

# NOTICE TO EMPLOYEES

Paid Family Leave Insurance Coverage Provided by:

CIGNA LIFE INSURANCE COMPANY OF NEW YORK

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

#### Pace University

## 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 Paid Family 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

INSERT NAME, ADDRESS, AND TELEPHONE NUMBER OF INSURER OR MAIN OFFICE OF AUTHORIZED NEW YORK SELF-INSURER		
CIGNA LIFE INSURANCE COMPANY OF NEW YORK 2 Grand Central Tower, 140 E 45th St., 8th FL New York, NY 10017 Phone 1-888-842-4462		
NYD0074816 Policy #:	Effective From:	July 1, 2018
⊠ Statutory □ Under a Plan or Agreement		
Class(es) of Employees Covered:		

All Employees eligible under NY Disability Benefits Law.

#### 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.