Question or Proposed Change	e TOPIC	Question or Issue	Proposal	Answer or Recommendation
proposed change	Bond	Specify if bond (for self-insured plans) will be required per legal entity or per company (A company may have multiple FEINs)	We would recommend bonds at the company level and not at the entity level.	Recommendation: Because the data that the CT Paid Leave Authority will be able to access is, in large part, based on FEIN, we will need to establish requirements at the FEIN level in order to be able to audit/verify the numbers of employees and the estimated contribution requirements and surety bond obligation.
proposed change	Coverage	The reference to all employees in the statute is meant to prevent the creation of private plans for a subset of privileged employees. It should not be read as requiring employers to undertake wider coverage obligation than public plan. Employers won't be able to fund priviate plans if employees can take leave without making any contributions. Plus, "all" would render unnecessary the coverage for former employees, thus it can't be the correct reading. The statute says the private plan must be equivalent to public plan although employer has option to be more generous, the statute doesn't allow the authority to require the employer to be more generous. Additionally, allowing all employees to receive paid leave benefits exacerbates the stacking problem caused by the difference in eligibility standards between paid leave and job protected leave.C14	o covered employees, ie. employees who meet the \$\$ eligiblity standard.	Recommendation: Allow private plans that provide paid leave benefits only to employees working in CT who meet the eligiblity standard.
proposed change	Employee vote	The two vote process would create unnecessary risk and administrative expense for employers. This is likely to disincentivize employers from proceeding with the burdensome and costly private plan application process – effectively eliminating the Private Plan market intended by the Act. Ultimately this hurts Connecticut employees who may have access to more generous benefits under a private plan than the state program, at no additional cost.	The Declaration of Insurance outlines, almost verbatim, all substantive statutory requirements. It was also issued by the CT Insurance Department through a Notice detailing, in a 19-page document, the substantive requirements for the approval of Private Plans, and several additional pages dedicated to the required filing of Private Plans with the Insurance Department. Therefore, one employee vote on the Declaration of Insurance (with additional explanatory materials for employees on how to vote) should satisfy the statutory voting requirement.	means contributions won't be waived until final approval, thus eliminating the need for the CT Paid Leave Authority to initiate collections actions from employers who end up not obtaining an approved plan. This approach reduces the burden to employers because only one vote will be required.
proposed change	Employee vote	The alternative of requiring one vote at the end would eliminate one round of the costly and burdensome administrative process of communicating and holding the vote, however, it carries all of the same risks noted above, particularly with respect to contributions and will discourage employers from opting out of the state program.	One vote based on the Declaration of Insurance only	Recommendation: Because the statute specifies that the employees must vote on the policy and there may be differences between the Declaration and the full policy, need to determine if it is consistent with statute to vote on declaration.
proposed change	Employee vote	Affirmative vote of majority of employees is burdensome and difficult and unnecessary because if employer offering a private plan, the plan must be determined by Autohrity and DOI to be valid and at least as generous as public option so low risk that employees would be harmed by private plan . Note - NJ got rid of vote because of administrative difficulties	Accept a "passive vote" - vote passes as long as majority of employees don't vote no. This approach provides the most flexibility and the least administrative burden to the employers and should be permitted in conjunction with robust notice/information period by employer	Recommendation: Continue to require an affirmative vote because of the CT Paid Leave Authority's need to audit and verify vote.
proposed change	Employee vote	Vote by all employees - if the expectation of the CTPFMLIA is for national employers to have a vote by all employees as opposed to all employees within CT, it would be extremely difficult for large employers who have tens of thousands of employees around the nation, but only a handful of employees in CT, to get employee approval.	Voter should be all CT employees, i.e. those who are actually covered by the plan, not all employees	Recommendation: Require that only employees working in CT shall vote. This is consistent with overall reading of the statute. It is reasonable that only those directly affected should be able to decide whether to approve the private plan. In addition, this will minimize administrative burdens associated with holding the vote.
proposed change	Employee vote	Does all employees mean all employees or just all CT employees?	Voter should be all CT employees, i.e. those who are actually covered by the plan, not all employees	Recommendation: Require that only employees working in CT shall vote. This is consistent with overall reading of the statute. It is reasonable that only those directly affected should be able to decide whether to approve the private plan. In addition, this will minimize administrative burdens associated with holding the vote.
proposed change	employee vote	Why can't the Declaration of Insurance, which contains a full description of the proposed insurance coverage, be used for the employee vote process upfront, well before policy issuance? In that case, if approved, the employer could submit both the Declaration of Insurance and evidence of the majority vote approval with the initial exemption filing.	One vote based on the Declaration of Insurance only	Recommendation: Because the statute specifies that the employees must vote on the policy and there may be differences between the Declaration and the full policy, need to determine if it is consistent with statute to vote on declaration.
proposed change	employee vote	The requirement to hold a vote is administratively burdensome. Generally, the decision about what benefits to offer is solely within the employer's discretion	Eliminate the vote entirely	Recommendation: The statute requires an employee vote; accordingly, the CT Paid Leave Authority does not have the legal authority to establish policies or procedures that eliminate this requirement.

proposed change	Employee vote	Specify if voting will be per legal entity under a company or the company as a whole. (A company may have multiple FEINs)	Voting should be done be at the company level and not at the entity level	Recommendation: Because the data that the CT Paid Leave Authority will be able to access is, in large part, based on FEIN, we will need to establish requirements at the FEIN level in order to be able to audit/verify the number of employees and estimated contribution requirements/surety bond obligation.
proposed change	Employer registration / submission of application	The draft procedure requires the Employer to register and apply but does not indicate whether a TPA could submit the application on the Employer's behalf	The TPA should be allowed to register / apply on the Employer's behalf, with appropriate verification of CT Paid Leave Authority	Recommendation: Amend the procedure to allow an authorized TPA to submit the application on the employer's behalf.
proposed change	reporting requirements	Information that employers are required to report about their claims raise concern about collection of information by the TPA not relevant to determination of an employee's application for benefits, such as gender, age, town of residence, and income level. This imposes additional risks on the TPA (and for the claimants) by having in its possession PII	Reduce the number and nature of elements that employers have to report on	Recommendation: Do not change the reporting requirements because 1) These are generally the same elements that the Authority has to report on; 2) there are ways to deidentify data; 3) the employer and TPA can work together to develop the report.
proposed change	Self-funded plan	it does not need or want. Transmission is a security risk but so is simple possession of that Self-funded plans need more info and an early approval process so that they can qualify for employee contibution wavier as as soon as possible so as to use that money to fund their own plans	t	This issue becomes moot if the waiver of contributions is approved only after the employees vote on the final policy, not the Declaration of Insurance.
proposed change	Self-funded plan	The declaration of insurance applies only to insurance policies, not self-funded plans, preventing employers who want to self-insure from being able to access the early approval/waiver of contributions	CID or the Authority should create an equivalent "early approval" process for self-funded plans	This issue becomes moot if the waiver of contributions is approved only after the employees vote on the final policy, not the Declaration of Insurance.
proposed change	Self-funded plan	Employers with insured plans who are approved to waive contributions based on the declaration of insurance are required to acknowledge the obligation to pay the Trust the contributions if the plan is not fully and finally approved	Impose similar obligation on self-insured employers	This issue becomes moot if the waiver of contributions is approved only after the employees vote on the final policy, not the Declaration of Insurance.
Question	Approval process	How long does the Authority expect to take to approve private plans?		We do not have a specific answer to this question yet but we are working to ensure that the approval process is as quick and streamlined as possible.
Question	Approval process	s Is there a fee for application		No
Question	Approval process	What will be the process for subsequent years		The process will be the same each year, with the exception that the declaration of insurance becomes moot once the CT Paid Leave Authority and the CID issue the Policy Filing Guidance Notice that will set forth the minimum requirements for an acceptable policy.
Question	claims procedure	Insurers need the same information that the Authority needs in order to build its internal claims administration process		The CT Paid Leave Authority is working with the CID to develop a Policy Filing Guidance Notice that will set forth the minimum requirements for an acceptable policy. It should be noted, however, that such Guidance is not anticipated to take the form of a claim administration manual.
Question	claims procedure	Please ensure that the claims procedures (and each party's respective rights and obligations) make clear if there are any differences between procedures under the state plan and procedures under a private plan.		The CT Paid Leave Authority is working with the CID to develop a Policy Filing Guidance Notice that will set forth the minimum requirements for an acceptable policy. It should be noted, however, that such Guidance is not anticipated to take the form of a claim administration manual.
Question	Decl of Insurance	e Is there a date by which the Declaration of Insurance must be submitted?		No
Question	Decl of Insurance	Are insurers being encouraged to submit the Declaration of Insurance filings now or should they wait until more information becomes available?		Insurers should make their own determinations as to when it makes sense for them to submit Declaration of Insurance filings.
Question	Decl of Insurance	If a company files a declaration of insurance, can they change their mind about entering the CT market once additional guidance information is released?		It is acceptable for a company to withdraw its declaration filing if it determines that it will not, after all, enter the CT market.

Question	denial/revocation	Please provide more info about denial/revocation process. We assume these procedures will include an opportunity for the employer or TPA or insurer to be heard, rectify any errors, and rehabilitate its plan and procedures if possible, before approval is withdrawn or denied.
Question	Employee vote	Provide more guidance about what employers must do to ensure that employees who are on leave are provided with the info/able to vote. Concerned that providing such info to employees will interfere with their leave (exp indv on Military leave) and that they may not have contact info for people who are on leave
Question	Employee vote	Is the Authority contemplating a template communication of how it expects employers to communicate with employees to provide information to inform them of the vote?
Question	Employee vote	Provide specific citations or references regarding "state and federal guidelines about disability and language accessibility"
Question	Employee vote	Employers need more info about what they must/can tell employees about the private plan. Can they tell the employees about using a TPA
Question	Employee vote	How can employer ensure that the votes are anonymous and also verifiable
Question	Employee vote	Will there be a time frame for voting - Once the voting is open is there only a certain amount of time it can last?
Question	Employee vote	Specify if voting would be one time or if there would be a reason that a vote would have to take place again.
Question	employee vote	The process set by the PFMLA states that an insurer is supposed to issue a CT PFML policy to an employer at least two weeks prior to the employee vote, even though private plan coverage can't be effective until a majority of employees have approved the private plan and the employer has obtained a finalized employer exemption. How can the insurer issue a Policy to the employer if the employer doesn't know yet know if the employees will approve such coverage?
Question	employee vote	Will the employee vote occur before the employer applies to opt out of the state plan?

The CT Paid Leave Authority may deny or revoke approval for a private plan if the CT Paid Leave Authority determines that the employer has threatened or coerced employees in connection with the private plan vote; failed to pay benefits; failed to pay benefits timely and in a manner consistent with the public plan; failed to maintain an adequate security deposit as required by the CID; misused private plan funds; failed to submit reports as required; submitted materially false infomration to the CT Paid Leave Authority; or failed to comply with sections 31-49e to 31-49t, inclusive of the Connecticut General Statutes or has directed its insurer or Third Party Administrator to engage in such actions. The CT Paid Leave Authority is developing specific denial and revocation procedures, which will include, at a minimum, notice and the opportunity to submit a response.

The CT Paid Leave Authority will not issue prescriptive requirements relating to employee communications. The CT Paid Leave Authority expects that employers will utilize the same methods they use when engaging in other mandated communications with employees, such as information about pensions, 401k and open enrollment.

The CT Paid Leave Authority will not issue prescriptive requirements relating to employee communications. The employer is responsible for ensuring that the information is accurate, complete and non-coercive.

Employers are expected to know and comply with existing state and federal laws, including but not limited to the Americans with Disabilities Act, the Rehabilitation Act and the Connecticut Fair Employment Practices Act, as well as any laws relating to language accessibility that already apply to them.

The CT Paid Leave Authority will not issue prescriptive requirements relating to employee communications. The employer is responsible for ensuring that the information is accurate, complete and non-coercive.

The CT Paid Leave Authority expects that the employer will be able to demonstrate that it provided all covered employees with information about the proposed plan and gave all covered employees the opportunity to vote. In recognition of the different sizes and circumstances of all the covered employers, the CT Paid Leave Authority will not mandate a specific voting methodology. A small employer may choose to have in-person votes with paper ballots. A large employer may choose to utilize an survey application. In all situations, the employer will need to describe the voting method, the number of employees in CT, and the ballot results.

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In order for the statutorily-required employee vote to be meaningful, the employees must have an opportunity to review the policy that the employer is offering as an alternative to the public program. We envision a process whereby insurance carriers develop insurance products that are approved by the CID and then are marketed to employers. The employer will select a product, provide its employers with the opportunity to review the selected product, including information about the costs of such product, hold the vote, apply for the exemption and then, if approved, notify the insurer, at which time the employer will purchase the policy.

The employee vote must take place before the employer files the application to opt out of the public plan. The obligation to remit contributions begins on January 1, 2021. If an employer does not have approval to utilize a private plan prior to that date, the employer must remit the employee contributions to the CT Paid Leave Authority from Jan 1, 2021 until it receives approval from the CT Paid Leave Authority to stop making such contributions.

Question	Rates	Claify what timing is expected for the filings.
Question	Rates	Will insurers have to file their proposed rates with their PFML product? If so, will CID establish guidelines for such rate submissions?
Question	Rates	Can you please confirm that the private plans are able to charge employers a higher rate than .5%, as long as the employees do not have to contribute more than they would have paid under the state plan?
Question	Registration	Define and specify what the industry code is that will be required to register on the portal.
Question	Self-funded plan	CID or the Authority should provide a template for what would be required of a self-funded plan
Question	Self-funded plan	Self insured plans need more info about requirements to demonstrate that the plan will be administered fairly and if a TPA is retained, what info about the TPA the authority would need to know. Would hiring a TPA be sufficient? Will the Authority establish a list of approved TPAs
Question	Self-funded plan	Self insured plans need more info about surety bond requirement - bond form and requirement regarding bond amounts
Question	self-funded plans	Is the Declaration of Insurance required for self-insureds?
Question	Solvency of Fund	Please provide very specific guidelines under which the Authority will deny an application on the basis of solvency so that an employer, TPA, and/or insurer can assess the advisability of designing and adopting a private plan. How will the Authority select among various private plans which it will deny under this provision? Can this happen in subsequent years after an initial approval, or even during a leave year?

An insurer can file a Declaration of Insurance at any time. Per the notice issued by the Connecticut Insurance Department, an insurer that files a Declaration of Insurance agrees to file a a paid family and medical leave insurance policy form filing within 60 days following the CID's issuance of a forthcoming Policy Filing Guidance Notice defining the contents of an acceptable paid family and medical leave insurance policy.

No, the insurers will not have to file their proposed rates with their PFML product; however, when an employer applies for approval to offer a private plan, the employer must demonstrate that the cost to the employees will not be greater than the contribution rate established by the Paid Leave Authority for participation in the public plan.

Yes, an insurer can charge employers a higher rate than the contribution rate established by the CT Paid Leave Authority (currently .5% of wages up to the Social Security contribution rate) as long as the employer can verify that it is not charging its employees more than the contribution rate established by the CT Paid Leave Authority.

When an employer registers on the CT Paid Leave Authority, it will be asked to provide its North American Industry Classification System (NAICS) code.

Self-funded plans should use the elements set forth in the CID notice regarding the Declaration of Insurance as their template.

The CT Paid Leave Authority is developing procedures detailing the factors it will consider in its analysis of whether an employer has demonstrated that it can administer claims in a sustainability and legally compliant manner. The CT Paid Leave Authority does not anticipate establishing a list of approved TPAs.

The surety bond must be in an amount equal to the estimated total yearly contributions that would otherwise be owed by the employees to the Fund.

No

The CT Paid Leave Authority will be able to provide more guidance relating to the solvency issue after it receives the final updated actuarial report. It is anticipated that the denial of a private plan application due to concerns about the solvency of the Fund will be an extraordinary measure, not a routine basis for evaluating applications.E12