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# 56TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2024

## INTRODUCED BY

### Marian Matthews

# AN ACT

RELATING TO LABOR; ENACTING THE PAID FAMILY AND MEDICAL LEAVE INSURANCE ACT; CREATING THE PAID FAMILY AND MEDICAL LEAVE INSURANCE AUTHORITY; CREATING THE PAID FAMILY AND MEDICAL LEAVE INSURANCE BOARD; CREATING THE PAID FAMILY AND MEDICAL LEAVE INSURANCE FUND; PROVIDING FOR ADMINISTRATION OF THE PAID FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM BY THE BOARD; EXCEPTING CERTAIN EMPLOYEES; PROVIDING FOR RULEMAKING; PROVIDING FOR AN APPEALS PROCESS; PREEMPTING SIMILAR PROGRAMS; PRESCRIBING PENALTIES; MAKING AN APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. [NEW MATERIAL] SHORT TITLE.--This act may be cited as the "Paid Family and Medical Leave Insurance Act".

SECTION 2. [NEW MATERIAL] DEFINITIONS.--As used in the Paid Family and Medical Leave Insurance Act:

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- Α. "authority" means the paid family and medical leave insurance authority;
- "base period" means the first four of the five most recently completed quarters;
- "base weekly earnings" means an amount equal to one twenty-sixth of a covered employee's total wages and selfemployment income earned during the two quarters of the covered employee's base period in which the employee's earnings were highest;
- "board" means the paid family and medical leave D. insurance board;
- "contribution rate" means the percentage of subject earnings that employees and self-employed individuals enrolled in the paid family and medical leave insurance program are required to contribute to the fund;
- "covered employee" means a person who has F. contributed to the fund for at least six months during any employment in the twelve-month period prior to submitting an application for family and medical leave and:
- has earned at least two thousand three hundred twenty-five dollars (\$2,325) in subject earnings during the employee's highest earning quarter within the base period; or
- is a self-employed individual who is a (2) resident of the state and has enrolled in the paid family and .226534.4

medical leave insurance program pursuant to Section 8 of the Paid Family and Medical Leave Insurance Act;

- G. "employee" means a person working within the state who performs a service for wages under a contract of hire, written or oral, express or implied, and includes an individual employed by the state or a political subdivision of the state. "Employee" does not mean an independent contractor, a person employed by the United States, a person employed by a private or public employer that is not subject to the jurisdiction of the state, an employee of an employer subject to the provisions of Title 2 of the federal Railway Labor Act or an employee as defined in either the federal Railroad Unemployment Insurance Act or the Federal Employers' Liability Act (Railroads);
- H. "employer" means a person that has one or more employees within the state, including the state or a political subdivision of the state;
- I. "employment benefits" means benefits provided or made available to employees by an employer, including group life insurance, health insurance, disability insurance, sick leave, annual leave, educational benefits, retirement benefits and pensions;
- J. "family and medical leave compensation" or "compensation" means the paid leave provided to covered employees from the fund;

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- Κ. "family member" means a spouse, domestic partner, sibling, son or daughter, grandparent, grandchild, parent or person related to the employee by blood or affinity whose close association with the employee shows to be the equivalent of those family relationships;
- "fund" means the paid family and medical leave insurance fund;
- "health care provider" means a physician, Μ. physician assistant, nurse practitioner or other health care professional authorized to provide health care services within the scope of the professional's license;
- "intermittent leave" means family and medical leave taken in separate periods of time due to a single illness or injury;
- "Indian tribe" means a governmental unit, 0. subdivision, agency, department or instrumentality of a federally recognized Indian nation, tribe or pueblo, wholly or partially located in New Mexico, or a business enterprise wholly owned by an Indian nation, tribe or pueblo;
- "medical leave" means leave for which an Ρ. employee can apply for family and medical leave compensation pursuant to the Paid Family and Medical Leave Insurance Act that is granted to allow the employee to provide care for the employee's own serious health condition;
- "person" means an individual, corporation, .226534.4

organization or other legal entity;

- R. "serious health condition" means an illness, injury, impairment or physical or mental condition that involves:
- (1) inpatient care in a hospital, hospice, nursing home or residential medical care facility; or
- (2) continuing treatment, including outpatient treatment by a health care provider;
- S. "subject earnings" means the portion of an employee's total wages that does not exceed the federal social security contribution and benefit base; and
- T. "total wages" means all remuneration for employment and dismissal payments, including the cash value of all remuneration paid in any medium other than cash. "Total wages" does not include the cash value of any remuneration paid for agricultural labor or domestic service in any medium other than cash or the cash value of employment benefits.
- SECTION 3. [NEW MATERIAL] PAID FAMILY AND MEDICAL LEAVE INSURANCE AUTHORITY--PAID FAMILY AND MEDICAL LEAVE INSURANCE BOARD--CREATED.--
- A. The "paid family and medical leave insurance authority" is created and is administratively attached to the workforce solutions department.
- B. The "paid family and medical leave insurance board" is created to oversee and operate the authority. The .226534.4

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board is composed of the following eleven voting members:

- (1) the secretary of workforce solutions or the secretary's designee;
- (2) the secretary of economic development or the secretary's designee;
- (3) the superintendent of insurance or the superintendent's designee;
- (4) the secretary of health care authority or the secretary's designee;
- (5) one member appointed by the speaker of the house of representatives who advocates for the interests of employees;
- (6) one member appointed by the minority floor leader of the house of representatives who has knowledge and experience relating to the interests of the elderly and people with chronic illness;
- (7) one member appointed by the president pro tempore of the senate who has personal knowledge and experience with economically distressed and underserved communities and is reflective of the ethnic and economic diversity of such communities;
- (8) one member appointed by the minority floor leader of the senate who has knowledge and experience relating to managing and developing employment benefit plans; and
  - (9) three members appointed by the governor as

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- (a) one member who has knowledge and experience relating to family and medical leave programs;
- (b) one member who has knowledge and experience relating to the delivery and management of child care services; and
- one member with knowledge and (c) experience relating to the delivery of rural health care.
- Appointed members of the board shall serve a term of four years that expires on July 1 of the board member's fourth year. All initial appointments to the board shall be made by July 1, 2024, and initial appointed members of the board shall determine by lot three members to serve two-year terms and four members to serve four-year terms. Board members shall serve until their successors have been appointed. position on the board becomes vacant for any reason, a successor shall be selected by the original appointing authority in the same manner as the original appointment and shall serve for the remainder of the vacated term.
- A board member who fails to attend three consecutive meetings or fails to attend fifty percent of all meetings held during any calendar year shall automatically be removed as a member of the board.
- The governor shall select one of the members of the board as the chair. The board shall annually elect a vice .226534.4

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chair and such other officers as it deems necessary from among its members.

- A majority of the members of the board shall constitute a quorum and shall be capable of conducting any The vote of a majority of a quorum shall board business. prevail, even though the vote may not represent an actual majority of all the board members.
- Board members shall receive per diem and mileage as provided in the Per Diem and Mileage Act and shall receive no other remuneration, compensation or allowance.
- SECTION 4. [NEW MATERIAL] PAID FAMILY AND MEDICAL LEAVE INSURANCE AUTHORITY STAFF. --
- The position of "director of the paid family and medical leave insurance authority" is created. The director shall be hired by the board and shall serve at the pleasure of the board. The director's salary shall be set by the board.
- The director may employ additional staff, agents or contractors as necessary for carrying out the authority's duties pursuant to the Paid Family and Medical Leave Insurance Act.
- SECTION 5. [NEW MATERIAL] PAID FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM--EMPLOYEE CONTRIBUTIONS--AUTHORITY DUTIES--AGENCIES AND DEPARTMENTS TO COOPERATE. --
- The authority shall establish and administer a paid family and medical leave insurance program to provide up .226534.4

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to six weeks of family and medical leave compensation to covered employees during any twelve-month period.

- Beginning January 1, 2026, each covered employee and self-employed individual who has enrolled in the paid family and medical leave insurance program shall contribute a percentage of the employee's or self-employed individual's subject earnings to the fund. The contribution rate shall be set by the authority and shall not exceed one-half percent of subject earnings.
- C. By January 1, 2027, and annually thereafter, the authority shall conduct an actuarial study to evaluate the sustainability of the fund. The study shall:
- determine the total amount of money in the (1) fund;
- determine the total amount of (2) contributions made to the fund during the previous calendar year;
- determine the total amount of family and medical leave compensation provided to covered employees during the previous calendar year;
- determine the total cost of administration (4) of the paid family and medical leave insurance program during the previous year;
- determine the total cost of administration (5) of the fund;

- (6) evaluate the effect that increasing or decreasing the contribution rate would have on the fund;
- (7) evaluate the effect that increasing the maximum weekly compensation amount would have on the fund;
- (8) identify the target fund balance sufficient to ensure the ongoing sustainability of the fund; and
- (9) identify a recommended contribution rate and maximum weekly compensation amount that would allow the fund to reach the target fund balance.
- D. On January 1, 2028, and annually thereafter, the authority may adjust the contribution rate according to the recommended contribution rate identified in the actuarial study conducted by the authority. The authority may:
- (1) increase the contribution rate to ensure the sustainability of the fund as long as the contribution rate does not exceed one-half percent of subject earnings; or
- (2) decrease the contribution rate if the actuarial study determines that the fund will remain solvent after a decrease in the contribution rate.
- E. The contributions of employees shall be remitted by the employer following the end of each quarter for which the contributions are deducted and on a date determined by the authority.
- F. To implement and administer the paid family and .226534.4

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medical leave insurance program, the authority shall:

- (1) evaluate and establish a process by which employers may credit covered employee contributions to the fund;
- establish and maintain a secure website that displays all public notices issued by the authority;
- (3) establish a process for determining whether a person meets the requirements for family and medical leave compensation, including the certification required for establishing eligibility for the compensation;
- (4) establish a process for determining whether an employer qualifies for a waiver from the paid family and medical leave insurance program;
- (5) make and enter into any contract or agreement necessary or incidental to the performance of its duties. A contract or agreement shall not contain any provision in which a contractor derives any direct or indirect economic benefit from denying or otherwise influencing the outcome of any claim for family and medical leave compensation; and
- adopt and promulgate rules necessary to (6) implement the provisions of the Paid Family and Medical Leave Insurance Act.
  - The authority may contract for:
- a person to administer the paid family and .226534.4

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medical leave insurance program;

- actuarial studies that evaluate the solvency of the fund; and
- public outreach related to the paid family and medical leave insurance program.
- State agencies and departments shall cooperate with the authority to timely and efficiently provide the information and services necessary to carry out the provisions of the Paid Family and Medical Leave Insurance Act.
- SECTION 6. [NEW MATERIAL] PAID FAMILY AND MEDICAL LEAVE INSURANCE FUND--CREATION.--
- The "paid family and medical leave insurance fund" is created in the state treasury and shall be administered by the authority. The fund shall be held for the benefit of the employees who paid into the fund and shall consist of all revenue collected and attributable to the Paid Family and Medical Leave Insurance Act. Money in the fund shall be invested by the state investment officer. Income from investment of the fund shall be credited to the fund.
- Money in the fund is appropriated to the authority for the purposes of:
- distributing family and medical leave (1) compensation to covered employees; and
- (2) paying the operational and administrative costs of the authority and educating and informing the public .226534.4

about the paid family and medical leave insurance program;

provided that money shall only be used for paying operational and administrative costs of the authority and educating and informing the public when authorized by the enactment of a specific appropriation by the legislature that:

(a) specifies the purpose for the appropriation; and

(b) obligates money in the fund for a period that is less than two years after the date of the enactment of the appropriation.

C. Money shall be disbursed from the fund only on

C. Money shall be disbursed from the fund only on warrant issued by the secretary of finance and administration pursuant to vouchers signed by the director of the paid family and medical leave insurance authority or the director's authorized representative. Any unexpended or unencumbered balance remaining at the end of a fiscal year shall not revert to the general fund.

# SECTION 7. [NEW MATERIAL] FAMILY AND MEDICAL LEAVE COMPENSATION-ELIGIBILITY-DOCUMENTATION REQUIRED.--

A. Beginning January 1, 2027, covered employees shall be entitled to a total of six weeks of family and medical leave compensation during any calendar year for any of the following reasons:

- (1) the birth of the covered employee's child;
- (2) the placement of a child with the covered

employee for adoption or foster care;

- (3) to care for a family member of the covered employee, if the family member has a serious health condition; or
- (4) to recover from the covered employee's serious health condition.
- B. Family and medical leave taken by a covered employee due to the birth of the covered employee's child or the placement of a child with the covered employee for adoption or foster care may be taken before the impending birth or placement to prepare for the birth or placement of the child.
- employee due to the birth of the covered employee's child or the placement of a child with the covered employee for adoption or foster care shall not be taken intermittently unless the covered employee and the employer agree otherwise. Family and medical leave taken by any covered employee for any other reason outlined in Subsection A of this section may be taken intermittently if both the covered employee and employer agree. A covered employee may receive family and medical leave compensation in increments of no fewer than eight hours.
- D. If a covered employee requests intermittent leave, the covered employee's employer may require the covered employee to transfer temporarily to an available alternative position that the covered employee is qualified for if the .226534.4

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- (1) has equivalent pay and employment benefits; and
- better accommodates recurring periods of leave than the covered employee's original position.

# A covered employee shall:

- (1) make a reasonable effort to schedule family and medical leave so as not to unduly disrupt the operations of the employer;
- (2) provide the employer with prior notice of the covered employee's intent to take family and medical leave at least thirty calendar days before taking family and medical leave, except when the circumstances require the covered employee to begin leave in less than thirty days, in which case the covered employee shall provide notice as soon as practicable; and
- provide the employer with prior notice of the schedule on which the covered employee will be taking family and medical leave, to the extent practicable.
- Family and medical leave taken pursuant to the Paid Family and Medical Leave Insurance Act shall not result in a reduction of the total amount of leave to which a covered employee is otherwise entitled pursuant to contract, policy, collective bargaining agreement or other law or rule in excess of the amount of family and medical leave actually taken .226534.4

pursuant to the Paid Family and Medical Leave Insurance Act;
provided that an employer subject to the federal Family and
Medical Leave Act of 1993 may require a covered employee who
takes family and medical leave and receives family and medical
leave compensation under the Paid Family and Medical Leave
Insurance Act that also qualifies as leave under the federal
Family and Medical Leave Act of 1993 to take leave
concurrently.

G. A covered employee shall be ineligible to
receive family and medical leave compensation if:

- (1) the covered employee or self-employed individual files a fraudulent claim for family and medical leave compensation or has filed a fraudulent claim for family and medical leave compensation within the previous three years;
- (2) the covered employee or self-employed individual is receiving unemployment insurance benefits during the period for which the claim for leave is filed;
- (3) during leave, the covered employee or self-employed individual does not provide the care or use leave as described in the covered employee's application for leave; or
- (4) the covered employee is seeking medical leave due to an injury or illness caused by circumstances that would entitle the covered employee to temporary indemnity benefits under the Workers' Compensation Act.

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- Η. To be eligible for family and medical leave compensation, a covered employee shall:
- (1) provide notice to the authority of the need for compensation in a form and manner prescribed by the authority;
- certify that the covered employee has (2) notified the covered employee's employer of the covered employee's intent to take family and medical leave;
- upon request of the authority, provide (3) certification of the employee's need for family and medical leave; and
- if applying for medical leave, certify that the employee's serious health condition is not eligible for benefits under the Workers' Compensation Act or the New Mexico Occupational Disease Disablement Law.
- The weekly compensation offered to covered employees shall be equal to ninety-five percent of the covered employee's base weekly earnings up to an amount equal to forty times the minimum wage rate provided in Section 50-4-22 NMSA 1978, and sixty percent of the covered employee's base weekly earnings above an amount equal to forty times the minimum wage rate. The total weekly compensation shall not exceed an amount equal to sixty times the minimum wage rate unless the authority determines, based on actuarial studies, that the fund can sustainably compensate covered employees at a higher maximum .226534.4

weekly compensation amount set by the authority.

- J. The authority shall withhold applicable federal and state income taxes from a covered employee's family and medical leave compensation.
- K. Amounts deducted and withheld from family and medical leave compensation shall remain in the fund until transferred to the federal internal revenue service or the taxation and revenue department.
- L. The authority shall follow all procedures specified by the United States department of labor and the federal internal revenue service pertaining to the deducting and withholding of income tax.
- SECTION 8. [NEW MATERIAL] ENROLLMENT IN PAID FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM BY SELF-EMPLOYED INDIVIDUALS.--
- A. A self-employed individual may submit an application to the authority, in a form and manner prescribed by the authority, to enroll in the paid family and medical leave insurance program. A self-employed individual enrolled in the program shall be required to remain in the program for at least three years and shall be automatically re-enrolled in the program each year thereafter, unless the self-employed individual opts out of the program.
- B. A self-employed individual may withdraw from the paid family and medical leave insurance program upon submitting written notice to the authority at least thirty days prior to .226534.4

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the expiration of the initial three-year enrollment period or a subsequent enrollment period.

# [NEW MATERIAL] FAMILY AND MEDICAL LEAVE SECTION 9. CERTIFICATION. --

- The authority shall require a covered employee who seeks family and medical leave compensation to provide, in accordance with authority rules, evidence of the birth or adoption of a child or placement of a foster child with the covered employee or verification by a health care provider that a family member has a serious health condition that supports the covered employee's claim for compensation.
- The authority shall require a covered employee who seeks family and medical leave compensation to provide, in accordance with authority rules, verification by a health care provider that the covered employee has a serious health condition that supports the covered employee's claim for compensation.
- Information contained in a covered employee's files and records pertaining to the Paid Family and Medical Leave Insurance Act are confidential and not open to public inspection, other than to authority employees and agents in the performance of their official duties and reporting requirements. However, the covered employee or the covered employee's authorized representative may review the records or receive specific information from the records upon the

presentation of the covered employee's signed authorization.

D. Employee information gathered by an employer pursuant to the Paid Family and Medical Leave Insurance Act shall be kept confidential by the employer; provided that confidential records may be used by authority employees in the performance of their duties.

# SECTION 10. [NEW MATERIAL] EMPLOYER WAIVER.--

A. An employer that has adopted and operates a private paid family and medical leave program or plan for the benefit of its employees that provides leave and compensation that is of equal or greater duration and value than the family and medical leave compensation offered under the Paid Family and Medical Leave Insurance Act may apply for a waiver to exempt the employer and its employees from participating in the paid family and medical leave insurance program. The employer shall apply and provide supporting documentation to the authority for exemption each calendar year. The documentation shall include evidence that:

- (1) the private program or plan offers at least six weeks of paid family and medical leave;
- (2) the private program or plan offers at least as much family and medical leave compensation as the compensation provided for in the Paid Family and Medical Leave Insurance Act;
- (3) the private program or plan does not .226534.4

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impose any conditions or restrictions that are not explicitly authorized by the Paid Family and Medical Leave Insurance Act; and

- (4) the private program or plan does not cost employees more than the premium charged to employees pursuant to the Paid Family and Medical Leave Insurance Act.
- B. An employer granted a waiver pursuant to Subsection A of this section shall notify all employees covered by the employer's paid leave program at the start of the employee's employment and annually thereafter that:
- (1) the employee is covered by a privately run family and medical leave program rather than a public plan;
- (2) employees may apply to the employer for family and medical leave;
- (3) employers shall provide family and medical leave and family and medical leave compensation that is of equal or greater value and duration than that granted to employees under the Paid Family and Medical Leave Insurance Act; and
- (4) employees may appeal to the authority if any right granted under the Paid Family and Medical Leave Insurance Act is violated.
- C. Employees who work for an employer that has received a waiver from the authority shall not contribute a percentage of their earnings to the fund.

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- A denial of family and medical leave compensation by a private plan or program shall be subject to the denial of compensation appeal procedure outlined in Section 14 of the Paid Family and Medical Leave Insurance Act.
- Nothing in this section shall be construed to limit an employer from providing a private paid family and medical leave program or plan that provides greater benefits than required by the Paid Family and Medical Leave Insurance Act.
- [NEW MATERIAL] PAID FAMILY AND MEDICAL LEAVE SECTION 11. FRAUD--DISQUALIFICATION FROM PAID FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM--REPAYMENT OF FAMILY AND MEDICAL LEAVE COMPENSATION -- PENALTIES . --
- Family and medical leave compensation fraud consists of:
- making a false statement or (1) misrepresentation regarding a material fact, or willfully failing to report a material fact, to obtain family and medical leave compensation; and
- (2) aiding, abetting, assisting, promoting or facilitating the production of a misrepresented claim for family and medical leave compensation.
- Except as otherwise provided for in this section regarding the repayment of family and medical leave compensation, a person who commits family and medical leave .226534.4

compensation fraud that results in improper family and medical leave compensation of:

- (1) not more than two hundred fifty dollars (\$250) is guilty of a petty misdemeanor and shall be sentenced pursuant to the provisions of Section 31-19-1 NMSA 1978;
- (2) more than two hundred fifty dollars (\$250) but not more than two thousand five hundred dollars (\$2,500) is guilty of a misdemeanor and shall be sentenced pursuant to the provisions of Section 31-19-1 NMSA 1978;
- (3) more than two thousand five hundred dollars (\$2,500) but not more than twenty thousand dollars (\$20,000) is guilty of a fourth degree felony and shall be sentenced pursuant to the provisions of Section 31-18-15 NMSA 1978; and
- (\$20,000) is guilty of a third degree felony and shall be sentenced pursuant to the provisions of Section 31-18-15 NMSA 1978.
- C. A person participating in the paid family and medical leave insurance program who willfully makes a false statement or misrepresentation regarding a material fact, or willfully fails to report a material fact, to obtain family and medical leave compensation shall be disqualified from receiving any compensation under the program for three years after making the false statement or misrepresentation or failing to report .226534.4

the material fact.

- D. If family and medical leave compensation is paid to a covered employee erroneously or as a result of willful misrepresentation by the covered employee, or if a claim for family and medical leave compensation is rejected after compensation is paid, the authority may seek repayment of family and medical leave compensation from the covered employee who received compensation. When payment is made due to willful misrepresentation, the authority may seek payment of a penalty not to exceed fifty percent of the family and medical leave compensation paid as a result of the misrepresentation.
- E. If family and medical leave compensation is paid as a result of willful misrepresentation by a health care provider, the authority may seek payment of a penalty from the health care provider not to exceed three hundred percent of the family and medical leave compensation paid as a result of the misrepresentation.
- F. A person, including an employer, who intentionally aids, abets, assists, promotes or facilitates the making of a misrepresented claim for compensation shall be liable for the same financial penalty as the person who made the claim.
- SECTION 12. [NEW MATERIAL] EMPLOYMENT AND EMPLOYMENT BENEFITS PROTECTION.--
- A. A covered employee who has been employed by the .226534.4

employee's current employer for at least one hundred twenty
days and takes family and medical leave pursuant to the Paid
Family and Medical Leave Insurance Act for the intended purpose
of the leave shall be entitled on return from the leave:

- (1) to be restored by the employer to the position of employment held by the covered employee when the leave commenced;
- (2) to be restored to an equivalent position with equivalent employment benefits and pay; or
- (3) in the case of a medical leave, if the covered employee is medically unable to perform the employee's original job upon returning to work, to be transferred to work suitable to the employee's physical condition if such work is available.
- B. Nothing in this section shall be construed to entitle a restored covered employee to:
- (1) the accrual of any seniority or employment benefits during a period of family and medical leave; or
- (2) any right, employment benefit or position of employment other than any right, employment benefit or position to which the covered employee would have been entitled had the covered employee not taken family and medical leave.
- C. An employer shall pay its share of group life insurance, health insurance and disability insurance premiums and maintain a covered employee's insurance coverage while the .226534.4

employee is on leave pursuant to the Paid Family and Medical Leave Insurance Act under terms that the covered employee would have received if the covered employee had not taken leave. The covered employee on leave shall pay the same share of premium payments as the covered employee would have paid if the employee were not on leave; provided that nothing in this section shall prohibit an employer acting in good faith to dispute an employee's eligibility to receive family and medical leave or compensation.

D. Nothing in this section shall be construed to prohibit an employer from requiring a covered employee on family and medical leave to report periodically to the employer on the status and intention of the covered employee to return to work.

SECTION 13. [NEW MATERIAL] INTERFERENCE AND RETALIATION PROHIBITED.--

- A. It is unlawful for an employer or any other person to interfere with or restrain or deny the exercise of or the attempt to exercise any right protected under the Paid Family and Medical Leave Insurance Act.
- B. An employer, employee organization or other person shall not take retaliatory action or otherwise discriminate against a covered employee because the covered employee exercised rights protected under the Paid Family and Medical Leave Insurance Act. Such rights include:

- (1) requesting, filing for, applying for or exercising any right to take family and medical leave as provided for under the Paid Family and Medical Leave Insurance Act;
- (2) communicating to the employer or any other person or entity an intent to file a claim, a complaint with the authority or courts or an appeal;
- (3) testifying, planning to testify or assisting at any time in any investigation, hearing or proceeding under the Paid Family and Medical Leave Insurance Act;
- (4) informing any person about an employer's alleged violation of the Paid Family and Medical Leave
  Insurance Act; and
- (5) informing any person of the person's rights under the Paid Family and Medical Leave Insurance Act.
- C. It is unlawful for an employer's absence policy to count family and medical leave taken under the Paid Family and Medical Leave Insurance Act as an absence that may lead to or result in discipline, discharge, demotion, suspension or any other adverse action.
- D. The protections provided in this section shall apply to any person who reasonably but mistakenly alleges violations of the Paid Family and Medical Leave Insurance Act.
- E. An employer that is found by a hearing officer
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or court of competent jurisdiction to have discharged a covered employee in violation of this section shall rehire that employee; provided that the covered employee agrees to be rehired.

F. Nothing in this section shall be construed to limit an employer from making a report in good faith to the authority, a law enforcement officer or a law enforcement agency relating to family and medical leave compensation fraud allegedly committed by an employee.

SECTION 14. [NEW MATERIAL] ADVERSE DETERMINATIONS--APPEAL
PROCEDURES--ADMINISTRATIVE ACTIONS--AUTHORITY DISCIPLINARY
POWERS.--

- A. A covered employee or the covered employee's authorized representative named in an application for leave may appeal an adverse determination of that application to the authority as follows:
  - (1) the aggrieved party shall:
- (a) file an appeal in writing with the authority within fifteen business days of receiving notice of the adverse decision;
  - (b) set forth the reasons for appeal;
- (c) provide notice to all parties that an appeal has been filed; and
  - (2) the authority may:

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and

1	(a) hold a hearing within ten business
2	days after an appeal is properly made, due notice is given to
3	the parties in dispute and mediation is refused by any party;
4	(b) develop a record of the proceedings;
5	and
6	(c) rule on the appeal within five
7	business days after the completion of the hearing and issue a
8	final decision in accordance with Subsection B of Section
9	39-3-1.1 NMSA 1978.
10	B. An aggrieved party, including a covered employee
11	or former employee, or the authority on its own motion may
12	bring an administrative action for an alleged violation of the
13	Paid Family and Medical Leave Insurance Act under a public or
14	privately run leave program as follows:
15	(1) the aggrieved party or the authority
16	shall:
17	(a) file a complaint alleging a
18	violation of the Paid Family and Medical Leave Insurance Act in
19	writing with the authority within thirty business days of
20	becoming aware of the alleged violation;
21	(b) set forth the grounds of the
22	complaint; and
23	(c) provide notice to parties to the
24	alleged violation that a complaint has been filed; and
25	(2) the authority shall:
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- (b) hold a hearing within ten business days after a complaint is properly made, due notice is given to the parties in dispute and mediation is refused by any party;
  - (c) develop a record of the proceedings;
- (d) have power to take disciplinary action, including investigating, fining, censuring or reprimanding a party or suspending or revoking a waiver issued pursuant to the Paid Family and Medical Leave Insurance Act; and
- (e) rule on a complaint within five business days after the completion of the hearing and issue a final decision in accordance with Subsection B of Section 39-3-1.1 NMSA 1978.
- C. A party may appeal a final decision made by the authority pursuant to the provisions of this section to the district court pursuant to Section 39-3-1.1 NMSA 1978.
- D. The authority may appear in its own name in district court in actions for injunctive relief to prevent any person or entity from violating the provisions of the Paid Family and Medical Leave Insurance Act or rules promulgated by the authority.

SECTION 15. [NEW MATERIAL] WRITTEN NOTICE REQUIRED OF .226534.4

1	EMPLOYERSEach employer, at the time of hiring a new covered
2	employee and annually thereafter, shall provide written notice
3	to each of the employer's employees that provides information
4	on the:
5	A. covered employee's rights and obligations under
6	the Paid Family and Medical Leave Insurance Act;
7	B. process for filing a claim for compensation;
8	C. protections that employees have to be able to
9	apply for or use family and medical leave compensation without
10	retaliation from an employer; and
11	D. right to file an appeal to the authority for
12	denial of family and medical leave compensation.
13	SECTION 16. [NEW MATERIAL] AUTHORITY REPORTING
14	REQUIREMENTS
15	A. No later than July 1, 2025 and annually
16	thereafter, the authority shall submit a report to the
17	legislature that includes information on the:
18	(1) projected and actual participation in the
19	paid family and medical leave insurance program;
20	(2) balance of the fund;
21	(3) reasons why covered employees are
22	receiving family and medical leave compensation;
23	(4) success of outreach and education efforts;
24	(5) demographic information of covered
25	employees who apply for family and medical leave compensation,
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2	(6) total number of claims made and claims
3	denied;
4	(7) total amount of contributions to the fund
5	paid during the previous fiscal year;
6	(8) total cost of administration of the fund
7	during the previous fiscal year; and
8	(9) target fund balance sufficient to ensure
9	the ongoing sustainability of the fund.
10	B. The authority shall make the report available to
11	the public on the authority's website.
12	SECTION 17. [NEW MATERIAL] PUBLIC EDUCATION CAMPAIGN
13	The authority shall conduct a public education campaign that
14	provides information on the paid family and medical leave
15	insurance program. The public education campaign shall include
16	information on the requirements for receiving family and
17	medical leave compensation and how to apply for family and
18	medical leave compensation. The authority may use money from
19	the fund for the purposes of the public education campaign.
20	SECTION 18. [NEW MATERIAL] PREEMPTION
21	A. A city, county, home rule municipality or other
22	political subdivision of the state shall not adopt or continue
23	in effect any ordinance, rule, regulation, resolution or
24	statute that establishes a program of rights and benefits as
25	set out in the Paid Family and Medical Leave Insurance Act,

including the employee's gender, age and income level;

excluding a paid sick leave or paid time-off ordinance, policy or resolution.

B. Subject to the requirements of the Paid Family and Medical Leave Insurance Act, the provisions of Subsection A of this section shall not prevent a city, county, home rule municipality or other political subdivision of the state from establishing any leave policies for its employees.

SECTION 19. [NEW MATERIAL] COLLECTIVE BARGAINING

AGREEMENTS UNAFFECTED.--Nothing in the Paid Family and Medical

Leave Insurance Act shall be construed to diminish the rights,

privileges or remedies of any employee under any collective

bargaining agreement.

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