

**First Regular Session
Seventy-first General Assembly
STATE OF COLORADO**

ENGROSSED

*This Version Includes All Amendments Adopted
on Second Reading in the House of Introduction*

LLS NO. 17-0034.01 Yelana Love x2295

HOUSE BILL 17-1307

HOUSE SPONSORSHIP

Winter,

SENATE SPONSORSHIP

Moreno and Fields,

House Committees

Business Affairs and Labor
Finance
Appropriations

Senate Committees

A BILL FOR AN ACT

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

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.

HOUSE
Amended 2nd Reading
April 27, 2017

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).

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" MEANS ANY PERSON, INCLUDING A MIGRATORY
22 LABORER, PERFORMING LABOR OR SERVICES FOR THE BENEFIT OF AN
23 EMPLOYER IN WHICH THE EMPLOYER MAY COMMAND WHEN, WHERE, AND
24 HOW MUCH LABOR OR SERVICES SHALL BE PERFORMED. FOR THE PURPOSES
25 OF THIS PART 3, AN INDIVIDUAL PRIMARILY FREE FROM CONTROL AND
26 DIRECTION IN THE PERFORMANCE OF THE SERVICE, BOTH UNDER HIS OR
27 HER CONTRACT FOR THE PERFORMANCE OF SERVICE AND IN FACT, AND

1 WHO IS CUSTOMARILY ENGAGED IN AN INDEPENDENT TRADE, OCCUPATION,
2 PROFESSION, OR BUSINESS RELATED TO THE SERVICE PERFORMED IS NOT
3 AN "EMPLOYEE".

4 (9) (a) "EMPLOYER" MEANS ANY PERSON ENGAGED IN COMMERCE
5 OR AN INDUSTRY OR ACTIVITY AFFECTING COMMERCE THAT EMPLOYS AT
6 LEAST ONE PERSON FOR EACH WORKING DAY DURING EACH OF TWENTY OR
7 MORE CALENDAR WORKWEEKS IN THE CURRENT OR IMMEDIATELY
8 PRECEDING CALENDAR YEAR.

9 (b) "EMPLOYER" INCLUDES:

10 (I) A PERSON WHO ACTS, DIRECTLY OR INDIRECTLY, IN THE
11 INTEREST OF AN EMPLOYER WITH REGARD TO ANY OF THE EMPLOYEES OF
12 THE EMPLOYER;

13 (II) A SUCCESSOR IN INTEREST OF AN EMPLOYER; AND

14 (III) THE STATE OR A POLITICAL SUBDIVISION OF THE STATE.

15 (10) "FAMILY AND MEDICAL LEAVE" MEANS LEAVE AUTHORIZED
16 UNDER PART 2 OF THIS ARTICLE 13.3.

17 (11) "FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS" OR
18 "BENEFITS" MEANS THE BENEFITS PROVIDED UNDER THE PROGRAM.

19 (12) "FAMILY MEMBER" MEANS AN EMPLOYEE'S IMMEDIATE
20 FAMILY MEMBER, AS DEFINED IN SECTION 2-4-401 (3.7), AND UP TO ONE
21 ADDITIONAL PERSON DESIGNATED ANNUALLY BY THE EMPLOYEE IN
22 ACCORDANCE WITH SECTION 8-13.3-306.

23 (13) "FMLA" MEANS THE FEDERAL "FAMILY AND MEDICAL LEAVE
24 ACT OF 1993", PUB.L. 103-3, AS AMENDED, 29 U.S.C. SEC. 2601 ET SEQ.

25 (14) "FMLA LEAVE" MEANS LEAVE FROM WORK AND ALL
26 BENEFITS AUTHORIZED BY THE FMLA.

27 (15) "HEALTH CARE PROVIDER" HAS THE SAME MEANING AS SET

1 FORTH IN THE FMLA.

2 (16) "PREMIUM" MEANS THE PAYMENTS AN INDIVIDUAL IS
3 REQUIRED BY THIS PART 3 TO PAY TO THE DIVISION FOR THE PROGRAM.

4 (17) "PROGRAM" MEANS THE FAMILY AND MEDICAL LEAVE
5 INSURANCE PROGRAM ESTABLISHED PURSUANT TO THIS PART 3.

6 (18) "QUALIFYING YEAR" MEANS THE FIRST FOUR OF THE LAST FIVE
7 COMPLETED CALENDAR QUARTERS OR THE LAST FOUR COMPLETED
8 CALENDAR QUARTERS IMMEDIATELY PRECEDING THE FIRST DAY OF A
9 COVERED INDIVIDUAL'S APPLICATION YEAR.

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

12 (a) INPATIENT CARE IN A HOSPITAL, HOSPICE, OR RESIDENTIAL
13 MEDICAL CARE FACILITY; OR

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

15 **8-13.3-303. Division of family and medical leave insurance -**
16 **creation as an enterprise - authority to issue bonds.** (1) THERE IS
17 HEREBY CREATED IN THE DEPARTMENT THE DIVISION OF FAMILY AND
18 MEDICAL LEAVE INSURANCE, THE HEAD OF WHICH IS THE DIRECTOR OF THE
19 DIVISION.

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

1 CONSTITUTION.

2 (b) THE ENTERPRISE ESTABLISHED PURSUANT TO THIS SUBSECTION
3 (2) HAS ALL THE POWERS AND DUTIES AUTHORIZED BY THIS PART 3
4 PERTAINING TO FAMILY AND MEDICAL LEAVE INSURANCE. THE FAMILY
5 AND MEDICAL LEAVE INSURANCE FUND CREATED IN SECTION 8-13.3-309
6 CONSTITUTES PART OF THE ENTERPRISE ESTABLISHED PURSUANT TO THIS
7 SUBSECTION (2).

8 (c) NOTHING IN THIS SUBSECTION (2) LIMITS OR RESTRICTS THE
9 AUTHORITY OF THE DIVISION TO EXPEND ITS REVENUES CONSISTENT WITH
10 THIS PART 3.

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

14 **8-13.3-304. Family and medical leave insurance program -**
15 **creation - division duties - applicant duties - outreach and education**
16 **- rules.** (1) (a) THE DIVISION SHALL ESTABLISH AND ADMINISTER A
17 FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM AND PAY FAMILY AND
18 MEDICAL LEAVE INSURANCE BENEFITS TO ELIGIBLE INDIVIDUALS AS
19 SPECIFIED IN THIS PART 3.

20 (b) STARTING JULY 1, 2018, THE DIVISION SHALL ESTABLISH AND
21 IMPLEMENT THE PROGRAM, INCLUDING SETTING PREMIUM AMOUNTS BY
22 RULE.

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

27 (3) THE DIVISION SHALL USE INFORMATION SHARING AND

1 INTEGRATION TECHNOLOGY TO FACILITATE THE DISCLOSURE OF RELEVANT
2 INFORMATION OR RECORDS PERTAINING TO A COVERED INDIVIDUAL IF THE
3 COVERED INDIVIDUAL CONSENTS TO THE DISCLOSURE IN ACCORDANCE
4 WITH THIS PART 3.

5 (4) INFORMATION CONTAINED IN THE FILES AND RECORDS
6 PERTAINING TO A COVERED INDIVIDUAL UNDER THIS PART 3 ARE
7 CONFIDENTIAL AND NOT OPEN TO PUBLIC INSPECTION; EXCEPT THAT A
8 COVERED INDIVIDUAL OR A PERSON AUTHORIZED BY A COVERED
9 INDIVIDUAL, AS EVIDENCED BY A SIGNED AUTHORIZATION FROM THE
10 COVERED INDIVIDUAL, MAY REVIEW THE RECORDS OR RECEIVE SPECIFIC
11 INFORMATION FROM THE RECORDS. IN ADDITION, A PUBLIC EMPLOYEE MAY
12 ACCESS AND USE THE INFORMATION IN THE PERFORMANCE OF THE PUBLIC
13 EMPLOYEE'S OFFICIAL DUTIES.

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

19 (b) THE DIVISION SHALL ENSURE THAT THE OUTREACH
20 INFORMATION EXPLAINS, IN AN EASY-TO-UNDERSTAND FORMAT, AT LEAST
21 THE FOLLOWING:

- 22 (I) ELIGIBILITY REQUIREMENTS;
- 23 (II) THE CLAIMS PROCESS;
- 24 (III) WEEKLY BENEFIT AMOUNTS AND MAXIMUM BENEFITS
25 PAYABLE;
- 26 (IV) NOTICE AND MEDICAL CERTIFICATION REQUIREMENTS;
- 27 (V) REINSTATEMENT AND NONDISCRIMINATION RIGHTS;

1 (VI) CONFIDENTIALITY OF RECORDS;

2 (VII) THE RELATIONSHIP BETWEEN EMPLOYMENT PROTECTION,
3 LEAVE FROM EMPLOYMENT, AND WAGE REPLACEMENT BENEFITS UNDER
4 THIS PART 3 AND OTHER LAWS, COLLECTIVE BARGAINING AGREEMENTS,
5 AND EMPLOYER POLICIES; AND

6 (VIII) ANY OTHER DETAILS OR INFORMATION ABOUT THE
7 PROGRAM THE DIVISION DEEMS APPROPRIATE.

8 (c) THE DIVISION SHALL DEVELOP A PROGRAM NOTICE THAT
9 DETAILS THE PROGRAM REQUIREMENTS, BENEFITS, CLAIMS PROCESS,
10 PAYROLL DEDUCTION REQUIREMENTS, AND OTHER PERTINENT PROGRAM
11 INFORMATION. EACH EMPLOYER SHALL POST THE PROGRAM NOTICE IN A
12 PROMINENT LOCATION IN THE WORKPLACE AND NOTIFY ITS EMPLOYEES OF
13 THE PROGRAM, IN WRITING, UPON HIRING AND UPON LEARNING OF AN
14 EMPLOYEE EXPERIENCING A QUALIFYING EVENT.

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

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

22 **8-13.3-305. Family and medical leave insurance benefits -**
23 **application - eligibility.** (1) BEGINNING JANUARY 1, 2020, FAMILY AND
24 MEDICAL LEAVE INSURANCE BENEFITS ARE PAYABLE TO AN INDIVIDUAL
25 WHO:

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

27 (II) IS CARING FOR HIS OR HER NEW CHILD DURING THE FIRST YEAR

1 AFTER THE BIRTH OR ADOPTION OF THE CHILD OR THE PLACEMENT OF THE
2 CHILD THROUGH FOSTER CARE;

3 (III) IS CARING FOR A FAMILY MEMBER WHO HAS A SERIOUS
4 HEALTH CONDITION;

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

7 (V) IS TAKING LEAVE FOR A QUALIFYING EXIGENCY RELATED TO
8 A FAMILY MEMBER'S MILITARY SERVICE IN ACCORDANCE WITH 29 U.S.C.
9 SEC. 2612 (a)(1)(E);

10 (b) FILES A CLAIM FOR BENEFITS IN A FORM AND MANNER
11 REQUIRED BY THE DIRECTOR BY RULE;

12 (c) IS A COVERED INDIVIDUAL;

13 (d) CONSENTS TO THE DISCLOSURE OF INFORMATION OR RECORDS
14 DEEMED CONFIDENTIAL UNDER STATE LAW PURSUANT TO SECTION
15 8-13.3-304 (4); AND

16 (e) IF CURRENTLY EMPLOYED, ATTESTS, IN THE APPLICATION FOR
17 FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS, THAT THE INDIVIDUAL
18 NOTIFIED HIS OR HER EMPLOYER IN WRITING OF THE INTENT TO TAKE
19 LEAVE FROM WORK FOR ONE OF THE PURPOSES SPECIFIED IN SUBSECTION
20 (1)(a) OF THIS SECTION.

21 (2) IN ADDITION TO THE REQUIREMENTS OF SUBSECTION (1) OF THIS
22 SECTION, THE DIVISION MAY REQUIRE A COVERED INDIVIDUAL WHO
23 APPLIES FOR BENEFITS TO:

24 (a) ATTEST THAT THE COVERED INDIVIDUAL:

25 (I) (A) BECAUSE OF A BIRTH, ADOPTION, OR PLACEMENT THROUGH
26 FOSTER CARE, IS CARING FOR A NEW CHILD DURING THE FIRST YEAR AFTER
27 BIRTH, ADOPTION, OR PLACEMENT OF THE CHILD;

1 (B) IS CARING FOR A FAMILY MEMBER WHO HAS A SERIOUS HEALTH
2 CONDITION; OR

3 (C) HAS A SERIOUS HEALTH CONDITION;

4 (II) IS NOT RECEIVING UNEMPLOYMENT INSURANCE BENEFITS OR
5 BENEFITS UNDER A DISABILITY INSURANCE POLICY IN AN AMOUNT THAT,
6 IF COMBINED WITH THE BENEFITS AVAILABLE TO THE INDIVIDUAL UNDER
7 THE PROGRAM, WOULD EXCEED THE INDIVIDUAL'S WAGES, AS DETERMINED
8 BY THE DIVISION; AND

9 (b) SUBMIT A CERTIFICATION FROM THE HEALTH CARE PROVIDER
10 PROVIDING HEALTH CARE TO THE COVERED INDIVIDUAL OR THE COVERED
11 INDIVIDUAL'S FAMILY MEMBER, AS APPLICABLE, SUPPORTING THE CLAIM
12 THAT THE COVERED INDIVIDUAL OR THE COVERED INDIVIDUAL'S FAMILY
13 MEMBER HAS A SERIOUS HEALTH CONDITION.

14 (3) A COVERED INDIVIDUAL WHO MEETS THE REQUIREMENTS OF
15 SUBSECTION (2)(a)(I) OF THIS SECTION IS ELIGIBLE FOR FAMILY AND
16 MEDICAL LEAVE INSURANCE BENEFITS REGARDLESS OF WHETHER THE
17 COVERED INDIVIDUAL IS CURRENTLY EMPLOYED OR IS WORKING AT AN
18 ADDITIONAL JOB WHILE TAKING FAMILY AND MEDICAL LEAVE.

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

22 **8-13.3-306. Designation of a designated person.** AN EMPLOYER
23 MAY ESTABLISH A UNIFORM PROCESS FOR EMPLOYEES TO SELECT A
24 DESIGNATED PERSON WITHIN THIRTY DAYS OF THE EMPLOYEE'S DATE OF
25 HIRE. THEREAFTER, THE EMPLOYER MUST PERMIT THE EMPLOYEE TO MAKE
26 OR CHANGE THE DESIGNATION ON AN ANNUAL BASIS. IF AN EMPLOYER
27 ESTABLISHED A UNIFORM PROCESS, THE COVERED EMPLOYEE MUST MAKE

1 THE DESIGNATION IN ACCORDANCE WITH THE EMPLOYER'S PROCESS. IF AN
2 EMPLOYER DOES NOT ESTABLISH A UNIFORM PROCESS, THE EMPLOYEE MAY
3 MAKE A DESIGNATION WHEN FILING A CLAIM FOR BENEFITS.

4 **8-13.3-307. Duration of benefits - payment intervals.** (1) THE
5 MAXIMUM NUMBER OF WEEKS DURING WHICH FAMILY AND MEDICAL
6 LEAVE INSURANCE BENEFITS ARE PAYABLE TO AN ELIGIBLE INDIVIDUAL IN
7 ANY CONSECUTIVE FIFTY-TWO-WEEK PERIOD IS TWELVE WEEKS.

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

22 (3) THE DIVISION SHALL MAKE THE FIRST PAYMENT OF BENEFITS
23 TO AN ELIGIBLE INDIVIDUAL WITHIN TWO WEEKS AFTER THE INDIVIDUAL
24 FILES THE CLAIM FOR BENEFITS AND SHALL MAKE SUBSEQUENT PAYMENTS
25 BIWEEKLY.

26 **8-13.3-308. Amount of benefits - maximum weekly benefit.**

27 (1) (a) THE DIVISION SHALL DETERMINE THE WEEKLY BENEFIT AMOUNT,

1 SUBJECT TO SUBSECTION (1)(b) OF THIS SECTION, AS FOLLOWS:

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

6 (II) FOR AN ELIGIBLE INDIVIDUAL WHOSE YEARLY EARNINGS ARE
7 MORE THAN TWENTY PERCENT BUT NOT MORE THAN THIRTY PERCENT OF
8 THE ANNUAL MEAN WAGE, THE DIVISION SHALL PAY WEEKLY BENEFITS IN
9 AN AMOUNT EQUAL TO NINETY PERCENT OF THE ELIGIBLE INDIVIDUAL'S
10 WEEKLY WAGE;

11 (III) FOR AN ELIGIBLE INDIVIDUAL WHOSE YEARLY EARNINGS ARE
12 MORE THAN THIRTY PERCENT BUT NOT MORE THAN FIFTY PERCENT OF THE
13 ANNUAL MEAN WAGE, THE DIVISION SHALL PAY WEEKLY BENEFITS IN AN
14 AMOUNT EQUAL TO EIGHTY-FIVE PERCENT OF THE ELIGIBLE INDIVIDUAL'S
15 WEEKLY WAGE;

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

20 (b) THE MAXIMUM WEEKLY BENEFIT AMOUNT DETERMINED UNDER
21 SUBSECTION (1)(a) OF THIS SECTION MUST NOT EXCEED ONE THOUSAND
22 DOLLARS PER WEEK. STARTING JANUARY 1, 2020, THE DIVISION SHALL
23 ANNUALLY ADJUST THE MAXIMUM WEEKLY BENEFIT AMOUNT TO REFLECT
24 THE RECENT AVERAGE CHANGE IN COLORADO PERSONAL INCOME. THE
25 RECENT AVERAGE CHANGE IN COLORADO PERSONAL INCOME FOR A FISCAL
26 YEAR IS EQUAL TO THE AVERAGE PERCENTAGE CHANGE IN COLORADO
27 PERSONAL INCOME FROM ONE CALENDAR YEAR TO THE NEXT FOR THE SIX

1 PRIOR CALENDAR YEARS, WHICH PERIOD ENDS WITH THE MOST RECENTLY
2 COMPLETED CALENDAR YEAR PRIOR TO THE FISCAL YEAR. FOR THE
3 PURPOSE OF DETERMINING THE AVERAGE RECENT INCREASE IN COLORADO
4 PERSONAL INCOME THAT APPLIES FOR A FISCAL YEAR, THE ESTIMATES OF
5 COLORADO PERSONAL INCOME FOR THE APPLICABLE CALENDAR YEARS
6 ARE THOSE AVAILABLE AS OF THE FIRST DAY OF THE FISCAL YEAR.

7 (c) THE DIVISION SHALL CALCULATE AN ELIGIBLE INDIVIDUAL'S
8 WEEKLY BENEFIT AMOUNT BASED ON THE ELIGIBLE INDIVIDUAL'S WEEKLY
9 WAGE EARNED FROM THE JOB FROM WHICH THE ELIGIBLE INDIVIDUAL IS
10 TAKING FAMILY AND MEDICAL LEAVE. IF THE ELIGIBLE INDIVIDUAL IS ABLE
11 TO CONTINUE WORKING AT A SECOND JOB WHILE TAKING FAMILY AND
12 MEDICAL LEAVE, THE DIVISION SHALL NOT CONSIDER THE ELIGIBLE
13 INDIVIDUAL'S WEEKLY WAGE EARNED FROM THE SECOND JOB WHEN
14 CALCULATING THE ELIGIBLE INDIVIDUAL'S WEEKLY BENEFIT AMOUNT.

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

18 **8-13.3-309. Family and medical leave insurance fund -**
19 **creation - employee premiums.** (1) (a) THERE IS HEREBY CREATED IN
20 THE STATE TREASURY THE FAMILY AND MEDICAL LEAVE INSURANCE FUND,
21 REFERRED TO IN THIS SECTION AS THE "FUND". MONEY IN THE FUND MAY
22 BE USED ONLY TO PAY REVENUE BONDS ISSUED IN ACCORDANCE WITH
23 SECTION 8-13.3-303 (2)(d) AND TO PAY BENEFITS UNDER, AND TO
24 ADMINISTER, THE FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM
25 PURSUANT TO THIS PART 3, INCLUDING THE OUTREACH PROGRAM
26 DEVELOPED UNDER SECTION 8-13.3-304 (5). INTEREST EARNED ON THE
27 INVESTMENT OF MONEY IN THE FUND REMAINS IN THE FUND. ANY MONEY

1 REMAINING IN THE FUND AT THE END OF A FISCAL YEAR REMAINS IN THE
2 FUND AND DOES NOT REVERT TO THE GENERAL FUND OR ANY OTHER FUND.
3 THE GENERAL ASSEMBLY SHALL NOT APPROPRIATE MONEY FROM THE
4 FUND FOR THE GENERAL EXPENSES OF THE STATE.

5 (b) THE DIVISION MAY SEEK AND ACCEPT GIFTS, GRANTS, AND
6 DONATIONS, INCLUDING PROGRAM-RELATED INVESTMENTS AND
7 COMMUNITY REINVESTMENT FUNDS, TO FINANCE THE COSTS OF SETTING
8 UP THE PROGRAM. THE DIVISION SHALL TRANSMIT ANY GIFTS, GRANTS,
9 AND DONATIONS IT RECEIVES TO THE STATE TREASURER FOR DEPOSIT IN
10 THE FUND.

11 (2) (a) (I) ON AND AFTER JULY 1, 2019, EVERY INDIVIDUAL
12 EMPLOYED BY AN EMPLOYER IN THIS STATE SHALL PAY A PREMIUM IN AN
13 AMOUNT DETERMINED BY THE DIRECTOR BY RULE IN ACCORDANCE WITH
14 THIS SUBSECTION (2)(a). PREMIUMS ESTABLISHED IN ACCORDANCE WITH
15 THIS SUBSECTION (2) ARE FEES AND NOT TAXES.

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

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

20 (B) ESTABLISH A MAXIMUM ANNUAL PREMIUM.

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

24 (b) EACH EMPLOYER SHALL COLLECT THE PREMIUM AMOUNT FROM
25 EACH EMPLOYEE AS A PAYROLL DEDUCTION FROM THE EMPLOYEE'S WAGES
26 EACH PAYROLL PERIOD AND SHALL REMIT THE PREMIUM AMOUNT TO THE
27 DIVISION, WHICH SHALL TRANSMIT THE PREMIUMS TO THE STATE

1 TREASURER FOR DEPOSIT IN THE FUND.

2 (c) THE DEPARTMENT SHALL DETERMINE THE NOMINAL AND
3 REASONABLE ASSISTANCE TO BE PROVIDED TO EMPLOYERS TO OFFSET THE
4 INITIAL COSTS OF CREATING THE PAYROLL DEDUCTION FOR ITS
5 EMPLOYEES. THE DEPARTMENT SHALL PROVIDE EMPLOYERS THE NOMINAL
6 AND REASONABLE ASSISTANCE FROM THE FUND.

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

13 **8-13.3-310. Employment protection - discrimination**
14 **prohibited.** (1) (a) AN ELIGIBLE INDIVIDUAL WHO WAS EMPLOYED BY AN
15 EMPLOYER FOR NINETY DAYS OR LONGER AND WHO TAKES LEAVE UNDER
16 THIS PART 3 FOR THE INTENDED PURPOSE OF THE LEAVE IS ENTITLED, ON
17 RETURN FROM SUCH LEAVE:

18 (I) TO BE RESTORED BY THE EMPLOYER TO THE POSITION OF
19 EMPLOYMENT HELD BY THE ELIGIBLE INDIVIDUAL WHEN THE LEAVE
20 COMMENCED; OR

21 (II) TO BE RESTORED TO AN EQUIVALENT POSITION WITH
22 EQUIVALENT EMPLOYMENT BENEFITS, PAY, AND OTHER TERMS AND
23 CONDITIONS OF EMPLOYMENT.

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

26 (2) AN EMPLOYER SHALL NOT DISCHARGE, DEMOTE, OR OTHERWISE
27 DISCRIMINATE OR TAKE AN ADVERSE EMPLOYMENT ACTION AGAINST AN

1 INDIVIDUAL BECAUSE HE OR SHE:

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

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

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

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

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

12 (4) DURING ANY PERIOD OF FAMILY AND MEDICAL LEAVE TAKEN
13 UNDER THIS PART 3, AN EMPLOYER SHALL MAINTAIN ANY EXISTING
14 HEALTH BENEFITS OF THE ELIGIBLE INDIVIDUAL FOR THE DURATION OF
15 SUCH LEAVE AS IF THE ELIGIBLE INDIVIDUAL CONTINUED TO WORK FROM
16 THE DATE THE ELIGIBLE INDIVIDUAL COMMENCED FAMILY AND MEDICAL
17 LEAVE.

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

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

27 **8-13.3-311. Coordination of benefits. (1) (a) LEAVE TAKEN**

1 UNDER THIS PART 3 RUNS CONCURRENTLY WITH ANY LEAVE TAKEN UNDER
2 THE FMLA OR PART 2 OF THIS ARTICLE 13.3. IF A PERIOD OF FAMILY AND
3 MEDICAL LEAVE INSURANCE BENEFITS RECEIVED BY AN ELIGIBLE
4 EMPLOYEE UNDER THIS PART 3 IS CONCURRENTLY DESIGNATED AS LEAVE
5 PURSUANT TO THE FMLA, THE EMPLOYER SHALL NOTIFY THE ELIGIBLE
6 EMPLOYEE OF SUCH DESIGNATION AND SHALL ALSO PROVIDE THE
7 EMPLOYEE WITH THE NOTICE REQUIRED UNDER 29 CFR 825.301 AND
8 825.305.

9 (b) AN EMPLOYER MAY REQUIRE THAT PAYMENT MADE OR LEAVE
10 TAKEN UNDER THIS PART 3 BE MADE OR TAKEN CONCURRENTLY OR
11 OTHERWISE COORDINATED WITH PAYMENT MADE OR LEAVE ALLOWED
12 UNDER THE TERMS OF DISABILITY OR FAMILY CARE LEAVE UNDER A
13 COLLECTIVE BARGAINING AGREEMENT OR EMPLOYER POLICY, AS
14 APPLICABLE. THE EMPLOYER SHALL GIVE ITS EMPLOYEES WRITTEN NOTICE
15 OF THIS REQUIREMENT.

16 (c) NOTWITHSTANDING SUBSECTIONS (1)(a) AND (1)(b) OF THIS
17 SECTION, AN EMPLOYER SHALL NOT REQUIRE AN EMPLOYEE TO USE TIME
18 OFF UNDER AN EMPLOYER POLICY, INCLUDING BUT NOT LIMITED TO PAID
19 TIME OFF, VACATION TIME, OR SICK TIME, PRIOR TO USE OF FAMILY AND
20 MEDICAL LEAVE UNDER THIS PART 3. IN ADDITION, AN EMPLOYER SHALL
21 NOT REQUIRE AN EMPLOYEE TO CHARGE ALL OR PART OF THE EMPLOYEE'S
22 FAMILY AND MEDICAL LEAVE UNDER THIS PART 3 TO UNUSED ACCRUALS
23 OR OTHER PAID TIME OFF, INCLUDING BUT NOT LIMITED TO VACATION TIME
24 AND SICK TIME, EXCEPT WHERE THE EMPLOYER MAINTAINS A SEPARATE
25 BANK OF PAID TIME SOLELY FOR THE PURPOSE OF PAID FAMILY AND
26 MEDICAL LEAVE UNDER THIS PART 3.

27 (2) (a) THIS PART 3 DOES NOT DIMINISH AN EMPLOYER'S

1 OBLIGATION TO COMPLY WITH A COLLECTIVE BARGAINING AGREEMENT OR
2 EMPLOYER POLICY, AS APPLICABLE, THAT PROVIDES GREATER LEAVE THAN
3 FMLA LEAVE OR LEAVE PERMITTED UNDER PART 2 OF THIS ARTICLE 13.3.

4 (b) AFTER THE EFFECTIVE DATE OF THIS PART 3, A COLLECTIVE
5 BARGAINING AGREEMENT ENTERED INTO OR RENEWED OR AN EMPLOYER
6 POLICY ADOPTED OR RETAINED MUST NOT DIMINISH AN INDIVIDUAL'S
7 RIGHT TO BENEFITS UNDER THIS PART 3. ANY AGREEMENT BY AN
8 INDIVIDUAL TO WAIVE HIS OR HER RIGHTS UNDER THIS PART 3 IS VOID AS
9 AGAINST PUBLIC POLICY.

10 **8-13.3-312. Erroneous payments - disqualification for benefits.**

11 (1) A COVERED INDIVIDUAL IS DISQUALIFIED FROM FAMILY AND MEDICAL
12 LEAVE INSURANCE BENEFITS FOR ONE YEAR IF THE INDIVIDUAL, IN
13 CONNECTION WITH AN APPLICATION FOR BENEFITS UNDER THE PROGRAM,
14 WILLFULLY MAKES A FALSE STATEMENT OR MISREPRESENTATION
15 REGARDING A MATERIAL FACT OR WILLFULLY FAILS TO REPORT A
16 MATERIAL FACT. A COVERED INDIVIDUAL WHO WILLFULLY MAKES A FALSE
17 STATEMENT OR MISREPRESENTATION REGARDING A MATERIAL FACT OR
18 WILLFULLY FAILS TO REPORT A MATERIAL FACT COMMITS A MISDEMEANOR
19 AND SHALL BE PUNISHED BY A FINE OF ONE THOUSAND DOLLARS.

20 (2) IF FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS ARE PAID
21 ERRONEOUSLY OR AS A RESULT OF WILLFUL MISREPRESENTATION, OR IF A
22 CLAIM FOR FAMILY AND MEDICAL LEAVE BENEFITS IS REJECTED AFTER
23 BENEFITS ARE PAID, THE DIVISION MAY SEEK REPAYMENT OF BENEFITS
24 FROM THE RECIPIENT. THE DIRECTOR SHALL EXERCISE HIS OR HER
25 DISCRETION TO WAIVE, IN WHOLE OR IN PART, THE AMOUNT OF ANY
26 REPAYMENTS WHERE THE RECOVERY WOULD BE AGAINST EQUITY AND
27 GOOD CONSCIENCE. THE DIRECTOR MAY ADOPT RULES TO DEVELOP A

1 PROCEDURE FOR RECOVERING ERRONEOUS PAYMENTS OF BENEFITS.

2 **8-13.3-313. Elective coverage - withdrawal from coverage -**

3 **rules.** (1) A SELF-EMPLOYED PERSON, INCLUDING A SOLE PROPRIETOR,
4 PARTNER, OR JOINT VENTURER, MAY ELECT COVERAGE UNDER THE
5 PROGRAM FOR AN INITIAL PERIOD OF NOT LESS THAN THREE YEARS OR A
6 SUBSEQUENT PERIOD OF NOT LESS THAN ONE YEAR IMMEDIATELY
7 FOLLOWING ANOTHER PERIOD OF COVERAGE. THE SELF-EMPLOYED PERSON
8 MUST FILE A NOTICE OF ELECTION IN WRITING WITH THE DIRECTOR, AS
9 REQUIRED BY THE DIVISION. THE ELECTION BECOMES EFFECTIVE ON THE
10 DATE THE NOTICE IS FILED.

11 (2) A SELF-EMPLOYED PERSON WHO HAS ELECTED COVERAGE MAY
12 WITHDRAW FROM COVERAGE BY FILING WRITTEN NOTICE WITH THE
13 DIRECTOR WITHIN THIRTY DAYS AFTER THE END OF THE THREE-YEAR
14 PERIOD OF COVERAGE OR AT OTHER TIMES THE DIRECTOR MAY PRESCRIBE
15 BY RULE. THE WITHDRAWAL FROM COVERAGE TAKES EFFECT NO SOONER
16 THAN THIRTY DAYS AFTER THE SELF-EMPLOYED PERSON FILES THE NOTICE.

17 **8-13.3-314. Federal income tax - state income tax.** (1) (a) IF
18 THE FEDERAL INTERNAL REVENUE SERVICE DETERMINES THAT FAMILY AND
19 MEDICAL LEAVE INSURANCE BENEFITS UNDER THIS PART 3 ARE SUBJECT TO
20 FEDERAL INCOME TAX, THE DIVISION SHALL INFORM AN INDIVIDUAL FILING
21 A NEW CLAIM FOR FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS, AT
22 THE TIME OF FILING, THAT:

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

25 (II) REQUIREMENTS EXIST PERTAINING TO ESTIMATED TAX
26 PAYMENTS;

27 (III) THE INDIVIDUAL MAY ELECT TO HAVE FEDERAL INCOME TAX

1 DEDUCTED AND WITHHELD FROM THE INDIVIDUAL'S PAYMENT OF BENEFITS
2 IN THE AMOUNT SPECIFIED IN THE FEDERAL INTERNAL REVENUE CODE; AND

3 (IV) THE INDIVIDUAL IS PERMITTED TO CHANGE A PREVIOUSLY
4 ELECTED WITHHOLDING STATUS.

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

9 (c) THE DIRECTOR SHALL FOLLOW ALL PROCEDURES SPECIFIED BY
10 THE FEDERAL INTERNAL REVENUE SERVICE PERTAINING TO DEDUCTING
11 AND WITHHOLDING INCOME TAX.

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

15 **8-13.3-315. Reports.** BY SEPTEMBER 1, 2020, AND BY EACH
16 SEPTEMBER 1 THEREAFTER, THE DIVISION SHALL REPORT TO THE SENATE
17 COMMITTEES ON BUSINESS, LABOR, AND TECHNOLOGY AND HEALTH AND
18 HUMAN SERVICES AND THE HOUSE OF REPRESENTATIVES COMMITTEES ON
19 HEALTH, INSURANCE, AND ENVIRONMENT AND BUSINESS, LABOR, AND
20 ECONOMIC AND WORKFORCE DEVELOPMENT, OR THEIR SUCCESSOR
21 COMMITTEES, ON PROJECTED AND ACTUAL PROGRAM PARTICIPATION,
22 SPECIFYING INCOME LEVEL, GENDER, RACE, AND ETHNICITY OF
23 PARTICIPANTS AND PURPOSE AND DURATION OF LEAVE, PREMIUM RATES,
24 FUND BALANCES, AND OUTREACH EFFORTS. THE DIVISION SHALL POST THE
25 REPORTS ON THE DEPARTMENT'S WEBSITE. NOTWITHSTANDING SECTION
26 24-1-136 (11)(a)(I), THE REQUIREMENT SPECIFIED IN THIS SECTION TO
27 SUBMIT ANNUAL REPORTS TO COMMITTEES OF THE GENERAL ASSEMBLY

1 CONTINUES INDEFINITELY.

2 **8-13.3-316. Rules.** THE DIRECTOR MAY ADOPT RULES AS
3 NECESSARY FOR THE IMPLEMENTATION AND ADMINISTRATION OF THIS
4 PART 3.

5 **8-13.3-317. Severability.** IF ANY PROVISION OF THIS PART 3 OR ITS
6 APPLICATION TO ANY PERSON OR CIRCUMSTANCE IS HELD INVALID, THE
7 INVALIDITY DOES NOT AFFECT OTHER PROVISIONS OR APPLICATIONS OF
8 THE PART THAT CAN BE GIVEN EFFECT WITHOUT THE INVALID PROVISION
9 OR APPLICATION, AND TO THIS END THE PROVISIONS OF THIS PART 3 ARE
10 SEVERABLE.

11 **8-13.3-318. Preparation for the "Family and Medical Leave
12 Insurance Act" - repeal of part - notice to revisor of statutes - repeal.**

13 (1) THIS PART 3 IS REPEALED IF THE DEPARTMENT FAILS TO MEET THE
14 REQUIREMENTS OF SUBSECTION (2) OF THIS SECTION. NOT LATER THAN
15 JUNE 15, 2018, THE EXECUTIVE DIRECTOR OF THE DEPARTMENT SHALL
16 NOTIFY THE REVISOR OF STATUTES IN WRITING IF THE DEPARTMENT IS
17 UNABLE TO COMPLY WITH SUBSECTION (2) OF THIS SECTION BY E-MAILING
18 THE NOTICE TO REVISOROFSTATUTES.GA@STATE.CO.US. THIS PART 3 IS
19 REPEALED UPON THE DATE IDENTIFIED IN THE NOTICE THAT THE
20 DEPARTMENT FAILED TO MEET THE REQUIREMENTS OF SUBSECTION (2) OF
21 THIS SECTION OR UPON THE DATE OF THE NOTICE TO THE REVISOR OF
22 STATUTES IF THE NOTICE DOES NOT SPECIFY A DIFFERENT DATE.

23 (2)(a) THE DEPARTMENT SHALL CONVENE A GROUP OF INTERESTED
24 PARTIES TO PREPARE FOR THE CREATION OF THE "FAMLI ACT" CREATED
25 IN THIS PART 3. NOT LATER THAN JUNE 1, 2018, THE DEPARTMENT SHALL:

26 (I) STUDY THE UNITED STATES DEPARTMENT OF LABOR'S OPEN
27 SOURCE CODE AND OTHER LOW-COST ALTERNATIVES; AND

1 (II) DEVELOP A PLAN FOR THE ISSUANCE OF REVENUE BONDS BY
2 THE DIVISION.

3 (b) THE DEPARTMENT MAY ACCEPT GIFTS, GRANTS, AND
4 DONATIONS TO FULFILL THE REQUIREMENTS OF THIS SUBSECTION (2).

5 (3) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2019.

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

8 39-22-104. Income tax imposed on individuals, estates, and
9 trusts - single rate - definitions - repeal. (4) There shall be subtracted
10 from federal taxable income:

11 (x) FOR INCOME TAX YEARS COMMENCING ON OR AFTER JANUARY
12 1, 2020, AN AMOUNT EQUAL TO ANY AMOUNT RECEIVED BY A TAXPAYER
13 AS FAMILY AND MEDICAL LEAVE INSURANCE BENEFITS PURSUANT TO PART
14 3 OF ARTICLE 13.3 OF TITLE 8.

15 SECTION 4. Act subject to petition - effective date. This act
16 takes effect at 12:01 a.m. on the day following the expiration of the
17 ninety-day period after final adjournment of the general assembly (August
18 9, 2017, if adjournment sine die is on May 10, 2017); except that, if a
19 referendum petition is filed pursuant to section 1 (3) of article V of the
20 state constitution against this act or an item, section, or part of this act
21 within such period, then the act, item, section, or part will not take effect
22 unless approved by the people at the general election to be held in
23 November 2018 and, in such case, will take effect on the date of the
24 official declaration of the vote thereon by the governor.