

# 2026 SESSION

INTRODUCED

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**HOUSE BILL NO. 1207**

Offered January 14, 2026

Prefiled January 14, 2026

A BILL to amend the Code of Virginia by adding in Title 60.2 a chapter numbered 8, consisting of sections numbered 60.2-800 through 60.2-821, relating to paid family and medical leave insurance program; notice requirements; civil action.

Patron—Sewell

Committee Referral Pending

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding in Title 60.2 a chapter numbered 8, consisting of sections numbered 60.2-800 through 60.2-821, as follows:

CHAPTER 8.

*PAID FAMILY AND MEDICAL LEAVE INSURANCE PROGRAM.*

**§ 60.2-800. Definitions.**

As used in this chapter, unless the context requires a different meaning:

"Application year" means the 12-month period beginning on the first day of the calendar week in which an individual files an application for family and medical leave benefits.

"Armed Forces" means the Armed Forces of the United States, the Reserves of the Armed Forces of the United States, or the Virginia National Guard.

"Board" means the Paid Family and Medical Leave Advisory Board.

"Child" includes a child of any age, including an adult child.

"Covered individual" means any individual other than an employee of the Commonwealth who:

1. Either:

a. Meets the minimum monetary eligibility criteria set forth in subdivision A 1 of § 60.2-612; or

b. Is self-employed, elects coverage, and meets the requirements of § 60.2-802;

2. Meets the administrative requirements outlined in this chapter and in regulations; and

3. Submits an application.

"Covered service member" means either (i) a member of the Armed Forces who is (a) undergoing medical treatment, recuperation, or therapy; (b) otherwise in outpatient status; or (c) otherwise on the temporary disability retired list for a serious injury or illness that was incurred by the member in the line of duty while on active duty in the Armed Forces, or a serious injury or illness that existed before the beginning of the member's active duty and was aggravated by service in the line of duty, or (ii) a former member of the Armed Forces who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness that was incurred by the member in the line of duty while on active duty in the Armed Forces, or a serious injury or illness that existed before the beginning of the member's active duty and was aggravated by service in the line of duty and manifested before or after the member was discharged or released from service.

"Domestic partner" means a person not less than 18 years of age who (i) is dependent upon the covered individual for support as shown by either unilateral dependence or mutual interdependence that is evidenced by a nexus of factors, including (a) common ownership of real or personal property, (b) common householding, (c) children in common, (d) signs of intent to marry, (e) shared budgeting, and (f) the length of the personal relationship with the covered individual, or (ii) has registered as the domestic partner of the covered individual with any registry of domestic partnerships maintained by the employer of either party, or in any state, county, city, town, or village in the United States.

"Employer" has the same meaning as provided in § 60.2-210, except that, for the purposes of this chapter, "employer" does not include the Commonwealth.

"Family and medical leave benefits" means the benefits provided under the terms of this chapter.

"Family member" means:

1. A biological, adopted, or foster child, a stepchild or legal ward, a child of a domestic partner, or a child to whom the covered individual stands in loco parentis;

2. A biological, adoptive, or foster parent, stepparent, or legal guardian of a covered individual or a covered individual's spouse or domestic partner, or a person who stood in loco parentis when the covered individual or the covered individual's spouse or domestic partner was a minor child;

3. A person to whom the covered individual is legally married under the laws of any state, or a domestic partner of a covered individual;

4. A grandparent, grandchild, or sibling, whether through a biological, foster, adoptive, or step relationship, of the covered individual or the covered individual's spouse or domestic partner; or

INTRODUCED

HB1207

59       5. Any individual whose close association with a covered individual is the equivalent of a family  
60       relationship.

61       "FMLA" means the federal Family and Medical Leave Act, 29 U.S.C. § 2601 et seq.

62       "Fund" means the Family and Medical Leave Insurance Trust Fund established under § 60.2-805.

63       "Health care provider" means a person licensed under the law of the jurisdiction in which such person  
64       practices to provide medical or emergency services, including doctors, nurses, emergency room personnel,  
65       and certified midwives.

66       "Military member" means a member of the Armed Forces.

67       "Next of kin" has the meaning ascribed thereto in § 101(17) of the FMLA, 29 U.S.C. § 2611(17).

68       "Qualifying exigency leave" means leave based on a need arising out of a covered individual's family  
69       member's active duty service or notice of an impending call or order to active duty in the Armed Forces,  
70       including providing for the care or other needs of the military member's child or other family member,  
71       making financial or legal arrangements for the military member, attending counseling, attending military  
72       events or ceremonies, spending time with the military member during a rest and recuperation leave or  
73       following return from deployment, or making arrangements following the death of the military member.

74       "Retaliatory personnel action" means denial of any right guaranteed under this chapter, including any  
75       threat, discharge, suspension, demotion, or reduction of hours, any other adverse action against a covered  
76       individual for the exercise of any right guaranteed under this chapter, or reporting or threatening to report a  
77       covered individual's suspected citizenship or immigration status or the suspected citizenship or immigration  
78       status of a family member of the covered individual to a federal, state, or local agency. "Retaliatory  
79       personnel action" also includes interference with or punishment for in any manner participating in or  
80       assisting an investigation, proceeding, or hearing under this chapter.

81       "Safety services" means:

82       1. Legal or law-enforcement assistance or remedies to ensure the health and safety of an individual,  
83       including preparing for and participating in protective order proceedings or other civil or criminal legal  
84       proceedings related to domestic violence, harassment, sexual assault, or stalking;

85       2. Medical treatment or recovery services for injuries caused by domestic violence, harassment, sexual  
86       assault, or stalking;

87       3. Counseling from a licensed mental health professional relating to an experience of domestic violence,  
88       harassment, sexual assault, or stalking;

89       4. Services from a victim services provider; and

90       5. Relocation and home security services to ensure the safety of an individual who has experienced  
91       domestic violence, harassment, sexual assault, or stalking.

92       "Serious health condition" means an illness, injury, impairment, pregnancy, recovery from childbirth, or  
93       physical or mental condition that involves inpatient care in a hospital, hospice, or residential medical care  
94       facility or continuing treatment by a health care provider.

95       "Workweek" means a calendar week.

96       **§ 60.2-801. Paid family and medical leave insurance program.**

97       A. By January 1, 2028, the Commission shall establish and administer a paid family and medical leave  
98       insurance program and shall begin collecting contributions as provided in this chapter. By January 1, 2029,  
99       the Commission shall begin receiving claims and paying family and medical leave benefits to covered  
100       individuals.

101       B. Information contained in the files and records relating to a claimant under this chapter are  
102       confidential and not open to public inspection other than to public employees in the performance of their  
103       official duties. However, such claimant or an authorized representative of such claimant may review such  
104       files and records or receive specific information from such records upon the presentation of such claimant's  
105       signed authorization.

106       C. The Department of Human Resource Management shall adopt rules to ensure that its policies relating  
107       to family and medical leave for employees of the Commonwealth, including parental leave under § 2.2-1210,  
108       provide employees of the Commonwealth with leave benefits equal to or greater than the leave benefits  
109       provided to a covered individual under the paid family and medical leave insurance program pursuant to this  
110       chapter, including as described in subdivision A 1 of § 60.2-816.

111       D. The Commissioner shall adopt regulations as necessary to implement this chapter, including (i) a  
112       process for receiving claims filed under this chapter, (ii) the form of any application, (iii) the timeline and  
113       process for providing notice of a claim to an employer, (iv) the timeline and process for making initial claim  
114       determinations, and (v) the timeline and process for requesting information prior to any decision on a claim  
115       being rendered.

116       **§ 60.2-802. Eligibility for benefits; certification.**

117       A. Beginning January 1, 2029, family and medical leave benefits shall be payable to any covered  
118       individual who:

119       1. Because of birth, adoption, or placement through foster care, is caring for a new child during the first  
120       year after the birth, adoption, or placement of that child;

121     2. Is caring for a family member with a serious health condition;

122     3. Has a serious health condition that makes the covered individual unable to perform the functions of the  
123 position of such individual's employment;

124     4. Is caring for a covered service member who is the covered individual's next of kin or other family  
125 member;

126     5. Is eligible for qualifying exigency leave arising out of the fact that a family member of the covered  
127 individual is on active duty, or has been notified of an impending call or order to active duty, in the Armed  
128 Forces; or

129     6. Is seeking safety services for the covered individual or a family member.

130     B. A claim for family and medical leave benefits shall include one of the following supporting  
131 certifications:

132     1. For a claimant seeking family and medical leave benefits due to a serious health condition, certification  
133 from a physician or health care provider (i) describing such condition, (ii) stating the date on which such  
134 condition commenced or is expected to commence and the probable duration of such condition, (iii) including  
135 a statement that such claimant is unable to perform job functions due to such condition, and (iv) including  
136 other appropriate medical facts as required by the Commission. Such certification shall be provided between  
137 60 days prior to and 90 days after the start date of leave.

138     2. For a claimant seeking family and medical leave benefits due to the serious health condition of a family  
139 member, certification from a physician or health care provider (i) describing such condition, (ii) stating the  
140 date on which such condition commenced or is expected to commence and the probable duration of such  
141 condition, (iii) including a statement that such condition requires such claimant to care for such family  
142 member and an estimated duration of such care, and (iv) including other appropriate medical facts as  
143 required by the Commission. Such certification shall be provided between 60 days prior to and 90 days after  
144 the start date of leave.

145     3. For a claimant seeking family and medical leave benefits due to the birth of a child, certification in the  
146 form of either (i) such child's birth certificate or (ii) another document issued by a health care provider or  
147 physician stating such child's birth date.

148     4. For a claimant seeking family and medical leave benefits due to the placement of a child with such  
149 claimant for adoption or foster care, certification in the form of a document issued by such child's health care  
150 provider or physician, by an adoption or foster care agency involved in such placement, or by other  
151 individuals as determined by the Commission that verifies the occurrence and date of such placement.

152     5. For a claimant seeking family and medical leave benefits for qualifying exigency leave, certification  
153 including (i) a copy of the family member's active-duty orders, (ii) other documentation issued by the Armed  
154 Forces, or (iii) other documentation as permitted by the Commission.

155     6. For a claimant seeking family and medical leave benefits in order to care for a family member who is a  
156 covered service member, certification including (i) the date on which the serious health condition commenced  
157 or is expected to commence, (ii) the probable duration of the condition, (iii) the appropriate medical facts  
158 within the knowledge of the health care provider as required by the Commission, (iv) a statement that the  
159 claimant is needed to care for the family member, (v) an estimate of the amount of time that the claimant is  
160 needed to care for the family member, and (vi) an attestation by the claimant that the health condition is  
161 connected to the covered service member's military service as required by this chapter. Such certification  
162 shall be provided between 60 days prior to and 90 days after the start date of leave.

163     7. For a claimant seeking family and medical leave benefits to seek safety services, a signed statement by  
164 the covered individual certifying that such benefits are required.

165     C. Any medical or health information required under this section shall be confidential and shall not be  
166 disclosed except with permission from the claimant providing such information unless disclosure is otherwise  
167 required by law. Nothing in this section shall be construed to require a claimant to provide as certification  
168 any information from a health care provider that would be in violation of § 32.1-127.1:03, § 1177 of the  
169 Social Security Act, 42 U.S.C. § 1320d-6, or the regulations promulgated under § 264(c) of the Health  
170 Insurance Portability and Accountability Act of 1996, P.L. 104-191.

171     **§ 60.2-803. Duration of benefits.**

172     A. Family and medical leave benefits shall be payable under § 60.2-801 for a maximum of 12 weeks in an  
173 application year for any covered individual.

174     B. Family and medical leave benefits shall be payable to a covered individual starting the first calendar  
175 day in an application year that such covered individual meets the eligibility requirements of § 60.2-802.

176     C. The first payment of family and medical leave benefits shall be made to a covered individual no later  
177 than two weeks after (i) the Commission has approved an initial claim pursuant to this chapter or (ii) the  
178 duration of leave pursuant to an approved claim pursuant to this chapter has commenced. Subsequent  
179 payments shall be made at least every two weeks thereafter.

180     **§ 60.2-804. Amount of benefits.**

181     A. A covered individual's weekly benefit amount shall be 80 percent of such covered individual's average  
182 weekly wages during the 12 months preceding such covered individual's initial claim filing, or 80 percent of

183 such covered individual's average weekly wages during the time such covered individual worked if less than  
184 12 months, subject to the maximum specified in subsection C.

185 B. A covered individual's minimum weekly benefit amount shall not be less than \$100 per week except that  
186 if such covered individual's average weekly wage is less than \$100 per week, the weekly benefit amount shall  
187 be such covered individual's full wage.

188 C. A covered individual's maximum weekly benefit amount shall be 100 percent of the state average  
189 weekly wage, as defined in subsection B of § 65.2-500. By September 30 of each year, the Commission shall  
190 adjust the maximum weekly benefit to reflect any changes in such state average weekly wage. The adjusted  
191 maximum weekly benefit amount shall take effect on the following January 1.

192 D. Claims pursuant to this chapter shall be payable for at least eight hours of family and medical leave  
193 accrued in one workweek unless the Commission sets a lower threshold.

194 **§ 60.2-805. Family and Medical Leave Insurance Trust Fund; appropriation prohibition;  
195 reimbursement.**

196 A. There is hereby created in the state treasury a special nonreverting fund to be known as the Family and  
197 Medical Leave Insurance Trust Fund. The Fund shall be established on the books of the Comptroller. All  
198 payroll contributions remitted pursuant to this chapter, all funds appropriated for the purposes of the Fund,  
199 and any gifts, donations, grants, bequests, and other funds shall be paid into the state treasury and credited  
200 to the Fund. Interest earned on moneys in the Fund shall remain in the Fund and be credited to it. Any  
201 moneys remaining in the Fund, including interest thereon, at the end of each fiscal year shall not revert to the  
202 general fund but shall remain in the Fund.

203 B. Moneys in the Fund shall be used solely for the payment of benefits under the paid family and medical  
204 leave insurance program established by the Commission pursuant to this chapter, the administration of such  
205 program, and any start-up costs associated with such program, including any required payment as provided  
206 in subsection D.

207 C. The General Assembly shall not appropriate or transfer any of the payroll contributions remitted to the  
208 Fund for any purpose other than purposes provided for in this section.

209 D. Any moneys provided in the appropriation act for the purposes of establishing the paid family and  
210 medical leave insurance program shall be repaid from the Fund to the general fund by January 1, 2034.

211 E. Expenditures and disbursements from the Fund shall be made by the State Treasurer on warrants  
212 issued by the Comptroller upon written request signed by the Commissioner or his designee.

213 **§ 60.2-806. Contributions.**

214 A. Payroll contributions to the Fund shall be authorized in order to finance the payment of benefits under  
215 and the administration of the paid family and medical leave insurance program.

216 B. Beginning on July 1, 2028, each employer shall remit to the Fund contributions in the form and  
217 manner determined by the Commission. No later than October 1, 2027, and annually thereafter, the  
218 Commissioner shall fix the contribution rate for the coming calendar year in the manner described in this  
219 subsection, taking into account the repayment requirement provided for in subsection D of § 60.2-805. For  
220 calendar years 2028 and 2029, the Commissioner shall fix such contribution rate based on sound actuarial  
221 principles. For calendar year 2030 and thereafter, the Commissioner shall first certify and publish the  
222 following information:

223 1. The total amounts of the previous fiscal year's expenditures for (i) family and medical leave benefits  
224 paid and (ii) the administration of the paid family and medical leave insurance program;

225 2. The total amount remaining in the Fund at the close of such fiscal year; and

226 3. The amount by which the contribution rate shall be adjusted to ensure that the projected balance of the  
227 Fund as a percentage of total program expenditure does not fall below 40 percent. The contribution rate  
228 adjustment, if any, made as the result of the Commissioner's certification and report under this subsection  
229 shall supersede the rate previously set forth and shall become effective on January 1 of the following  
230 calendar year.

231 C. A self-employed individual electing coverage under § 60.2-815 shall be responsible for the employer's  
232 share of contributions set forth in subsection B on that individual's income from self-employment.

233 D. Each employer of more than 10 employees shall (i) deduct from each employee's wages an amount  
234 equal to 50 percent, or such lesser percentage as may be agreed upon by such employer and employee, of the  
235 contribution required per employee pursuant to subsection B and (ii) remit the full contribution required per  
236 employee pursuant to subsection B to the Commission for deposit into the Fund.

237 E. Each employer of 10 or fewer employees shall deduct from each employee's wages an amount equal to  
238 50 percent of the contribution per employee required of an employer of more than 10 employees pursuant to  
239 subsection B. Such employer of 10 or fewer employees shall remit such deducted amount to the Commission  
240 for deposit into the Fund and shall not be required to make additional contributions.

241 F. Contributions under this section shall not be required for an employee's wages or an individual's  
242 income from self-employment above the contribution and benefit base limit established annually by the  
243 federal Social Security Administration for purposes of the federal Old-Age, Survivors, and Disability  
244 Insurance Benefits program limits pursuant to 42 U.S.C. § 430.

**§ 60.2-807. Reduced leave schedule.**

245 A covered individual shall have the option to receive paid family and medical leave benefits on an  
 246 intermittent or reduced leave schedule in which all of the leave authorized under this chapter is not taken  
 247 sequentially. Family and medical leave benefits for an intermittent or reduced leave schedule shall be  
 248 prorated.

249 B. Such covered individual shall make a reasonable effort to schedule paid family and medical leave  
 250 taken pursuant to this section so as not to unduly disrupt the operations of such covered individual's  
 251 employer. Such covered individual shall provide such employer with prior notice of the schedule on which  
 252 such covered individual will be taking the leave, to the extent practicable. Paid family and medical leave  
 253 taken pursuant to this section shall not result in a reduction of the total amount of leave to which a covered  
 254 individual is entitled beyond the amount of leave actually taken.

**§ 60.2-808. Leave and employment protection; remedies.**

255 A. Any covered individual who receives family and medical leave benefits shall, upon the expiration of  
 256 such leave, be entitled to restoration by the employer to the position held by such covered individual when  
 257 such leave commenced, or to a position with equivalent seniority, status, employment benefits, pay, and other  
 258 terms and conditions of employment, including fringe benefits and service credits, to which the covered  
 259 individual had been entitled at the commencement of such leave.

260 B. During any leave taken pursuant to this chapter, an employer shall maintain any health care benefits to  
 261 which a covered individual was entitled prior to taking such leave as if the covered individual had continued  
 262 working continuously from the date such covered individual commenced the leave until the date such covered  
 263 individual returns from leave, and such covered individual shall continue to pay his share of the cost of  
 264 health care benefits as required prior to the commencement of the leave.

265 C. Any employer that violates this section or § 60.2-809 shall be liable to any affected covered individual  
 266 for:

267 1. Damages equal to:

268 a. The amount of:

269 (1) Any wages, salary, employment benefits, or other compensation denied or lost to such covered  
 270 individual due to the violation; or

271 (2) In a case in which wages, salary, employment benefits, or other compensation has not been denied or  
 272 lost to the covered individual, any actual monetary losses sustained by the covered individual due to the  
 273 violation, such as the cost of providing care, up to a sum equal to 12 weeks of wages or salary for the  
 274 covered individual;

275 b. Interest on the amount described in subdivision a, calculated at the legal rate; and

276 c. An additional amount as liquidated damages equal to the sum of the amount described in subdivision a  
 277 and the interest described in subdivision b, except that if an employer who has violated this section or  
 278 § 60.2-809 proves to the satisfaction of the court that the act or omission that violated this section or  
 279 § 60.2-809 was in good faith and that the employer had reasonable grounds for believing that the act or  
 280 omission was not a violation of this section or § 60.2-809, such court may reduce the amount of the liability  
 281 to the amount and interest determined under subdivisions a and b, respectively; and

282 2. Such equitable relief as may be appropriate, including employment, reinstatement, and promotion.

283 D. The court in an action to recover such damages or equitable relief prescribed in subsection C shall, in  
 284 addition to any judgment awarded to the plaintiff, allow reasonable attorney fees, reasonable expert witness  
 285 fees, and other costs of the action to be paid by the defendant.

286 E. Except as provided in subsection F, an action may be brought for a violation of this section or  
 287 § 60.2-809 not later than two years after the date of the last event constituting the alleged violation for which  
 288 the action is brought.

289 F. In the case of such action brought for a willful violation of this section or § 60.2-809, such action may  
 290 be brought within three years of the date of the last event constituting the alleged violation for which such  
 291 action is brought.

**§ 60.2-809. Retaliatory personnel actions prohibited.**

292 A. No employer or other person shall interfere with, restrain, or deny the exercise of, or the attempt to  
 293 exercise, any right protected under this chapter.

294 B. No employer, employment agency, employee organization, or other person shall take retaliatory  
 295 personnel action or otherwise discriminate against an individual due to such individual's lawful exercise of  
 296 rights protected under this chapter. Such rights include the right to request, file for, apply for, or use benefits  
 297 provided for under this chapter; the right to communicate to the employer or any other person or entity that  
 298 such individual (i) intends to file a claim, a complaint with the Commission or a court, or an appeal or (ii)  
 299 has testified in, intends to testify in, or has otherwise assisted in any investigation, hearing, or proceeding  
 300 under this chapter; the right to inform any person about any employer's alleged violation of this chapter; and  
 301 the right to inform any individual of the individual's rights under this chapter.

302 C. It is unlawful for an employer's absence control policy to count paid family and medical leave taken  
 303 under this chapter as an absence that may lead to or result in discipline, discharge, demotion, suspension, or

307 any other adverse action.

308 D. Protections of this section shall apply to any person who mistakenly but in good faith alleges a  
309 violation of this chapter.

310 E. This section shall be enforced as provided in subsections C through F of § 60.2-808.

311 **§ 60.2-810. Coordination of benefits; applicability of chapter.**

312 A. Leave taken with wage replacement under this chapter that also qualifies as leave under the FMLA  
313 shall run concurrently with leave taken under the FMLA.

314 B. An employer may require that payments made pursuant to this chapter be made concurrently or  
315 otherwise coordinated with payments made or leave allowed under the terms of disability or family care  
316 leave under a collective bargaining agreement or employer policy. Such employer shall give employees  
317 written notice of this requirement.

318 C. Nothing in this chapter shall be construed to limit or reduce an employer's obligation to comply with a  
319 collective bargaining agreement, an employer policy, or any other provision of law requiring more generous  
320 leave.

321 D. No provision of this chapter shall apply to an employer or employee as such terms are defined in 45  
322 U.S.C. § 351.

323 E. An individual's right to leave under this chapter shall not be diminished by a collective bargaining  
324 agreement entered into or renewed, or an employer policy adopted or retained, after January 1, 2027. Any  
325 agreement by an individual to waive the individual's rights under this chapter is void as against public  
326 policy.

327 **§ 60.2-811. Notice requirements.**

328 A. An employer shall provide written notice as prescribed in this subsection to each employee upon hiring  
329 and annually thereafter. An employer shall also provide such written notice to an employee when such  
330 employee requests leave pursuant to this chapter or when the employer acquires knowledge of an employee's  
331 intent to take leave that may meet the eligibility requirements of § 60.2-802. Such notice shall include (i) a  
332 statement of an employee's right to family and medical leave benefits pursuant to this chapter and the terms  
333 under which such benefits may be used; (ii) the amount of family and medical leave benefits available; (iii)  
334 the procedure for filing a claim for family and medical leave benefits; (iv) a statement of the right to job  
335 protection and benefits continuation under § 60.2-808; (v) a statement that discrimination and retaliatory  
336 personnel actions against a person for requesting, applying for, or using family and medical leave benefits  
337 are prohibited under § 60.2-809; and (vi) a statement that the employee has a right to file a complaint for a  
338 violation of this chapter. An employer shall also display and maintain a poster provided by the Commission  
339 in a conspicuous place accessible to employees at the employer's place of business that contains the  
340 information required by this section in English, Spanish, and any language that is the first language spoken  
341 by at least five percent of the employer's workforce. The Commissioner may adopt regulations to establish  
342 additional requirements concerning the means by which employers shall provide such notice.

343 B. An employee seeking to take leave under the provisions of this chapter shall notify his employer as  
344 soon as practicable.

345 **§ 60.2-812. Appeals.**

346 A. The Commissioner shall establish a system for appeals within 90 days of a denial of a claim for family  
347 and medical leave benefits. In establishing such system, the Commissioner may utilize any and all procedures  
348 and appeals mechanisms established under this title.

349 B. Judicial review of any decision with respect to family and medical leave benefits shall be permitted in a  
350 court of competent jurisdiction after a party aggrieved thereby has exhausted all administrative remedies  
351 established by the Commissioner.

352 C. The Commissioner shall implement procedures to ensure confidentiality of all information related to  
353 any claims filed or appeals taken to the maximum extent permitted by applicable laws.

354 **§ 60.2-813. Enforcement.**

355 A. Contributions required by the provisions of § 60.2-806 that are unpaid on the date on which they are  
356 due and payable, as prescribed by the Commissioner under this chapter, shall bear interest at the rate of one  
357 and one-half percent per month from and after such date until payment plus accrued interest is received by  
358 the Commission. Interest collected pursuant to this chapter shall be paid into the Fund. An employer who  
359 fails to timely remit a contribution or any portion thereof under § 60.2-806 shall be solely responsible for the  
360 interest due under this section.

361 B. If, after notice, any employer defaults in any payment of contributions or interest, the amount due shall  
362 be collected by civil action in the name of the Commissioner. The employer adjudged in default shall pay the  
363 fees and costs of such action. Civil actions brought under this chapter to collect contributions or interest or  
364 any penalty from an employer shall be heard by the court at the earliest possible date. Such civil actions may  
365 be brought against any officer, employee, or agent of a corporation or partnership in his individual, personal  
366 capacity when that person willfully fails to cause the employer to pay the appropriate contributions or  
367 interest and he had the authority to do so. No person shall be subject to this section unless it is proved that  
368 such person (i) knew of the failure or attempt to make such payment and (ii) had authority to prevent such

369 failure or attempt. In addition to the foregoing remedies, the Commissioner shall have such other remedies as  
 370 are available to the State Tax Commissioner and county and city treasurers for the collection of taxes  
 371 generally. The Commissioner is authorized to compromise, settle, and adjust any contributions, including  
 372 interest, or any penalty assessed against any employer where in the judgment of the Commissioner the best  
 373 interests of the Commonwealth will be promoted or served. The Commissioner may in such cases accept in  
 374 full settlement of the contributions assessed an amount less than that assessed.

375 C. When an unsatisfied execution has been returned by an officer, and the employer against whom the  
 376 judgment has been obtained on which the execution was issued continues in default of payment of  
 377 contributions, or any portion thereof, such employer may be enjoined from operating and doing business in  
 378 the Commonwealth until such contributions have been paid. The Circuit Court of the City of Richmond shall  
 379 have exclusive original jurisdiction to grant such injunction upon the complaint of the Commissioner. Notice  
 380 of the time and place when the application for the injunction will be made shall be served on the employer  
 381 and a copy of the bill of complaint shall be served with the notice.

382 **§ 60.2-814. Erroneous payments and disqualification for benefits.**

383 A. An individual shall be disqualified from family and medical leave benefits for one year if the individual  
 384 is determined by the Commissioner to have willfully made a false statement or misrepresentation regarding a  
 385 material fact, or willfully failed to report a material fact, to obtain benefits under this chapter.

386 B. If family and medical leave benefits are paid erroneously or as a result of willful misrepresentation, or  
 387 if a claim for family and medical leave benefits is rejected after benefits are paid, the Commission may seek  
 388 repayment of benefits from the recipient. The Commissioner shall exercise his discretion to waive, in whole  
 389 or in part, the amount of any such payments where the recovery would be against equity and good  
 390 conscience.

391 **§ 60.2-815. Elective coverage.**

392 A. A self-employed person, including a sole proprietor, partner, or joint venturer, may elect coverage  
 393 under this chapter for an initial period of not less than three years. The self-employed person shall file a  
 394 notice of election in writing with the Commissioner, as required by the Commission. Such election shall  
 395 become effective on the date such notice is filed, provided that such self-employed person agrees to supply  
 396 any information concerning income that the Commission deems necessary.

397 B. A self-employed person who has elected coverage may withdraw from coverage within 30 days after  
 398 the end of the three-year period of coverage, or at such other times as the Commissioner may prescribe by  
 399 rule, by filing written notice with the Commissioner, such withdrawal to take effect not sooner than 30 days  
 400 after filing such notice.

401 **§ 60.2-816. Private employer plans; exemption from contributions.**

402 A. Employers may apply to the Commission for approval to meet their obligations under this chapter  
 403 through a private plan. The Commission may approve such private plan if the Commission determines that  
 404 such private plan:

405 1. Confers all of the same rights, protections, and benefits provided to covered individuals under this  
 406 chapter, including:

407 a. The provision of family and medical leave benefits for all purposes specified in subsection A of  
 408 § 60.2-802;

409 b. The provision of family and medical leave benefits for the maximum number of weeks required in  
 410 § 60.2-803 per application year;

411 c. The provision of family and medical leave benefits as specified in subdivision A 3 § 60.2-802 for a  
 412 covered individual with a serious health condition;

413 d. A wage replacement rate for all family and medical leave benefits that equals or exceeds the rate  
 414 required by subsection A of § 60.2-804;

415 e. A maximum weekly family and medical leave benefit amount that equals or exceeds the amount  
 416 specified in subsection C of § 60.2-804 and a minimum weekly family and medical leave benefit amount that  
 417 equals or exceeds the amount specified in subsection B of § 60.2-804;

418 f. The provision of family and medical leave benefits on an intermittent basis as specified in § 60.2-807;

419 g. No additional conditions or restrictions on family and medical leave benefits, or leave taken in  
 420 accordance with such benefits, beyond those explicitly authorized by this chapter or regulations issued  
 421 pursuant to this chapter;

422 h. The provision of family and medical leave benefits to any employee covered under such private plan  
 423 who would otherwise be eligible for such benefits pursuant to this chapter; and

424 i. An employee contribution amount that does not exceed the amount such employee would otherwise  
 425 contribute for family and medical leave benefits pursuant to § 60.2-806.

426 2. Complies with the following provisions:

427 a. Such private plan shall provide family and medical leave benefits for all eligible employees throughout  
 428 the course of their employment;

429 b. If such private plan is in the form of self-insurance, the employer shall furnish a bond to the  
 430 Commonwealth in a form, amount, and manner determined by the Commission; and

431       c. If such plan is in the form of a third-party provider of insurance, the forms of the policy must be issued  
432       by an insurer approved by the Commission.

433       B. The Commission shall withdraw approval for an employer's private plan pursuant to subsection A if  
434       such employer violates the terms or conditions of such private plan, including by:

435       a. Failing to pay benefits;

436       b. Failing to pay benefits timely and in a manner consistent with the provisions of this chapter;

437       c. Failing to maintain an adequate surety bond;

438       d. Misusing private plan money;

439       e. Failing to submit reports or comply with other requirements or terms set by the Commission; or

440       f. Failing to comply with this chapter or regulations promulgated pursuant to this chapter.

441       C. An employee covered by a private plan approved under this section shall retain all applicable rights  
442       provided in §§ 60.2-808 and 60.2-809.

443       D. A contested determination or denial of family and medical leave insurance benefits by a private plan is  
444       subject to appeal before the Commission and any court of competent jurisdiction pursuant to § 60.2-812.

445       E. The Commission shall establish a fine structure for employers and entities offering private plans that  
446       violate this section. The Commission shall transfer any fines collected pursuant to this subsection to the state  
447       treasurer for deposit into the Fund. The Commission shall establish a process for the determination,  
448       assessment, and appeal of fines under this subsection.

449       F. The Commission shall annually determine the total amount expended by the Commission for costs  
450       arising from the administration of private plans. Each employer offering a private plan pursuant to this  
451       section shall reimburse the Commission for the costs arising out of the private plans in the amount, form, and  
452       manner determined by the Commission.

453       **§ 60.2-817. Federal income tax treatment.**

454       If the Internal Revenue Service determines that family and medical leave benefits under this chapter are  
455       subject to federal income tax, the Commission shall advise any covered individual filing a new claim for  
456       family and medical leave benefits, at the time of filing such claim, that:

457       1. The Internal Revenue Service has determined that benefits are subject to federal income tax;

458       2. Requirements exist pertaining to estimated tax payments;

459       3. The individual may elect to have federal income tax deducted and withheld from the individual's  
460       payment of benefits in the amount specified in the federal Internal Revenue Code; and

461       4. The individual is permitted to change a previously elected withholding status.

462       **§ 60.2-818. Reports; public dashboard.**

463       By April 1, 2030, and annually thereafter, the Commission shall report to the General Assembly on  
464       projected and actual program participation by purpose listed in § 60.2-802, gender of beneficiaries, race and  
465       ethnicity of beneficiaries, age of beneficiaries, amount of benefits paid to beneficiaries per week, premium  
466       rates, fund balances, outreach efforts, and, for leaves taken under subdivision A 2 of § 60.2-802, family  
467       members for whom leave was taken to provide care.

468       The Commission shall develop and continually update a publicly accessible online dashboard with  
469       information including the number of claims filed and approved and the average times for claim approval, in  
470       the aggregate and divided by the purpose for which leave is requested, and additional information as the  
471       Commission deems appropriate. The dashboard shall be developed and launched no later than the date on  
472       which family and medical leave benefits are first paid pursuant to this chapter.

473       **§ 60.2-819. Public education.**

474       The Commission shall develop and conduct a public education campaign to inform workers and  
475       employers regarding the availability of family and medical leave benefits. Such campaign shall include  
476       multiple ways to communicate to employers and employees about the new benefit system and leave rights,  
477       contributions, timeline, and eligibility requirements. Such campaign shall be an ongoing function of the  
478       Commission for the duration of the paid family and medical leave insurance program. In conducting and  
479       planning such campaign, the Commission shall consult with the Paid Family and Medical Leave Advisory  
480       Board established in § 60.2-821 and work with other stakeholders, including chambers of commerce, trade  
481       associations, nonprofit organizations, and labor unions, to develop and implement a statewide  
482       communication outreach strategy. Such campaign shall also include targeted outreach and education for  
483       small businesses. Outreach information shall be available in English, Spanish, Korean, Tagalog, Vietnamese,  
484       Urdu, Arabic, and other languages spoken by more than five percent of the Commonwealth's population. The  
485       Commission shall deliver to the Board quarterly updates on applications, approvals, and any additional  
486       information as requested by the Board.

487       **§ 60.2-820. Sharing technology.**

488       The Commission is encouraged to use state data collection and technology to the extent possible and to  
489       integrate the provisions of this chapter with existing state policies. To the extent permitted by law, the  
490       Commonwealth may make relevant data sources from state agencies available to the Commission for  
491       purposes of implementing the provisions of this chapter to increase the efficiency of eligibility and benefit  
492       determinations under this chapter.

**§ 60.2-821. Paid Family and Medical Leave Advisory Board.**

493     A. The Paid Family and Medical Leave Advisory Board is established as an advisory board, within the  
 494 meaning of § 2.2-2100, in the executive branch of state government. The purpose of the Board is to report to  
 495 and advise the Commissioner on the implementation and administration of this chapter.

496     B. The Board shall have a total membership of 18 members that shall consist of five legislative members  
 497 and 13 nonlegislative citizen members. Members shall be appointed as follows: two members of the Senate,  
 498 to be appointed by the Senate Committee on Rules; three members of the House of Delegates, to be appointed  
 499 by the Speaker of the House of Delegates; three nonlegislative citizen members to be appointed by the Senate  
 500 Committee on Rules; two nonlegislative citizen members to be appointed by the Speaker of the House of  
 501 Delegates; and eight nonlegislative citizen members to be appointed by the Governor, one of whom shall be a  
 502 representative of the business community, one of whom shall be a representative of a small business, one of  
 503 whom shall be a representative of a labor union, one of whom shall be a representative of an advocacy  
 504 organization focused on economic issues impacting children and families, one of whom shall be a  
 505 representative of an organization that advocates on behalf of people with serious health conditions or  
 506 disabilities, one of whom shall be a public technology expert or a technical advisor on information  
 507 technology and data for the Commonwealth, one of whom shall be a human-centered design expert, and one  
 508 of whom shall have skill, knowledge, and experience in family and medical leave programs.  
 509

510     Nonlegislative citizen members of the Board shall be citizens of the Commonwealth. Legislative members  
 511 of the Board shall serve terms coincident with their terms of office.

512     C. Nonlegislative citizen members shall be appointed for a term of four years. Appointments to fill  
 513 vacancies, other than by expiration of a term, shall be for the unexpired terms. Vacancies shall be filled in  
 514 the same manner as the original appointments. No nonlegislative citizen member shall serve more than two  
 515 consecutive four-year terms. The remainder of any term to which a member is appointed to fill a vacancy  
 516 shall not constitute a term in determining the member's eligibility for reappointment.

517     D. The Board shall elect a chairman and vice-chairman from among its membership. A majority of the  
 518 members shall constitute a quorum. The meetings of the Board shall be held at the call of the chairman, but  
 519 no less than four times a year.

520     E. Legislative members of the Board shall receive such compensation as provided in § 30-19.12.  
 521 Nonlegislative citizen members of the Board shall not receive compensation but shall be reimbursed for all  
 522 reasonable and necessary expenses incurred in the performance of their duties as provided in §§ 2.2-2813  
 523 and 2.2-2825.

524     **2. That the Virginia Employment Commission shall promulgate all rules and regulations necessary for  
 525 implementation of this act by July 1, 2027.**

526     **3. That by January 1, 2029, the Department of Human Resource Management (the Department) shall  
 527 modify the Commonwealth's policies relating to family and medical leave pursuant to subsection C of  
 528 § 60.2-801 of the Code of Virginia, as created by this act. In modifying such policies, the Department  
 529 shall not reduce any existing leave or benefits available to an employee of the Commonwealth that are  
 530 more generous than the leave and benefits provided under the paid family and medical leave insurance  
 531 program, as created by this act.**