

~~August 9, 2018~~ January XX, 2019

Dear Member of Congress,

On behalf of the undersigned organizations and the tens of millions of working families we represent, we **urge you to support co-sponsor and advocate for swift and thorough consideration of the Family And Medical Insurance Leave (FAMILY) Act (~~S. 337/H.R. 947~~)**. The FAMILY Act would create a national family and medical leave insurance program to help ensure that people who work can take the time they need to address serious health and caregiving needs. It would help support working families' economic security, promote gender equity in workplaces, create a more level playing field for businesses of all sizes and strengthen our economy. The FAMILY Act is ~~the~~ a national paid family and medical leave plan voters want and our country needs.

The benefits of paid family and medical leave are well documented, yet the vast majority of working people in the United States do not have access to this basic protection. More than 100 million people – or ~~85-83~~ percent of workers – do not have paid family leave through their jobs, and more than 60 percent lack access to paid personal medical leave through their employer.¹ Access rates for workers in lower-wage jobs are even lower, and most recent private sector advances are disproportionately concentrated in higher-skill industries and among higher-paid employees, creating even greater disparities between lower- and higher-paid workers.² Even unpaid leave through the Family and Medical Leave Act (FMLA) is inaccessible to nearly two-thirds of working people, either because of eligibility restrictions or because they simply cannot afford to take unpaid leave.³ This means that when serious personal or family health needs inevitably arise, people face impossible choices between their families' well-being, their financial security and their jobs.

The FAMILY Act would create a strong, inclusive national paid family and medical leave insurance program and set a nationwide paid leave baseline. Employees would earn two-thirds of their wages, up to a cap, for a limited period of time (up to 60 workdays, or 12 workweeks in a year) to address their own serious health issue, including pregnancy or childbirth; to deal with the serious health issue of a family member; to care for a new child; and for certain military caregiving and leave purposes. Employees, employers and self-employed workers would fund both the benefits and the administrative costs of the program by contributing a small amount in each pay period to a self-sustaining fund, administered through a new Office of Paid Family and Medical Leave. Eligibility rules would allow younger, part-time, low-wage and contingent workers to contribute and benefit, regardless of their employer's size or their length of time on the job.

The FAMILY Act builds on successful state programs. In fact, nearly all state programs now go beyond the FAMILY Act in several important ways, providing data and lessons that Congress should consider. California has had a paid family and medical leave insurance program in place since 2004, New Jersey since 2009, Rhode Island since 2014 and New York since 2018. Strong new programs will take effect in Washington state and the District of Columbia in 2020 and Massachusetts in 2021. Evidence from the existing state programs shows their value and affordability; all are financially sound and self-sustaining, and each state that has paid leave in place has or is exploring ways to make them even more accessible to people who need family leave. Analyses of California's law show that both

employers and employees benefit from the program.⁴ In New Jersey, the program's costs have been lower than expected and public attitudes toward the program are favorable.⁵ Early research on Rhode Island's program found positive effects for new parents, and a majority of small- and medium-sized employers were in favor of the program one year after it took effect.⁶

The FAMILY Act would address the full-range of care needs people face, including the growing need to provide elder care. Changing demographics mean more adults will need elder care and the number of potential family caregivers is shrinking: For every person age 80 and older, the number of potential family caregivers will fall from about seven in 2010 to four by 2030, and then to less than three by 2050.⁷ It is also important to note that more than 75 percent of people who take family or medical leave each year do so for reasons other than maternity or paternity care. They take leave to care for family members with serious illnesses, injuries or disabilities or for their own serious health issue.⁸ The majority of parents, adult children and spouses who provide care for ill family members or children with disabilities also have paying jobs, and most work more than 30 hours per week while also managing their caregiving responsibilities.⁹ The majority of military caregivers – and more than three-quarters of caregivers for post-9/11 wounded warriors – are also in the labor force.¹⁰

The FAMILY Act would support improved health outcomes and could lower health care costs. New mothers who take paid leave are more likely to take the amount of time away from work recommended by doctors,¹¹ and their children are more likely to be breastfed, receive medical check-ups and get critical immunizations.¹² When children are seriously ill, the presence of a parent shortens a child's hospital stay by 31 percent;¹³ active parental involvement in a child's hospital care may head off future health problems, especially for children with chronic health conditions,¹⁴ and thus reduce costs. Paid leave also lets people help older family members recover from serious illnesses, fulfill treatment plans, and avoid complications and hospital readmissions.¹⁵ Early research has found that California's paid leave program reduced nursing home utilization.¹⁶ And, for the millions of families in communities that are struggling with opioid and other substance use disorders, paid leave supports family caregivers, who play a key role in care and recovery by helping loved ones with health care arrangements and treatment.¹⁷

The FAMILY Act also would strengthen large and small businesses and support entrepreneurs. Paid leave reduces turnover costs – typically about one-fifth of an employee's salary¹⁸ – and increases employee loyalty. In California, nine out of 10 businesses surveyed reported positive effects or no impacts on profitability and productivity after the state's paid leave program went into effect.¹⁹ Small businesses reported even more positive or neutral outcomes than larger businesses.²⁰ Small business owners from across the nation expect that the FAMILY Act model would help level the playing field with large corporations, improve worker retention, productivity and morale, and help protect their economic security if an accident or medical emergency occurs.²¹ This is part of the reason that 70 percent of small businesses surveyed nationwide support the FAMILY Act approach of shared payroll deductions.²² By including self-employed people, the FAMILY Act would also help entrepreneurs balance the risks of starting a new business with the need to ensure their families' health and security.

National paid family and medical leave has broad support from voters across party lines.

~~Supermajorities of voters across party lines support a comprehensive, 12-week national paid family and medical leave law, including 66 percent of Republicans, 77 percent of independents and 93 percent of Democrats. Nearly two-thirds of voters (64 percent) say they would “strongly favor” such a law. In focus groups conducted with conservative and independent voters in September 2017, voters preferred the FAMILY Act’s “personal and family security fund” model over an employer tax credit, tax free savings account or a limited parents-only leave program.~~ Recent polling shows that eight in ten voters support a comprehensive, inclusive, sustainably funded national paid family and medical leave law modeled on the FAMILY Act, including 76 percent of Republicans, 74 percent of independents and 89 percent of Democrats. When asked to rank four paid leave proposals, the FAMILY Act model was the top choice across party lines. And when asked how much they would be willing to contribute toward a paid leave fund, seven in 10 voters said they would be willing to contribute one percent of their wages, or one cent for every dollar earned, which is much more than the FAMILY Act would actually cost.²³ Additional qualitative research ~~conducted around the same time~~ shows voters prefer a national plan that covers all family relationships and includes employment protections.²⁴

It is well past time for the United States to adopt a nationwide paid family and medical leave standard – but policy details matter tremendously.

Disparities in people’s access to paid leave, changing demographics and the realities working families face today require that any national plan be comprehensive of working people’s needs as reflected in the FMLA, inclusive of all working people across the United States and provide a meaningful duration of leave and wage replacement rate to make taking leave financially possible for all working people. Responsible governance requires that any plan be affordable, cost-effective and sustainably funded with new revenue – not funded by cutting or reducing benefits from programs people rely on. Any plan that fails to meet these tests is unacceptable.

The FAMILY Act is the only national paid family and medical leave proposal that reflects what most people in the United States need. We urge you to ~~support and~~ co-sponsor this essential legislation today, ~~to push for swift and thorough consideration that surfaces the best practices and lessons learned from state policies,~~ and to reject inadequate proposals that would fail to meet the needs of the nation’s workforce, families or businesses – and that would do more harm than good.

Sincerely,

National Organizations

- 1,000 Days
- 9to5, National Association of Working Women
- A Better Balance
- AFL-CIO
- American Academy of Nursing
- American Association of People with Disabilities
- American Association of University Women (AAUW)
- American Civil Liberties Union
- American Federation of Teachers, AFL-CIO

American Medical Student Association
American Medical Women's Association
American Psychological Association
American Public Health Association
American Society on Aging
American Sustainable Business Council
A. Philip Randolph Institute
Association of Flight Attendants-CWA
Association of Reproductive Health Professionals (ARHP)
Association of University Centers on Disabilities
Association of Women's Health, Obstetric and Neonatal Nurses
Autistic Self Advocacy Network
Bend the Arc Jewish Action
Black Women's Health Imperative
Black Women's Roundtable
Caregiver Action Network
Catalyst
Center for American Progress Action Fund
Center for Community Change Action
Center for Popular Democracy Action
ChangeLab Solutions
CLASP
Coalition of Labor Union Women
Coalition on Human Needs
Communications Workers of America (CWA)
Congregation of Our Lady of Charity of the Good Shepherd, US Provinces
Demos
Ecumenical Poverty Initiative
Every Child Matters
Faith in Public Life
Family Equality Council
Family Values @ Work
Family Voices
First Focus Campaign for Children
The Gerontological Society of America
Hadassah, The Women's Zionist Organization of America, Inc.
HealthConnect One
Hispanic Federation
Human Rights Watch
Interfaith Worker Justice
Jewish Women International
Jobs With Justice
La Leche League USA
The Leadership Conference on Civil and Human Rights
Main Street Alliance
Mi Familia Vota
Mom2Mom Global
MomsRising
NAACP

NARAL Pro-Choice America
National Alliance for Caregiving
National Asian Pacific American Women's Forum (NAPAWF)
National Association for Rural Mental Health
National Association of County Behavioral Health & Developmental Disability Directors
National Association of Social Workers
National Center for Lesbian Rights
National Center for Transgender Equality
National Consumer Voice for Quality Long-Term Care
National Council of Jewish Women
National Education Association
National Employment Law Project
National Employment Lawyers Association
National Health Law Program
National Institute for Reproductive Health (NIRH)
National LGBTQ Task Force Action Fund
National Network to End Domestic Violence
National Organization for Women
National Partnership for Women & Families
National Respite Coalition
National Women's Health Network
National Women's Law Center
NETWORK Lobby for Catholic Social Justice
Organization United for Respect at Walmart
Oxfam America
ParentsTogether
Partnership For America's Children
People For the American Way
People's Action Institute
Physicians for Reproductive Health
PL+US: Paid Leave for the U.S.
Poligon Education Fund
Promundo-US
Public Advocacy for Kids
RESULTS
ROC United
SEIU
Small Business Majority
TASH
U.S. Breastfeeding Committee
U.S. Women's Chamber of Commerce
UltraViolet
Union for Reform Judaism
United Food and Commercial Workers International Union
United State of Women
United Steelworkers
URGE: Unite for Reproductive & Gender Equity
Voices for Progress
Women of Reform Judaism

The Women's Caucus of the American Psychiatric Association
Women's Media Center
Workplace Fairness
Young Invincibles
YWCA USA
ZERO TO THREE

Alabama

AIDS Alabama

California

2020 Mom
Asset Building Strategies
Business and Professional Women
BreastfeedLA
CA Work & Family Coalition
California Breastfeeding Coalition
Center for WorkLife Law, University of California, Hastings College of Law
Child Care Law Center
EMC Strategies
Equal Rights Advocates
Family Voices of California
Food Chain Workers Alliance
Futures Without Violence
Legal Aid at Work
Maternal Mental Health NOW
National Council of Jewish Women, Los Angeles Section
Parent Voices CA
YWCA Berkeley/Oakland
YWCA San Francisco & Marin

Colorado

13th Moon Midwifery
9to5 Colorado
All Families Deserve a Chance Coalition
Colorado Coalition for the Homeless
Colorado Consumer Health Initiative
Colorado Fiscal Institute
Colorado Lactation Consultant Association
Colorado Organization for Latina Opportunity and Reproductive Rights (COLOR)
Movement Advancement Project
NARAL Pro-Choice Colorado
National Coalition Against Domestic Violence
National Council of Jewish Women, CO. State Policy Advocate, Advocacy Chair, Advocacy Committee
SynerGenius Telepresence
United for a New Economy
Women's Lobby of Colorado

Connecticut

All Our Kin
Connecticut Breastfeeding Coalition
Connecticut Women's Education and Legal Fund (CWEALF)
Connecticut Working Families Organization
Hispanic Federation – CT

Delaware

Breastfeeding Coalition of Delaware
Delaware Ecumenical Council on Children and Families

District of Columbia

Herd on the Hill
Jacobs Institute of Women's Health
Jews United for Justice

Florida

Advocacy Chair National Council of Jewish Women Palm Beach Section
Central Florida Jobs with Justice
FL Alliance of Community Development Corporations, Inc.
Hispanic Federation - FL
National Council of Jewish Women Florida State Policy Advocate Advocacy Chair
National Council of Jewish Women, Florida
National Council of Jewish Women, Valencia Shores Section
Organize Florida

Hawaii

Hawaii Children's Action Network
Healthy Mothers Healthy Babies Coalition of Hawaii
YWCA O'ahu

Illinois

AIDS Foundation of Chicago
EverThrive Illinois
National Council of Jewish Women, South Cook Section, State Policy Advocate
NCJW Illinois, State Policy Advocate
Oak Park River Forest Food Pantry
Sargent Shriver National Center on Poverty Law
Women Employed
YWCA of the University of Illinois

Indiana

Indiana Coalition Against Domestic Violence
Indiana Institute for Working Families

Iowa

Leadership Team of the Sisters of Charity, BVM

Kansas

Kansas Breastfeeding Coalition, Inc.

Kentucky

Kentuckiana Lactation Improvement Coalition
Kentucky Equal Justice Center
Lactation Improvement Network Of Kentucky

Louisiana

National Council of Jewish Women, Greater New Orleans Section

Maine

Maine Women's Lobby

Maryland

Jews United for Justice
Job Opportunities Task Force
Lactation Education Resources
Leadership for Education Equity
Maryland Family Network
NARAL Pro-Choice Maryland
National Advocacy Center of the Sisters of the Good Shepherd
Public Justice Center
Racial and Ethnic Health Disparities Coalition

Massachusetts

Equal Exchange
Jewish Alliance for Law and Social Action
Massachusetts Communities Action Network

Michigan

Sugar Law Center for Economic and Social Justice

Minnesota

Children's Defense Fund - Minnesota
ISALAH
Minnesota Association of Professional Employees
TakeAction Minnesota

Missouri

NARAL Pro-Choice Missouri

Nebraska

Sisters of Mercy West Midwest Justice Team

Nevada

Advanced Breastfeeding Support of Las Vegas
Make It Work Nevada

New Hampshire

Campaign for a Family Friendly Economy
Rights and Democracy

New Jersey

Anti-Poverty Network of New Jersey
New Jersey Citizen Action
NJ Breastfeeding Coalition, Inc.
NJ Time to Care Coalition
SPAN Parent Advocacy Network
Union of Rutgers Administrators, AFT Local 1766

New Mexico

Southwest Women's Law Center

New York

AAUW of Rockland County
Arrangements Abroad Inc.
Center for Children's Initiatives
Center for Frontline Retail
The Children's Agenda
Citizen Action of New York
Early Care & Learning Council
Fearless Talent Development Inc.
Gender Equality Law Center
Greater New York Labor-Religion Coalition
Hope's Door
Indivisible Westchester
Labor-Religion Coalition of NYS
League of Women Voters of St. Lawrence County, NY
Legal Momentum
Masten Block Club Coalition and the Board of Block Clubs of Buffalo & Erie County
National Federation of Business and Professional Women's Clubs-NYC (NFBPWC-NYC)
New York Paid Leave Coalition
New York Union Child Care Coalition
PowHer New York
Rios de Agua Viva United Church of Christ
Westchester National Organization for Women
Women's Research and Education Fund
The YMCA of Greater Rochester
YWCA of Binghamton & Broome County

North Carolina

Action NC
NARAL Pro-Choice North Carolina

National Coalition of 100 Black Women Inc. - Queen City Metropolitan Chapter
NC AFL-CIO
NC Alliance for Retired Americans
NC Child
North Carolina Council of Churches
North Carolina Justice Center
North Carolina Women United
Women AdvaNCe
Working America North Carolina
YWCA Asheville

North Dakota

Family Voices of ND
North Dakota Women's Network

Ohio

Appalachian Breastfeeding Network
Innovation Ohio
NARAL Pro-Choice Ohio
National Coalition of 100 Black Women Central Ohio
National Council of Jewish Women, Ohio State Policy Advocate
Ohio Domestic Violence Network
The Ohio Women's Public Policy Network

Oregon

Asian Pacific American Network of Oregon (APANO)
Cascade AIDS Project
Center for Parental Leave Leadership
Children First for Oregon
Family Forward Oregon
NARAL Pro-Choice Oregon

Pennsylvania

Maternity Care Coalition
One PA
PathWays PA
Southwest PA National Organization For Women
Women and Girls Foundation of Southwest Pennsylvania
Women's Law Project
YWCA Titusville

Rhode Island

Rhode Island KIDS COUNT

South Dakota

Brookings Supports Breastfeeding

Tennessee

Black Children's Institute of Tennessee
State Policy Advocate National Council of Jewish Women - Tennessee

Vermont

Hunger Free Vermont
Main Street Alliance of VT
Peace & Justice Center
Vermont Family Network
Voices for Vermont's Children

Virginia

Division for Early Childhood of the Council for Exceptional Children (DEC)
The McShin Foundation
NARAL Pro-Choice Virginia
National Military Family Association
Virginia Organizing

Washington

Economic Opportunities Institute
Legal Voice
PAVE Family to Family Health Information Center
YWCA Clark County

West Virginia

WV Citizen Action Group

Wisconsin

9to5 Wisconsin
Keep Families First Coalition
Marathon County Democratic Party
Mid-Day Women's Alliance of Appleton, WI
Unitarian Universalist Women's Federation
Wisconsin Alliance for Women's Health
Wisconsin Breastfeeding Coalition
Wisconsin Early Childhood Association

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