

## **DMEC ABSENCEAUTHORITY™ GUIDANCE: CALCULATING AND COORDINATING PFML BENEFITS**

DMEC AbsenceAuthority™ provides detailed calculations for parental and pregnancy-related leave benefits and serves as a directional tool for caregiving, non-pregnancy related medical, or other covered leave types. Leave management practitioners should verify estimates for non-parental leave using state-specific resources to ensure accuracy.

### **KEY CONSIDERATIONS FOR NON-PARENTAL OR PREGNANCY-RELATED LEAVE**

When using DMEC AbsenceAuthority™ for non-parental leave, account for the following differences:

#### **Duration Adjustments**

Non-parental leave may have shorter or longer durations depending on the state and leave reason.

Example: California allows up to 52 weeks for state disability insurance (medical leave) but only 12 weeks for paid family leave (caregiving).

#### **Wage Replacement Rates**

Non-parental leave may have unique calculations or require offsets with employer-provided benefits like short-term disability.

#### **Stacking of Leave Types**

Employees may combine multiple leave types (e.g., medical leave followed by caregiving), which influences overall durations.

#### **Employer Policies**

Employers often provide more generous policies for parental leave (e.g., full wage replacement) compared with other leave types.

For detailed comparisons, refer to the [DMEC State and Local Leave Law Map](#).

## Step-by-Step Instructions

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### Step 1: Calculate State Benefits Using DMEC AbsenceAuthority™

#### Input Required Data:

- Employee's state of employment.
- Type of leave (e.g., parental, caregiving, medical).
- Gross wages for the relevant base period.

#### Verify Calculations:

- Confirm wage replacement rate and ensure the state's maximum weekly benefit cap is applied.
- Record the output:
  - Weekly state benefit amount.
  - Duration of state-provided benefits.

### Step 2: Standardized Calculation Template

Use the template below to determine offsets and total benefits. Input data gathered in Step 1 and employer-specific policies.

Category	Details
Employee Name	[Insert Employee Name]
State Program	[Insert State Program (e.g., CA PFL, NY PFL)]
Regular Weekly Wage	[Insert Regular Gross Weekly Wage]
State Benefit Amount	= Wage Replacement Rate × Weekly Wage (subject to caps)

Category	Details
Employer Offset	= Regular Weekly Wage – State Benefit Amount
Supplement Required (Local Ordinance)	[Yes/No]
Total Weekly Wage Replacement	= State Benefit Amount + Employer Offset
Benefit Duration (Weeks)	[Insert Weeks Allowed by Program, e.g., 12 Weeks]
Total Wage Replacement (Duration)	= Total Weekly Replacement × Benefit Duration (Weeks)

### Step 3: Determine Employer Offset Amount

1. Use the following offset formula to calculate the employer-paid amount:  
Employer Offset Amount = Regular Weekly Wage – State Weekly Benefit
2. Verify whether the offset meets local ordinance requirements:  
Example: In San Francisco, employers must supplement state benefits to provide 100% wage replacement.
3. If applicable, confirm compliance with state-specific rules for stacking leave types or coordinating benefits.

### Step 4: Combine State and Employer Benefits

- Ensure the combined state benefit and employer-paid offset equal the employee's **regular weekly wage** without exceeding it.
- Use the template in Step 2 to determine:
  - **Total Weekly Wage Replacement.**
  - **Total Wage Replacement Duration** = Weekly Replacement × Duration in Weeks.



## Step 5: Finalize and Communicate

**Use the Employee Notification Letter Template below to share wage replacement details with the employee.**

### **Employee Notification Letter Template**

**Subject:** Coordination of Paid Family and Medical Leave Benefits

Dear [Employee Name],

We've reviewed your eligibility for Paid Family and Medical Leave under [State Program Name]. Below is a summary of your wage replacement benefits:

- **State Benefits:** You are eligible to receive [Weekly Amount] for up to [Duration in Weeks] under [State Program Name].
- **Employer–Paid Offset:** We will supplement your state benefit with [Amount] to help ensure wage continuity.
- **Total Weekly Wage Replacement:** [Insert Total Amount].
- **Duration of Benefits:** From [Start Date] to [End Date].

Please provide your approved state benefit determination letter to ensure accurate coordination of benefits. Let us know if you need additional support during your leave.

Sincerely,

[Your Name]

[Title]

### **Retain documentation for compliance:**

- DMEC AbsenceAuthority™ output.
- Completed calculation template.
- State–provided benefit determination letters.

**PRACTICAL EXAMPLE**

- **Employee Details:**
  - Weekly Wage: \$1,200
  - State: California
- **Paid Family Leave (PFL) Weekly Benefit:** \$840 (70% of weekly wage, capped by state).
- **Employer Offset:**  $\$1,200 - \$840 = \$360$ .
- **Total Weekly Wage Replacement:**  $\$840$  (state) +  $\$360$  (employer) =  $\$1,200$  (100% wage replacement).

## **ADDITIONAL TOOLS**

- **Employer Development Department Benefit Calculator (California)**
- **Massachusetts Paid Family and Medical Leave Calculator**
- **New York Paid Family Leave Estimator**
- **PFML and Statutory Disability Insurance Matrix by state, provided by Sedgwick**
- **Washington Paid Family and Medical Leave Benefits Calculator**