Paid Family Leave NOTICE OF COMPLIANCE



Paid Family Leave insurance coverage provided by: First Reliance Standard Life Insurance Company		
	INSERT INSURER NAME HERE	
Covering employees of: $\frac{\text{Lehigh Univ}}{\text{Lehigh Univ}}$	versity	
	INSERT EMPLOYED NAME LIEDE	

Paid Family Leave is employee-funded insurance that provides eligible employees job-protected, paid time off to:

- **BOND** with a newly born, adopted, or fostered child;
- CARE for a family member with a serious health condition (see paidfamilyleave.ny.gov for eligible family members); or
- ASSIST loved ones when a spouse, domestic partner, child, or parent is deployed abroad on active military service.

Paid Family Leave Request Process:

- 1. Notify your employer at least 30 days in advance, if foreseeable, or as soon as possible.
- 2. Complete and submit the Request for Paid Family Leave (Form PFL-1) to your employer.
- **3.** Complete and attach the additional documentation as instructed on the request form and submit to your employer's insurance carrier listed below. Submit within 30 days after the start of your leave to avoid losing benefits.

You may obtain all forms from your employer, their insurance carrier listed below, or online at PaidFamilyLeave.ny.gov/Forms.

Employers should NEVER discriminate or retaliate against anyone who requests or takes Paid Family Leave

INSURER OR AUTHORIZED NEW YORK SELF-INSURER INFORMATION			
Name: First Reliance Standard Life Insurance Company	Telepho	one: 1-800-351-7500	
Address: 488 Madison Avenue Suite 803 New York, NY 10022			
Policy#: DBL253110	Effective date from: $\frac{01/01/2024}{1}$	to Until Cancelled	
■ Statutory □ Under a plan or agreement			
Class(es) of employees covered: All Employees eligible under the New York Paid Family Leave Benefits Law			

For more information, visit PaidFamilyLeave.ny.gov or call (844) 337-6303