



# Your Guide to Washington Paid Family and Medical Leave for 2026 (WA PFML)

Updated as of November 2025



This guide aims to provide you with comprehensive information about your rights, benefits, and the process for applying for these programs.

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# Overview of WA PFML

Washington Paid Family and Medical Leave (WA PFML) offers leave and paid leave benefits and job protection\* to eligible employees who need time off from work for qualifying reasons. Employees may be eligible if they are sick or hurt and cannot work, including during pregnancy. Employees may also be eligible to take leave to bond with a new child, care for a family member who has a serious health condition or to address a qualifying military exigency for a family member's military duty.

## Eligibility

You are eligible for benefit payments under a WA PFML approved voluntary plan once you have worked 820 hours in the qualifying period and 340 hours for your current employer.

If you are not yet eligible for coverage under an approved voluntary plan, you are eligible for benefits under the state plan if you have worked 820 hours in the qualifying period. Your employer may waive these requirements for the voluntary plan.

The qualifying period is usually the first four of the last five completed calendar quarters from the date leave begins or can be the last four completed calendar quarters.

If you were covered under a voluntary plan by your previous employer, you are immediately eligible for your current employer's voluntary plan.

## Cost of Coverage

Beginning January 1, 2025, the state rate for the state-run WA PFML program is 0.92% of your taxable wages (excluding tips). Your maximum contribution is 71.52% of the state rate or up to \$1,158.71.

Your employer may withhold this amount via payroll deductions. In 2025, payroll deductions for this benefit should stop once the taxable wage base is reached which is the Social Security taxable maximum, or \$176,100.

This changes in 2026 - it goes to 1.13% still based on SS taxable maximum (for 2026)

## Benefit Duration and Waiting Period

Leave can be taken intermittently or on a reduced leave schedule.

# 12

Weeks

Up to 12 weeks per claim year for medical or family leave. A claim year is a period of 52 weeks beginning on the Sunday before the first day of leave.

# 16

Weeks

You may be eligible for a total of up to 16 weeks per claim year for medical and family leave combined.

# 2

Weeks

In the case of pregnancy, childbirth, or a related medical complication, an extra 2 weeks is possible.

A one-time, 7-day waiting period is required per claim year, except for medical leave for birth of a child (post-natal period), family leave for child bonding, child bereavement, or military exigency. The waiting period does not reduce the total number of allotted weeks for family or medical leave.

# Benefit Details

## Benefits and Qualifying Life Events

You can receive part of your pay and may also be eligible for job protection\* if you need to take time off for certain reasons. Job protection may also be provided through other federal or state laws such as the federal Family and Medical Leave Act (FMLA).

### **Medical Leave** can be taken to:

address a personal serious health condition or injury (an extra 2 weeks for qualifying pregnancy or childbirth related complications)

### **Family Leave** can be taken to:

bond with a new child after birth, adoption, or foster placement child bereavement if the loss occurs during child bonding care for a family member with a serious health condition assist while loved ones are on overseas military deployment

\*Job protection is available if you work for a company that employs at least 50 people in Washington, has worked for the company for at least a year, and has completed at least 1,250 hours worked.

# Qualifying Family Members

A covered family member can be a child (biological, adopted, foster, stepchild, legal guardian, de facto, or loco parentis), grandchild, grandparent (or spouse's grandparent), parent (or spouse's parent), sibling, spouse, domestic partner, son in law and daughter in law, someone who has an expectation to rely on you for care whether you live together or not.



# Calculating Your Benefits

The benefit amount you can receive depends on how much money you make weekly compared to others in Washington.

## 1. Determine Your Regular Wages

- Your regular wages are the amount you typically earn before any deductions.

## 2. Understand the Maximum Weekly Benefit

- You can receive up to \$1,647 per week after a 7-day waiting period (if applicable) 2026 - max benefit will be \$1,647.

## 3. Calculate Your Benefit Percentage

If your regular weekly wages are equal to or less than 50% of Washington's average weekly wage, you can receive 90% of your average weekly pay.

If your average weekly pay is more than 50% of Washington's average weekly wage, you can receive the sum of 90% of one half of the state's average weekly wage, plus 50% of the difference between your average weekly wage and one half of the state's average weekly wage, up to the weekly maximum benefit.

## Example Calculation

Let's go through examples to make it clearer.

### Example 1

#### If your weekly wages are \$600

- Since **\$600** is less than **50%** of the state average weekly wage ( $\$1,534.94 / 2 = \$767.47$ ), you will receive **90%** of your regular wages.

- $90\%$  of  $\$600 = \$540$ .

- Therefore, your weekly benefit amount will be **\$540**.

### Example 2

#### If your weekly wages are \$3,000

- Since **\$3,000** is higher than **50%** of the state average weekly wage ( $\$1,534.94 / 2 = \$767.47$ ), there is a two-step calculation.

- $90\%$  of  $\$767.47 = \$690.72$ .

- Plus, **50%** of **\$2,232.53** ( $\$3,000 - \$767.47$ ) = **\$1,116.27**.

- Add those two together,  $\$690.72 + \$1,116.27 = \$1,806.99$ .

- However, this is more than the maximum weekly benefit of **\$1,341.21**.

- Therefore, your weekly benefit amount will be **\$1,341.21**.



# Coordination with Other Benefits

You may be eligible for more than one leave. Colorado Paid Family and Medical Leave Insurance (CO PFML) and Family Medical Leave Act (FMLA) benefits can and should be used at the same time when applicable. Your employer may require you to use Paid Medical Leave (PML) benefits and short-term or long-term disability benefits at the same time, however, your employer cannot make you use up other types of leave, like vacation days, before taking CO PFML. It's up to you to decide if you want to take these other leaves in conjunction with CO PFML to bring your benefits up to full weekly pay.

# Applying for Benefits

## Steps to Apply

1. Notify your employer at least 30 days prior if leave is foreseeable or as soon as you can if it's unforeseeable.
2. If the leave is unforeseeable, claims may be submitted up to 30 days after the leave has begun. If a claim is submitted after 30 days from the start of leave, but before 90 days, your application should include the reason why your claim was not submitted within the 30-day timeframe.
3. Apply for benefits through MetLife via the web, telephone, or paper claim, depending on your employer's coverage plan.
4. Submit supporting documentation.
5. Stay connected with your employer and MetLife until you return to work.



# Documentation to Support your Claim



## For your own disability (when you are sick or hurt and cannot work for an extended period):

- Certification of a Disability/Serious Health Condition form filled out by you and your healthcare provider, or
- A doctor's note or Attending Physician Statement (APS) that includes the same information as the Certification form

## For child bonding for adoption or foster care placement:

- A copy of court documents finalizing the adoption; or
- Documentation from the child's healthcare provider; or
- Foster/adoption agency paperwork containing adoption or placement

If you are not the parent named in the court documents (in loco parentis), you may also be asked to provide proof verifying your relationship to the in loco parentis named in the court documentation. This could be a marriage certificate, civil union papers, or something showing you are in a domestic partnership.

## For child bonding for a newborn:

- A copy of the child's birth certificate, or
- A statement from the child's healthcare provider stating the child's date of birth, or
- A statement from the parent's healthcare provider stating the child's date of birth

## For leave to care for a family member with a serious health condition, including medical events related to pregnancy or childbirth, you must provide ONE of the following:

- Certification of a Disability/Serious Health Condition form filled out by you and your family member's healthcare provider, or
- A doctor's note or APS that includes the same information as the Certification of Serious Health Condition form

In some cases, a statement confirming the relationship between you and the family member may also be requested.

# Claim Denials

If your claim has been denied, you can reach out to MetLife to have your claim reconsidered. If, after a second review, your claim is still denied, you can file an appeal with the state within 49 days of the date of the date of determination or redetermination of your claim by submitting a completed Appeal Request Form to the state.

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