MetLife

Your Guide to Delaware Paid Family and Medical Leave for 2026

(DE PFML)

Updated as of January 2026



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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 DE PFML

Delaware Paid Family and Medical Leave (DE PFML) is a benefit that offers paid leave and job protection* for qualifying reasons. DE PFML applies if you are unable to work due to injury or illness, including pregnancy and childbirth (PML), for paid parental leave (PPL) to bond with a new child, or for paid family leave (PFL) to care for a family member with a serious health condition and to address a military exigency.

Eligibility

You are covered for DE PFML if you:

- Work for a covered employer.
- Have worked at least 60% of your time in Delaware, for at least 12 months, and worked at least 1,250 hours.

Benefit Details

Benefits and Qualifying Life Events

You can receive part of your pay, but no job protection, if you need to take time off for certain reasons, such as:

Medical Leave can be taken to: address a personal serious health condition or injury (up to 6 weeks, every 2 years).

Parental Leave can be taken to: bond with a new child (up to 12 weeks per year).

Family Leave can be taken to: care for a child (up to 6 weeks, every 2 years).

- care for a family member** with a serious health condition (up to 6 weeks, every 2 years).
- assist while loved ones are on overseas military deployment (up to 6 weeks, every 2 years).

* An employee is entitled to be restored to their previous position, or to a position with equivalent seniority, status, employment benefits, pay, and other terms and conditions of employment, including fringe benefits and service credits, which the employee was entitled to at the commencement of the covered leave.
**A covered family member can be a parent, a child, or a spouse.

Cost of Coverage

Beginning January 1, 2026, your maximum cost of coverage is $738, or 0.4% of your taxable wages up to the Federal Wage Cap ($184,500).

Your contributions are split by leave types as follows:

- Medical leave: 0.2%
- Parental leave: 0.16%
- Family leave: 0.04%

Your employer may withhold this amount via payroll deductions.

Benefit Duration and Waiting Period

Leave can be taken intermittently in increments of no less than one full day.

6
Weeks

Medical Leave: Up to 6 weeks, every 2 years.

12
Weeks

Parental Leave: Up to 12 weeks per year.

6
Weeks

Family Leave: Up to 6 weeks, every 2 years.

Calculating Your Benefits

The benefit amount you can receive depends on your average wages for the prior 12 months.

1. **Determine Your Regular Wages**
   - Your regular wages are the amount you typically earn before any deductions. This includes your salary, hourly wages, overtime, commissions, holiday pay, paid time off, vacation, sick time, and any other earnings.
2. **Understand the Maximum Weekly Benefit**
   - In **2026** the maximum benefit is **$900** per week. This means that no matter how much you earn, the maximum benefit you can receive per week is **$900**.
3. **Calculate Your Benefit Percentage**
   - Take your regular wages and multiply them by **80%.**

Example Calculation

Let's go through examples to make it clearer.

Example 1
If your weekly wages are $600

- Since **$600** is less than the state average weekly wage ($1,048), you will receive **80%** of your regular wages.
- 80% of $600 = **$480**.
- Therefore, your weekly benefit amount will be **$480**.

Example 2
If your weekly wages are $3,000

- Since **$3,000** is higher than the state average weekly wage ($1,048).
- 80% of $3,000 = **$2,400**.
- However, this is more than the maximum weekly benefit of **$900**.
- Therefore, your weekly benefit amount will be **$900**.



Coordination with Other Benefits

You may be eligible for more than one leave. Delaware Paid Family and Medical Leave Insurance (DE 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 unused accrued paid time off before accessing family and medical leave benefits.

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. Apply for benefits through MetLife via the web, telephone, or paper claim, depending on your employer's coverage plan.
3. Submit supporting documentation, which may vary depending on the reason for your leave.
4. 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.

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

- Certification of a Disability/Serious Health Condition form filled out by you and your family member's healthcare provider

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

For parental leave for childbirth, 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, common law, or same-sex marriage.



Claim Denials

If your claim has been denied, you can reach out to MetLife to have your claim reconsidered, within 10 days of our initial determination. If, after a second review, your claim is still denied, you can file an appeal with the state. Appeal instructions can be found in the claim denial letter you received.

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