How to file your own CT Paid Leave Appeal?

Employee Step 1:



Employee Step 2:

Access the CT Department of Labor (DOL) Portal using this <u>link</u>.

Use this <u>link</u> for filing a new CTPL Appeal, also found at the bottom of the CTDOL Portal as shown below.

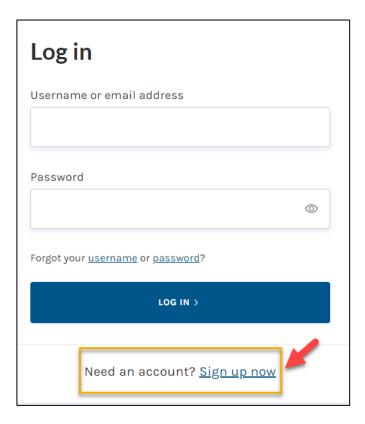
Clicking on this link will take you to a secure portal hosted by ct.gov.

- File a new CT Paid Leave appeal
- · Access an existing CT Paid Leave appeal
- · File a New Family & Medical Leave Complaint
- Access an Existing CT Family & Medical Leave Complaint



Employee Step 3:

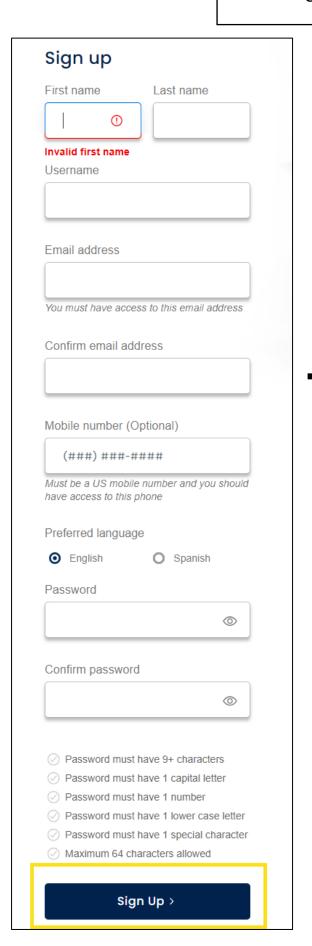
After accessing the link for filing a new CTPL Appeal, if this is your first CTPL Appeal, you must **FIRST** sign up for a new user account using this link as shown below.

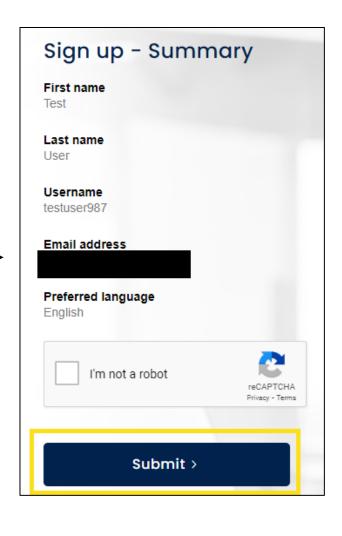


Employee Steps 4 and 5:

Complete the form to create a user account and click "Sign Up".

Review the information to confirm it is correct. If so, click on the CAPTCHA box and validate. Then click "Submit".





Employee Steps 6 and 7:

An eight-digit verification code will be sent to the email address used during the sign-up.

Locate the email from <u>do-not-reply-account@notifications.ct.gov</u>, put the code in on the verification page and click "Verify".

From: do-not-reply-account@notifications.ct.gov

Date: July 15, 2024 at 8:27:09 AM EDT

Subject: Your CT.gov Verification Code

GCT.GOV

Dear Test,

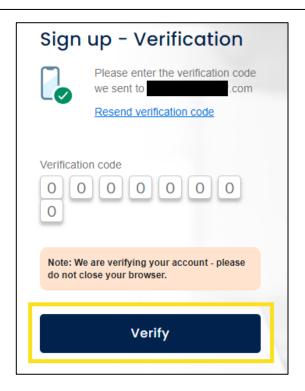
Please use the following Verification code to verify your email address with CT.gov, the official website of the State of Connecticut. The verification code will expire in 15 minutes.

Verification Code: 46403428

Thank you, State of Connecticut

Please do not reply to this email. This mailbox is unmonitored.

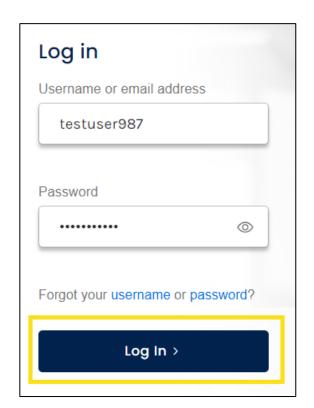


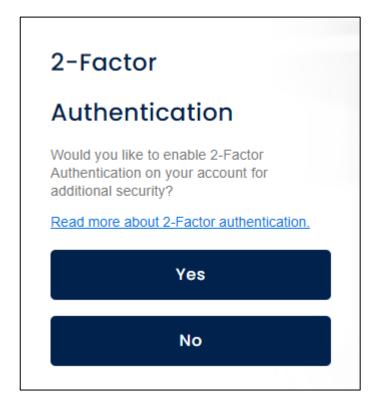


Employee Steps 8 and 9:

Once back at the log in page, enter your new credentials and click 'Log In' to sign onto the Portal.

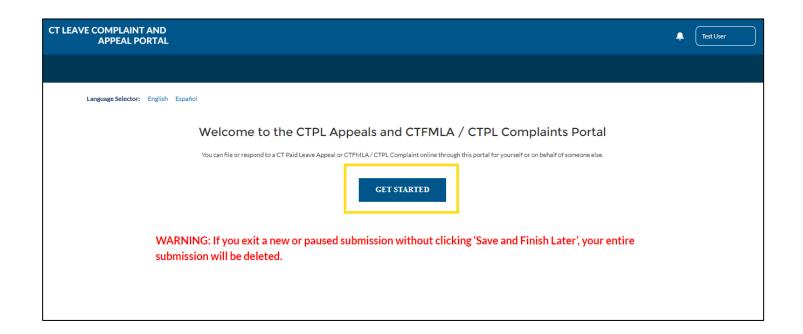
You will be asked if you want to enable 2-Factor Authentication. This is not required but it adds extra security to your account.





Employee Step 10:

Once you are signed in, click the 'Get Started' Button to start a new appeal submission process.



Continue the appeal submission process by selecting the following:

"I am an employee or employee's representative submitting a complaint or appeal"

"I want to file a CT Paid Leave Appeal due to a denial of compensation or assessment of a penalty by the CT Paid Leave Authority or private plan"

"I am filing an appeal for myself"

Select yes or no for whether you have an attorney.

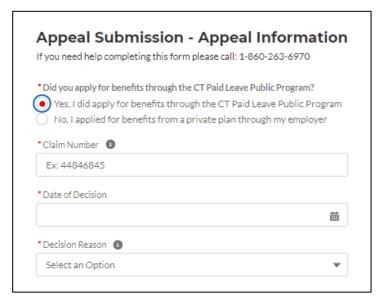
Click 'Next"

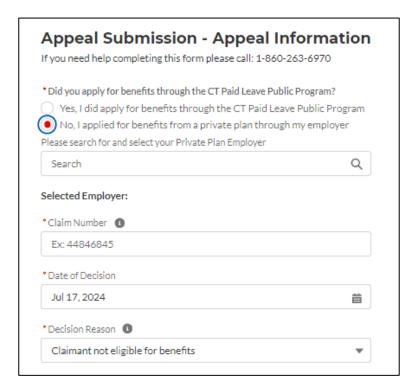
Employee Step 11:

Appeal and Complaint Submission Form		
CT Family and Medical Leave (CTFMLA) and CT Paid Leave (CTPL) are two separate laws to help eligible workers who need to take leave from their job to care for a family member with a serious health condition or for their own medical reasons. The CTFMLA provides eligible employees with job-protected leave through their employer. The CTPL provides eligible workers with income replacement during a leave through the CT Paid Leave Authority or private plan.		
1. Are you responding to a complaint or submitting a complaint/appeal?		
I am an employee or an employee's representative submitting a complaint or appeal		
2. What would you like to do?		
I want to file a CT Paid Leave Appeal due to a denial of compensation or the assessment of a penalty by the CT Paid Leave Authority or private plan I want to file a complaint against my employer for violating my CT Family and Medical Leave and/or CT Paid Leave rights		
3. For whom are you filing?		
I am filing an appeal for myself		
4 De veu have an atternavy supresenting you?		
4. Do you have an attorney representing you? Note: An attorney is not required to file an appeal or complaint.		
Yes		
Next		

Employee Step 12:

Select whether you applied for CTPL compensation through the Public Program or your employer's private plan and fill in the required information as indicated below.





Employee Step 13:

On the next screen fill in your SSN and telephone number.

Communications regarding your appeal are sent by email unless you opt out. If you opt out, you must provide a valid mailing address

Appellant Information		
Appellant Full Name		
Test User		
Email		
* Social Security Number (SSN)		
* Telephone Number		
Please note: critical and time sensi	itive communications will be sent to the email entered above. Please provide an email you have access to and can check regularly.	
If you will not have access to email	l:	
Opt out of email communicati	ons.	
* Mailing Address Line 1		
Mailing Address Line 2		
Mailing Address Line 3		
*City		
City		
*State		
*Zip Code		

Employee Step 14:

On the next screen you must provide details on the reason why you are filing this appeal and why you disagree with the decision that you are appealing.

Appeal Submission - Reason for Appeal		
Please use the space below to support your reasons for appealing the decision. Be specific about why you believe the decision was incorrect and what information supports your claim. If you want to attach documents supporting your appeal, you will be given instructions on how to do so after you submit this appeal form.		
Reason For Appeal		

Employee Step 15:

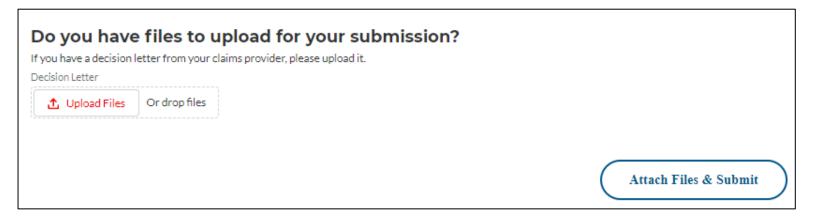
On the next screen confirm that the information you have provided is correct and if so click 'Submit'. If you want to change anything you can click the 'Back' button to get to the page you wish to change.

Submission Review - Review Your Information If you need to make any edits, please use the "Back" button at the bottom of the form to edit your information. You will be able to submit documentation on the next page. Telephone Number Plan Selected Private Plan Claim Number 123 Date of Decision 2024-07-17 Decision Reason Claimant not eligible for benefits By clicking "submit", I attest that the information I have provided in my submission is true and complete. Save and Finish Later Submit

Employee Step 16:

On the next screen you can upload files to include with your appeal. NOTE: You will be able to upload files after you submit your appeal.

Clicking 'Attach Files & Submit" will submit your appeal to CTDOL.

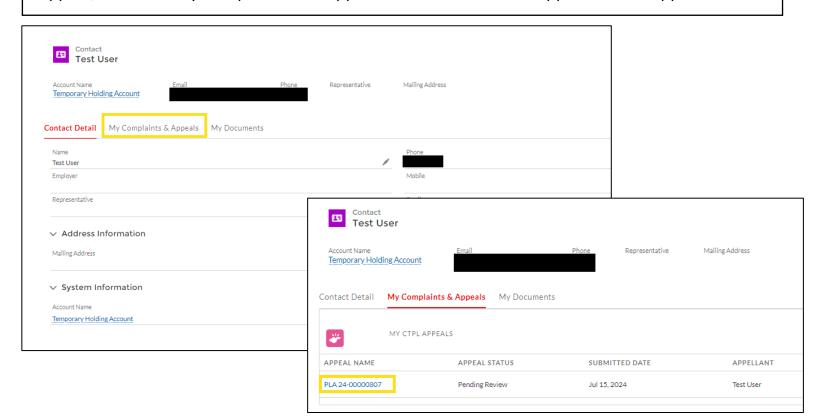


After submitting your appeal, you will receive a submission confirmation email if you did not opt out of email communications.

Please allow up to 5 minutes for the email confirmation to be sent and for your appeal to display on your account in the Portal.

If you opt out of email communications or do not receive an email confirmation within 5 minutes, please call the Appeals Division at (860) 263-6970 to confirm receipt of your appeal.

After submitting your appeal, you will be directed to your account homepage. To view your appeal, click the "My Complaints and Appeals" tab and select the appeal under "Appeal Name".



A copy of all documents and notices can be found in the "Documentation" tab.

To upload a new document after submitting your appeal, click "Add Files".

