



Patient Advocacy Organizations' Consensus Paid Medical Leave Principles

The availability of paid family and medical leave for people with and caring for individuals who have a serious illness or health condition is vital, as treatment for and recovery from serious illnesses and conditions are often difficult and time consuming. The flexibility to balance treatment and employment is essential. Not all people with serious illness or conditions or their caregivers have access to paid family and medical leave, and without it they risk financial hardship or not getting the care they or their loved ones need. Certain populations in particular have less access to paid family and medical leave, including individuals with lower incomes and education levels, and people of color – a reality that exacerbates health inequities.

Lawmakers are considering a new federally-sponsored program to allow individuals to take paid time off to care for a new child, to receive treatment or recover from a serious illness or condition, or to care for a loved one. As Congress and the Administration consider the development and enactment of paid family and medical leave policy, the undersigned patient advocacy organizations and partners will utilize the following principles to evaluate these proposals:

1. A federal paid leave program must provide medical, parental, and caregiving leave. The undersigned organizations will only support a policy that includes caregiving leave and medical leave for a serious illness/health condition as defined by Family and Medical Leave Act (FMLA).
2. A paid leave program must have a broadly inclusive definition of family for caregiving purposes and include at a minimum parents, spouses, domestic partners, children, foster children, siblings, family by marriage, aunts, uncles, cousins, nieces, nephews, grandparents, and grandchildren.
3. The duration of leave provided should be adequate, equitable, and sufficient to ensure that people have time for treatment and recovery from serious illness/health conditions, and/or provide care.
4. Leave should include meaningful compensation/wage replacement in an amount that allows employees, including lower-income workers, to reasonably afford to take needed leave.
5. A paid leave program must be available to all workers, regardless of employer size, including part-time, contingent, and self-employed workers.

6. A paid leave program must ensure job protection and use of leave must not result in any adverse employment consequences. The program should be thoughtfully incorporated into the system of federal employment laws that exist today to ensure that no existing protections are limited.
7. A paid leave program must ensure continued access to employer-provided health insurance and other health-related benefits important to patients and caregivers, continued on the same terms.
8. A paid leave policy must be easy to use and written and implemented in such a manner that it is administratively simple for the employee and employer.
9. A paid leave program must be flexible and allow for intermittent use.
10. A paid leave program should have a sustainable and predictable funding source that allows for sufficient administrative resources and long-term program success.
11. Public policies that incentivize or require paid leave should not pre-empt more generous paid leave policies as applicable – i.e. a federal law must not pre-empt more generous state laws, a state law must not pre-empt a more generous local law, and any type of law must not pre-empt employers who choose to offer more generous leave.

Academy of Oncology Nurse & Patient Navigators

The AIDS Institute

Alliance for Aging Research

ALS Association

American Cancer Society Cancer Action Network

Association of Community Cancer Centers

Black Women's Health Imperative

Cancer Support Community

Cervivor, Inc.

COA Patient Advocacy Network

Community Oncology Alliance

Epilepsy Foundation

Family Voices

Hemophilia Federation of America

Mended Hearts & Mended Little Hearts

Muscular Dystrophy Association

National Alliance for Caregiving

National Alliance on Mental Illness

National Coalition for Cancer Survivorship

National Hemophilia Foundation

National Multiple Sclerosis Society

National Organization for Rare Disorders

National Patient Advocate Foundation

Pulmonary Hypertension Association

Susan G. Komen

UsAgainstAlzheimer's

WomenHeart: The National Coalition for Women with Heart Disease

Zero - The End of Prostate Cancer

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