

First Regular Session  
Seventy-first General Assembly  
STATE OF COLORADO

INTRODUCED

LLS NO. 17-0034.01 Yelana Love x2295

HOUSE BILL 17-1307

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HOUSE SPONSORSHIP

Winter,

SENATE SPONSORSHIP

(None),

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**House Committees**  
Business Affairs and Labor

**Senate Committees**

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A BILL FOR AN ACT

101 CONCERNING THE CREATION OF A FAMILY AND MEDICAL LEAVE  
102 INSURANCE PROGRAM.

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov/>.)*

The bill creates the family and medical leave insurance (FAMLI) program in the division of family and medical leave insurance (division) in the department of labor and employment (department) to provide partial wage-replacement benefits to an eligible individual who takes leave from work to care for a new child or a family member with a serious health condition or who is unable to work due to the individual's

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters indicate new material to be added to existing statute.*  
*Dashes through the words indicate deletions from existing statute.*

own serious health condition.

Each employee in the state will pay a premium determined by the director of the division by rule, which premium is based on a percentage of the employee's yearly wages and must not exceed .99%. The premiums are deposited into the family and medical leave insurance fund from which family and medical leave benefits are paid to eligible individuals. The director may also impose a solvency surcharge by rule if determined necessary to ensure the soundness of the fund. The division is established as an enterprise, and premiums paid into the fund are not considered state revenues for purposes of the taxpayer's bill of rights (TABOR).

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*Be it enacted by the General Assembly of the State of Colorado:*

**SECTION 1. Legislative declaration.** (1) The general assembly hereby finds and declares that:

- (a) Colorado is a family-friendly state;
- (b) Providing the workers of Colorado with family and medical leave insurance will encourage an entrepreneurial atmosphere, encourage economic growth, and promote a healthy business climate; and
- (c) The premiums collected under the "FAMLI Act" are used exclusively for the payment of family and medical leave benefits and the administration of the program.

**SECTION 2.** In Colorado Revised Statutes, **add** part 3 to article 13.3 of title 8 as follows:

PART 3

FAMILY AND MEDICAL LEAVE INSURANCE

**8-13.3-301. Short title.** THE SHORT TITLE OF THIS PART 3 IS THE "FAMILY AND MEDICAL LEAVE INSURANCE ACT" OR "FAMLI ACT".

**8-13.3-302. Definitions.** AS USED IN THIS PART 3, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "ANNUAL MEAN WAGE" MEANS THE ESTIMATED TOTAL ANNUAL WAGES OF ALL OCCUPATIONS IN COLORADO DIVIDED BY THE

1 OCCUPATIONS' ESTIMATED EMPLOYMENT, AS DETERMINED BY THE  
2 FEDERAL BUREAU OF LABOR STATISTICS IN THE UNITED STATES  
3 DEPARTMENT OF LABOR.

4 (2) "COLORADO PERSONAL INCOME" MEANS THE TOTAL PERSONAL  
5 INCOME FOR COLORADO, AS DEFINED AND OFFICIALLY REPORTED BY THE  
6 BUREAU OF ECONOMIC ANALYSIS IN THE UNITED STATES DEPARTMENT OF  
7 COMMERCE, OR ANY SUCCESSOR INDEX.

8 (3) "COVERED INDIVIDUAL" MEANS AN INDIVIDUAL WHO HAS BEEN  
9 EMPLOYED BY AND WORKED FOR ONE OR MORE EMPLOYERS FOR AT LEAST  
10 SIX HUNDRED EIGHTY HOURS, OR FIVE HUNDRED FOUR HOURS IN THE CASE  
11 OF AIRLINE FLIGHT CREW MEMBERS, DURING THE PERSON'S QUALIFYING  
12 YEAR.

13 (4) "DEPARTMENT" MEANS THE DEPARTMENT OF LABOR AND  
14 EMPLOYMENT.

15 (5) "DIRECTOR" MEANS THE DIRECTOR OF THE DIVISION.

16 (6) "DIVISION" MEANS THE DIVISION OF FAMILY AND MEDICAL  
17 LEAVE INSURANCE CREATED IN SECTION 8-13.3-303.

18 (7) "ELIGIBLE INDIVIDUAL" MEANS AN INDIVIDUAL WHO SATISFIES  
19 THE REQUIREMENTS OF SECTION 8-13.3-305 AND IS ELIGIBLE TO RECEIVE  
20 FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS;

21 (8) "EMPLOYEE" HAS THE SAME MEANING AS SET FORTH IN  
22 SECTION 8-4-101 (5).

23 (9) (a) "EMPLOYER" MEANS ANY PERSON ENGAGED IN COMMERCE  
24 OR AN INDUSTRY OR ACTIVITY AFFECTING COMMERCE THAT EMPLOYS AT  
25 LEAST ONE PERSON FOR EACH WORKING DAY DURING EACH OF TWENTY OR  
26 MORE CALENDAR WORKWEEKS IN THE CURRENT OR IMMEDIATELY  
27 PRECEDING CALENDAR YEAR.

1 (b) "EMPLOYER" INCLUDES:  
2 (I) A PERSON WHO ACTS, DIRECTLY OR INDIRECTLY, IN THE  
3 INTEREST OF AN EMPLOYER WITH REGARD TO ANY OF THE EMPLOYEES OF  
4 THE EMPLOYER;  
5 (II) A SUCCESSOR IN INTEREST OF AN EMPLOYER; AND  
6 (III) THE STATE OR A POLITICAL SUBDIVISION OF THE STATE.  
7 (10) "FAMILY AND MEDICAL LEAVE" MEANS LEAVE AUTHORIZED  
8 UNDER PART 2 OF THIS ARTICLE 13.3.  
9 (11) "FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS" OR  
10 "BENEFITS" MEANS THE BENEFITS PROVIDED UNDER THE PROGRAM.  
11 (12) "FAMILY MEMBER" MEANS AN EMPLOYEE'S IMMEDIATE  
12 FAMILY MEMBER, AS DEFINED IN SECTION 2-4-401 (3.7), AND UP TO ONE  
13 ADDITIONAL PERSON DESIGNATED ANNUALLY BY THE EMPLOYEE IN  
14 ACCORDANCE WITH SECTION 8-13.3-306.  
15 (13) "FMLA" MEANS THE FEDERAL "FAMILY AND MEDICAL LEAVE  
16 ACT OF 1993", PUB.L. 103-3, AS AMENDED, 29 U.S.C. SEC. 2601 ET SEQ.  
17 (14) "FMLA LEAVE" MEANS LEAVE FROM WORK AND ALL  
18 BENEFITS AUTHORIZED BY THE FMLA.  
19 (15) "HEALTH CARE PROVIDER" HAS THE SAME MEANING AS SET  
20 FORTH IN THE FMLA.  
21 (16) "PREMIUM" MEANS THE PAYMENTS AN INDIVIDUAL IS  
22 REQUIRED BY THIS PART 3 TO PAY TO THE DIVISION FOR THE PROGRAM.  
23 (17) "PROGRAM" MEANS THE FAMILY AND MEDICAL LEAVE  
24 INSURANCE PROGRAM ESTABLISHED PURSUANT TO THIS PART 3.  
25 (18) "QUALIFYING YEAR" MEANS THE FIRST FOUR OF THE LAST FIVE  
26 COMPLETED CALENDAR QUARTERS OR THE LAST FOUR COMPLETED  
27 CALENDAR QUARTERS IMMEDIATELY PRECEDING THE FIRST DAY OF A

1 COVERED INDIVIDUAL'S APPLICATION YEAR.

2 (19) "SERIOUS HEALTH CONDITION" MEANS AN ILLNESS, INJURY,  
3 IMPAIRMENT, OR PHYSICAL OR MENTAL CONDITION THAT INVOLVES:

4 (a) INPATIENT CARE IN A HOSPITAL, HOSPICE, OR RESIDENTIAL  
5 MEDICAL CARE FACILITY; OR

6 (b) CONTINUING TREATMENT BY A HEALTH CARE PROVIDER.

7 **8-13.3-303. Division of family and medical leave insurance -**  
8 **creation as an enterprise - authority to issue bonds.** (1) THERE IS  
9 HEREBY CREATED IN THE DEPARTMENT THE DIVISION OF FAMILY AND  
10 MEDICAL LEAVE INSURANCE, THE HEAD OF WHICH IS THE DIRECTOR OF THE  
11 DIVISION.

12 (2) (a) THE DIVISION CONSTITUTES AN ENTERPRISE FOR PURPOSES  
13 OF SECTION 20 OF ARTICLE X OF THE STATE CONSTITUTION, AS LONG AS  
14 THE DIVISION RETAINS AUTHORITY TO ISSUE REVENUE BONDS AND THE  
15 DIVISION RECEIVES LESS THAN TEN PERCENT OF ITS TOTAL ANNUAL  
16 REVENUES IN GRANTS, AS DEFINED IN SECTION 24-77-102 (7), FROM ALL  
17 COLORADO STATE AND LOCAL GOVERNMENTS COMBINED. FOR AS LONG AS  
18 IT CONSTITUTES AN ENTERPRISE PURSUANT TO THIS SECTION, THE DIVISION  
19 IS NOT SUBJECT TO SECTION 20 OF ARTICLE X OF THE STATE  
20 CONSTITUTION.

21 (b) THE ENTERPRISE ESTABLISHED PURSUANT TO THIS SUBSECTION  
22 (2) HAS ALL THE POWERS AND DUTIES AUTHORIZED BY THIS PART 3  
23 PERTAINING TO FAMILY AND MEDICAL LEAVE INSURANCE. THE FAMILY  
24 AND MEDICAL LEAVE INSURANCE FUND CREATED IN SECTION 8-13.3-309  
25 CONSTITUTES PART OF THE ENTERPRISE ESTABLISHED PURSUANT TO THIS  
26 SUBSECTION (2).

27 (c) NOTHING IN THIS SUBSECTION (2) LIMITS OR RESTRICTS THE

1 AUTHORITY OF THE DIVISION TO EXPEND ITS REVENUES CONSISTENT WITH  
2 THIS PART 3.

3 (d) THE DIVISION IS HEREBY AUTHORIZED TO ISSUE REVENUE  
4 BONDS FOR THE EXPENSES OF THE DIVISION, WHICH BONDS MAY BE  
5 SECURED BY ANY REVENUES OF THE DIVISION.

6 **8-13.3-304. Family and medical leave insurance program -**  
7 **creation - division duties - applicant duties - outreach and education**  
8 **- rules.** (1) (a) THE DIVISION SHALL ESTABLISH AND ADMINISTER A  
9 FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM AND PAY FAMILY AND  
10 MEDICAL LEAVE INSURANCE BENEFITS TO ELIGIBLE INDIVIDUALS AS  
11 SPECIFIED IN THIS PART 3.

12 (b) STARTING JULY 1, 2018, THE DIVISION SHALL ESTABLISH AND  
13 IMPLEMENT THE PROGRAM, INCLUDING SETTING PREMIUM AND SOLVENCY  
14 SURCHARGE AMOUNTS BY RULE.

15 (2) THE DIVISION SHALL ESTABLISH PROCEDURES AND FORMS FOR  
16 FILING CLAIMS FOR BENEFITS UNDER THE PROGRAM. THE DIVISION SHALL  
17 NOTIFY AN EMPLOYER WITHIN FIVE BUSINESS DAYS AFTER A COVERED  
18 INDIVIDUAL FILES A CLAIM FOR BENEFITS UNDER SECTION 8-13.3-305.

19 (3) THE DIVISION SHALL USE INFORMATION SHARING AND  
20 INTEGRATION TECHNOLOGY TO FACILITATE THE DISCLOSURE OF RELEVANT  
21 INFORMATION OR RECORDS PERTAINING TO A COVERED INDIVIDUAL IF THE  
22 COVERED INDIVIDUAL CONSENTS TO THE DISCLOSURE IN ACCORDANCE  
23 WITH THIS PART 3.

24 (4) INFORMATION CONTAINED IN THE FILES AND RECORDS  
25 PERTAINING TO A COVERED INDIVIDUAL UNDER THIS PART 3 ARE  
26 CONFIDENTIAL AND NOT OPEN TO PUBLIC INSPECTION; EXCEPT THAT A  
27 COVERED INDIVIDUAL OR A PERSON AUTHORIZED BY A COVERED

1 INDIVIDUAL, AS EVIDENCED BY A SIGNED AUTHORIZATION FROM THE  
2 COVERED INDIVIDUAL, MAY REVIEW THE RECORDS OR RECEIVE SPECIFIC  
3 INFORMATION FROM THE RECORDS. IN ADDITION, A PUBLIC EMPLOYEE MAY  
4 ACCESS AND USE THE INFORMATION IN THE PERFORMANCE OF THE PUBLIC  
5 EMPLOYEE'S OFFICIAL DUTIES.

6 (5) (a) BY JANUARY 1, 2019, AND FOR AS LONG AS THE FAMILY  
7 AND MEDICAL LEAVE INSURANCE PROGRAM CONTINUES, THE DIVISION  
8 SHALL DEVELOP AND IMPLEMENT AN OUTREACH PROGRAM TO EDUCATE  
9 THE PUBLIC ABOUT THE AVAILABILITY OF FAMILY AND MEDICAL LEAVE  
10 INSURANCE BENEFITS UNDER THIS PART 3 FOR COVERED INDIVIDUALS.

11 (b) THE DIVISION SHALL ENSURE THAT THE OUTREACH  
12 INFORMATION EXPLAINS, IN AN EASY-TO-UNDERSTAND FORMAT, AT LEAST  
13 THE FOLLOWING:

14 (I) ELIGIBILITY REQUIREMENTS;

15 (II) THE CLAIMS PROCESS;

16 (III) WEEKLY BENEFIT AMOUNTS AND MAXIMUM BENEFITS  
17 PAYABLE;

18 (IV) NOTICE AND MEDICAL CERTIFICATION REQUIREMENTS;

19 (V) REINSTATEMENT AND NONDISCRIMINATION RIGHTS;

20 (VI) CONFIDENTIALITY OF RECORDS;

21 (VII) THE RELATIONSHIP BETWEEN EMPLOYMENT PROTECTION,  
22 LEAVE FROM EMPLOYMENT, AND WAGE REPLACEMENT BENEFITS UNDER  
23 THIS PART 3 AND OTHER LAWS, COLLECTIVE BARGAINING AGREEMENTS,  
24 AND EMPLOYER POLICIES; AND

25 (VIII) ANY OTHER DETAILS OR INFORMATION ABOUT THE  
26 PROGRAM THE DIVISION DEEMS APPROPRIATE.

27 (c) THE DIVISION SHALL DEVELOP A PROGRAM NOTICE THAT

1 DETAILS THE PROGRAM REQUIREMENTS, BENEFITS, CLAIMS PROCESS,  
2 PAYROLL DEDUCTION REQUIREMENTS, AND OTHER PERTINENT PROGRAM  
3 INFORMATION. EACH EMPLOYER SHALL POST THE PROGRAM NOTICE IN A  
4 PROMINENT LOCATION IN THE WORKPLACE AND NOTIFY ITS EMPLOYEES OF  
5 THE PROGRAM, IN WRITING, UPON HIRING AND UPON LEARNING OF AN  
6 EMPLOYEE EXPERIENCING A QUALIFYING EVENT.

7 (d) THE DIVISION SHALL PROVIDE THE INFORMATION REQUIRED BY  
8 THIS SUBSECTION (5) IN A MANNER THAT IS CULTURALLY COMPETENT AND  
9 LINGUISTICALLY APPROPRIATE.

10 (e) THE DIVISION MAY, ON ITS OWN OR THROUGH A CONTRACT  
11 WITH AN OUTSIDE VENDOR, USE A PORTION OF THE MONEY IN THE FAMILY  
12 AND MEDICAL LEAVE INSURANCE FUND TO DEVELOP, IMPLEMENT, AND  
13 ADMINISTER THE OUTREACH PROGRAM.

14 **8-13.3-305. Family and medical leave insurance benefits -**  
15 **application - eligibility.** (1) BEGINNING JANUARY 1, 2020, FAMILY AND  
16 MEDICAL LEAVE INSURANCE BENEFITS ARE PAYABLE TO AN INDIVIDUAL  
17 WHO:

18 (a) (I) HAS A SERIOUS HEALTH CONDITION;

19 (II) IS CARING FOR HIS OR HER NEW CHILD DURING THE FIRST YEAR  
20 AFTER THE BIRTH OR ADOPTION OF THE CHILD OR THE PLACEMENT OF THE  
21 CHILD THROUGH FOSTER CARE;

22 (III) IS CARING FOR A FAMILY MEMBER WHO HAS A SERIOUS  
23 HEALTH CONDITION;

24 (IV) IS TAKING ANY OTHER LEAVE FROM WORK AUTHORIZED BY  
25 THE FMLA; OR

26 (V) IS TAKING LEAVE FOR A QUALIFYING EXIGENCY RELATED TO  
27 A FAMILY MEMBER'S MILITARY SERVICE IN ACCORDANCE WITH 29 U.S.C.



1 SEC. 2612 (a)(1)(E);  
2 (b) FILES A CLAIM FOR BENEFITS IN A FORM AND MANNER  
3 REQUIRED BY THE DIRECTOR BY RULE;  
4 (c) IS A COVERED INDIVIDUAL;  
5 (d) CONSENTS TO THE DISCLOSURE OF INFORMATION OR RECORDS  
6 DEEMED CONFIDENTIAL UNDER STATE LAW PURSUANT TO SECTION  
7 8-13.3-304 (4); AND  
8 (e) IF CURRENTLY EMPLOYED, ATTESTS, IN THE APPLICATION FOR  
9 FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS, THAT THE INDIVIDUAL  
10 NOTIFIED HIS OR HER EMPLOYER IN WRITING OF THE INTENT TO TAKE  
11 LEAVE FROM WORK FOR ONE OF THE PURPOSES SPECIFIED IN SUBSECTION  
12 (1)(a) OF THIS SECTION.  
13 (2) IN ADDITION TO THE REQUIREMENTS OF SUBSECTION (1) OF THIS  
14 SECTION, THE DIVISION MAY REQUIRE A COVERED INDIVIDUAL WHO  
15 APPLIES FOR BENEFITS TO:  
16 (a) ATTEST THAT THE COVERED INDIVIDUAL:  
17 (I) (A) BECAUSE OF A BIRTH, ADOPTION, OR PLACEMENT THROUGH  
18 FOSTER CARE, IS CARING FOR A NEW CHILD DURING THE FIRST YEAR AFTER  
19 BIRTH, ADOPTION, OR PLACEMENT OF THE CHILD;  
20 (B) IS CARING FOR A FAMILY MEMBER WHO HAS A SERIOUS HEALTH  
21 CONDITION; OR  
22 (C) HAS A SERIOUS HEALTH CONDITION;  
23 (II) IS NOT RECEIVING UNEMPLOYMENT INSURANCE BENEFITS OR  
24 BENEFITS UNDER A DISABILITY INSURANCE POLICY IN AN AMOUNT THAT,  
25 IF COMBINED WITH THE BENEFITS AVAILABLE TO THE INDIVIDUAL UNDER  
26 THE PROGRAM, WOULD EXCEED THE INDIVIDUAL'S WAGES, AS DETERMINED  
27 BY THE DIVISION; AND

1 (b) SUBMIT A CERTIFICATION FROM THE HEALTH CARE PROVIDER  
2 PROVIDING HEALTH CARE TO THE COVERED INDIVIDUAL OR THE COVERED  
3 INDIVIDUAL'S FAMILY MEMBER, AS APPLICABLE, SUPPORTING THE CLAIM  
4 THAT THE COVERED INDIVIDUAL OR THE COVERED INDIVIDUAL'S FAMILY  
5 MEMBER HAS A SERIOUS HEALTH CONDITION.

6 (3) A COVERED INDIVIDUAL WHO MEETS THE REQUIREMENTS OF  
7 SUBSECTION (2)(a)(I) OF THIS SECTION IS ELIGIBLE FOR FAMILY AND  
8 MEDICAL LEAVE INSURANCE BENEFITS REGARDLESS OF WHETHER THE  
9 COVERED INDIVIDUAL IS CURRENTLY EMPLOYED OR IS WORKING AT AN  
10 ADDITIONAL JOB WHILE TAKING FAMILY AND MEDICAL LEAVE.

11 (4) IF THE DIVISION DENIES A CLAIM FOR BENEFITS SUBMITTED  
12 PURSUANT TO THIS SECTION, THE COVERED INDIVIDUAL MAY APPEAL THAT  
13 DECISION IN THE MANNER SPECIFIED IN ARTICLE 74 OF THIS TITLE 8.

14 **8-13.3-306. Designation of a designated person.** AN EMPLOYER  
15 MAY ESTABLISH A UNIFORM PROCESS FOR EMPLOYEES TO SELECT A  
16 DESIGNATED PERSON WITHIN THIRTY DAYS OF THE EMPLOYEE'S DATE OF  
17 HIRE. THEREAFTER, THE EMPLOYER MUST PERMIT THE EMPLOYEE TO MAKE  
18 OR CHANGE THE DESIGNATION ON AN ANNUAL BASIS. IF AN EMPLOYER  
19 ESTABLISHED A UNIFORM PROCESS, THE COVERED EMPLOYEE MUST MAKE  
20 THE DESIGNATION IN ACCORDANCE WITH THE EMPLOYER'S PROCESS. IF AN  
21 EMPLOYER DOES NOT ESTABLISH A UNIFORM PROCESS, THE EMPLOYEE MAY  
22 MAKE A DESIGNATION WHEN FILING A CLAIM FOR BENEFITS.

23 **8-13.3-307. Duration of benefits - payment intervals.** (1) THE  
24 MAXIMUM NUMBER OF WEEKS DURING WHICH FAMILY AND MEDICAL  
25 LEAVE INSURANCE BENEFITS ARE PAYABLE TO AN ELIGIBLE INDIVIDUAL IN  
26 ANY CONSECUTIVE FIFTY-TWO-WEEK PERIOD IS TWELVE WEEKS.

27 (2) FAILURE TO FILE AN APPLICATION FOR BENEFITS, FURNISH

1 NOTICE TO AN EMPLOYER, OR SUBMIT CERTIFICATION FROM A HEALTH  
2 CARE PROVIDER IN THE MANNER SPECIFIED IN SECTION 8-13.3-305 DOES  
3 NOT INVALIDATE A CLAIM FOR BENEFITS OR AN INDIVIDUAL'S ELIGIBILITY  
4 FOR BENEFITS, BUT THE DIVISION IS NOT REQUIRED TO PAY BENEFITS FOR  
5 A PERIOD OF MORE THAN TWO WEEKS PRIOR TO THE DATE ON WHICH THE  
6 INDIVIDUAL FILES THE REQUIRED APPLICATION, FURNISHES NOTICE TO HIS  
7 OR HER EMPLOYER, AND SUBMITS THE CERTIFICATION FROM THE HEALTH  
8 CARE PROVIDER UNLESS THE INDIVIDUAL DEMONSTRATES TO THE  
9 SATISFACTION OF THE DIVISION THAT IT WAS NOT REASONABLY POSSIBLE  
10 TO SUBMIT THE APPLICATION OR CERTIFICATION OR FURNISH THE NOTICE  
11 TO HIS OR HER EMPLOYER, AND THAT THE INDIVIDUAL SUBMITTED THE  
12 APPLICATION AND CERTIFICATION, AND NOTIFIED HIS OR HER EMPLOYER,  
13 AS SOON AS WAS POSSIBLE.

14 (3) THE DIVISION SHALL MAKE THE FIRST PAYMENT OF BENEFITS  
15 TO AN ELIGIBLE INDIVIDUAL WITHIN TWO WEEKS AFTER THE INDIVIDUAL  
16 FILES THE CLAIM FOR BENEFITS AND SHALL MAKE SUBSEQUENT PAYMENTS  
17 BIWEEKLY.

18 **8-13.3-308. Amount of benefits - maximum weekly benefit.**

19 (1) (a) THE DIVISION SHALL DETERMINE THE WEEKLY BENEFIT AMOUNT,  
20 SUBJECT TO SUBSECTION (1)(b) OF THIS SECTION, AS FOLLOWS:

21 (I) FOR AN ELIGIBLE INDIVIDUAL WHOSE YEARLY EARNINGS ARE  
22 NOT MORE THAN TWENTY PERCENT OF THE ANNUAL MEAN WAGE, THE  
23 DIVISION SHALL PAY WEEKLY BENEFITS IN AN AMOUNT EQUAL TO  
24 NINETY-FIVE PERCENT OF THE ELIGIBLE INDIVIDUAL'S WEEKLY WAGE;

25 (II) FOR AN ELIGIBLE INDIVIDUAL WHOSE YEARLY EARNINGS ARE  
26 MORE THAN TWENTY PERCENT BUT NOT MORE THAN THIRTY PERCENT OF  
27 THE ANNUAL MEAN WAGE, THE DIVISION SHALL PAY WEEKLY BENEFITS IN

1 AN AMOUNT EQUAL TO NINETY PERCENT OF THE ELIGIBLE INDIVIDUAL'S  
2 WEEKLY WAGE;

3 (III) FOR AN ELIGIBLE INDIVIDUAL WHOSE YEARLY EARNINGS ARE  
4 MORE THAN THIRTY PERCENT BUT NOT MORE THAN FIFTY PERCENT OF THE  
5 ANNUAL MEAN WAGE, THE DIVISION SHALL PAY WEEKLY BENEFITS IN AN  
6 AMOUNT EQUAL TO EIGHTY-FIVE PERCENT OF THE ELIGIBLE INDIVIDUAL'S  
7 WEEKLY WAGE;

8 (IV) FOR AN ELIGIBLE INDIVIDUAL WHOSE YEARLY EARNINGS ARE  
9 MORE THAN FIFTY PERCENT OF THE ANNUAL MEAN WAGE, THE DIVISION  
10 SHALL PAY WEEKLY BENEFITS IN AN AMOUNT EQUAL TO SIXTY-SIX  
11 PERCENT OF THE ELIGIBLE INDIVIDUAL'S WEEKLY WAGE.

12 (b) THE MAXIMUM WEEKLY BENEFIT AMOUNT DETERMINED UNDER  
13 SUBSECTION (1)(a) OF THIS SECTION MUST NOT EXCEED ONE THOUSAND  
14 DOLLARS PER WEEK. STARTING JANUARY 1, 2020, THE DIVISION SHALL  
15 ANNUALLY ADJUST THE MAXIMUM WEEKLY BENEFIT AMOUNT TO REFLECT  
16 THE RECENT AVERAGE CHANGE IN COLORADO PERSONAL INCOME. THE  
17 RECENT AVERAGE CHANGE IN COLORADO PERSONAL INCOME FOR A FISCAL  
18 YEAR IS EQUAL TO THE AVERAGE PERCENTAGE CHANGE IN COLORADO  
19 PERSONAL INCOME FROM ONE CALENDAR YEAR TO THE NEXT FOR THE SIX  
20 PRIOR CALENDAR YEARS, WHICH PERIOD ENDS WITH THE MOST RECENTLY  
21 COMPLETED CALENDAR YEAR PRIOR TO THE FISCAL YEAR. FOR THE  
22 PURPOSE OF DETERMINING THE AVERAGE RECENT INCREASE IN COLORADO  
23 PERSONAL INCOME THAT APPLIES FOR A FISCAL YEAR, THE ESTIMATES OF  
24 COLORADO PERSONAL INCOME FOR THE APPLICABLE CALENDAR YEARS  
25 ARE THOSE AVAILABLE AS OF THE FIRST DAY OF THE FISCAL YEAR.

26 (c) THE DIVISION SHALL CALCULATE AN ELIGIBLE INDIVIDUAL'S  
27 WEEKLY BENEFIT AMOUNT BASED ON THE ELIGIBLE INDIVIDUAL'S WEEKLY

1 WAGE EARNED FROM THE JOB FROM WHICH THE ELIGIBLE INDIVIDUAL IS  
2 TAKING FAMILY AND MEDICAL LEAVE. IF THE ELIGIBLE INDIVIDUAL IS ABLE  
3 TO CONTINUE WORKING AT A SECOND JOB WHILE TAKING FAMILY AND  
4 MEDICAL LEAVE, THE DIVISION SHALL NOT CONSIDER THE ELIGIBLE  
5 INDIVIDUAL'S WEEKLY WAGE EARNED FROM THE SECOND JOB WHEN  
6 CALCULATING THE ELIGIBLE INDIVIDUAL'S WEEKLY BENEFIT AMOUNT.

7 (2) BENEFITS ARE NOT PAYABLE FOR LESS THAN ONE DAY OR EIGHT  
8 CONSECUTIVE HOURS OF FAMILY AND MEDICAL LEAVE TAKEN IN ONE  
9 WORKWEEK.

10 **8-13.3-309. Family and medical leave insurance fund -**  
11 **creation - employee premiums.** (1) (a) THERE IS HEREBY CREATED IN  
12 THE STATE TREASURY THE FAMILY AND MEDICAL LEAVE INSURANCE FUND,  
13 REFERRED TO IN THIS SECTION AS THE "FUND". MONEY IN THE FUND MAY  
14 BE USED ONLY TO PAY REVENUE BONDS ISSUED IN ACCORDANCE WITH  
15 SECTION 8-13.3-303 (2)(d) AND TO PAY BENEFITS UNDER, AND TO  
16 ADMINISTER, THE FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM  
17 PURSUANT TO THIS PART 3, INCLUDING THE OUTREACH PROGRAM  
18 DEVELOPED UNDER SECTION 8-13.3-304 (5). INTEREST EARNED ON THE  
19 INVESTMENT OF MONEY IN THE FUND REMAINS IN THE FUND. ANY MONEY  
20 REMAINING IN THE FUND AT THE END OF A FISCAL YEAR REMAINS IN THE  
21 FUND AND DOES NOT REVERT TO THE GENERAL FUND OR ANY OTHER FUND.

22 (b) THE DIVISION MAY SEEK AND ACCEPT GIFTS, GRANTS, AND  
23 DONATIONS, INCLUDING PROGRAM-RELATED INVESTMENTS AND  
24 COMMUNITY REINVESTMENT FUNDS, TO FINANCE THE COSTS OF SETTING  
25 UP THE PROGRAM. THE DIVISION SHALL TRANSMIT ANY GIFTS, GRANTS,  
26 AND DONATIONS IT RECEIVES TO THE STATE TREASURER FOR DEPOSIT IN  
27 THE FUND.

1           (2) (a) (I) ON AND AFTER JULY 1, 2019, EVERY INDIVIDUAL  
2 EMPLOYED BY AN EMPLOYER IN THIS STATE SHALL PAY A PREMIUM IN AN  
3 AMOUNT DETERMINED BY THE DIRECTOR BY RULE IN ACCORDANCE WITH  
4 THIS SUBSECTION (2)(a).

5           (II) THE DIRECTOR, BY RULE, SHALL:

6           (A) SET THE PREMIUM AMOUNT BASED ON A PERCENTAGE OF  
7 TOTAL ANNUAL TAXABLE WAGES, NOT TO EXCEED NINETY-NINE  
8 ONE-HUNDREDTHS OF ONE PERCENT; AND

9           (B) ESTABLISH A MAXIMUM ANNUAL PREMIUM.

10          (III) THE DIRECTOR MAY ADJUST PREMIUM AMOUNTS ANNUALLY,  
11 BY RULE, TO ENSURE THE ACTUARIAL SOUNDNESS OF THE FUND AND AVOID  
12 AN EXCESSIVE FUND BALANCE.

13          (b) EACH EMPLOYER SHALL COLLECT THE PREMIUM AMOUNT FROM  
14 EACH EMPLOYEE AS A PAYROLL DEDUCTION FROM THE EMPLOYEE'S WAGES  
15 EACH PAYROLL PERIOD AND SHALL REMIT THE PREMIUM AMOUNT TO THE  
16 DIVISION, WHICH SHALL TRANSMIT THE PREMIUMS TO THE STATE  
17 TREASURER FOR DEPOSIT IN THE FUND.

18          (3) ON AND AFTER JANUARY 1, 2020, IF THE DIRECTOR  
19 DETERMINES THAT A SOLVENCY SURCHARGE IS REQUIRED TO ENSURE THE  
20 SOLVENCY OF THE FUND, THE DIRECTOR, BY RULE, MAY ESTABLISH A  
21 SOLVENCY SURCHARGE THAT EVERY INDIVIDUAL EMPLOYED BY AN  
22 EMPLOYER IN THIS STATE SHALL PAY THROUGH A PAYROLL DEDUCTION IN  
23 THE MANNER SPECIFIED IN SUBSECTION (2)(b) OF THIS SECTION.

24           **8-13.3-310. Employment protection - discrimination**  
25 **prohibited.** (1) (a) AN ELIGIBLE INDIVIDUAL WHO WAS EMPLOYED BY AN  
26 EMPLOYER FOR THIRTY DAYS OR LONGER AND WHO TAKES LEAVE UNDER  
27 THIS PART 3 FOR THE INTENDED PURPOSE OF THE LEAVE IS ENTITLED, ON

1 RETURN FROM SUCH LEAVE:

2 (I) TO BE RESTORED BY THE EMPLOYER TO THE POSITION OF  
3 EMPLOYMENT HELD BY THE ELIGIBLE INDIVIDUAL WHEN THE LEAVE  
4 COMMENCED; OR

5 (II) TO BE RESTORED TO AN EQUIVALENT POSITION WITH  
6 EQUIVALENT EMPLOYMENT BENEFITS, PAY, AND OTHER TERMS AND  
7 CONDITIONS OF EMPLOYMENT.

8 (b) THIS SECTION DOES NOT APPLY TO SEASONAL WORKERS, AS  
9 DEFINED IN SECTION 8-73-106.

10 (2) AN EMPLOYER SHALL NOT DISCHARGE, DEMOTE, OR OTHERWISE  
11 DISCRIMINATE OR TAKE AN ADVERSE EMPLOYMENT ACTION AGAINST AN  
12 INDIVIDUAL BECAUSE HE OR SHE:

13 (a) FILED FOR, APPLIED FOR, OR USED BENEFITS UNDER THIS PART  
14 3;

15 (b) COMMUNICATED TO THE EMPLOYER AN INTENT TO FILE A  
16 CLAIM FOR BENEFITS, A COMPLAINT, OR AN APPEAL;

17 (c) TESTIFIED, AGREED TO TESTIFY, OR OTHERWISE ASSISTED IN  
18 ANY PROCEEDING UNDER THIS PART 3; OR

19 (d) TOOK, OR ATTEMPTED TO TAKE, LEAVE UNDER THIS PART 3.

20 (3) AN EMPLOYER SHALL NOT REDUCE AN ELIGIBLE INDIVIDUAL'S  
21 PREVIOUSLY ACCRUED BENEFITS THAT HAVE ACCRUED PRIOR TO THE DATE  
22 ON WHICH THE LEAVE COMMENCED.

23 (4) DURING ANY PERIOD OF FAMILY AND MEDICAL LEAVE TAKEN  
24 UNDER THIS PART 3, AN EMPLOYER SHALL MAINTAIN ANY EXISTING  
25 HEALTH BENEFITS OF THE ELIGIBLE INDIVIDUAL FOR THE DURATION OF  
26 SUCH LEAVE AS IF THE ELIGIBLE INDIVIDUAL CONTINUED TO WORK FROM  
27 THE DATE THE ELIGIBLE INDIVIDUAL COMMENCED FAMILY AND MEDICAL

1 LEAVE.

2 (5) (a) THE DIRECTOR SHALL ESTABLISH A FINE STRUCTURE FOR  
3 EMPLOYERS WHO VIOLATE THIS SECTION. THE DIRECTOR SHALL TRANSFER  
4 ANY FINES COLLECTED PURSUANT TO THIS SECTION TO THE STATE  
5 TREASURER FOR DEPOSIT IN THE FAMILY AND MEDICAL LEAVE INSURANCE  
6 FUND CREATED IN SECTION 8-13.3-309 (1).

7 (b) AN EMPLOYER WHO VIOLATES THIS SECTION IS SUBJECT TO THE  
8 DAMAGES AND EQUITABLE RELIEF AVAILABLE UNDER 29 U.S.C. SEC. 2617  
9 (a)(1). AN AGGRIEVED EMPLOYEE MAY BRING AN ACTION IN COURT  
10 AGAINST THE EMPLOYER.

11 **8-13.3-311. Coordination of benefits.** (1) (a) LEAVE TAKEN  
12 UNDER THIS PART 3 RUNS CONCURRENTLY WITH ANY LEAVE TAKEN UNDER  
13 THE FMLA OR PART 2 OF THIS ARTICLE 13.3. IF A PERIOD OF FAMILY AND  
14 MEDICAL LEAVE INSURANCE BENEFITS RECEIVED BY AN ELIGIBLE  
15 EMPLOYEE UNDER THIS PART 3 IS CONCURRENTLY DESIGNATED AS LEAVE  
16 PURSUANT TO THE FMLA, THE EMPLOYER SHALL NOTIFY THE ELIGIBLE  
17 EMPLOYEE OF SUCH DESIGNATION AND SHALL ALSO PROVIDE THE  
18 EMPLOYEE WITH THE NOTICE REQUIRED UNDER 29 CFR 825.301 AND  
19 825.305.

20 (b) AN EMPLOYER MAY REQUIRE THAT PAYMENT MADE OR LEAVE  
21 TAKEN UNDER THIS PART 3 BE MADE OR TAKEN CONCURRENTLY OR  
22 OTHERWISE COORDINATED WITH PAYMENT MADE OR LEAVE ALLOWED  
23 UNDER THE TERMS OF DISABILITY OR FAMILY CARE LEAVE UNDER A  
24 COLLECTIVE BARGAINING AGREEMENT OR EMPLOYER POLICY, AS  
25 APPLICABLE. THE EMPLOYER SHALL GIVE ITS EMPLOYEES WRITTEN NOTICE  
26 OF THIS REQUIREMENT.

27 (c) NOTWITHSTANDING SUBSECTIONS (1)(a) AND (1)(b) OF THIS



1 SECTION, AN EMPLOYER SHALL NOT REQUIRE AN EMPLOYEE TO USE TIME  
2 OFF UNDER AN EMPLOYER POLICY, INCLUDING BUT NOT LIMITED TO PAID  
3 TIME OFF, VACATION TIME, OR SICK TIME, PRIOR TO USE OF FAMILY AND  
4 MEDICAL LEAVE UNDER THIS PART 3. IN ADDITION, AN EMPLOYER SHALL  
5 NOT REQUIRE AN EMPLOYEE TO CHARGE ALL OR PART OF THE EMPLOYEE'S  
6 FAMILY AND MEDICAL LEAVE UNDER THIS PART 3 TO UNUSED ACCRUALS  
7 OR OTHER PAID TIME OFF, INCLUDING BUT NOT LIMITED TO VACATION TIME  
8 AND SICK TIME, EXCEPT WHERE THE EMPLOYER MAINTAINS A SEPARATE  
9 BANK OF PAID TIME SOLELY FOR THE PURPOSE OF PAID FAMILY AND  
10 MEDICAL LEAVE UNDER THIS PART 3.

11 (2) (a) THIS PART 3 DOES NOT DIMINISH AN EMPLOYER'S  
12 OBLIGATION TO COMPLY WITH A COLLECTIVE BARGAINING AGREEMENT OR  
13 EMPLOYER POLICY, AS APPLICABLE, THAT PROVIDES GREATER LEAVE THAN  
14 FMLA LEAVE OR LEAVE PERMITTED UNDER PART 2 OF THIS ARTICLE 13.3.

15 (b) AFTER THE EFFECTIVE DATE OF THIS PART 3, A COLLECTIVE  
16 BARGAINING AGREEMENT ENTERED INTO OR RENEWED OR AN EMPLOYER  
17 POLICY ADOPTED OR RETAINED MUST NOT DIMINISH AN INDIVIDUAL'S  
18 RIGHT TO BENEFITS UNDER THIS PART 3. ANY AGREEMENT BY AN  
19 INDIVIDUAL TO WAIVE HIS OR HER RIGHTS UNDER THIS PART 3 IS VOID AS  
20 AGAINST PUBLIC POLICY.

21 **8-13.3-312. Erroneous payments - disqualification for benefits.**

22 (1) A COVERED INDIVIDUAL IS DISQUALIFIED FROM FAMILY AND MEDICAL  
23 LEAVE INSURANCE BENEFITS FOR ONE YEAR IF THE INDIVIDUAL, IN  
24 CONNECTION WITH AN APPLICATION FOR BENEFITS UNDER THE PROGRAM,  
25 WILLFULLY MAKES A FALSE STATEMENT OR MISREPRESENTATION  
26 REGARDING A MATERIAL FACT OR WILLFULLY FAILS TO REPORT A  
27 MATERIAL FACT.

1           (2) IF FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS ARE PAID  
2           ERRONEOUSLY OR AS A RESULT OF WILLFUL MISREPRESENTATION, OR IF A  
3           CLAIM FOR FAMILY AND MEDICAL LEAVE BENEFITS IS REJECTED AFTER  
4           BENEFITS ARE PAID, THE DIVISION MAY SEEK REPAYMENT OF BENEFITS  
5           FROM THE RECIPIENT. THE DIRECTOR SHALL EXERCISE HIS OR HER  
6           DISCRETION TO WAIVE, IN WHOLE OR IN PART, THE AMOUNT OF ANY  
7           REPAYMENTS WHERE THE RECOVERY WOULD BE AGAINST EQUITY AND  
8           GOOD CONSCIENCE. THE DIRECTOR MAY ADOPT RULES TO DEVELOP A  
9           PROCEDURE FOR RECOVERING ERRONEOUS PAYMENTS OF BENEFITS.

10           **8-13.3-313. Elective coverage - withdrawal from coverage -**  
11           **rules.** (1) A SELF-EMPLOYED PERSON, INCLUDING A SOLE PROPRIETOR,  
12           PARTNER, OR JOINT VENTURER, MAY ELECT COVERAGE UNDER THE  
13           PROGRAM FOR AN INITIAL PERIOD OF NOT LESS THAN THREE YEARS OR A  
14           SUBSEQUENT PERIOD OF NOT LESS THAN ONE YEAR IMMEDIATELY  
15           FOLLOWING ANOTHER PERIOD OF COVERAGE. THE SELF-EMPLOYED PERSON  
16           MUST FILE A NOTICE OF ELECTION IN WRITING WITH THE DIRECTOR, AS  
17           REQUIRED BY THE DIVISION. THE ELECTION BECOMES EFFECTIVE ON THE  
18           DATE THE NOTICE IS FILED.

19           (2) A SELF-EMPLOYED PERSON WHO HAS ELECTED COVERAGE MAY  
20           WITHDRAW FROM COVERAGE BY FILING WRITTEN NOTICE WITH THE  
21           DIRECTOR WITHIN THIRTY DAYS AFTER THE END OF THE THREE-YEAR  
22           PERIOD OF COVERAGE OR AT OTHER TIMES THE DIRECTOR MAY PRESCRIBE  
23           BY RULE. THE WITHDRAWAL FROM COVERAGE TAKES EFFECT NO SOONER  
24           THAN THIRTY DAYS AFTER THE SELF-EMPLOYED PERSON FILES THE NOTICE.

25           **8-13.3-314. Federal income tax - state income tax.** (1) (a) IF  
26           THE FEDERAL INTERNAL REVENUE SERVICE DETERMINES THAT FAMILY AND  
27           MEDICAL LEAVE INSURANCE BENEFITS UNDER THIS PART 3 ARE SUBJECT TO

1 FEDERAL INCOME TAX, THE DIVISION SHALL INFORM AN INDIVIDUAL FILING  
2 A NEW CLAIM FOR FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS, AT  
3 THE TIME OF FILING, THAT:

4 (I) THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT  
5 BENEFITS ARE SUBJECT TO FEDERAL INCOME TAX;

6 (II) REQUIREMENTS EXIST PERTAINING TO ESTIMATED TAX  
7 PAYMENTS;

8 (III) THE INDIVIDUAL MAY ELECT TO HAVE FEDERAL INCOME TAX  
9 DEDUCTED AND WITHHELD FROM THE INDIVIDUAL'S PAYMENT OF BENEFITS  
10 IN THE AMOUNT SPECIFIED IN THE FEDERAL INTERNAL REVENUE CODE; AND

11 (IV) THE INDIVIDUAL IS PERMITTED TO CHANGE A PREVIOUSLY  
12 ELECTED WITHHOLDING STATUS.

13 (b) AMOUNTS DEDUCTED AND WITHHELD FROM BENEFITS UNDER  
14 THIS SECTION MUST REMAIN IN THE FAMILY AND MEDICAL LEAVE  
15 INSURANCE FUND UNTIL TRANSFERRED TO THE FEDERAL TAXING  
16 AUTHORITY AS A PAYMENT OF INCOME TAX.

17 (c) THE DIRECTOR SHALL FOLLOW ALL PROCEDURES SPECIFIED BY  
18 THE FEDERAL INTERNAL REVENUE SERVICE PERTAINING TO DEDUCTING  
19 AND WITHHOLDING INCOME TAX.

20 (2) FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS RECEIVED  
21 PURSUANT TO THIS PART 3 ARE NOT SUBJECT TO STATE INCOME TAX  
22 PURSUANT TO SECTION 39-22-104 (4)(u).

23 **8-13.3-315. Reports.** BY SEPTEMBER 1, 2020, AND BY EACH  
24 SEPTEMBER 1 THEREAFTER, THE DIVISION SHALL REPORT TO THE SENATE  
25 COMMITTEES ON BUSINESS, LABOR, AND TECHNOLOGY AND HEALTH AND  
26 HUMAN SERVICES AND THE HOUSE OF REPRESENTATIVES COMMITTEES ON  
27 HEALTH, INSURANCE, AND ENVIRONMENT AND BUSINESS, LABOR, AND

1 ECONOMIC AND WORKFORCE DEVELOPMENT, OR THEIR SUCCESSOR  
2 COMMITTEES, ON PROJECTED AND ACTUAL PROGRAM PARTICIPATION,  
3 SPECIFYING INCOME LEVEL, GENDER, RACE, AND ETHNICITY OF  
4 PARTICIPANTS AND PURPOSE AND DURATION OF LEAVE, PREMIUM RATES,  
5 FUNDBALANCES, AND OUTREACH EFFORTS. THE DIVISION SHALL POST THE  
6 REPORTS ON THE DEPARTMENT'S WEBSITE. NOTWITHSTANDING SECTION  
7 24-1-136 (11)(a)(I), THE REQUIREMENT SPECIFIED IN THIS SECTION TO  
8 SUBMIT ANNUAL REPORTS TO COMMITTEES OF THE GENERAL ASSEMBLY  
9 CONTINUES INDEFINITELY.

10 **8-13.3-316. Rules.** THE DIRECTOR MAY ADOPT RULES AS  
11 NECESSARY FOR THE IMPLEMENTATION AND ADMINISTRATION OF THIS  
12 PART 3.

13 **8-13.3-317. Severability.** IF ANY PROVISION OF THIS PART 3 OR ITS  
14 APPLICATION TO ANY PERSON OR CIRCUMSTANCE IS HELD INVALID, THE  
15 INVALIDITY DOES NOT AFFECT OTHER PROVISIONS OR APPLICATIONS OF  
16 THE PART THAT CAN BE GIVEN EFFECT WITHOUT THE INVALID PROVISION  
17 OR APPLICATION, AND TO THIS END THE PROVISIONS OF THIS PART 3 ARE  
18 SEVERABLE.

19 **SECTION 3.** In Colorado Revised Statutes, 39-22-104, **add**  
20 (4)(x) as follows:

21 **39-22-104. Income tax imposed on individuals, estates, and**  
22 **trusts - single rate - definitions - repeal.** (4) There shall be subtracted  
23 from federal taxable income:

24 (x) FOR INCOME TAX YEARS COMMENCING ON OR AFTER JANUARY  
25 1, 2020, AN AMOUNT EQUAL TO ANY AMOUNT RECEIVED BY A TAXPAYER  
26 AS FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS PURSUANT TO PART  
27 3 OF ARTICLE 13.3 OF TITLE 8.

1           **SECTION 4. Act subject to petition - effective date.** This act  
2 takes effect at 12:01 a.m. on the day following the expiration of the  
3 ninety-day period after final adjournment of the general assembly (August  
4 9, 2017, if adjournment sine die is on May 10, 2017); except that, if a  
5 referendum petition is filed pursuant to section 1 (3) of article V of the  
6 state constitution against this act or an item, section, or part of this act  
7 within such period, then the act, item, section, or part will not take effect  
8 unless approved by the people at the general election to be held in  
9 November 2018 and, in such case, will take effect on the date of the  
10 official declaration of the vote thereon by the governor.