

# NOTICE TO EMPLOYEES

Paid Family Leave Insurance Coverage Provided by:

#### THE STATE INSURANCE FUND

RED SUN HOME CARE INC.

Covering Employees of:

## Paid Family Leave is insurance that provides job protected paid time off to:

- **Bond** with a newly born, adopted, or fostered child
- **Care** for a family member with a serious health condition
- Assist loved ones when a family member is deployed abroad on active military service

### **How to File:**

- Notify your employer at least 30 days in advance, if foreseeable, or as soon as possible
- **Submit** the Request for Paid Family Leave form to your employer
- **Complete** and attach the additional documentation as instructed on the request form and submit to the insurance carrier listed below

# Employers should NEVER discriminate or retaliate against anyone who requests or takes leave

FOR MORE INFORMATION AND HELP: Visit **ny.gov/PaidFamilyLeave** or call **(844) 337-6303**  You can get forms to take Paid Family Leave from

- Your employer,
- The insurance carrier below, or
- ny.gov/PaidFamilyLeave

New York State Insurance Fund NYSIF Document Control Center-Disability Underwriting 1 Watervliet Ave Ext, Albany, NY 12206 (866) 697-4332		
Policy #: DB 6868 25-2	Effective From: 05/04/2022	то: 05/04/2023
🕱 Statutory 🛛 Under a Plan or Agreement		
Class(es) of Employees Covered:	All Eligible Employees	
I	NOTICE OF COMPLIANCE	
PRESCRIBED BY	THE CHAIR, WORKERS' COMPENSATION BOARD	)

THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.