



ZERO TO THREE
Early connections last a lifetime

prenatal-to-3
policy IMPACT CENTER

The University of Texas at Austin
LBJ School of Public Affairs

***Equity and Evidence:
Data Tools to Inform
Paid Family
Leave Policymaking***

January 28, 2021



January 28, 2021

PRENATAL-TO-3 POLICY IMPACT CENTER

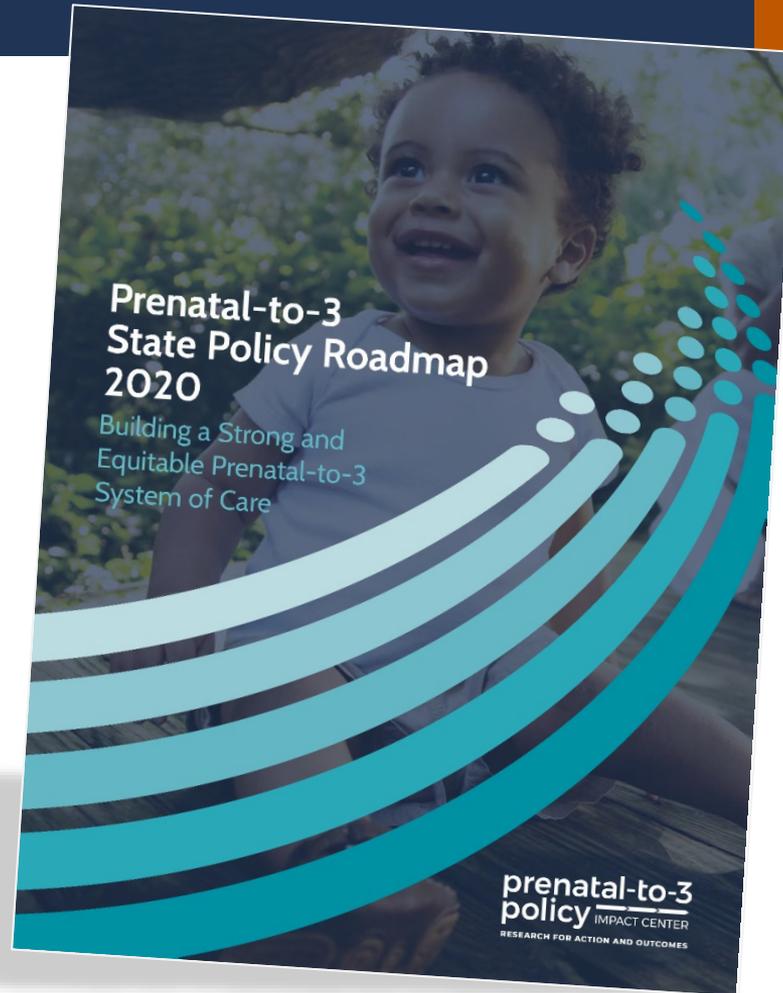
Research for Action and Outcomes

CYNTHIA OSBORNE, PH.D.

The University of Texas at Austin
Associate Dean, LBJ School of Public Affairs
Director, Prenatal-to-3 Policy Impact Center



2020 Prenatal-to-3 State Policy Roadmap



State Policy Roadmap Framework



Prioritize your state's SCIENCE-BASED POLICY GOALS
to promote optimal health and development of infants and toddlers



Adopt and implement EFFECTIVE POLICIES & STRATEGIES
to improve PN-3 goals and outcomes



Monitor your STATE'S PROGRESS toward adoption & implementation
of effective solutions



Track OUTCOMES TO MEASURE IMPACT
on optimal health and development of infants and toddlers

Eight Prenatal-to-3 Policy Goals



Access
to Needed
Services

Families have access to necessary services through expanded eligibility, reduced administrative burden, and identification of needs and connection to services.



Parents'
Ability
to Work

Parents have the skills and incentives for employment and the resources they need to balance working and parenting.



Sufficient
Household
Resources

Parents have the financial and material resources they need to provide for their families.



Healthy
and Equitable
Births

Children are born healthy to healthy parents, and pregnancy experiences and birth outcomes are equitable.



Parental Health
and Emotional
Wellbeing

Parents are mentally and physically healthy, with particular attention paid to the perinatal period.



Nurturing
and Responsive
Child-Parent
Relationships

Children experience warm, nurturing, stimulating interactions with their parents that promote healthy development.



Nurturing
and Responsive
Child Care in
Safe Settings

When children are not with their parents, they are in high-quality, nurturing, and safe environments.



Optimal Child
Health and
Development

Children's emotional, physical, and cognitive development is on track, and delays are identified and addressed early.

Five Policies and Six Strategies

EFFECTIVE POLICIES

Expanded Income Eligibility for Health Insurance	State has adopted and fully implemented the Medicaid expansion under the ACA that includes coverage for most adults with incomes up to 138% of the federal poverty level.
Reduced Administrative Burden for SNAP	State's median recertification interval is 12 months or longer among households with SNAP-eligible children under age 18.
Paid Family Leave	State has adopted and fully implemented a paid family leave program of a minimum of 6 weeks following the birth, adoption, or the placement of a child into foster care.
State Minimum Wage	State has adopted and fully implemented a minimum wage of \$10 or greater.
State Earned Income Tax Credit	State has adopted and fully implemented a refundable EITC of at least 10% of the federal EITC for all eligible families with any children under age 3.

EFFECTIVE STRATEGIES

Comprehensive Screening and Referral Programs	State has both evidence-based comprehensive screening and referral programs: Family Connects and Healthy Steps.
Child Care Subsidies	State base reimbursement rates (for infants and toddlers in center-based care and family child care) meet the federally recommended 75th percentile using a recent market rate survey.
Group Prenatal Care	State supports the implementation of group prenatal care financially through enhanced reimbursements for group prenatal care providers.
Evidence-Based Home Visiting Programs	State supplements federal funding, and the estimated percentage of eligible children served by home visiting is at or above the median state value (7.3%).
Early Head Start	State supplements federal funding, and the estimated percentage of income-eligible children with access to EHS is at or above the median state value (8.9%).
Early Intervention Services	State has moderate or broad criteria to determine eligibility and serves children who are at risk for later delays or disabilities.

Effective policies impact PN-3 goals and research provides clear legislative or regulatory action. Effective strategies have demonstrated impacts on PN-3 goals, but research provides no clear guidance for legislative action.

● Policy/strategy is aligned with goal in column
Policy/strategy does not align with goal in column (intentionally blank)

GOALS

To achieve a science-driven PN-3 goal.



POLICIES

Adopt and fully implement the effective policies aligned with the goal

Expanded Income Eligibility for Health Insurance	●		●	●	●			●
Reduced Administrative Burden for SNAP	●		●					
Paid Family Leave	●	●	●		●	●		●
State Minimum Wage			●	●	●			●
State Earned Income Tax Credit		●	●	●				

STRATEGIES

Make substantial progress relative to other states toward implementing the effective strategies aligned with the goal

Comprehensive Screening and Referral Programs	●							●
Child Care Subsidies	●	●	●					
Group Prenatal Care	●			●	●			●
Evidence-Based Home Visiting Programs						●		
Early Head Start						●	●	●
Early Intervention Services					●			●

OUTCOMES

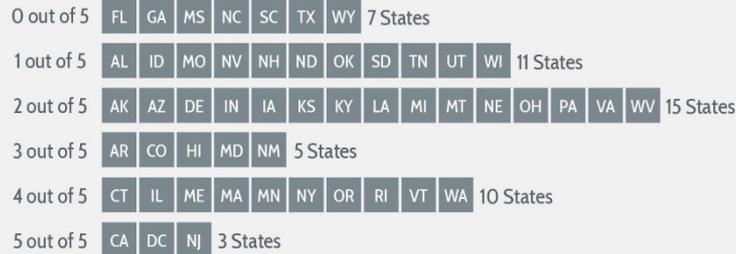
Measure progress toward achieving the PN-3 goal



Prenatal-to-3 State Policy Roadmap

State Progress

POLICIES Adopted and Implemented Policy Count by State



STRATEGIES Implemented Strategy Count by State



Have states adopted and fully implemented the effective policies?

Policies	NO				SOME PROGRESS			YES			
	0	1	2	3	4	5	6	7	8	9	10
Expanded Income Eligibility for Health Insurance	5 states	4 states		3 states			2 states	3 states	4 states	28 states	2 states
Reduced Administrative Burden for SNAP	12 states					7 states		1 state	10 states	21 states	
Paid Family Leave		29 states		1 state	12 states	1 state	3 states				5 states
State Minimum Wage	9 states	2 states		10 states	3 states	4 states	4 states		1 state		18 states
State Earned Income Tax Credit	9 states	8 states		2 states	3 states	6 states	5 states	1 state	5 states		12 states

Have states made substantial progress relative to other states toward implementing the effective strategies?

Strategies	LITTLE TO NO PROGRESS			SOME PROGRESS			SUBSTANTIAL PROGRESS			
	1	2	3	4	5	6	7	8	9	10
Comprehensive Screening and Referral Programs	21 states		5 states		14 states	3 states	7 states			1 state
Child Care Subsidies	21 states		20 states		9 states		1 state			
Group Prenatal Care	16 states		11 states	1 state	9 states	4 states	2 states			8 states
Evidence-Based Home Visiting	10 states		3 states		15 states		18 states			5 states
Early Head Start	23 states		15 states	4 states	2 states		7 states			
Early Intervention Services	16 states			14 states		16 states	4 states			1 state

Texas' Prenatal-to-3 Outcome Measures

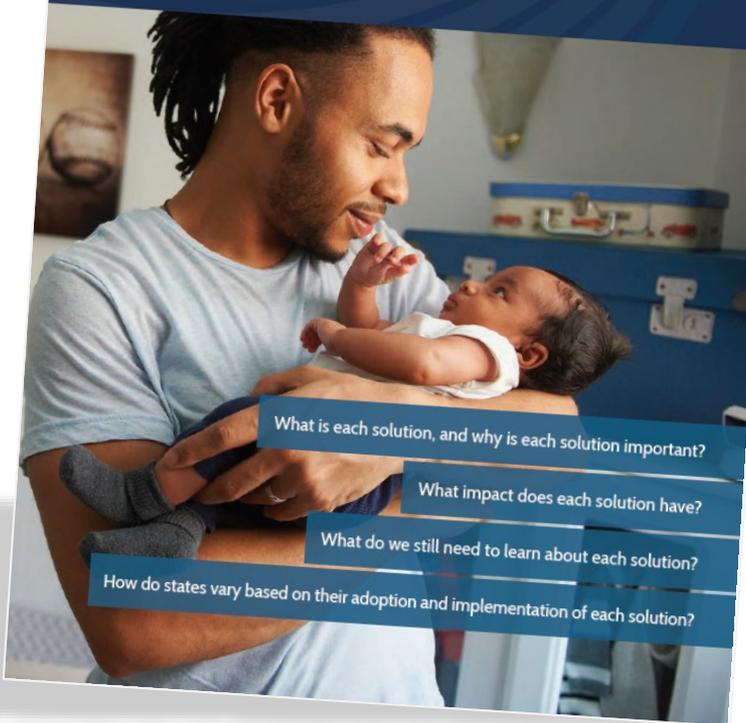


* Thirteen states either do not report these data in the QRIS Compendium or have no statewide QRIS. This outcome is not ranked.

Policy Profile

11

EFFECTIVE STATE SOLUTIONS TO STRENGTHEN THE PRENATAL-TO-3 SYSTEM OF CARE



What is each solution, and why is each solution important?

What impact does each solution have?

What do we still need to learn about each solution?

How do states vary based on their adoption and implementation of each solution?

Policy Profile

POLICY

PAID FAMILY LEAVE

A paid family leave program of a minimum of 6 weeks is an effective state POLICY to impact:

- Access to Needed Services
- Parent Ability to Work
- Sufficient Household Resources
- Healthy and Equitable Births
- Parental Health and Emotional Wellbeing
- Nurturing and Responsive Child-Parent Relationships
- Nurturing and Responsive Child Care or Safe Settings
- Optimal Child Health and Development

A state program providing a minimum of 6 weeks of paid leave following the birth, adoption, or the placement of a child into foster care:

- increases the likelihood and length of leave-taking for mothers and fathers;
- reduces racial disparities in leave-taking;
- boosts maternal labor force attachment;
- improves mothers' mental health;
- fosters better child-parent relationships; and
- supports children's health and development.

6 states have adopted and fully implemented a paid family leave program of a minimum of 6 weeks following the birth, adoption, or the placement of a child into foster care.

A total of 10 states have adopted paid family leave policies of any length.

WHAT IS PAID FAMILY LEAVE?

State paid family leave programs require employers to allow eligible parents time off from work to bond with a new child while receiving a portion of their wages. States allow parents to take between 4 and 12 weeks off of work, with pay varying based on a proportion of the employee's wages prior to taking leave. States also vary in eligibility requirements, job protection provisions, and funding mechanisms.

*

* Updated

Examples of Impact of Paid Family Leave



- Access to paid family leave increased leave-taking by 5 weeks for mothers and 2 to 3 days for fathers (B)
- Among Black mothers, access to paid family leave led to a 10.6 percentage point increase in leave-taking; among White mothers, a 4 percentage point increase (N)



- Access to paid family leave led to a 5 to 8 percentage point increase in maternal labor force participation in the months surrounding birth (D)
- Access to paid family leave led to 7.1 more weeks worked by mothers in the second year of a child's life (B)
- Access to paid family leave led to a 13% increase in the likelihood of returning to prebirth employer in the year following birth (B)
- Access to paid family leave led to a 12.9 to 18.3 percentage point increase in the probability of mothers working 1 year following birth (B)



- Access to paid family leave led to a \$3,400 increase in household income (M)
- Access to paid family leave led to a 2 percentage point reduction in the poverty rate, with the greatest effect for less-educated, low-income, single mothers (M)

Examples of Impact of Paid Family Leave

Parental Health and Emotional Wellbeing

- Access to paid family leave led to a 7 to 17 percentage point increase in mothers reporting very good or excellent mental health and a 3 to 5 percentage point increase in mothers reporting coping well with day-to-day demands of parenting (C)
- Access to paid family leave led to an 8.2 percentage point decline in the risk of being overweight and a 12 percentage point decline in any alcohol consumption (P)

Nurturing and Responsive Child-Parent Relationships

- Access to paid family leave led to a 10% to 20% increase in parents who reported reading to infants 4+ days per week, depending on the group (C)
- Mothers who took paid leave reported going on outings with children 9.8 more times per month, and having breakfast with children 3.6 more times per week (A)

Optimal Child Health and Development

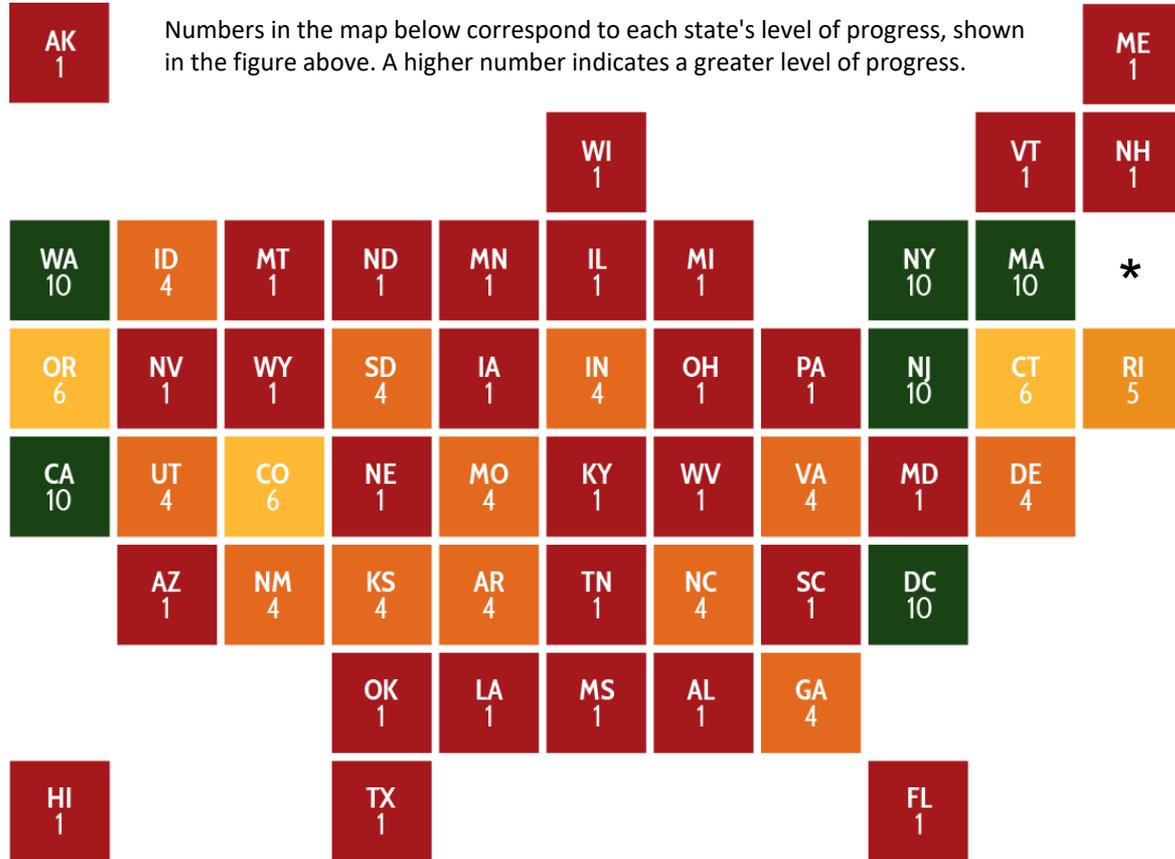
- Access to paid family leave led to a 1.3 percentage point increase in exclusive breastfeeding at age 6 months (G)
- Among Black mothers, access to paid family leave led to a 7.5 percentage point increase in initiating breastfeeding (K)
- Among low-income families, access to paid family leave led to a 5 to 7 percentage point decline in the likelihood of infants receiving late vaccinations (E)
- Access to paid family leave led to 2.8 fewer cases of pediatric abusive head trauma per 100,000 children under age 2, and 5.1 fewer cases per 100,000 children under age 1 (I)

Have States Adopted and Fully Implemented a Paid Family Leave Program of a Minimum of 6 Weeks?

Progress	Detail	# of States
Yes	10 Yes, and the state has adopted and fully implemented a paid family leave program that provides more than 6 weeks of benefits.	6
	9	
	8 Yes, the state has fully adopted and implemented a paid family leave program that provides a maximum of 6 weeks of benefits.	0
	7	
Some Progress	6 No, but the state has enacted a paid family leave law that will provide at least 6 weeks of benefits once fully implemented.	3
	5 No, but the state has a paid family leave program that provides fewer than 6 weeks of benefits.	1
	4 No, but the state has a paid family leave program for eligible state employees.	12
No	3 No, but there has been considerable legislative initiative to adopt and implement a paid family leave program.	0
	2	
	1 No, and there has been little legislative initiative to adopt and implement a paid family leave program.	29
Regressive	0	

*

* Updated



* Updated

State Variation in Paid Family Leave: Number of Weeks, Benefit Value, and Benefit Timeline

State With a Paid Family Leave Program	Maximum Number of Weeks of Paid Family Leave Benefit	Maximum Paid Family Leave Benefit Value	Date When Paid Family Leave Benefit Takes Effect
California	8	About 100% of the state average weekly wage	Already in effect.
Colorado	12	\$1,100 per week	Colorado voters approved a ballot measure to establish a paid family leave program in November 2020. Premiums will be effective in January 2023, and benefits will be effective in January 2024.
Connecticut	12	60 times the minimum fair wage	The state's paid family leave program was passed in 2019. Premiums will be implemented in 2021, and benefits will become effective in 2022.
District of Columbia	8	\$1,000 per week	Already in effect.
Massachusetts	12	\$850 per week	Already in effect.
New Jersey	12	70% of the state average weekly wage	Already in effect.
New York	10	67% of the state average weekly wage	Already in effect.
Oregon	12	120% of the state average weekly wage	The state enacted paid family leave legislation in 2019 through HB 2005. Premiums will be effective in January 2022, and benefits will be effective in January 2023.
Rhode Island	4	85% of the state average weekly wage for the preceding calendar year	Already in effect.
Washington	12	90% of the state average weekly wage	Already in effect.

*

* Updated

States highlighted in blue have enacted and implemented a paid family leave policy of a minimum of 6 weeks.

Source: State statutes and legislation on paid family leave, as of January 2021. For additional information, please refer to the Methods and Sources section of pn3policy.org.

Prenatal-to-3 Policy Clearinghouse

The screenshot shows a web browser window with the URL pn3policy.org/pn-3-state-policy-clearinghouse/. The page features the Prenatal-to-3 Policy Impact Center logo and navigation links for About, Research, Roadmap, and Exchange. The main heading is "State Policies and Strategies". Below this is a filter bar for "Evidence Review Findings" with four options: Effective (selected), Needs Further Study, Ineffective, and Harmful. A list of 15 policy items follows, each with a radio button indicating its status and a right-pointing chevron for more details.

Evidence Review Findings:	
<input checked="" type="radio"/> Effective	<input type="radio"/> Needs Further Study
<input type="radio"/> Ineffective	<input type="radio"/> Harmful

<input type="radio"/> Child Care Coaching	>	<input type="radio"/> Child Care Quality Rating and Improvement Systems	>
<input type="radio"/> Child Care Ratios	>	<input checked="" type="radio"/> Child Care Subsidies	>
<input type="radio"/> Child Care Workforce Compensation	>	<input type="radio"/> Child Care Workforce Qualifications	>
<input checked="" type="radio"/> Comprehensive Screening and Referral Programs	>	<input checked="" type="radio"/> Early Head Start	>
<input checked="" type="radio"/> Early Intervention Services	>	<input checked="" type="radio"/> Evidence-Based Home Visiting Programs	>
<input checked="" type="radio"/> Expanded Income Eligibility for Health Insurance	>	<input type="radio"/> Fair Work Scheduling	>
<input checked="" type="radio"/> Group Prenatal Care	>	<input checked="" type="radio"/> Paid Family Leave	>
<input type="radio"/> Paid Sick Leave	>	<input type="radio"/> Perinatal Telehealth Services	>
<input checked="" type="radio"/> Reduced Administrative Burden for SNAP	>	<input checked="" type="radio"/> State Earned Income Tax Credit	>
<input checked="" type="radio"/> State Minimum Wage	>	<input type="radio"/> Strategies to Reduce Maternal Mortality and Morbidity	>
<input type="radio"/> Two-Generation Programs for Parental Employment	>		

Prenatal-to-3 Policy Clearinghouse Review Method >

Evidence Review for Paid Family Leave

The screenshot shows a web browser window with the URL `pn3policy.org/policy-clearinghouse/paid-family-leave/`. The page features the Prenatal-to-3 Policy Impact Center logo and navigation links for About, Research, Roadmap, and Exchange. A left sidebar lists Policy Goals with expandable sections: Access to Needed Services, Parents' Ability to Work, Sufficient Household Resources, Healthy and Equitable Births, Parental Health and Emotional Wellbeing, Nurturing and Responsive Child-Parent Relationships, Nurturing and Responsive Child Care in Safe Settings, and Optimal Child Health and Development. The main content area is titled "Paid Family Leave" and includes an "Evidence Review Findings" section indicating the policy is "Effective". A highlighted box states: "Paid family leave positively impacts these policy goals:" followed by a list of eight goals. Below this, a paragraph summarizes the findings: "A state policy providing at least 6 weeks of paid family leave to parents with a new biological, adopted, or foster child increases the likelihood and length of leave-taking for mothers, reduces racial disparities in leave-taking, and has beneficial effects on maternal labor force attachment, parent and child health, and nurturing and responsive parenting." The text continues to discuss the requirements of such policies and their current implementation in various states.

www.pn3policy.org/interactive

New Jersey Policies

Paid Family Leave

YES

Has New Jersey adopted and fully implemented a paid family leave program of a minimum of 6 weeks following the birth, adoption, or the placement of a child into foster care?

Paid family leave increases access to paid time off from work, reduces racial disparities in leave-taking, boosts maternal labor force attachment, improves maternal mental health, fosters better child-parent relationships, and supports child health and development.

REGRESSIVE	NO		SOME PROGRESS			YES				
–	29 STATES	–	0 STATES	12 STATES	1 STATES	3 STATES	–	–	–	6 STATES

*

New Jersey

Yes, and the state has adopted and fully implemented a paid family leave program that provides more than six weeks of benefits.

New Jersey has a paid family leave program that first passed in 2008 and was implemented in 2009. House bill 3975 was passed in 2019 and increased the duration of benefits from 6 to 12 weeks, effective July 1, 2020. Two bills in the 2020 session that would alter some provisions of the paid family leave program (SB 2168 and SB 2285) were both pending when the legislature adjourned but are eligible to carryover to 2021.

5 states have adopted and fully implemented

Maximum number of weeks of paid family leave benefit

12

Maximum paid family leave benefit value

70% of the state Average Weekly Wage

* Updated

Data marked with a * should be interpreted with caution. For additional information regarding calculation details, data quality, and source data please refer to [Methods and Sources](#).

Contact

- Website: **pn3policy.org**
- Contact us: **pn3exchange@austin.utexas.edu**
- Follow on Twitter: **@pn3policy** and **#pn3policy**
- Subscribe for email updates: **http://bit.ly/email_pn3**



ZERO TO THREE
Early connections last a lifetime

The Case For Paid Leave

**Equity and Evidence:
Data Tools to Inform Paid
Family Leave
Policymaking**

January 28, 2021



How Does PFML Benefit Babies?

- The first three years are foundational and environmental factors significantly impact development.
- All families benefit from parenting supports that promote stability.
- Because stability is inextricably tied to healthy development, we must ensure that the early childhood experience is well-resourced.





STATE OF BABIES
YEARBOOK 2019



National



States



Impact
Areas



Take
Action



About
Us

Babies are born with unlimited potential.

For the 12 million infants and toddlers in the United States, the state where they are born and live during their first three years makes a big difference in their chance for a strong start in life.

The littlest among us face big challenges, and we can't afford to squander the potential of a single child.



ZERO TO THREE
Early connections last a lifetime

Centering Family Needs



ZERO TO THREE
Early connections last a lifetime

- Without a paid leave policy, families are forced to make impossible choices and miss crucial moments.
- Centering equitable work practices in public policy helps families meet basic needs.



Data on State Policies

- Paid Family and Medical Leave is one of more than 60 indicators we use to help policymakers, advocates and stakeholders see babies and families behind the numbers.
- As of last year, only 9 states had a paid family leave program, and only 11 states required employers to provide sick days.
- The U.S. is nearly alone among the world's nations in its lack of a federal paid family leave policy.



Think Babies Campaign



ZERO TO THREE
Early connections last a lifetime



Make their potential our priority.

What is *Think Babies*?

- ZERO TO THREE created the Think Babies campaign to bring nationwide attention to what babies and families need to thrive.
- Think Babies is a call to action for federal and state policymakers to prioritize the needs of infants, toddlers, and their families and invest in our future.



What Are We Learning From COVID-19?

- Temporary paid leave measures help families, but do not go far enough.
- Paid family and medical leave is a crucial safety net. Without it, our babies and their families face incredible uncertainty.





We owe it to our nation's families – and their infants and toddlers – to support working families.



Rhode Island's Paid Family Leave Program

- In 2013, Rhode Island joined two pioneering states (CA and NJ) and became the 3rd state to establish a state-managed paid family leave for workers.
- Our paid family leave program is called Temporary Caregivers Insurance (TCI).
- Like CA and NJ, our paid family leave program is built on our state's Temporary Disability Insurance (TDI) program, established in the 1940s



Rhode Island's Paid Family Leave Program

- In Rhode Island, both TDI and TCI are funded entirely through employee payroll reductions (no state or employer contribution).
- The TCI program provides job protection and 4 weeks of partial wage replacement for a new child (birth, adoption or foster care) or to care for a seriously ill family member.
- The TDI program provides partial wage replacement for disabling conditions including pregnancy complications (e.g. bed rest), severe maternal depression, and recovery from childbirth (usually, 6 weeks for a vaginal birth and 8 weeks for a c-section)



Rhode Island's Paid Family Leave Program

Advocacy Coalition

- Women's Fund of RI
- Economic Progress Institute
- Rhode Island KIDS COUNT
- RI Chapter of the American Academy of Pediatrics
- AARP
- The Senior Agenda
- Labor Unions
- Working Families Party
- Others



Earned Sick Leave in Rhode Island

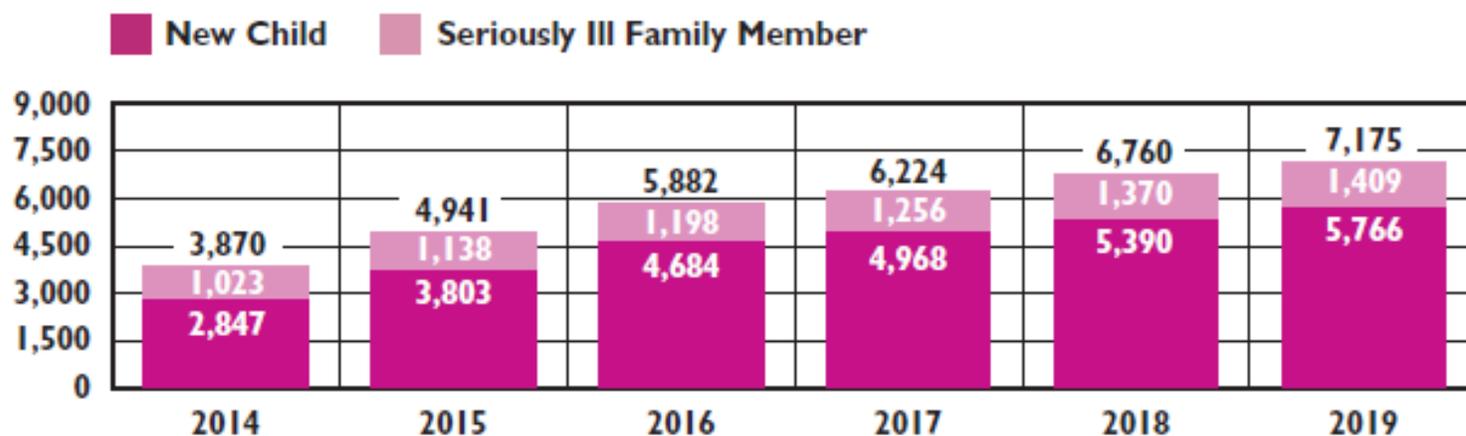
- In 2017, Rhode Island passed an Earned Sick and Safe Leave law requiring that employers provide at least 5 days of earned sick time per year.
- Workers can take this leave for BOTH preventive health care and leave during routine illnesses for themselves and for family members, including children. This leave can also be taken for domestic violence issues (moves, court appearances, etc.)
- There are 13 well-child visits in the first three years of life and young children often experience 7 to 8 routine illnesses per year (croup, flu, stomach bugs, colds, conjunctivitis, Hand Foot and Mouth disease, etc.)
- There are about 8-12 routine prenatal care visits for pregnant people. More for higher risk pregnancies.



Rhode Island's Paid Family Leave Program



Approved Temporary Caregiver Insurance Claims by Type, Rhode Island, 2014-2019



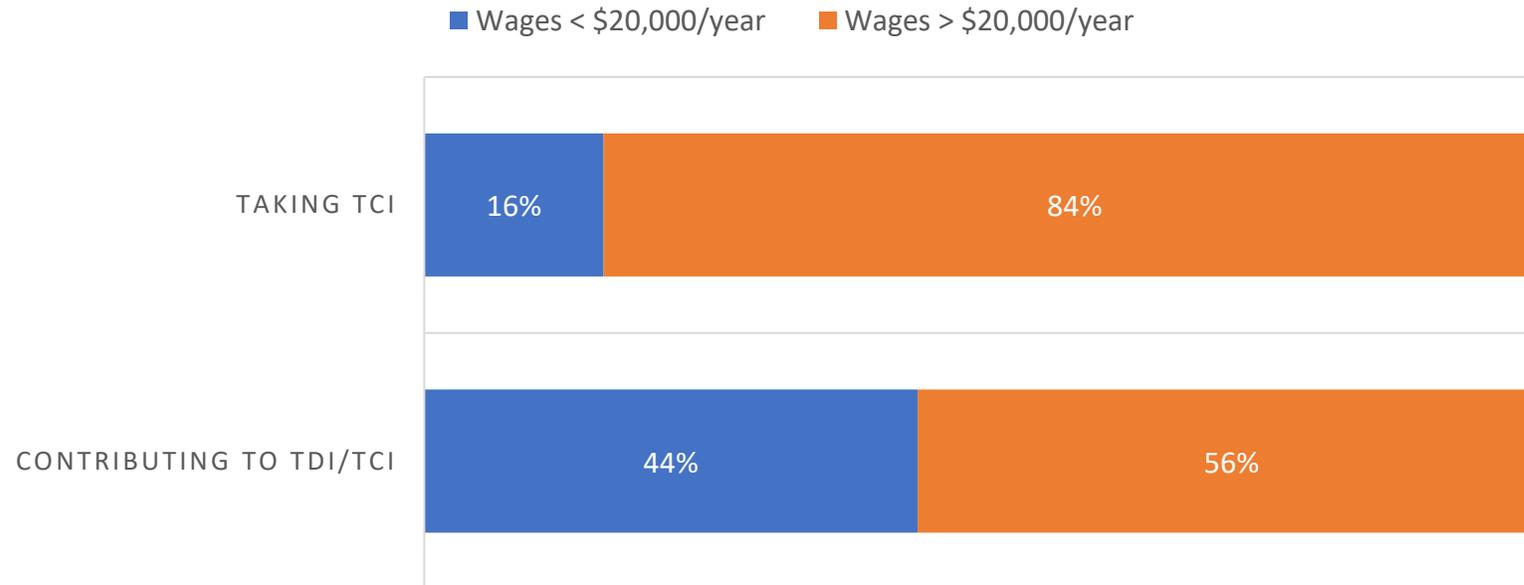
Source: Rhode Island Department of Labor and Training, TCI Program, 2014-2019

In 2019:

- 80% of approved claims were to bond with a new child and 20% were to care for a seriously ill family member
- Of the 5,766 approved claims to bond with a new child, 98% were for a newborn child and 2% were for a newly adopted, foster, or other child.
- 41% of approved claims to bond with a new child were filed by men and 59% were filed by women.

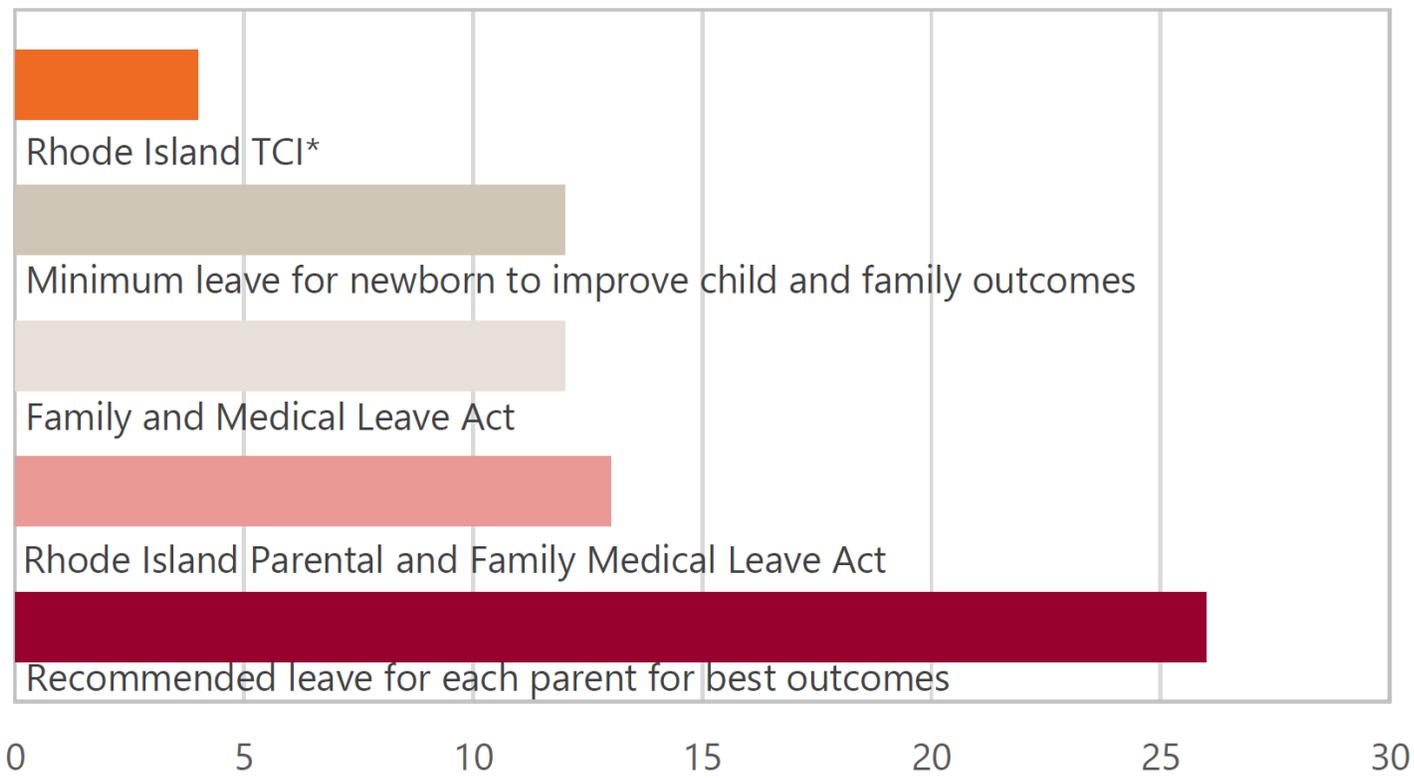
Rhode Island's Paid Family Leave Program

INDIVIDUALS CONTRIBUTING TO VS. RECEIVING TCI BY WAGE CATEGORY, RHODE ISLAND, 2018



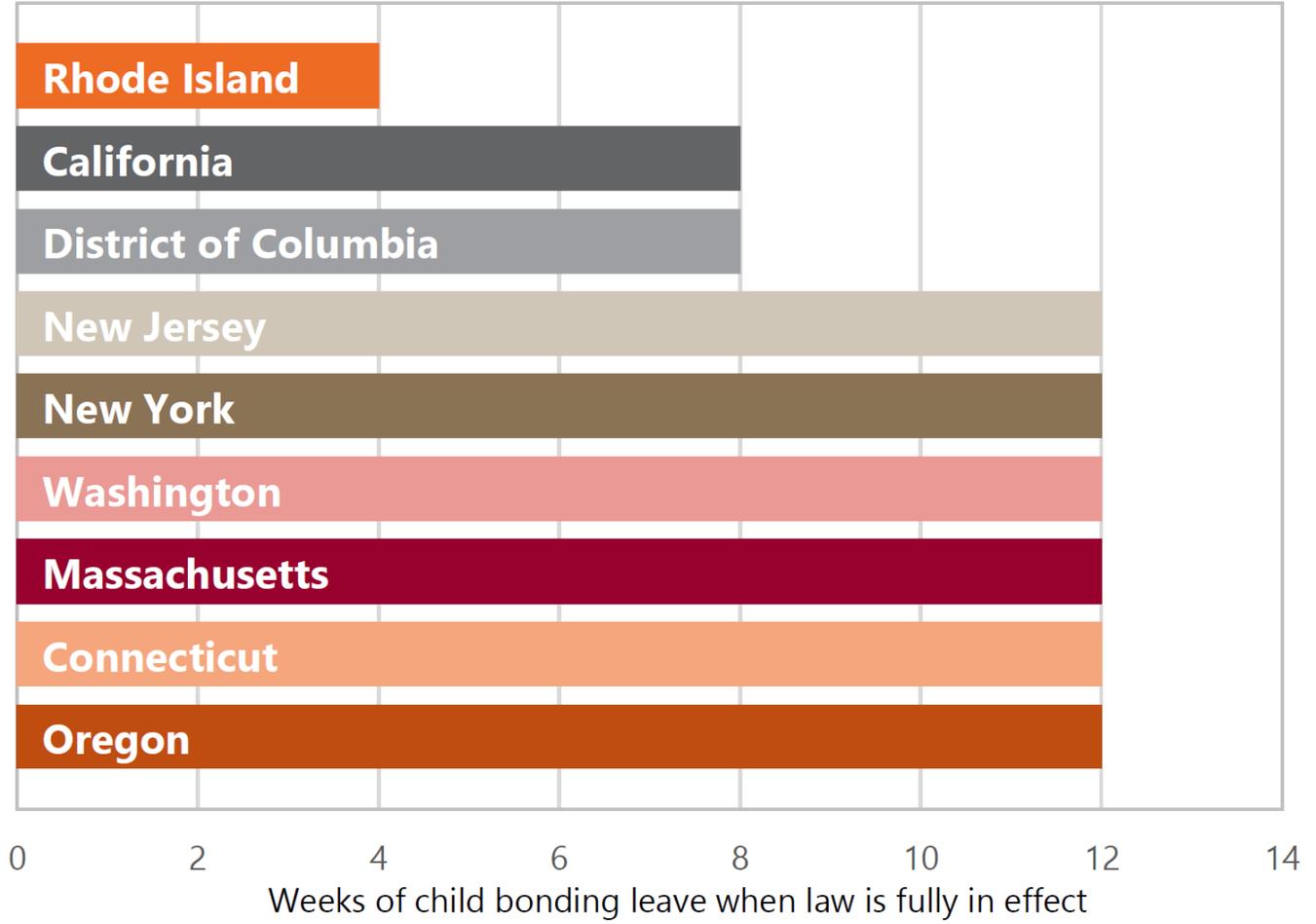
- Rhode Island's wage replacement rate (60%) is the lowest among the states that have launched or enacted a Paid Family Leave program.
- Low wage replacement rates limit use of paid family leave.

Rhode Island leaves workers facing weeks of unpaid leave under FMLA, PFMLA or doctors' recommendations

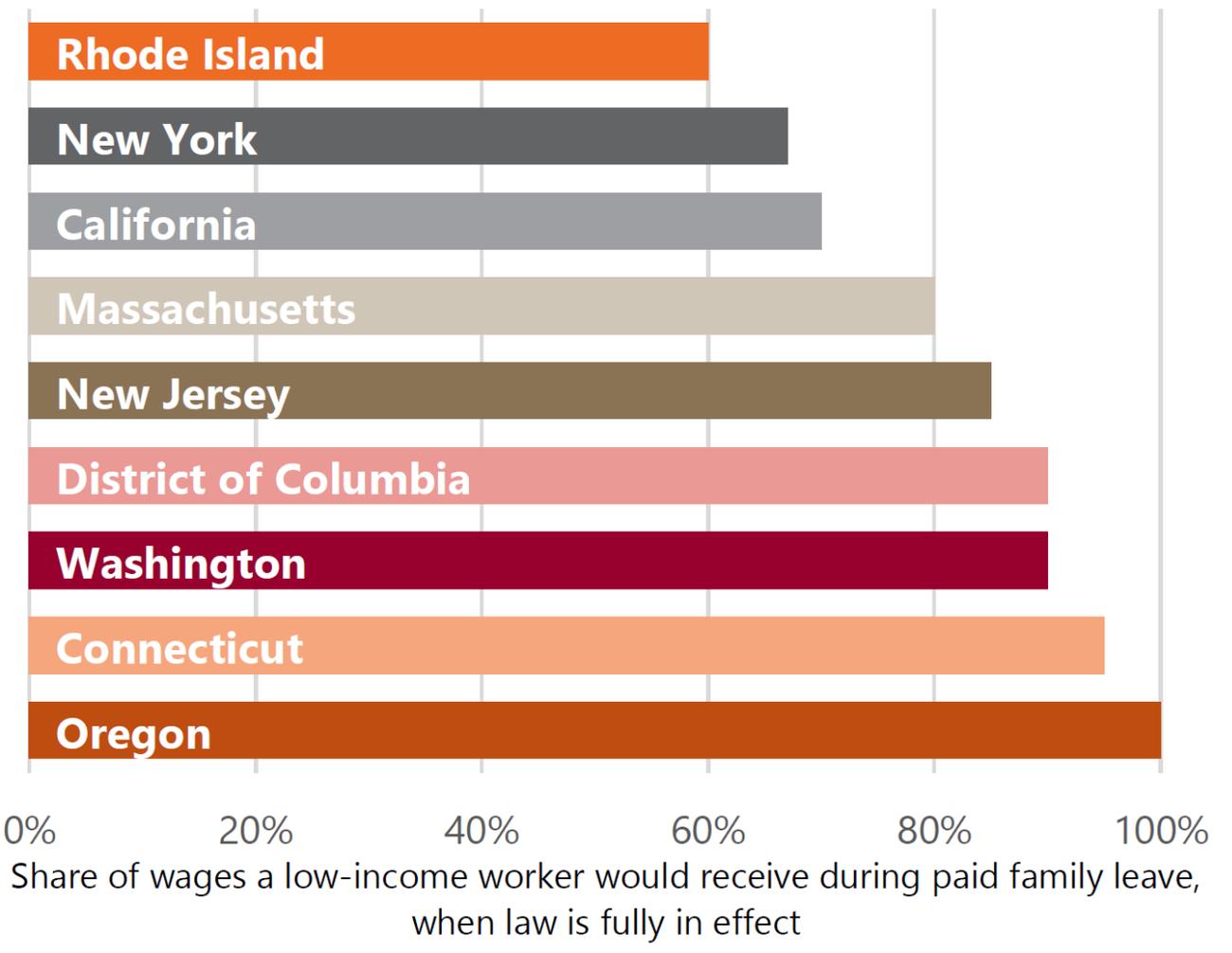


* Individuals who give birth are also eligible for 6 to 8 weeks of TDI to recover from childbirth. Taken consecutively with TCI, this can provide 10 to 12 weeks of leave for those who give birth.

Rhode Island TCI provides the shortest paid family leave of any state program



Rhode Island is falling behind as other states raise standards





2021 LEGISLATIVE & BUDGET PRIORITIES

- Enact strong state and federal **revenue** policies.
- Pass the **RI Child Care is Essential Act** to improve access to high-quality, affordable child care.
- Pass the **RI Early Educators Investment Act** to establish goals for early educator wages.
- Improve our state's **paid family leave program** (Temporary Caregivers Insurance) by increasing wage replacement rates and extending the number of weeks to match national benchmarks.





2021 LEGISLATIVE & BUDGET PRIORITIES

- Cover **community-based doula services** through Medicaid and private health insurance.
- Address the staffing crisis for the **RI Early Intervention program** and our network of voluntary **Family Home Visiting programs** by increasing Medicaid rates.
- Maintain full state funding and children's access to **RI Pre-K and Head Start**.
- Vote to **pass Question 3 and Question 5 on the March 2, 2021** ballot to expand access to affordable housing and help early learning programs improve their facilities.

Helpful National Resources on Paid Family Leave



ZERO TO THREE
Early connections last a lifetime

CLASP
The Center for Law and Social Policy



**prenatal-to-3
policy** 
IMPACT CENTER
RESEARCH FOR ACTION AND OUTCOMES



NCCP National Center for Children in Poverty
Putting research into action to improve lives



Legislative round-up on state PFML policies

Thursday, January 28, 2021

How NCSL Strengthens Legislatures



Policy Research

NCSL provides trusted, nonpartisan policy research and analysis



Connections

NCSL links legislators and staff with each other and with experts



Training

NCSL delivers training tailored specifically for legislators and staff



State Voice in D.C.

NCSL represents and advocates on behalf of states on Capitol Hill



Meetings

NCSL meetings facilitate information exchange and policy discussions

Early Care and Education Project

Prenatal through Prekindergarten

Legislative Tracking

- [ECE Legislative Tracking Database](#)
- [State Action on Coronavirus \(COVID-19\)](#)

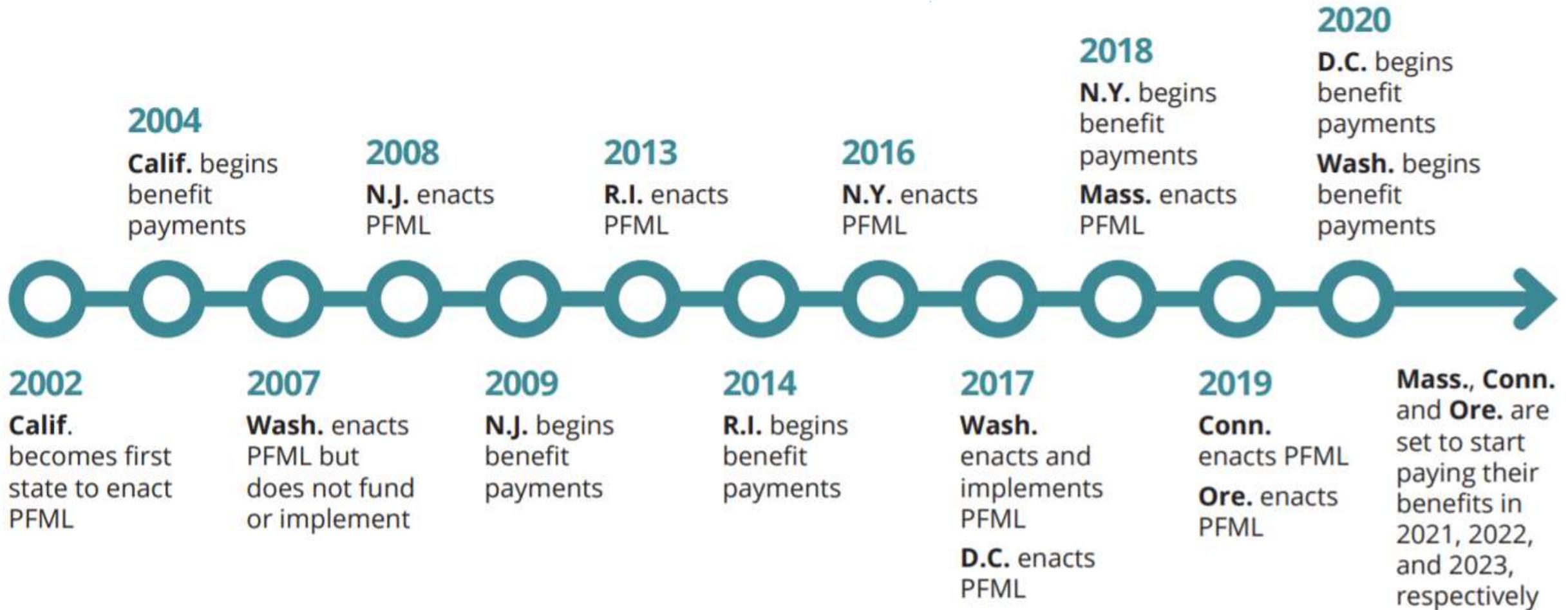
Writing

- **Reports:**
 - [Time Off to Care: State Actions on Paid Family Leave](#)
 - [ECE State Budget Actions FY 2020](#)
- **Magazine articles:**
 - [Legislators, Infants and Toddlers](#)
 - [Child Care a Necessity for Rebuilding the Economy](#)

Convenings

- Virtual
- In-person

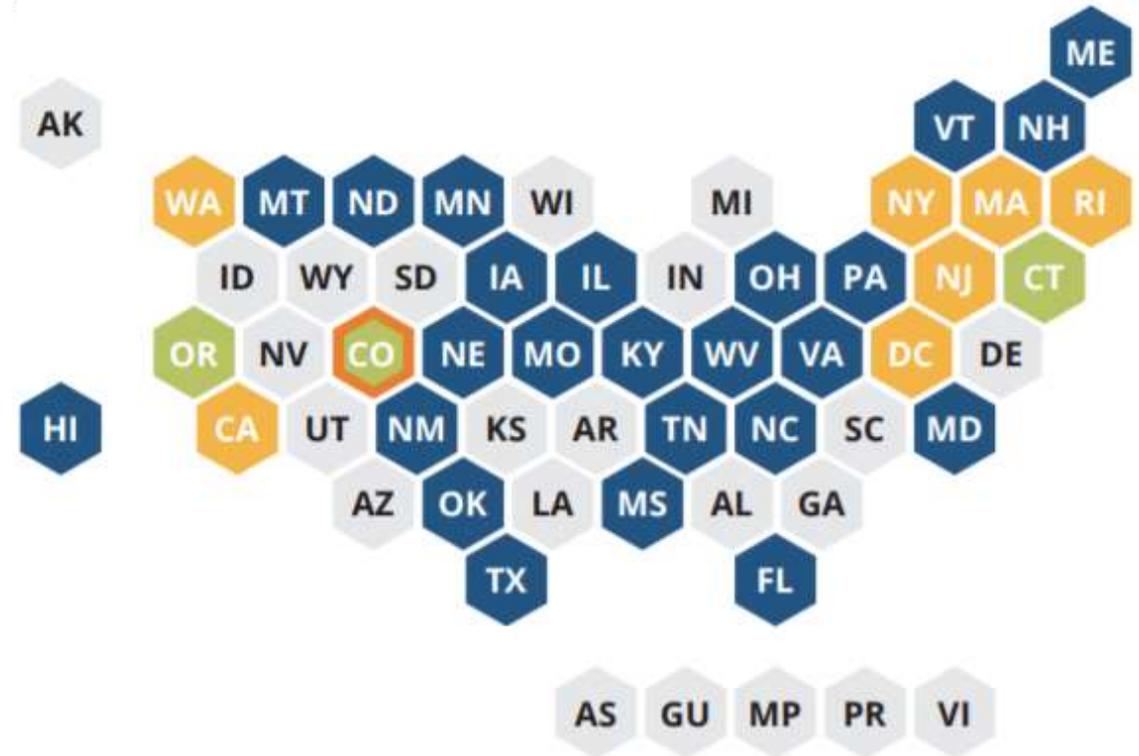
Timeline of Legislatively Enacted PFML in the States



2019 Paid Family Leave Proposals

In 2019, 24 states introduced paid leave legislation, and three states enacted laws

- Legislation introduced
- Legislation enacted
- Bill to study paid family leave and medical leave enacted
- Paid family and medical leave already in place

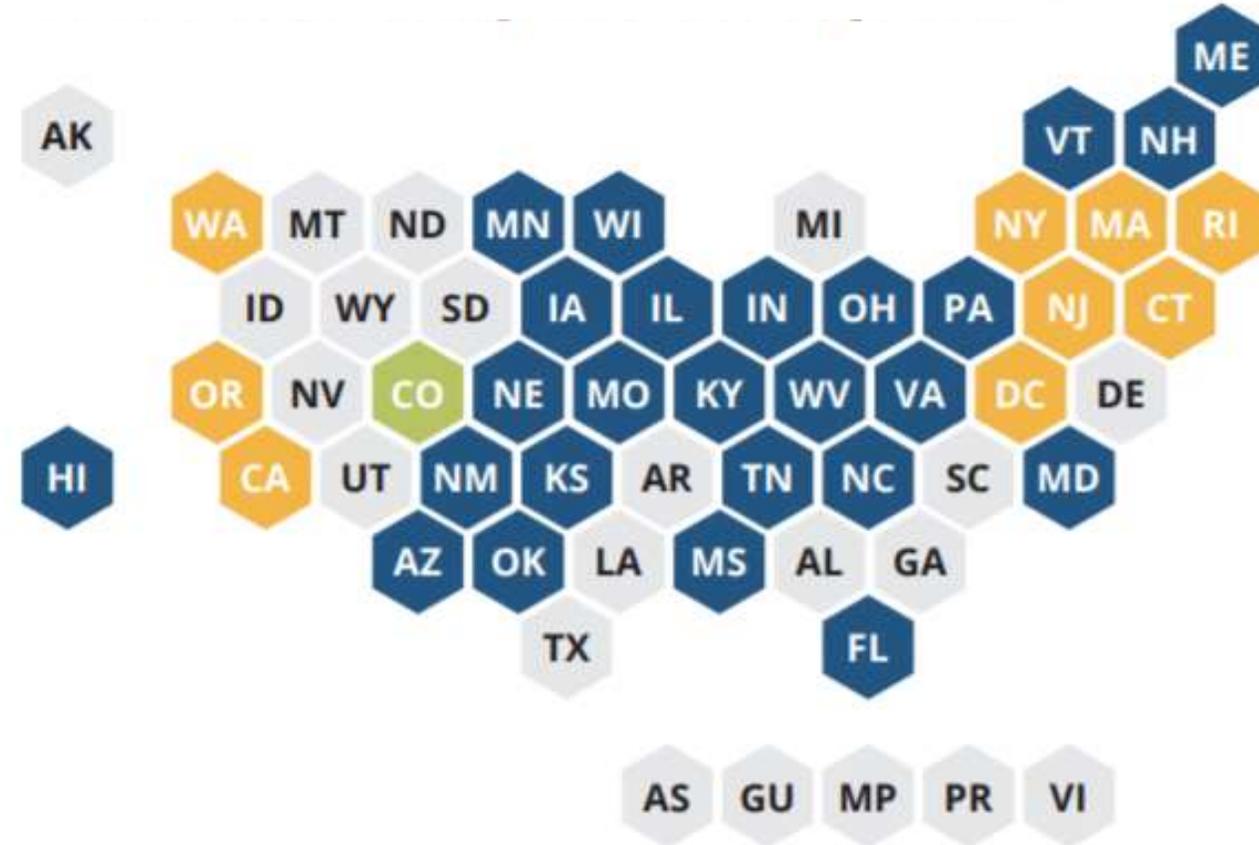


Source: NCSL, 2020

2020 Paid Family Leave Proposals

In 2020, 25 states introduced paid leave legislation, and one state enacted a law

- Legislation introduced
- Legislation enacted
- Paid family and medical leave already in place



Source: NCSL, 2020

2021 Legislative Action

State examples. Visit our [legislative database](#) under the topic *prenatal, infants and toddlers* for more.

Indiana

[SB 313](#) | [HB 1136](#)

- Paid Family and Medical Leave Program
- Identical bills
- Bipartisan support on the House bill
 - Sponsor Democrat & Co-Sponsor Republican
- Funded by appropriations from the general assembly and payroll contributions
- Self-employed can opt in



2021 Legislative Action

State examples. Visit our [legislative database](#) under the topic *prenatal, infants and toddlers* for more.

Nebraska

LB 290

- Adopt the Paid Family and Medical Leave Insurance Act
- Comprehensive paid family and medical leave program
- 11 co-sponsors
- Fund to consist of private donations, money transferred and contributions from covered employers

LB 459

- Change provisions relating to the cigarette tax
- \$30 Million for upfront administrative costs of PFML program



2021 Legislative Action

State examples. Visit our [legislative database](#) under the topic *prenatal, infants and toddlers* for more.

New Mexico

HB 38

- Paid Family & Medical Leave Act
- Public, private and self-employed can opt into the program
- Low-income individuals to receive a higher percentage of their income than higher earners
- Creation of a temporary advisory committee



2021 Legislative Action

State examples. Visit our [legislative database](#) under the topic *prenatal, infants and toddlers* for more.

Arizona

HB 2264

- Paid parental leave for state employees only
- One of a handful of leave related legislation
- 6-weeks of paid leave due to birth, adoption or placement on a child



South Carolina

SB 11 | HB 3560

- Paid parental leave for state employees
- Identical bills
- 12-weeks paid to any full-time state employee due to birth or adoption



NCSL resources

- Report | Fall 2020
[Time Off to Care: State Actions on Paid Family Leave](#)
- [Legislative Database](#)
- Leave Related Webpages
 - [Employee Leave Overview](#)
 - [Paid Family Leave Resources](#)
 - [Paid Sick Leave](#)
- Results-Driven Governing
 - [Overview](#)
 - Report [*The ABC's of Evidence-Informed Policymaking*](#)



Feel free to connect

Alison May
Early Care and Education Policy Associate

Alison.May@ncsl.org | 303-856-1473



Resources

- Prenatal-to-3 Policy Impact Center
 - [Prenatal-to-3 State Policy Roadmap](#)
 - [Resources on the Evidence on Paid Family Leave](#)
- ZERO TO THREE
 - [The Child Development Case for a National Paid Family and Medical Leave Program](#)
 - [Paid Leave Advocacy Toolkit](#)
 - [State of Babies Yearbook](#)
- Family Forward
 - [Family Forward Website](#)
- Rhode Island Kids Count
 - [Rhode Island Kids Count Website](#)
- NCSL
 - [Time off to Care: State Actions on Paid Family Leave](#)
 - [Early Care and Education Bill Tracking Legislative Database](#)
 - [Results-Driven Governing at NCSL](#)