLI program](#). According to evidence from the [Maryland Center on Economic Policy](#), “Most businesses in states that today offer paid leave report positive or neutral impacts on their bottom line” and find that “businesses fare well when workers can take paid leave because it increases likelihood that workers would return to the same employer, potentially meaning lower costs for hiring and training.” In a similar study in California, they found that “large and small businesses, employers’ payroll costs slightly decreased when workers took leave.” Small businesses owners have also indicated their support as 61% would agree to establishing paid family and medical leave programs.



We must also recognize that since the 1920s, according to the [Department of Labor](#) there has been an exponential incline of women in the workforce, many of whom are mothers. With several US states implementing paid leave policies, a [study](#) from the March of Dimes Center for Social Science Research states that there has been a “20 percent reduction in the number of female employees leaving their jobs in the first year after giving birth—and up to a 50 percent reduction after five years.” In addition, there are detrimental effects for women who do not have access to paid family leave in which “30% dropped out of the workforce after giving birth and one in five did not return for over a decade.”

The 21st Century for women has moved beyond maternal responsibilities such as giving birth and caring for ill family members. We live now in a paradoxical society that while we may view women as invaluable members of the workforce and matriarchs, we have not sufficiently adapted to create an environment where all women are able to return to work after taking necessary extended family leave— including both women and men who are low-wage earners. The bill would not only benefit women, but those who are immunocompromised, inflicted with long-term illnesses, and those who must care for terminally ill family members. With many struggling families requiring two incomes and the plight of the pandemic, it is a necessity to ensure paid family leave in the state of Maryland and urge a favorable vote on SB211.

*John B. King Jr.*  
*Founder and Board Chair*

*Alice Wilkerson*  
*Executive Director*

**SB 211 - Mayson-Dixon Written Testimony 2021.pdf**

Uploaded by: Williams, Jayson

Position: FAV



**MAYSON-DIXON  
COMPANIES**

SB 211 - Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)

Submitted to the Senate Finance Committee

1/28/2021

Madame Chair; Ladies and Gentlemen of the Committee – thank you for providing me the opportunity to submit testimony to you today. My name is Jayson Williams. I’m the co-founder and Chief Executive Officer of Mayson-Dixon Companies, a minority-owned, community development firm. Our services across four subcompanies include general and sub-contracting, supply management, management consulting, property acquisition and community engagement. We invest in people, places, and spaces to create community. I come here before you today in support SB 211 as a businessman and from a place of both compassion and competitiveness.

When my partner and I started our small business, we wanted to create a workplace culture that values our employees. Less than two years after starting the company, one of our vice presidents reached out to let us know she was pregnant with their second child and wanted to take the first three months off after she gave birth. She was a very dedicated member of the team and even offered to take the time unpaid. We did not think that was right and made the decision that we were going to offer paid family leave. We could not afford to pay her regular salary, but we arranged to continue her pay at a portion of her salary during the time that she was out of the office. We knew it was the right thing to do.

Then, in 2019, another employee needed time away because, within a short period of time, both of his parents, who live in Ohio, were diagnosed with early-onset Alzheimer’s Disease. Our company gave him paid family leave so he could go visit them, make caregiving arrangements, and work out legal and medical issues with his siblings.

Here’s what we know from over five years in business: offering good benefits helps any business recruit and retain better employees. But, if the state administered a program like the one we’re talking about today, it would help small businesses like mine. In some ways, we can’t compete with corporations that are larger than us when it comes to benefits. So, the way I take care of my employees is extremely important to me, to our company culture, and to the growth and success of our business. We can’t give out big bonuses, but I can take care of the people that have taken care of us and helped us grow in their time of greatest need.

Thank you again for your time and consideration.

# **SB211 - FAV - Elliot Richman.pdf**

Uploaded by: Zeimer, Matan

Position: FAV

January 28, 2021

Elliot Richman  
Ellicott City, MD 21042

**TESTIMONY IN SUPPORT OF SB211/HB3755**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Elliot Richman

My name is Jeffrey Elliot Richman. I live in Ellicott City in District 9A. This testimony is in support of SB211/HB375, the Time to Care Act of 2021.

When my son was born I was working for a publishing company two states away from my home. Company policy allowed me about a week of leave to care for my wife and newborn child. Even if the Caesarean section had gone smoothly, this would have been only barely enough. However, my wife developed an infection. As a result, her functionality was severely reduced and her recovery from childbirth was significantly delayed. I requested additional time at home from my employer (this was before telecommuting became commonplace). My request was met with denial and visible annoyance.

It was difficult and costly for us to make it through the several months during which my wife was recovering and I was commuting and working, but I had no choice so I made do. Even today, decades later, many if not most fathers still do not have their employer's permission to care for their newborn and spouse for long enough, their wages have not afforded them the savings to take unpaid leave, and they fear termination even if they could afford the time.

I want Maryland to be a better place for families and a leader in social awareness in the United States. The guiding Jewish values of "lovingkindness" (*hesed*) and "repairing the world to leave it a better place" (*tikkun olam*) also justify passage of the Time to Care Act. In the ancient Babylonian Talmud it is written: Whoever withholds an employee's wages, it is as though he has taken the person's life from her (tractate Bava Metzia 112a). Accordingly, we should not ransom a person's wages to allow them to care for their newborn; we should not ransom a person's care for their newborn for them to get their wages. We must make sure that all Marylanders have the capability to take time to be with their families and attend to their own and their family members' health when such need arises.

**I respectfully urge a favorable report on SB211.**

# **SB211 - FAV - Jeremy Kridel.pdf**

Uploaded by: Zeimer, Matan

Position: FAV

January 28, 2021

Rabbi Jeremy Kridel  
Ellicott City, MD 21043-7445

**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Rabbi Jeremy Kridel

My name is Rabbi Jeremy Kridel. I live in Ellicott City, Maryland, in District 12. This testimony is in support of the paid family and medical leave legislation SB211/HB375, the Time to Care Act.

My wife and I are the parents of a teenager with a diagnosis of severe autism. As the parent of a disabled child who, as a rabbi, counsels others who have disabled family members, I bring a unique lens to the question of paid family and medical leave.

In 2019, my son spent a total of 64 days hospitalized, all from late August onward. Four weeks — 28 of those 64 days — were spent in emergency rooms waiting for an inpatient placement at a specialized psychiatric unit at Sheppard Pratt's campus in Towson. During that waiting period — including 3 ½ weeks in the emergency department of the Baltimore Washington Medical Center, which spanned late November to mid-December and included the entire Thanksgiving holiday — we lived with our son in the emergency room. Because he was in an emergency department, we had to stay with him; because he could not be admitted inpatient, he was waylaid in the emergency department; because of his behavioral and psychiatric difficulties, which include aggressive behavior, we both needed to stay with him for his and others' safety.

We were able to do this only because my wife and I both work for synagogues with supportive congregants, boards, and coworkers. We both work part-time for small religious organizations — a necessary compromise to help ensure that we can support our son's school in the event of an incident, and thus we lack even unpaid family leave under the federal FMLA. Without the understanding of our respective communities, we would have had to decide who was going to lose their job to stay with our son. We would certainly have lost our home in that situation, a particularly destabilizing experience for a child with autism.

No Marylander should face the choice of remaining employed or caring for an ill or disabled family member — and they certainly should not have to choose between employment or family for acute, short-duration illnesses. And no Marylander who is paid on an hourly basis should be forced to choose between earning a wage or caring for a family member and going unpaid because they could not go to a job that pays only when hours are logged.

These insights are not new. Jewish biblical tradition makes it clear that workers should be treated fairly: “you shall not abuse a needy and destitute laborer” (Deut. 24:14). Jewish legal tradition knows that workers need to be enabled to care for themselves and their employers by not working night and day, wearing themselves down until they are unproductive (Babylonian Talmud, Tractate Berakhot 16a).

It is time for our state to help hard-working Marylanders by ensuring their families have the stability and care they need to thrive. It is time to make paid family and medical leave the law in Maryland.

In light of the needs of Maryland’s families and the values we share, **I respectfully urge that this committee submit a favorable report on SB211.**



# **SB211 - FAV - Michael Diamond.pdf**

Uploaded by: Zeimer, Matan

Position: FAV

January 28, 2021

Michael Diamond  
Potomac, MD 20854

**TESTIMONY IN SUPPORT OF SB211/HB375**

**Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)**

**TO:** Chair Kelley, Vice Chair Feldman, and the members of the Finance Committee

**FROM:** Michael S. Diamond, MD

My name is Michael S. Diamond, MD. I live in Potomac, in District 15. I am submitting this testimony in support of SB211/HB375, the Time to Care Act of 2021.

I have been a private solo medical practitioner for 30 years and I strongly support government sponsored paid family leave. As an employer, I have always given my assistant as much paid leave as she needs for whatever the purpose. She is a single mother of two and also bears caretaking responsibility for her mother and grandmother. She is grateful for the flexibility and I appreciate her loyalty. However, it is quite expensive, to say nothing of the fact that I do not get paid at all if I am not working. I am not in a particularly lucrative specialty, but I feel a moral obligation to my employee. Of course if she had easy access to competent and affordable childcare some of her absences would not have been necessary.

By passing the Time to Care Act, Maryland will not only provide much needed support to workers, but also to employers, like myself, who are dedicated to supporting their staff. The United States is woefully behind the rest of the developed world in instituting paid family and medical leave and other workplace supports. No one should be forced to choose between their jobs and caring for themselves or their loved ones. Thank you in advance for your efforts and leadership in bringing closer to a kinder and more compassionate society.

**I respectfully urge a favorable report on SB211.**

**2021 SB211 Time to Care Act 1-26-21.pdf**

Uploaded by: Hancock, Rebecca

Position: FWA



**Testimony Concerning SB 211 – Labor and Employment -  
Family and Medical Leave Insurance Program - Establishment**

**Submitted to Senate Finance Committee**

**January 28, 2021**

**Position: Support with Amendments**

The Maryland State Family Child Care Association (MSFCCA) is a non-profit association advocating on behalf of approximately 4700 registered family child care providers and 140 large family child care homes in Maryland. These small businesses are a vital part of the child care delivery system in Maryland and a significant portion of child care programs that remained open to essential personnel during the COVID-19 Pandemic. As a workforce, our members normally care for approximately 50% of all children under the age of two in Maryland. As an association, we are seeing our members struggle to make ends meet but continue to operate with reduced enrollments due to COVID-19. Family providers have always dealt with fluctuating enrollments affecting their incomes, but the last 10 months have been devastating to these small businesses.

Registered family child care providers typically work alone in their homes, in small mixed-age groups. SB 211 would offer these self-employed providers the *opportunity* to enroll in the Family and Medical Leave Insurance Program *voluntarily*. However, there are significant numbers of family child care providers that *have an employee(s)*, which may allow them to care for a larger group of children, attend classes, or other appointments as needed during child care hours. These employees may serve as co-providers/additional adults/substitutes, working alongside the provider or in place of the provider. SB 211 as written, would *“require”* these

providers to participate and enroll themselves and their employee(s) in the Family and Medical Leave Insurance Program. In other words, a family provider with up to eight (8) children and an employee(s), or a large family child care with up to twelve (12) children and an employee(s) would *NOT* have a *choice*, they would be **“required”** to participate. This would force them to pay 100% of the cost for themselves and 50% of the cost for their employee(s). This financial hardship on small businesses that already have limited and fluctuating incomes is not in their best interest, not to mention the added financial struggles we see that have happened as a result of COVID. A likely outcome of this mandate would be to terminate the employee(s). That, in turn, may result in terminating children from programs. This can impact families and will force them to struggle to find quality child care in a system where a serious shortage of programs already exists, especially for children under two years old.

For this reason, MSFCCA is again asking that the threshold required to participate in the Family and Medical Leave Insurance Program (***currently ONE employee***) be more in line with the Maryland Healthy Working Families Act, that requires employers with “15 or more” and the Maryland Parental Leave Act which requires employers with “15 to 49” employees to participate. MSFCCA would even support changing the threshold to “5” or more” employees. This would make sure that the Family and Medical Leave Insurance Program remained ***voluntary*** for all small businesses with only a few employees and fluctuating hours. It is important to note that according to SB 211 as written, employees who are mandated to participate and work fewer than 680 hours per year may never benefit from the program. This is because it is a current requirement in the Bill that in order to use the benefits you have to work at least 680 per year. This means many will be forced to pay for a program they may never use.

Another disadvantage of SB 211 is that family child care providers who voluntarily enroll in the Family and Medical Leave Insurance Program, are required to commit for three years. This is an onerous commitment for small businesses that on any given day can lose one or more of their clients and have it significantly reduce their income. A more suitable option would be a smaller commitment, such as one year or even an “*opt-out*” clause in the event of financial hardship.

MSFCCA appreciates the opportunity to comment on this legislation and understands that the intent of SB 211 is to help families in challenging situations; but realistic options for smaller businesses must be part of the conversation. There has been discussions downplaying the financial commitment this program would require. Even though we have not been given a definitive cost, it has been suggested that it may be under a few dollars for the employer and the same for the employee per pay period. It is important that any increase to operating expenses at this time is too much for struggling small businesses.

As always we favor support systems for Maryland families, but only if they produce reasonable outcomes for all. Therefore, MSFCCA on behalf of our members can only Support SB 211, the Family and Medical Leave Insurance Program with the attached Amendments and ask for your support on this matter. Feel free to contact Rebecca Hancock, the Vice President of MSFCCA at 240-299-0222 to answer any questions concerning this testimony and Amendments.

# **SB211 Amendments 1-26-21 Regular Session.pdf**

Uploaded by: Hancock, Rebecca

Position: FWA

BY: Senate Finance Committee

AMENDMENTS TO SENATE BILL 211

AMENDMENT NO. 1

On page 4 in line 13 strike “ONE”, and substitute “FIFTEEN”

13 (H) “EMPLOYER” MEANS A PERSON OR GOVERNMENTAL ENTITY THAT  
14 EMPLOYS AT LEAST ONE INDIVIDUAL IN THE STATE.

AMENDMENT NO. 2

On page 8 in line 6 strike “3”, and substitute “1”

6 (B) (1) IF A SELF-EMPLOYED INDIVIDUAL ELECTS TO PARTICIPATE IN  
7 THE PROGRAM UNDER SUBSECTION (A) OF THIS SECTION, THE INDIVIDUAL SHALL  
8 PARTICIPATE FOR AN INITIAL PERIOD OF NOT LESS THAN 3 YEARS.



**SB 211.FWA.MACS .pdf**

Uploaded by: Kallins, Lauren

Position: FWA

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**Laura Howell,**  
Executive Director

## Senate Finance Committee SB 211: Labor and Employment – Family and Medical Leave Insurance Program -- Establishment (Time to Care Act of 2021) Position: Support With Amendments

January 28, 2021

The Maryland Association of Community Services (MACS) is a non-profit association of over 100 agencies across Maryland serving people with intellectual and developmental disabilities (IDD). MACS members provide residential, day and supported employment services to thousands of Marylanders, so that they can live, work and fully participate in their communities.

The intent of SB 211, to assist employees who need leave in order care for themselves or a family member is a goal that IDD providers support, which is why MACS supported the Maryland Healthy Working Families Act in 2017. However, the financial and administrative challenges raised by SB 211 threaten to negatively impact some segment of the 17,764 Marylanders with IDD and their families that DDA-licensed providers support. While some caregivers will certainly be helped by SB 211, the impact of the bill on services by providers struggling with high vacancy and turnover rates will, we fear, have a negative affect on others. Prior to the pandemic,

- 1 in 3 direct support staff didn't stay in their jobs 6 months;
- over half of direct support staff did not last a full year (and the vast majority left voluntarily because of high stress, low-wage work-- they can make as much if not more working for retailers and other employers);
- half of all IDD providers had a direct support vacancy rate over 16%; and
- 1 in 4 providers had a direct support vacancy rate over 24%.

The pandemic has exacerbated this staffing crisis, and the supports that people with IDD rely on in order to live in the community will be jeopardized if providers are unable to maintain full staffing for extended periods of time and/or unable to find qualified replacement staff for employees who might be eligible under the bill for up to *twenty-four* weeks of leave-- *in addition* to any accrued vacation leave.

Additionally, the vast majority of IDD providers are nonprofit organizations that rely on funding from the state and federal government. Unlike other businesses, DDA-licensed Medicaid providers are prohibited from passing on cost increases to the people they support. The unfunded employer mandate proposed by this legislation raises concerns for IDD providers. As this Committee will remember from the minimum wage debate, many of these Medicaid providers are already operating on thin margins due to a state reimbursement rate that hovers near minimum wage for direct support workers—a rate that is responsible in large part for the historically high vacancy and turnover rates that IDD providers are facing.

In an effort to balance the interest in providing additional paid leave to employees against the negative impact that the loss of staff would have on people with developmental disabilities, MACS respectfully requests **amendments that would provide paid family and medical leave to eligible employees based on requirements that do not exceed the requirements of the federal Family and Medical Leave Insurance Act (FMLA)**. As drafted, SB 211 allows an employee to qualify for leave who has only worked 680 hours as compared to 1,250 hours under FMLA, and provides the possibility of 24 weeks of leave rather than 12 weeks of leave under FMLA. SB 211 also permits an employee to take the leave to care for an expanded list of family members and for expanded reasons as compared with FMLA.

The impact of such a significant broadening of the allowances under the federal FMLA law will impede the ability of IDD providers to meet the needs of people with developmental disabilities who depend on staff to live and work.

Additionally, the financial impact of the increased cost of the program will have a negative impact on IDD providers and their ability to provide services. Therefore, MACS requests an **amendment that would require the State to cover the cost of the employer contribution proposed by this bill for DDA-licensed IDD providers**.

Sincerely,

Laura Howell  
Executive Director



# **SB211- SWA- The Arc Maryland.pdf**

Uploaded by: Kolp, Ande

Position: FWA



The Arc Maryland  
8601 Robert Fulton Drive, Suite 140  
Columbia, MD 21046  
T 410.571.9320  
F 410.974.6021  
[www.thearcmd.org](http://www.thearcmd.org)

## Senate Finance Committee

### SB 211: Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)

Position: Support With Amendments

The Arc Maryland is the largest statewide advocacy organization dedicated to the rights and quality of life of people with intellectual and developmental disabilities (I/DD) and we support the concept of having a medical leave insurance program in Maryland. **That said, while the program would be incredibly helpful in allowing individuals, parents, and other caregivers to have access to paid leave and job security as they care for themselves or provide care to a loved one, the bill contains several problematic definitions and provisions. These definitions and provisions, as detailed herein, would likely create severe staffing and financial difficulties for people with disabilities who self-direct their home care services, and Developmental Disabilities provider organizations.**

The common reality we all have is that almost all of us will need to take leave at some point - to care for our family member's or our own serious medical condition, or to welcome a new child. Without pay during these periods of leave, people are often faced with making a grueling decision to take the leave without pay, that they know they or their loved ones NEED for health and bonding but which will create a financial hardship and threaten job stability, or not take the leave and continue to work to make ends meet, sacrificing the needs of their family or their own needs. Paid family leave that has been passed in other states has been found to boost economic security and opportunity for all, including an estimated 1 in 5 Americans with disabilities and their families.

A report<sup>i</sup> completed by The Leadership Conference Education Fund found that many low-wage workers with disabilities and family members of people with disabilities feared that “staying home when they or a loved one are sick or in need [would] mean not only the loss of a day's pay but also the possible loss of their job.”

According to a survey completed by Bankrate<sup>ii</sup> this month, just 39 percent of Americans surveyed say they could comfortably cover an unexpected expense of \$1,000. Many people live paycheck to paycheck and any unexpected illness could mean the difference between relative stability and absolute crisis.

SB211, while promising and well-intended, has several components that would create hardships for some people with disabilities and DDA (Medicaid) providers in the state, including **the creation of a mandatory benefit insurance plan** to which both the employer and employee would be required to contribute. DDA providers are Medicaid providers and cannot pass on any of the costs of doing business to people who receive their services. Their primary funding source comes from the state budget and any state-mandated changes

to workforce benefits or wages needs to be coupled by a commitment from the state for increased state funding for DD services.

In addition to the costs to the DD provider/employers (to include people with disabilities who self-direct their services who are employers of record) there are inconsistencies between the Federal FMLA program and this leave program which would create undue tracking burdens, confusion, and added expense for providers and people who self-direct services.

Inconsistencies between the Federal FMLA program and the proposed Time To Care program:

Area of inconsistency	FMLA	“Time to Care”
Hours of work required for program eligibility	1250 hours within the 12 months prior to the start of leave	680 hours within the 12 months preceding the start of leave
Definition of employer under which employee would be eligible for leave benefit	50 or more employees must work at the location	1 employee
Definition of serious health condition	The “continuing treatment” test for a serious health condition under the regulations may be met through a period of incapacity of more than three consecutive, full calendar days, plus treatment by a healthcare professional, or any period of incapacity related to pregnancy or pre-natal care	There is no three-day standard for use of intermittent leave. Employees must make “reasonable effort to schedule the intermittent leave in a manner that does not unduly disrupt operations”, and “provide the employer with reasonable and practicable prior notice of the reason for which the intermittent leave is necessary. There are no definitions for intermittent leave intervals or minimum amount of leave (hours) to be taken at a time
Notice of Rights	Employer must post rights in a conspicuous place	Employer must provide written notice of rights annually to employees. When an employer “knows that an employee’s leave may be for a qualifying reason, the employer shall notify the employee of the employee’s eligibility to take FAMI leave within 5 business days

Payment of leave benefit to employee	According to normal pay period schedule (typically within 14 days)	Within 5 business days after a claim is approved.
Amount of protected leave allowed to be taken per year	Up to 12 weeks	Up to 24 weeks

In this time of pandemic, the workforce shortage in the Developmental Disabilities field has become dire. Workers are not coming into the field to work due to the known risks and low pay/benefits. Allowing a worker to have up to 24 weeks off through the Time to Care Program could create a dire staffing crisis for providers who already struggle to fill shifts. People who self-direct their services do not have a pool of alternative caregivers from which to draw. If their staff leaves for 24 weeks it may place their health in jeopardy. There is no back up long term staffing plan for many who self-direct: no one to provide care, dressing, bathing and other critical assistance for community living if their caregiver is on leave and they are compelled to hold their position.

**Recommendations:**

- 1. Add provisions to the bill to create state funding mandates for DDA Medicaid HCBS providers and people who self-direct to cover the projected costs of employer and employee contributions to the plan as well as additional administration costs.*
- 2. Amend definitions to align with FMLA for: Hours of work required for program eligibility, Definition of employer under which employee would be eligible for leave benefit, Definition of serious health condition, Notice of Rights, Payment of leave benefit to employee, and amount of protected leave allowed to be taken per year.*

In conclusion, we appreciate the intent of this bill, and hope the amendments we have included may be made in order to bring this benefit to workers in Maryland.

Sincerely,

Ande Kolp  
The Arc Maryland  
akolp@thearcmd.org

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<sup>i</sup> [https://www.thearc.org/file/public-policy-document/Georgetown\\_PFML-report\\_Dec17.docx](https://www.thearc.org/file/public-policy-document/Georgetown_PFML-report_Dec17.docx)

<sup>ii</sup> Survey: Fewer than 4 in 10 Americans could pay a surprise \$1,000 bill from savings  
<https://www.bankrate.com/banking/savings/financial-security-january-2021/>

# **SB 211 and HB 375 - Paid Family and Medical Leave**

Uploaded by: Costello, Christopher

Position: UNF





6240 Old Dobbin Lane ■ Suite 110 ■ Columbia, MD 21045

January 25, 2021

The Honorable Delores G. Kelley  
Chair, Senate Finance Committee  
3 East  
Miller Senate Office Building  
Annapolis, Maryland 21401

The Honorable Delegate Dereck E. Davis  
Chair, Economic Matters Committee  
Room 231  
House Office Building  
Annapolis, Maryland 21401

**Re: SB 211/ HB 375 - Paid Family and Medical Leave Legislation**

Dear Senator Kelley and Delegate Davis:

The Howard County Chamber of Commerce (“Chamber”) is a business organization comprised of small business, corporations, non-profits, and governmental agencies all working together for the betterment of the Howard County business community. Our mission is to provide advocacy, connections, and access to timely information to advance the growth and success of the Howard County business community. I write to you at this moment on behalf of our 700 plus member companies out of concerns relative to paid family and medical leave legislation.

As demonstrated in other states, Paid Family and Medical Leave insurance places a significant cost on both employers and employees. If implemented, employees may end up with a less generous benefit than employers already pay. We ask the Committee to consider the following concerns experienced in other states as you discuss possible paid family and medical leave legislation.

- 1. Cost** – The Chamber is particularly concerned with the additional financial and administrative costs to employers and employees that would result from passage of this proposal. In Massachusetts, a recent study estimated the total annual cost of paid family and medical leave insurance, excluding the state’s administrative costs, to be \$949.2 million or roughly \$269 per worker each year, shared by the employer and employee. In addition, the Massachusetts ballot proposal included approximately \$70 million in administrative fees for the operations of a new state agency to administer the program. Importantly, the study showed that the legislation added a \$55 million cost to the already strained state budget to provide the benefit to the state’s workforce. Not to mention, employers that participate in the state program and maintain a standalone paid leave program would likely see increased costs due to a greater cost of administration under the state program.

Similarly, all employers in a similar program would be subject to new administrative and reporting requirements. This, in addition to the already numerous and burdensome administrative costs associated with the Maryland Healthy Working Families Act, Maryland Parental Leave Act and Maryland Flexible Leave Act.

2. **Opt-out Clause or Waiver** – Proposals in other states have required virtually all employers to take part in the state’s paid family and medical leave program. Many of our members already provide employees with the ability to accrue paid leave benefits. Any legislation should at least provide an option for employers to opt-out of the state program in favor of administering a private program with more-generous benefits. Without an opt-out clause, required legislation is an added expense for employers already providing generous paid leave benefits. To facilitate compliance and administration of the program, employers may opt to use the state system instead of more generous offerings.
3. **Employee Eligibility** – Any proposed legislation should align the eligibility requirements with FMLA thus mitigating this issue and provide employers predictability around when their employees will return to work. States that have required paid leave to be taken concurrently with leave under the Family and Medical Leave Act (FMLA) or under the State Parental Leave have created eligibility discrepancies. Employees can become eligible for the paid family and medical leave programs prior to reaching eligibility for FMLA. This makes it impossible for the two programs to run concurrently in some situations, may allow for leave stacking, and would result in numerous administration issues for employers.

The Chamber would be willing to work with the bill proponents to establish a more feasible family and medical leave insurance program and proposes the following amendments:

1. **Reduce the time frames** – The Bill places significant challenges on small employers by providing up to 24 weeks of leave in one calendar year, mandating that an employer hold the job open. Align time frames with existing federal or DC laws.
2. **Increase implementation time period.** - As we have seen in other jurisdictions it takes longer than 6 months to implement a family and medical leave insurance program.
3. **Align definitions with FMLA.** Any proposed legislation should align the definitions of “Covered Employer” and “Eligible Employee” to align with those of FMLA.
4. **Revise oversight structure** - Remove oversight of fund from Unemployment Insurance Division to its own department within the State of Maryland.

Thank you for taking into consideration the Chamber’s concerns. Know that the Howard County Chamber remains supportive of the paid family and medical leave concept. However, we believe that one-sided drafted legislation could have several negative and unforeseen consequences for employees and employers. Meetings were held with the legislation’s proponents only to find proponents had no interest in finding common ground. Consequently, we have no alternative but to request an unfavorable vote.

For questions on the Chamber’s concerns, I can be reached directly at 443-878-1234.

Respectfully,



Leonardo McClarty  
President, Howard County Chamber of Commerce

CC: Howard County General Assembly Delegation  
Howard County Chamber Board of Directors  
Howard County Legislative Affairs Committee Members

# **SB211 Labor Employment-Family Medical Leave Insu**

Uploaded by: Doyle, Lori

Position: UNF



**Testimony on SB 211**  
**Labor and Employment – Family and Medical Leave Insurance Program –**  
**Establishment (Time to Care Act of 2021)**

Senate Finance Committee

January 28, 2021

**POSITION: OPPOSE**

The Community Behavioral Health Association of Maryland (CBH) is the leading voice for community-based providers serving the mental health and addiction needs of vulnerable Marylanders. Our 95 members serve the majority of those accessing care through the public behavioral health system. CBH members provide outpatient and residential treatment for mental health and addiction-related disorders, day programs, case management, Assertive Community Treatment (ACT), employment supports, and crisis intervention.

From the outset we want to state our strong support of our workforce and the sponsor's efforts to make their lives better. They are the backbone of what we do and are critical to the programs we provide for those with serious mental illness and substance use disorders. That is why our member organizations try to be as generous as they can within the bounds of their rates – which are set by the State Medicaid program – in offering flexible leave benefits and perks to attract potential employees to jobs that don't pay competitive salaries. Our opposition to this bill is rooted in the unintended impact we believe it will have on our employees and clients.

We are concerned about the impact on employees, particularly at the low end of the pay scale. While 0.75% of an employee's wage may not seem like much, our members note that few direct care staff avail themselves of 403(b) plans made available to them because of the employee contribution required. Their salaries are so low that many find it difficult to afford housing and other necessities. Some work multiple jobs to make ends meet. Investments – even ones such as 403(b) plans that would directly benefit them – are simply unaffordable for them. This bill would require those same employees to contribute to a fund they may never benefit from.

Similarly, direct care employees tend not to enroll in short-term disability plans if there is an employee contribution required. Many of our member organizations absorb the total cost of short-term disability for their employees and question their ability and rationale for continuing to do so if this bill passes.

One of our greatest concerns is the effect this bill would have on staffing. Our member organizations already struggle with attracting and retaining their workforce due to the low salaries and demanding nature of direct care work; some report staff vacancy rates as high as 50%. These vacancies are exacerbated by the number of employees on extended or intermittent leave (such as that covered by the Americans with Disabilities Act, the Family Medical Leave Act, and the Maryland Health Working Families Act). Staffing is of particular concern in residential programs that operate 24/7 and often have shifts staffed with one or two employees. This bill would allow employees who have already taken 12 weeks of paid leave for their own qualifying health condition to then take an additional 12 weeks of paid leave for another qualifying condition, such as the birth of a child. We believe this will have a significant impact on our ability to ensure client health and safety, not to mention quality of care.

For these reasons we respectfully oppose SB 211.

*For more information contact Lori Doyle, Public Policy Director, at (410) 456-1127 or [lori@mdcbh.org](mailto:lori@mdcbh.org).*

# **MD Judiciary - Testimony SB 211.pdf**

Uploaded by: Elalamy, Sara

Position: UNF

**MARYLAND JUDICIAL CONFERENCE**  
**OFFICE OF GOVERNMENT RELATIONS**

Hon. Mary Ellen Barbera  
Chief Judge

580 Taylor Avenue  
Annapolis, MD 21401

**MEMORANDUM**

**TO:** Senate Finance Committee  
**FROM:** Legislative Committee  
Suzanne D. Pelz, Esq.  
410-260-1523  
**RE:** Senate Bill 211  
Labor and Employment – Family and Medical Leave Insurance  
Program - Establishment  
**DATE:** January 25, 2021  
(1/28)  
**POSITION:** Oppose

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The Maryland Judiciary opposes Senate Bill 211. This bill establishes the Family and Medical Leave Insurance Program and Fund to provide up to 12 weeks of benefits to covered individuals taking leave from employment for a qualifying reason.

This bill raises separation of power concerns as it impedes the Judiciary's independence. Article IV, §18(b)(1) identifies the Chief Judge of the Court of Appeals as the administrative head of the Maryland Judiciary. The power to administer the Judiciary is not an implied or inherent power but is an express constitutional power of the Chief Judge. This constitutional authority includes managing the Judiciary's personnel.

The Judiciary has its own comprehensive personnel system with policies that address recruitment, supervision, grievances, and termination. The Judiciary is exempt from those aspects of the State Personnel Management System. Indeed, in 1996, as part of the comprehensive personnel reform bill, the General Assembly enacted State Personnel and Pensions Article §2-201, which says "Except as otherwise provided by law, an employee in the Judicial, Legislative, or Executive Branch of State Government is governed by the laws and personnel policies and procedures applicable in that branch." The Judiciary, therefore, submits that the same principle should be applied here: that this legislation should not be applied to the Judiciary.

The bill could also have a large operational impact on the Judiciary workforce as it expands leave benefits beyond what is currently allowed by Judiciary policy and the federal Family and Medical Leave Act, potentially leading to increased absences. The increased absences could have an operational impact, the extent of which could be substantial.

Finally, this legislation could have a significant fiscal impact on the Judiciary at an initial cost in excess of \$1.6 million. This cost has not been budgeted by the Judiciary.

cc. Hon. Antonio Hayes  
Judicial Council  
Legislative Committee  
Kelley O'Connor



**SB211 PGAMA.pdf**

Uploaded by: Goldscher, Jay

Position: UNF



Printing & Graphics Association MidAtlantic

## **SB211 Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021) Opposition**

The Printing & Graphics Association Mid-Atlantic respectfully opposes SB211. The printing & graphics industry in Maryland encompasses roughly 16,000 employees across 500 companies and is among the largest manufacturing sectors in the state. Our opposition is not because our members do not want to do right by our employees, but because we feel this blanket program is the wrong approach. Most of our industry are small businesses with less than 50 employees and each additional mandate places additional burdens on the ability to operate a successfully, fully staffed business. In addition to the increased costs to both the employer and employee, an employer would be required to maintain non-wage benefits for up to 12 weeks for any employee in this program, which would be a real struggle for small businesses while having to accommodate for an absent employee.

More and more businesses are utilizing flexible hours and unique arrangements to accommodate employees that require it. This bill would put businesses into a one-size-fits-all system, when we should be allowing businesses to find solutions for their workforce's needs.

Finally, COVID has wreaked havoc on businesses of all shapes and sizes. Many will be recovering for years. Continuing to pile on additional mandated benefits at a time when businesses, particularly small businesses can least afford it, will be detrimental to economic recovery across the state. We respectfully request an unfavorable report.

Jay Goldscher  
President and CEO  
PGAMA  
[jay@pgama.com](mailto:jay@pgama.com)

# **SB 211\_Paid Family and Medical Leave Insurance Pro**

Uploaded by: Griffin, Andrew

Position: UNF



**LEGISLATIVE POSITION:**

**UNFAVORABLE**

**Senate Bill 211--Labor and Employment-Family and  
Medical Leave Insurance Program-Establishment  
Senate Finance Committee**

**Thursday, January 28, 2021**

Dear Chairwoman Kelley and Members of the Committee:

Founded in 1968, the Maryland Chamber of Commerce (MDCC) is the leading voice for business in Maryland. We are a statewide coalition of more than 5,000 members and federated partners, and we work to develop and promote strong public policy that ensures sustained economic recovery and growth for Maryland businesses, employees and families. Through our work, we seek to maintain a balance in the relationship between employers and employees within the State through the establishment of policies that promote fairness and ease restrictive burdens.

Senate Bill 211 would establish a Family & Medical Leave Insurance (FAMLI) Program to be administered under the supervision of the Department of Labor's Unemployment Insurance (UI) Division.

The program generally provides up to 12 weeks of benefits to an employee who is taking partially paid or unpaid leave for certain reasons, except that an additional 12 weeks for benefits appears to be provided in certain circumstances. Leave with benefits is provided for the following reasons: 1) to care for a child during the first year after the child's birth or after the placement of the child through foster care or adoption; 2) to care for a family member with a serious health condition, 3) because the employee has a health condition that results in their being unable to perform the functions of their job, 4) to care for a service member who is the employee's next of kin, or 5) because the employee has an exigency arising out of the deployment of a service member who is a family member.

The bill establishes the FAMLI Fund, which will consist of contributions from employees and employers. Beginning January 1, 2022, each employee and employer shall contribute to the fund at a rate to be set by the Maryland Department of Labor. Self-employed individuals may also participate.

There are any number of additional nuances and complexities outlined in the language, and the Chamber is **very concerned** that the implementation of this legislation will result in additional costs and administrative burden to employers, and especially small businesses at a time when they can least afford it.

To say that COVID-19 has had a tremendous, detrimental impact on Maryland's economy would be an understatement. Maryland job creators continue to struggle to stay afloat, and the Comptroller has estimated that approximately 30,000 businesses have either closed or will close permanently as a direct result of the pandemic. A period of major economic downturn and future uncertainty is not the time to

implement new employer mandates that stand to negatively impact businesses that are struggling to overcome the impact of the pandemic.

To be clear, the Chamber and its members recognize that paid family and medical leave programs are being implemented in other states across the country and in the federal government. While we agree with the intent of the legislation in seeking to help employees balance the challenges between work and life, we do not believe that this legislation appropriately balances those goals with economic realities faced today, particularly as a result of the pandemic.

Through our MDCC Paid Family & Medical Leave (PFML) Workgroup, the Chamber has attempted to work with the advocates for this program to outline our concerns and encourage changes to the bill. Unfortunately, these changes, some of which help the bill more closely align with federal law and seek to address some of the challenges for small businesses, were not accepted. The Chamber will continue to work with stakeholders toward a better outcome on this issue. A comprehensive list of our main concerns is outlined below.

For these reasons, the Maryland Chamber of Commerce respectfully requests an **UNFAVORABLE REPORT** on Senate Bill 211

**The bill will have a significant, negative cost impact, particularly for small businesses and non-profits, at a time when they can least afford it.**

The bill establishes the FAMILI Fund, which will consist of contributions from employees, employers and self-employed individuals. Beginning January 1, 2022, each employee, employer and self-employed individual shall contribute to the fund. The total rate of contribution: 1) may not exceed 0.75% of an employee's wages, 2) shall be applied to all wages up to and including the Social Security wage base, 3) shall be shared equally by employers and employees, and 4) shall be sufficient to fund the benefits payable.

The cost to employers presents additional financial strain to already extremely burdened businesses. Mandated employer contributions are an additional financial demand that small businesses and nonprofits simply cannot afford, particularly given the layering of other employer mandates (sick and safe leave, \$15 minimum wage) that Maryland has implemented in the recent past. We are particularly concerned with the impact on small employers (those with fewer than 50 employees) and non-profits with limited resources (who are also facing significantly reduced charitable giving and government funding), who are struggling with these recent mandates. Other states that have implemented similar programs have recognized the impact on smaller employers and have incorporated provisions into their programs to relieve some of the pressure on these employers by exempting them from contributions or reducing their contributions. There is no such recognition in the proposed bill.

**The bill requires clarification that the program provides benefits to cover already-available leave, and not a separate leave bank.**



While the bill states that it is establishing an insurance program to provide benefits for covered leave, the actual language of the bill is unclear as to whether it is also providing rights to leave itself, rather than just insurance benefits to cover unpaid leave to which an employee is otherwise entitled under laws or employer policies. Other states with similar paid family leave benefits laws make it clear that they are not providing paid leave, but rather benefits to cover unpaid leave which an employee is already receiving. This bill needs similar clarification.

These are the conflicting provisions in the bill:

- Section 8.3-701(A) provides that “a covered individual taking leave from employment may submit a claim for benefits” for reasons that generally track the federal Family and Medical Leave Act. However, Section 8.3-701(B) also provides “A covered individual may take the leave for which the individual is eligible for benefits under subsection (A) of this section on an intermittent basis” and then goes on to provide parameters around the taking of intermittent leave, including scheduling and notice to the employer. In particular, (B)(3) states, “If leave is taken on an intermittent leave schedule, an employer may not reduce the total amount of leave to which the covered individual is entitled beyond the amount of leave actually taken.” (Emphasis added). This language clearly conveys that the program is providing not just pay benefits but actual leave rights.
- Similarly, Section 8.3-702(B) provides that “If a covered individual takes leave for which the covered individual is receiving benefits under this title, the leave shall run concurrently with eligible leave that may be taken by the covered individual under the federal Family and Medical Leave Act.” This language contemplates a leave bank separate from FMLA leave, which would run concurrently with FMLA leave, as opposed to providing benefits when an employee is taking FMLA leave.
- In addition, Section 8.3-707 states that, “If a covered individual receives benefit under this title or takes leave from work for which benefit may be paid under this title, the employer of the covered individual shall, on the expiration of the leave, restore the covered individual to an equivalent position of employment.” (Emphasis added). This same protective language appears in Section 8.3-708 with regard to the provision of employment benefits. Again, this language offers protection not only for receiving benefits, but for taking leave under the bill. It absolutely insulates the leave, regardless of whatever rights employers would otherwise have to manage leave under other laws.
- Section 8.3-801(B) also states, “When an employee requests leave under this title ... the employer shall notify the employee of the employee’s eligibility to take leave for which benefits may be paid ...” (Emphasis added). This language clearly considers the right under the bill to be leave, and not just benefits. Yet, the remainder of this section, which has to do with the required notification to employees, focuses on the receipt of program benefits, not leave.



- Further, Section 8.3-904 provides that no adverse action may be taken when a covered individual has “filed for, applied for, or received benefits, or taken family or medical leave for which benefits may be paid under this title.” Once again, the bill contemplates the provision of leave in addition to benefits.
- Other bill provisions appropriately focus on benefits. For example, Section 8.3-702(A) provides that “a covered individual may not receive more than 12 weeks of benefits in an application year.” (Emphasis added). This benefits language is carried throughout the rest of this subsection, as well as 8.3-702(C) (discussing “benefits under this title” but not leave). Similarly, the provisions on prohibited acts under Section 8.3-901 discuss false statements and other fraudulent acts only with regard to “a claim for benefits.”
- Yet other provisions, like Section 8.3-704(B)(1)(III) contemplate “partially paid leave” that the employee would already be taking, and how benefits under the program would interact with that leave, which supports the premise that this is a benefits, and not a leave, program.

If this is a leave (with benefits) program, it leaves in the State’s hands the authority and responsibility of reviewing and approving leave requests – and then imposing on the employer that State-approved leave, which can be up to 24 weeks (almost 6 months). The employer would have no ability to review, control, verify or manage the leave process – contrary to its abilities under every other leave law that provides leave for the same reasons as this bill.

There are a number of laws that provide employees rights to such unpaid leave, beyond the federal Family and Medical Leave Act. For example, the Maryland Organ and Bone Marrow Donation law provides employees with unpaid leave for those purposes. The Maryland Parental Leave Act requires employers with 15-49 employees (who are therefore not covered by FMLA, which applies to employers with 50 or more employees) with 6 weeks of unpaid leave. These laws, including the FMLA, do not autocratically and automatically impose leave obligations on employers, however. Rather, they contain the same requirements as FMLA for eligibility in terms of a minimum term of service (12 months) and hours worked (1,250 in the prior 12 months), thus ensuring that this valuable leave benefit is granted to employees who have shown a commitment to the employer through service. The organ donation law, like FMLA, allows an employer to terminate an employee for reasons unrelated to the leave. The parental leave law allows an employer to deny leave if it would cause “substantial and grievous economic injury to the operations of the employer.” In addition, all of these laws apply to employers of at least 15 employees. Thus, these laws offer a balance between the needs of employees and those of employers – particularly smaller employers.

In addition, the federal and state disability anti-discrimination laws require employers to provide unpaid leave rights to employees as a reasonable accommodation. These laws apply to employers with 15 or more employees. Again, there is a balancing of the rights of employees with the needs of employers. The leave rights are not absolute – they must be a reasonable accommodation and may not pose an undue



hardship on the employer. That is an assessment that must be made on a case-by-case basis, taking into account many factors such as the length of the leave, the employee's role for the employer, the employer's resources, the impact on operations, etc. And as above, there is the recognition that these obligations are too burdensome to impose on small (under 15 employees) employers as a matter of course.

In contrast, there are seriously reduced eligibility requirements for employees under this bill, enabling employees with relatively short service to take extended leave. Moreover, every employer – even those with a single employee – would be required to give the employee the leave of up to 24 weeks and hold the job for the employee. There is absolutely no consideration as to the impact on an employer's operations, which particularly for smaller employers would be dire. This is a plainly untenable situation.

If this is, as entitled and asserted, truly an insurance benefits program, then the program should only provide benefits for unpaid leave that the employee is already receiving, and not give employees the separate right to leave as well.

### **Definitions and terms in the bill are not consistent with the FMLA or other laws.**

From a practical standpoint, the law most directly interrelated with this bill is the federal Family and Medical Leave Act. This bill, in fact, specifically references the FMLA. Section 8.3-403(B) requires that the implementing regulations to be developed by the Secretary of Labor "shall be consistent with regulations adopted to implement the federal Family and Medical Leave Act" (absent conflict with the bill). Section 8.3-702(B) provides that that any leave for which the employee receives benefits must run concurrently with FMLA. In addition, the reasons for which employees may receive benefits under the bill generally mimic the reasons for which an employee may take FMLA - but not entirely. We further note that these reasons are listed both in 8.3-302 and 8.3-701, but that the two lists are not actually identical in language, which could lead to confusion under the bill.

Additionally, the definitions contained in the bill language are broader than what is contained in the FMLA, and the bill lacks other, critical definitions that are contained in the FMLA, as follows:

- "Person" appears 18 times throughout the bill. It should be changed to either "employee" or "employer."
- "Covered employee" has different eligibility requirements than the primary leave laws of FMLA, Maryland organ donation leave, and Maryland parental leave.
- The definition of "family member" is far broader than under FMLA.
- The definition of "qualifying exigency" is similar, but broader than under the FMLA.
- The definition of "serious health condition" is similar, but broader than under the FMLA.
- The definition of "service member" is not entirely consistent with the FMLA.

The variations in these terms and definitions complicate an already complicated situation for employers in terms of understanding and managing an employee's need for leave under FMLA and entitlement to





benefits under this bill. Different standards would apply to each, even though it seems that they are intended to work together.

A separate issue is that, as noted above, the bill specifically provides that the leave under this bill will run concurrently with FMLA leave. What the bill language ignores is the fact that there are other laws providing unpaid leave that should also run concurrently with any benefit period under the program. This includes Maryland's organ donation law, Maryland's Parental Leave Act, Maryland's Deployment Leave Act, the Americans with Disabilities Act, and Maryland's Civil Rights law. By excluding reference to these laws, as well as any others that may apply, and any additional leave rights provided by employer policy, this bill suggests that such leave rights would run in addition – not concurrently – with benefits under the program. That clearly is not the intent of the program.

### **The length of leave—up to 24 weeks – is unduly burdensome for employers.**

The entitlement to benefits under the bill well exceeds any statutory length of leave. The FMLA provides for 12 weeks of leave for all reasons combined (26 weeks if caring for a service member is involved). Section 8.3-702 of the bill, however, provides benefits and leave of 12 weeks for the employee's own serious health condition and another 12 weeks for any other reason. Thus, this bill provides that an employee could literally take leave with pay benefits for almost half a year!

Having an employee out for that length of time presents innumerable challenges for an employer in terms of covering the employee's absence. Because the employer must hold the job open, they cannot hire another employee to fill the position on a permanent basis and it is not likely, particularly in this tight job market, that an applicant would be interested in short-term work. The use of temporary staffing services can be expensive. And in certain cases, temporary staffing workers may not have the skills or knowledgebase to perform the position in question. Using existing employees to cover the work is also problematic. Increasing the workload may mean that those employees may not get all the work done, may require overtime payments, and will impose burdens on those employees that will cause resentment and anger – both at the employer and the employee on leave.

As previously noted, the various existing leave laws take into consideration the burden of extended leaves on employers and do not automatically impose such extended leave requirements for employees. This bill, however, offers no such consideration.

### **There is no means to verify the validity of leave certification and address benefit abuse.**

Verification and abuse of benefits are already a major challenge for employers as it relates to the implementation of the sick and safe leave mandate, as well as under the federal Family and Medical Leave Act. Under the Maryland Healthy Working Families Act, verification of the need for sick and safe leave may only be required if an employee is absent for more than two consecutive shifts or if, with agreement upon hire, the employee is absent during the 107th-120th days of employment. As many of employers can attest, they have seen an increase in unscheduled call-outs of less than three days at a time – which cannot be verified and subjected to discipline. Similarly, an employee who has been certified by a



physician as needing intermittent FMLA leave cannot generally be required to verify each absence. This bill, as written, would exacerbate those challenges. However, both laws provide employers with some recourse and ability to verify longer leaves and, in the case of FMLA, suspicious or questionable use of leave.

Although the bill provides for certification to the State of the need for medical leave for which benefits may be awarded, it contains no process by which such certification can be verified or challenged at all – either by the State or by employers. Employers are not even entitled to see the certifications obtained by the State. Accordingly, while the bill prohibits fraud in the application for benefits, there is no means by which an employer or the State can use to address suspected fraud in the use of leave or application for benefits. And given that the employee is “entitled” to an extended leave with pay benefits, there is unfortunately an incentive for some employees to engage in fraud.

We also note that there is no certification process for benefits for leave due to qualifying exigencies associated with a service member’s deployment. This is both inconsistent with the FMLA and subject to abuse.

**The bill does not sufficiently account for alternative options.**

Section 8.3-706 states that an employer who has a private employer plan that meets or exceeds the requirements under the program is exempt from the required contributions. Many employers provide short term disability benefits to employees who cannot work because of a medical condition. Many employers provide paid parental leave benefits. Many employers provide general paid time off benefits that may be used for any reason, including those under this bill. We are not aware, however, of any employer who provides paid leave benefits that cover all of the reasons set forth by the bill for the extended period of time (up to 24 weeks) contemplated by the bill. Thus almost no employers would qualify for this exemption, even though they may provide paid leave that covers some of the listed reasons.

What the bill does is to create a disincentive for employers to provide these alternative benefits. If an employer provides paid parental leave, for example, there is a cost to the employer to provide that leave and the employer is still responsible for the contribution to the State program – which would provide benefits for the same reason. Thus, the employer is effectively paying twice to provide the same benefit to the employee. It is only logical that an employer would simply eliminate its paid parental leave benefit, thereby saving the cost of the benefit, and require the employee to apply for benefits through the State program to which it must contribute regardless.

Other states’ paid family leave benefits programs are more thoughtful in addressing these alternative benefits. For example, Washington D.C. requires employers to contribute to the program but also allows an employer that provides such paid leave benefits to seek reimbursement from the program for such benefits. In this manner, the employer is only required to pay once for the benefit.



Another issue is that the bill is unclear on the coordination of these other paid leave benefits with the program benefits. Section 8.3-703(A) provides that an employer “may allow” an employee to use vacation, sick leave, or other paid time off to bridge the difference between the program benefits and 100% of wages. But if an employee chooses not to use such alternative paid leave, it is possible that they could “stack” the program benefit and alternative paid leave benefit, such that once the up to 24 weeks of program benefits are exhausted, they would still have other paid leave available to use. The potential amount of total leave is staggering, and untenable for employers.

And while we appreciate the addition of Section 8.3-703(B), which provides “an employer contributing to the fund may require a covered individual who receives benefits under this title to use those benefits concurrently with family or medical leave benefits provided under an employer policy,” this language is also unclear as to the actual effect. Does this include vacation, PTO and sick leave, which may be used for family and medical leave reasons?

### **The bill presents collective bargaining agreement challenges.**

Section 8.3-203 provides that “An employee’s rights to benefits under this title may not be diminished by a collective bargaining agreement entered into or renewed ... on or after June 1, 2020” and further provides that any waiver is void as against public policy. This provision is contrary to the entire premise of the National Labor Relations Act, which contemplates that employers and unions may bargain over the terms and conditions of employees’ employment, including paid leave benefits such as those contemplated by this bill. A union may choose to give up certain benefits in order to achieve others that it and the employees it represents value more greatly, and this choice is one that is granted to them under the NLRA. Similarly, an employer and union may wish to agree to administer or access benefits differently than this bill provides, and their rights to do so under the NLRA should be respected.

In addition, the impact of compliance with the law is problematic for employers subject to a CBA that provides for paid leave benefits. Although the quoted language above contemplates that any current CBA will continue until expiration, it does not postpone compliance with the law as to contributions and employees’ rights to benefits under the program. Thus, in addition to the employer being forced to pay twice to provide similar benefits, there is no consideration for how existing CBA benefits would coordinate with the new program benefits.

### **Employers should not face a private right of action.**

Employers in Maryland already face a multitude of reasons that they can be sued by employees. This bill adds yet another basis, in addition to providing for administrative remedies through a complaint process to the Secretary. The administrative remedies are sufficient to address any potential violations; a private right of action is not necessary.



**SB0211 - Greater Bethesda Chamber - OPPOSE.pdf**

Uploaded by: Italiano, Ginanne

Position: UNF

January 26, 2021

Senator Dolores G. Kelley  
Chair, Senate Finance Committee  
Maryland State Senate  
3 East, Miller Senate Office Building  
Annapolis, MD 21401

**RE: SB0211 - Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021) - Position: OPPOSE**

Dear Chairwoman Kelley, Vice Chair Feldman, and Members of the Committee:

On behalf of our 500-member businesses and more than 45,000 employees in Montgomery County, The Greater Bethesda Chamber of Commerce is in **Opposition to SB0211 – Labor and Employment - Family and Medical Leave Insurance Program - Establishment (Time to Care Act of 2021)**. This bill would establish a Family & Medical Leave Insurance (FAMLI) Program to be administered under the supervision of the Department of Labor’s Unemployment Insurance (UI) Division. The program generally provides up to 12 weeks of benefits to an employee who is taking partially paid or unpaid leave for certain reasons, except that an additional 12 weeks for benefits appears to be provided for certain circumstances.

There are a number of issues with this legislation:

1. **COST**: Over the past few years, companies throughout the state have been impacted by other mandated laws that greatly impacted their bottom line and ability to be successful or profitable at all, such as sick and safe leave, minimum wage increases and especially the impact that the COVID crisis has on all businesses.
2. **MANAGEMENT OF LEAVE**: The bill does not clarify whether or not this program is meant to provide wage replacement for leave to which an employee is already entitled, or if it is meant to apply to a separate bank of leave, leaving the door open to the possibility that an employee could be eligible for up to 24 weeks of paid leave. • Having an employee out for that length of time presents innumerable challenges for a business in terms of productivity and for the other employees who are left to fill in the gaps.
3. **ADMINISTRATIVE NIGHTMARE**: The bill would require large-scale tracking and verification systems to ensure compliance. Employers would be left to create, manage and administer obtuse tracking systems. Many employers do not have this internal capability and would incur additional costs if they are required to contract out that responsibility.

Bottom line, now is not the time to implement more mandated benefits to employees at a cost to both the employee and employer, when everyone is focused on just getting back to normalcy. We ask you to please vote **UNFAVORABLE** on this unnecessary and damaging bill. Thank you for your consideration of our remarks.

Sincerely,



Allie Williams  
President & CEO

**SB0211-FIN\_MACo\_OPP.pdf**

Uploaded by: Jabin, Drew

Position: UNF



## Senate Bill 211

*Labor and Employment - Family and Medical Leave Insurance Program - Establishment  
(Time to Care Act of 2021)*

MACo Position: **OPPOSE**

To: Finance Committee

Date: January 28, 2021

From: Drew Jabin

The Maryland Association of Counties (MACo) **OPPOSES** SB 211. This bill would create and implement a Family and Medical Leave Insurance (FAMLI) Program funded through shared employee and employer contributions. The Program would provide up to 24 weeks of benefits to covered individuals taking leave due to specific personal and family circumstances.

Under state law, counties would have no choice but to fund these mandated employer contributions—competing for limited local funds against school construction, public safety, roadway maintenance, and other essential public services. The entitlement to benefits under SB 211 far exceeds any statutory length of leave, presenting innumerable challenges for employers. Also concerning is the potential for employer contribution rates for this proposed program to eventually increase to maintain fund solvency, as more employees take advantage of this benefit.

Local jurisdictions would incur significant costs as a result of paying half of the FAMLI contribution rate as well as incur programming costs to their payroll systems. Furthermore, to the extent that local government employees take more leave, the FAMLI program may overburden other employees and create additional personnel expenses for overtime costs for local jurisdictions, especially for law enforcement and other agencies that provide 24/7 coverage.

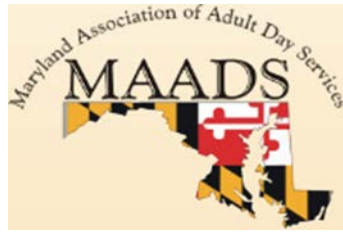
This legislation does not appropriately balance the goals of helping employees with the economic realities that counties are facing, and accordingly MACo urges the Committee to issue a **UNFAVORABLE** report on **SB 211**.

**SB0211\_UNF\_LS,MNCHA,MAADS,Hospice\_Labor and Employ**

Uploaded by: Kauffman, Danna

Position: UNF





Hospice & Palliative Care Network  
OF MARYLAND

TO: The Honorable Delores G. Kelley, Chair  
Members, Senate Finance Committee  
The Honorable Antonio Hayes

FROM: Danna L. Kauffman  
Pamela Metz Kasemeyer

DATE: January 28, 2021

RE: **OPPOSE (Written Only)** – Senate Bill 211 – *Labor and Employment – Family and Medical Leave Insurance Program – Establishment*

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On behalf of the LifeSpan Network, the Maryland-National Capital Homecare Association (MNCHA), the Hospice & Palliative Care Network of Maryland (HPCNM) and the Maryland Association of Adult Day Services (MAADS), we respectfully we respectfully oppose Senate Bill 211. Senate Bill 211 would create and implement a Family and Medical Leave Insurance Program funded through employee and employer contributions. Senate Bill 211 provides paid leave to a greater number of employees than the federal Family and Medical Leave Insurance Act. Unlike the federal Family and Medical Leave Act, Senate Bill 211 applies to all employers (rather than those with 50 or more employees), allows an employee who has worked at least 680 hours (rather than 1,250 hours) to qualify for the leave, and allows an employee to take the leave to care for an expanded list of family members.

On behalf of our respective memberships and our employees, we value our workforce and understand that there are times that this workforce must be absent to care for themselves and their family members. Never was this need clearer than during the COVID-19 pandemic. However, as providers of care to Medicare and Medicaid beneficiaries, we must balance this need against our obligation to ensure that quality of care is provided to our residents and clients on a consistent and uninterrupted basis, often 24 hours, seven days a week. When employees are absent from work, care still must be provided. While the absent employee would be compensated by the established Fund under the bill, the employer would still need to pay for a replacement worker to ensure that care is being provided. Often, this is through overtime of existing staff or contracting with nurse staffing agencies, which is often at a higher cost to the employer. In addition, because Senate Bill 211 extends the right to take leave to additional employees as compared to the federal law, employers may be placed in a position of having a greater number of employees out, causing a higher cost to the employer for replacement staff.

Over the last several years, Maryland has implemented the Maryland's Healthy Working Families Act (paid sick and safe leave) and increased the State's minimum wage, both of which have had a financial and operating impact on members.<sup>1</sup> However, neither compares to the financial impact that COVID-19 has had on providers. Providers have been placed in the position of purchasing personal protective equipment, paying increase wages to maintain current staff or hire contract staff, making environmental modifications to accommodate the requirement cohort patients, and paying for COVID-19 testing. While nursing homes received assistance from the federal and State governments, it was not enough to cover the cost incurred from these added expenditures. Other providers received little to no assistance from either the federal or State government and, again, the assistance received was inadequate to cover the costs. It is also important to point out that declining census among these providers has also exacerbated the financial pressures that continue to mount.

Therefore, while we believe that Senate Bill 211 is well-intentioned, it is unmanageable given the financial crisis facing many industries and providers. We would request an unfavorable vote.

**For more information call:**

Danna L. Kauffman  
Pamela Metz Kasemeyer  
410-244-7000

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<sup>1</sup> The State has provided a 4% increase in Medicaid rates, which is appreciative, but only extends to a portion of the individuals that are cared for by providers.

**SB211 wmda kirk.pdf**

Uploaded by: McCauley, Kirk

Position: UNF



WMDA/CAR Service Station  
and Automotive Repair Association

Chair: Delores G. Kelley  
Members of Senate Finance Committee

SB211– Family and Medical Leave Insurance Program – Establishment  
Position: In opposition

The cost to a business for contributions and professional help is just the beginning. Overtime pay, replacement personnel, upgrading software and record keeping all raise the costs.

Minimum wage along with sick leave is increasing costs every year and COVID 19 has magnified the need to let small business breathe. As the fiscal notes said in 2020, “Small Business Effect: MEANINGFUL”. In today’s struggle for small business to survive, that is an understatement.

Under this bill an employee would be eligible for 12 weeks of paid leave if he worked 680 hours over a 12 month period and is eligible for 24 weeks under certain circumstances This is an amazing ratio when an employee works 17 weeks and allowed 12 weeks off let alone the 24 weeks that is possible.

Verification would be a nightmare, if not impossible.

SB211 is a multi-layered bill and would add significant cost to small businesses to track and implement. Most of the small businesses that WMDA/CAR represents do not have a dedicated HR person nor legal counsel. Were this bill to pass they will clearly need both to ensure compliance.

Please give SB211 an unfavorable Report

WMDA/CAR is a trade association that has represented service stations, convenience stores and independent repair shops since 1937. Any questions can be addressed to Kirk McCauley, 301-775-0221 or [kmccauley@wmda.net](mailto:kmccauley@wmda.net)

# **SB 211 and HB 375 - Paid Family and Medical Leave**

Uploaded by: McClarty, Leonardo

Position: UNF



6240 Old Dobbin Lane ■ Suite 110 ■ Columbia, MD 21045

January 25, 2021

The Honorable Delores G. Kelley  
Chair, Senate Finance Committee  
3 East  
Miller Senate Office Building  
Annapolis, Maryland 21401

The Honorable Delegate Dereck E. Davis  
Chair, Economic Matters Committee  
Room 231  
House Office Building  
Annapolis, Maryland 21401

***Re: SB 211/ HB 375 - Paid Family and Medical Leave Legislation***

Dear Senator Kelley and Delegate Davis:

The Howard County Chamber of Commerce (“Chamber”) is a business organization comprised of small business, corporations, non-profits, and governmental agencies all working together for the betterment of the Howard County business community. Our mission is to provide advocacy, connections, and access to timely information to advance the growth and success of the Howard County business community. I write to you at this moment on behalf of our 700 plus member companies out of concerns relative to paid family and medical leave legislation.

As demonstrated in other states, Paid Family and Medical Leave insurance places a significant cost on both employers and employees. If implemented, employees may end up with a less generous benefit than employers already pay. We ask the Committee to consider the following concerns experienced in other states as you discuss possible paid family and medical leave legislation.

- 1. Cost** – The Chamber is particularly concerned with the additional financial and administrative costs to employers and employees that would result from passage of this proposal. In Massachusetts, a recent study estimated the total annual cost of paid family and medical leave insurance, excluding the state’s administrative costs, to be \$949.2 million or roughly \$269 per worker each year, shared by the employer and employee. In addition, the Massachusetts ballot proposal included approximately \$70 million in administrative fees for the operations of a new state agency to administer the program. Importantly, the study showed that the legislation added a \$55 million cost to the already strained state budget to provide the benefit to the state’s workforce. Not to mention, employers that participate in the state program and maintain a standalone paid leave program would likely see increased costs due to a greater cost of administration under the state program.

Similarly, all employers in a similar program would be subject to new administrative and reporting requirements. This, in addition to the already numerous and burdensome

administrative costs associated with the Maryland Healthy Working Families Act, Maryland Parental Leave Act and Maryland Flexible Leave Act.

2. **Opt-out Clause or Waiver** – Proposals in other states have required virtually all employers to take part in the state’s paid family and medical leave program. Many of our members already provide employees with the ability to accrue paid leave benefits. Any legislation should at least provide an option for employers to opt-out of the state program in favor of administering a private program with more-generous benefits. Without an opt-out clause, required legislation is an added expense for employers already providing generous paid leave benefits. To facilitate compliance and administration of the program, employers may opt to use the state system instead of more generous offerings.
3. **Employee Eligibility** – Any proposed legislation should align the eligibility requirements with FMLA thus mitigating this issue and provide employers predictability around when their employees will return to work. States that have required paid leave to be taken concurrently with leave under the Family and Medical Leave Act (FMLA) or under the State Parental Leave have created eligibility discrepancies. Employees can become eligible for the paid family and medical leave programs prior to reaching eligibility for FMLA. This makes it impossible for the two programs to run concurrently in some situations, may allow for leave stacking, and would result in numerous administration issues for employers.

The Chamber would be willing to work with the bill proponents to establish a more feasible family and medical leave insurance program and proposes the following amendments:

1. **Reduce the time frames** – The Bill places significant challenges on small employers by providing up to 24 weeks of leave in one calendar year, mandating that an employer hold the job open. Align time frames with existing federal or DC laws.
2. **Increase implementation time period** - As we have seen in other jurisdictions it takes longer than 6 months to implement a family and medical leave insurance program.
3. **Align definitions with FMLA.** Any proposed legislation should align the definitions of “Covered Employer” and “Eligible Employee” to align with those of FMLA.
4. **Revise oversight structure** - Remove oversight of fund from Unemployment Insurance Division to its own department within the State of Maryland.

Thank you for taking into consideration the Chamber’s concerns. Know that the Howard County Chamber remains supportive of the paid family and medical leave concept. However, we believe that one-sided drafted legislation could have several negative and unforeseen consequences for employees and employers. Meetings were held with the legislation’s proponents only to find proponents had no interest in finding common ground. Consequently, we have no alternative but to request an unfavorable vote.

**SB 211/ HB 375 - Paid Family and Medical Leave Legislation**

January 26, 2021

p. 3

For questions on the Chamber's concerns, I can be reached directly at 443-878-1234.

Respectfully,

A handwritten signature in black ink that reads "Leonardo McClarty". The signature is written in a cursive style with a long, sweeping tail on the final letter.

Leonardo McClarty  
President, Howard County Chamber of Commerce

CC: Howard County General Assembly Delegation  
Howard County Chamber Board of Directors  
Howard County Legislative Affairs Committee Members



# **SB 211 Labor and Employment – Family and Medical L**

Uploaded by: McCulloch, Champe

Position: UNF



**SB 211**  
**Labor and Employment – Family and Medical Leave Insurance Program –**  
**Establishment (Time to Care Act of 2021)**  
**Senate Finance Committee**  
**Position: Unfavorable**

Maryland AGC, the Maryland Chapter of the Associated General Contractors of America, provides professional education, business development, and advocacy for commercial construction companies and vendors, both open shop and union. AGC of America is the nation’s largest and oldest trade association for the construction industry. AGC of America represents more than 26,000 firms, including over 6,500 of America’s leading general contractors, and over 9,000 specialty-contracting firms, all through a nationwide network of chapters. Maryland AGC respectfully urges SB 211 be given an unfavorable report.

SB 211 presents a range of issues that are detrimental to employers. The first, and most obvious, is the assessment on employers of 50% of the costs of the program without any guarantee that there will be a commensurate benefit. Moreover, the bill requires the assessments to cover the full costs of the program<sup>1</sup>, and the benefits to be indexed to the CPI<sup>2</sup>, so it is a certainty that the initial cap of 0.75% of employee wages will rise over time. This is an added cost at a time when businesses of every sort are suffering.

While some employees would have taken leave for one of the covered circumstances regardless of whether the leave was paid or unpaid, it is also certain that the availability of paid leave will cause and encourage more employees to take leave. The consequence to employers is greater uncertainty in their available workforce, with the attendant costs of covering for absent employees. This is especially true of employees critical to the employer’s operations.

Managing intermittent leave is problematic for employers. While an employee requesting intermittent leave has to make a “reasonable effort” not to “unduly” disrupt the employer’s operations,<sup>3</sup> the employer is not authorized to deny that leave if it is unduly disruptive, since it appears that leave can be taken in whatever increment of time is deemed desirable by the employee. Equally certain is that the program will introduce other unrecoverable costs to employers for the internal administration of the program, payroll processing changes, required notices, and other bureaucracy. In other words, the costs to employers are definite, but the benefits to employers are speculative.

It also should be noted that an employee who makes a false claim for leave gets a slap on the wrist – ineligibility for paid leave for one year<sup>4</sup> and the possibility that the Commissioner may seek recovery of the fraudulently used benefits<sup>5</sup>. Employers, on the other hand, face the certainty of a \$1,000 penalty for failure to report a material fact related to a claim for benefits<sup>6</sup>, and, if the employer fails to deduct and remit the required fees, reimbursement of the whole amount and a penalty of twice more the amount not remitted.<sup>7</sup> In addition, employers face the burden of both an action by the Commissioner and a civil suit by disgruntled employees simultaneously<sup>8</sup>. In a civil suit, employers are subject to punitive damages (with no standard in the bill by which their propriety should be determined). Since employers will be required to pay a prevailing employee’s legal costs, there will be no lack of attorneys available for litigation.

Accordingly, for the reasons set forth above, Maryland AGC respectfully urges SB 211 be given an unfavorable report.

Champe C. McCulloch  
McCulloch Government Relations, Inc.  
Lobbyist for Maryland AGC

<sup>1</sup> §8.3-601(B)(1)(ii)(4)

<sup>2</sup> §8.3-704(B)(3)

<sup>3</sup> §8.3-701(B)

<sup>4</sup> §8.3-901(A)

<sup>5</sup> §8.3-902

<sup>6</sup> §8.3-901(B)

<sup>7</sup> §8.3-903

<sup>8</sup> §8.3-905 & 906

# **2021 SB0211 Testimony in Opposition - MTC.pdf**

Uploaded by: Plaut, Ari

Position: UNF



**LETTER OF OPPOSITION ON BEHALF OF  
MARYLAND TOURISM COALITION**

**IN OPPOSITION OF SB0211 - PAID FAMILY AND MEDICAL LEAVE PROGRAM**

Before the Senate Finance Committee, January 28, 2021

Dear Madam Chair & Committee Members,

My name is Ruth Toomey, Executive Director of Maryland Tourism Coalition, a 50-year old organization that represents the various services, attractions, organizations and accommodations that make up the State's Industry. MTC is the voice of our state's diverse tour and travel community, bringing together the entire industry to enhance business growth and to promote Maryland as a first-class destination for visitors. On behalf of our 1,000+ members, I would like to express our opposition of SB0211.

Tourism is vital to Maryland's economy! In a typical year, tourism supports 226,000 direct and indirect jobs, making it the 11<sup>th</sup> largest industry in the state. Visitors to Maryland spend nearly \$18.6 billion in Maryland each year and those same visitors generate close to \$2.6 billion in state and local taxes. Without tourism in the state of Maryland, each household would pay \$1,175 more in local taxes.

But as we all well know, this past year has been anything but typical. Our industry was among the hardest hit due to the pandemic. Many of our members have been forced to close and some are even now unable to reopen. 95% of all tourism businesses are small businesses and many are hanging on by a thread. The Paid Family and Medical Leave Program would be largely detrimental to many of our tourism businesses. The bill establishes the FAMLI Fund, which will consist of contributions from employees, employers and self-employed individuals. Beginning January 1, 2021, each employee, employer and self-employed individual shall contribute to the fund. The total rate of contribution: 1) may not exceed 0.75% of an employee's wages, 2) shall be applied to all wages up to and including the Social Security wage base, 3) shall be shared equally by employers and employees, and 4) shall be sufficient to fund the benefits payable. This would be a financial burden on top of an already struggling industry. Not only is the large cost a problem, but the time and resources it would take to manage and account for this program would be devastating for small businesses.

On behalf of the Maryland Tourism Coalition, we respectfully request that you oppose SB0211.

Sincerely,

**Ruth Toomey**

Ruth Toomey  
MTC Executive Director

# **SB211 - MHLA Testimony - Oppose.pdf**

Uploaded by: Rohrer, Amy

Position: UNF

**MHLA**  
Maryland Hotel  
Lodging Association

**SB211 – Oppose**  
**Family and Medical Leave Insurance Program – Establishment**  
**Senate Finance Committee**  
**January 28, 2021**

Dear Madam Chair and Members of the Committee:

As the sole statewide trade association dedicated to advocacy for Maryland's lodging industry, with more than 700 hotels totaling 75,000+ rooms, we urge an unfavorable report on SB 211.

Senate Bill 211 would seek to establish a Family & Medical Leave Insurance Program (FAMLI) which would be funded by a payroll tax applied to both the employee and employer.

**While the establishment of such a fund is well intentioned, we are very much concerned by the cost and administrative burden it would place on employers, at a time when our industry simply cannot afford it.** The economic climate that the pandemic has produced for the hotel industry is devastating, as detailed by the American Hotel Lodging Association's [2021 State of the Industry Report](#).

The overwhelming majority of hotels are trying to survive right now. Many have had to make tough decisions to remain open or suspend operations (temporarily or indefinitely). All have had to lay employees off or severely reduce hours. Virtually none are profitable or even close to breaking even. Any additional costs placed on employers at this time will likely cause even more jobs to be lost, at a time when ten years of employment gains in the hotel industry have been erased by the pandemic.

Additionally, there are several fundamental flaws with the language of the bill that the Maryland Chamber of Commerce has detailed in their testimony. In this regard, MHLA concurs with the findings of the Chamber and shares those same concerns. Rather than replicating details in this letter, we defer to the Chamber's position but would be glad to provide additional information if requested by the Committee.

For the reasons expressed in this letter, we oppose SB 211 and request an unfavorable report.

Respectfully submitted,

Amy Rohrer, CAE  
President & CEO

# **SB211 - MoCo Chamber - Family and Medical Leave In**

Uploaded by: Swanson, Tricia

Position: UNF



*To Lead, Advocate and Connect as the Voice of Business*

## **Senate Bill 211 - Family and Medical Leave Insurance Program - Establishment**

Finance Committee

January 28, 2021

### **OPPOSE**

The Montgomery County Chamber of Commerce (MCCC), as the voice of Montgomery County business, **opposes Senate Bill 211**. Senate Bill 211 generally provides up to 12 weeks of benefits to an employee who is taking partially paid or unpaid leave for certain reasons, except that an additional 12 weeks for benefits appears to be provided in certain circumstances. Leave with benefits is provided for the following reasons: 1) to care for a child during the first year after the child's birth or after the placement of the child through foster care or adoption; 2) to care for a family member with a serious health condition, 3) because the employee has a health condition that results in their being unable to perform the functions of their job, 4) to care for a service member who is the employee's next of kin, or 5) because the employee has an exigency arising out of the deployment of a service member who is a family member.

The bill establishes the FAML I Fund, which will consist of contributions from employees and employers. Beginning January 1, 2022, each employee and employer shall contribute to the fund at a rate to be set by the Maryland Department of Labor. Self-employed individuals may also participate.

There are any number of additional nuances and complexities outlined in the language, and MCCC is very concerned that the implementation of this legislation will result in additional costs and administrative burden to employers, specifically small businesses. Over the last four years, the General Assembly has passed legislation requiring (small) businesses provide paid sick leave and reach a minimum wage of \$15 by 2025. While both are important supports for employees and Maryland's workforce, MCCC has concerns that the addition of an employer supported FAML I requirement is too much, too soon. Businesses must be given time to absorb prior legislation and its impact to their bottom line.

While MCCC's agree with the intent of the legislation in seeking to help employees balance the challenges between work and life, we do not believe that this legislation appropriately balances those goals with economic realities faced today, particularly as a result of the pandemic. For the aforementioned reasons, **the Chamber opposes Senate Bill 211 and respectfully urges an unfavorable report.**

*The Montgomery County Chamber of Commerce (MCCC) accelerates the success of our nearly 400 members by advocating for increased business opportunities, strategic investment in infrastructure, and balanced tax reform to advance Metro Maryland as a regional, national, and global location for business success. Established in 1959, MCCC is an independent non-profit membership organization and is proud to be a Montgomery County Green Certified Business.*

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SENATE FINANCE COMMITTEE

Senate Bill 211

Labor and Employment – Family and Medical Leave Insurance Program - Establishment

January 28, 2021

INFORMATION

Chair Kelley, Vice Chair Feldman and committee members, thank you for the opportunity to share our thoughts on Senate Bill 211. This bill would require the USM institutions to participate in a Family & Medical Leave Insurance Program that provides job protection and wage replacement at a certain level for employees who need to be absent for up to twelve weeks due to reasons generally set forth in the federal Family & Medical Leave Act.

Attached is a chart showing the various leave benefits available to regular faculty and staff who need to be absent for purposes recognized under the federal Family & Medical Leave Act. Compared to private sector leave policies, these policies are extremely generous. **USM employees are guaranteed twelve weeks of paid parental leave and may use the various other forms of accrued leave while they are absent for their own or their family member's health condition or military-related absences as set forth in the federal law.**

Challenges may arise with applying the language of the bill in the context of employee work schedules and the employment categories of most higher education institutions, not just the USM. It appears the bill would apply not just to regular faculty and staff, but also to those more temporary categories of employees, such as Contingent I and Contingent II employees, “contractual” faculty, adjunct faculty, and student employees. Those employees are typically short-term employees who often do not work regular schedules. USM institutions regularly employ adjunct faculty and certain staff employees on an “if and when needed” basis and for periods of six months or less.

The bill states that employees would be eligible for benefits if they worked 680 hours during the preceding calendar year. This could mean that a full-time Contingent I employee on a six month contract during the fall 2020 semester, who took another job in the interim but returned to the university on another six month contract for the fall 2021 semester, could be eligible for a twelve week paid leave the day they begin another contract six months later. They would then be absent for most of the semester and the university would need to scramble to provide coverage for a class or other necessary operation at the last minute.

**Certain Leave Policies Available to USM Regular Faculty & Staff  
for Use During Family & Medical Leave**

<b>Policy</b>	<b>Eligibility</b>	<b>Amount of Leave</b>	<b>Comments</b>
<b>Sick &amp; Safe Leave</b> – VII-7.45 for staff; II-2.30 for faculty	Any illness or injury or “safe leave” of a faculty or staff member or their immediate family member. Also includes childbirth, adoption, parental leave, & death of relative.	Accrue 15 days/yr. Pro-rated based on FTE if at least 50% time and faculty appointment type. No limit on accumulation.	In addition to regular sick leave, Faculty also have access to collegial sick leave at rate of 25 workday per acad. year. Use of more than 25 days is charged as regular sick leave.
<b>Parental Leave</b> VII-7.49 for staff and II -2.25 for faculty	Eligible after 6 months’ employment; must first exhaust available annual, personal and holiday leave. Available to regular staff, tenured and tenure-track faculty, and non-tenure track faculty w/multi-year contracts	Minimum assured period of 12 weeks annually of paid parental leave to child’s primary caregiver	
<b>Holiday Leave</b> – VII – 7.30	Regular Exempt and Nonexempt staff	Accrue 14 or 15 days/yr.	Faculty are paid, but not required to work, on university holidays.
<b>Personal Leave</b> - VII-7.10 Personal Leave for Regular Nonexempt and Exempt Staff	All regular staff employees. Prorated for PT staff working 50% or more.	Accrue 3 days/yr.	No carry-over from year to year.
<b>Annual Leave</b> - VII-7.00 for staff; II-2.40 for faculty	Accrues from the date of hire and is available as earned.  May use only with supervisor’s prior approval.	*Nonexempt staff accrue on sliding scale from 11 – 25 days/year based on length of service *Exempt staff accrue on sliding scale from 22 – 25 days/year based on length of service *Faculty accrue based on contract type: 12-month contract - same as Exempt 10-month contract - 15 days that must be used last 15 days of contract	Pro-rated based on FTE. 50 day (400 hour) maximum carryover, also based on FTE.
<b>Advanced Sick Leave (ASL)</b> in Sick Leave Policy VII-7.45 for staff	Available immediately. Must have exhausted all accrued leave & have satisfactory record. Available for employee’s recoverable illness or injury or for parental leave.	15 days per year of service up to 60 days in a calendar year, based on FTE. Pro-rated during first year of service.	Must be repaid upon return to work @ rate of ½ Sick and Annual Leave accrued each pay period
<b>Extended Sick Leave (ESL)</b> in Sick Leave Policy VII-7.45 for staff	Must have 5 years of service and must have exhausted all types of accrued leave and ASL. Otherwise, same as ASL.	52 work weeks over entire USM or State service.	Does not require repayment.
<b>Leave Reserve Fund</b> for Regular Status Nonexempt and Exempt Staff Employees VII7.11	Must have 1 year of service and must have exhausted all types of accrued leave, ASL, and ESL. Otherwise, same as ASL.	One day per month of creditable service.	Does not require repayment.

See also other related policies:

VII-7.50 Family and Medical Leave for Nonexempt and Exempt Staff Employees

II-2.31 Family and Medical Leave for Faculty

II-2.00 Sabbatical Leave for Faculty