



## 102ND GENERAL ASSEMBLY

### State of Illinois

2021 and 2022

HB5029

Introduced 1/27/2022, by Rep. Sonya M. Harper

#### SYNOPSIS AS INTRODUCED:

New Act  
30 ILCS 105/5.970 new

Creates the Family and Medical Leave Insurance Program Act. Requires the Department of Employment Security to establish and administer a Family Leave Insurance Program that provides family leave insurance benefits to eligible employees. Sets forth eligibility requirements for benefits under the Act. Contains provisions concerning disqualification from benefits; premium payments; the amount and duration of benefits; the recovery of erroneous payments; hearings; defaulted premium payments; elective coverage; employment protection; coordination of family leave; defined terms; and other matters. Amends the State Finance Act. Creates the Family Leave Insurance Account Fund. Provides phase-in periods for the collection of money and making of claims for benefits under the Act. Effective January 1, 2023.

LRB102 25760 SPS 35086 b

1 AN ACT concerning employment.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the Family  
5 and Medical Leave Insurance Act.

6 Section 5. Declaration of policy and intent. Many workers  
7 do not have access to family and medical leave programs, those  
8 who do may not be in a financial position to take family or  
9 medical leave that is unpaid, and employer-paid benefits meet  
10 only a relatively small part of this need. It is the public  
11 policy of this State to protect working individuals and their  
12 families against the economic hardship caused by the need to  
13 take time off from work to care for themselves or family  
14 members who are suffering from a serious illness, for a  
15 newborn or a newly adopted or foster child, for pregnancy and  
16 related conditions, for the health and caregiving needs of  
17 military families, or to cope with domestic and sexual  
18 violence.

19 The disparities for access to and the need for leave cut  
20 across income and other demographics. Higher income workers  
21 have greater access to paid leave than lower income workers;  
22 women workers have higher rates of unmet need for leave than  
23 men; Black, Asian American, Pacific Islander, and Native

1 American workers have higher rates of unmet need for leave  
2 than white workers; and Hispanic workers are less likely than  
3 non-Hispanic workers to have access to paid leave in the first  
4 place.

5 Moreover, in 73% of all Illinois households with children,  
6 more than 2,000,000 homes, all parents have paying jobs.  
7 Illinois mothers are key family breadwinners in 84% of black  
8 families, 49% of Latinx families, and 48% of white families.  
9 While women make up half of the workforce, they are  
10 responsible for the majority of unpaid family household and  
11 care work, which has a significant impact on their health and  
12 well-being. Maintaining an attachment to the workforce is  
13 vital to women's economic stability; an employment gap of just  
14 one year leads to a 39% decrease in annual earnings, and that  
15 disparity increases over time. With the demographic shift  
16 toward an aging population, the need for family caregiving  
17 continues to grow. In less than 15 years, the share of the  
18 State's population of individuals aged 65 and over will grow  
19 by one-third. If any of these women take unpaid leave, her  
20 whole family, and Illinois, suffers.

21 The United States is the only industrialized nation in the  
22 world that does not have a mandatory workplace-based program  
23 for such income support. The negative economic impact on  
24 families and our economy is real. A U.S. Department of Labor  
25 report indicates if women participated in the labor force at  
26 the same rate as women in countries with paid leave, our

1 economy would benefit from more than \$500 billion in  
2 additional economic activity.

3 The majority of Illinois small business owners and  
4 entrepreneurs support a State-administered paid family and  
5 medical leave program as it ensures economic security,  
6 strengthens business recruitment and retention of employees,  
7 and mitigates the loss of income for small business owners,  
8 which comprise over 90% of businesses in the United States,  
9 including the self-employed and businesses with under 10  
10 employees.

11 It is therefore desirable and necessary to develop systems  
12 that help individuals and families adapt to the competing  
13 interests of work and home, which not only benefit workers,  
14 but also benefit employers by reducing employee turnover and  
15 increasing worker productivity.

16 It is the intent of the General Assembly to create a family  
17 and medical leave program to relieve the serious menace to  
18 health, morals, and welfare of Illinois families, to increase  
19 workplace productivity, and to alleviate the enormous and  
20 growing stress on working families of balancing the demands of  
21 work and family needs. It is the intent of the General Assembly  
22 that this Act shall be liberally construed in favor of  
23 providing workers with the greatest amount of paid family and  
24 medical leave coverage, benefits, and employment security.

25 Section 10. Definitions. In this Act:

1           (1) "Average weekly wage" means the amount derived by  
2 dividing by 12 an employee's total earnings, including wages,  
3 gratuities, bonuses, commissions, and any other compensation  
4 that constitutes remuneration, earned during the quarter with  
5 the highest earnings in the applicable benefit year, or the  
6 amount derived by dividing by 12 an employee's total earnings,  
7 including wages, gratuities, bonuses, commissions, and any  
8 other compensation that constitutes remuneration, to fulfill a  
9 contract for a covered business entity, earned in the quarter  
10 with the highest earnings in the applicable benefit year, or  
11 for individuals not currently employed or under contract, the  
12 amount derived by dividing by 12 of an individual's total  
13 earnings, including wages, gratuities, bonuses, commissions,  
14 and any other compensation that constitutes remuneration,  
15 earned during the quarter with the highest earnings earned in  
16 the 4 quarters prior to the last day of employment or end of  
17 contract.

18           (2) "Benefit year" means the period of 52 consecutive  
19 weeks beginning on the Sunday immediately preceding the first  
20 day that family and medical leave under this Act commences for  
21 the covered individual.

22           (3) "Care" includes, but is not limited to, physical or  
23 psychological care, emotional support, visitation, arranging  
24 for care or a change in care, assistance with essential daily  
25 living matters, and personal attendant services.

26           (4) "Child" means a biological, adopted, or foster child,

1 a stepchild, grandchild, or legal ward, or a child for whom an  
2 employee stands in loco parentis, a person to whom the  
3 employee stood in loco parentis when the person was a minor  
4 child, a child of the spouse of an employee, or a child of a  
5 party to a civil union or legal guardianship, or any other  
6 individual whose close association with the employee is the  
7 equivalent of a child as determined by the employee,  
8 regardless of age or dependency status.

9 (5) "Civil union" means a civil union as defined in the  
10 Illinois Religious Freedom Protection and Civil Union Act.

11 (6) "Consecutive leave" means leave that is taken without  
12 interruption based upon an employee's regular work schedule or  
13 contract and does not include breaks in employment in which an  
14 employee is not regularly scheduled to work. For example, when  
15 an employee is normally scheduled to work from September  
16 through June and is not scheduled to work during July and  
17 August, a leave taken continuously during May, June, and  
18 September shall be considered a consecutive leave.

19 (7) "Contributions" or "premiums" means the payments made  
20 by an employer, a covered business entity, or a self-employed  
21 individual to the Family and Medical Leave Insurance Fund, as  
22 required by this Act.

23 (8) "Covered business entity" means a business or trade  
24 that contracts with one or more individuals for services and  
25 is required to report the payment of services to such  
26 individuals on IRS Form 1099-MISC or IRS Form 1099-K for more

1 than 25% of its Illinois workforce. Such individuals are  
2 included in the covered business entity's workforce if the  
3 contracts for services include, but are not limited to, oral  
4 or written contracts, and services arranged through  
5 application software designed to run on smartphones and other  
6 mobile devices and software designed to run inside a web  
7 browser. Covered business entities and individuals who  
8 contract for services with covered business entities are  
9 considered employers or employees where the context dictates.

10 (9) "Covered individual" means either:

11 (A) an individual who is or has been employed by any  
12 combination of employers in the State of Illinois and  
13 meets the financial eligibility requirements of subsection  
14 (f) of Section 20;

15 (B) a self-employed individual who has: (i) elected  
16 coverage under Section 25 and (ii) reported earnings to  
17 the Illinois Department of Revenue from self-employment  
18 that meet the financial eligibility requirements of  
19 subsection (f) of Section 20, as if the individual were an  
20 employee;

21 (C) an individual who contracts for services with a  
22 covered business entity;

23 (D) a domestic worker; or

24 (E) a former employee, self-employed individual,  
25 individual who contracts for services with a covered  
26 business entity, or a domestic worker, and has:

1 (i) met the financial eligibility requirements of  
2 subsection (f) of Section 20 at the time of separation  
3 from employment or the end of a contract; and

4 (ii) been separated from employment or the end of  
5 a contract for not more than 52 weeks at the start of  
6 the family or medical leave taken by the former  
7 employee, self-employed individual, individual who  
8 contracts for services with a covered business entity,  
9 or is a domestic worker.

10 A covered individual is considered to be employed in the  
11 State of Illinois if: (i) the individual works in Illinois;  
12 (ii) the individual performs some work in Illinois and the  
13 employer's base of operations or the place from which the work  
14 is directed and controlled is in Illinois; or (iii) the base of  
15 operations or place from which the work is directed or  
16 controlled is not in any state in which some part of the work  
17 is performed, but the individual's residence is in this State.

18 (10) "Department" means the Department of Employment  
19 Security.

20 (11) "Director" means the Director of Employment Security  
21 and any transaction or exercise of authority by the Director  
22 shall be deemed to be performed by the Department.

23 (12) "Domestic or sexual violence" means domestic  
24 violence, sexual assault, or stalking.

25 (13) "Domestic violence" means abuse, as defined in  
26 Section 103 of the Illinois Domestic Violence Act of 1986, by a



1 family or household member, as defined in Section 103 of the  
2 Illinois Domestic Violence Act of 1986, or as defined in this  
3 Act.

4 (14) "Domestic worker" has the meaning set forth in  
5 Section 10 of the Domestic Workers' Bill of Rights. "Domestic  
6 worker" also includes independent contractors, sole  
7 proprietors, and partnerships who engage in "domestic work",  
8 as defined in Section 10 of the Domestic Workers' Bill of  
9 Rights Act.

10 (14) "Employ" means to suffer or permit to work.

11 (15) "Employee" means any individual or person who works  
12 for an employer for wage, remuneration, or other compensation,  
13 and works any number of hours, whether full-time or part-time  
14 or on a temporary or contingent basis, and any individual who  
15 contracts for services with a covered business entity or is a  
16 domestic worker. Except for individuals or persons that  
17 contract for services with a covered business entity or  
18 domestic workers who contract for services, "employee" does  
19 not include any individual:

20 (A) who has been and will continue to be free from  
21 control and direction over the performance of the  
22 individual's work, both under the individual's contract of  
23 service with the individual's employer and in fact; and

24 (B) who performs work which is either outside the  
25 usual course of business or is performed outside all of  
26 the places of business of the employer unless the employer

1 is in the business of contracting with third parties for  
2 the placement of employees; and

3 (C) who is in an independently established trade,  
4 occupation, profession or business.

5 (16) "Employer" means any individual, person, partnership,  
6 association, limited liability company, trust, estate,  
7 joint-stock company, insurance company, employment and labor  
8 placement agency, or business where wages are made directly or  
9 indirectly by the agency or business for work undertaken by  
10 the employee under hire to a third party pursuant to a contract  
11 between the agency or business with the third party, or  
12 corporation, whether domestic or foreign, or the receiver,  
13 trustee in bankruptcy, trustee, or person that has in its  
14 employ one or more employees performing services for it.  
15 "Employer" also includes any employer subject to the  
16 Unemployment Insurance Act and any business or trade defined  
17 as a covered business entity in this Act. All employees  
18 performing services within this State for any employing unit  
19 that maintains 2 or more separate establishments within this  
20 State shall be deemed to be employed by a single employing unit  
21 for all purposes of this Act.

22 (17) "Employment benefits" means all benefits provided or  
23 made available to employees by an employer, including, but not  
24 limited to, life insurance, health insurance, disability  
25 insurance, sick leave, annual or vacation leave, paid time  
26 off, educational benefits, and pensions.

1           (18) "Family member" means an employee's child, spouse or  
2 party to a civil union or legal guardianship, parent,  
3 grandparent, grandchild, sibling, or any other individual  
4 related by blood, marriage, or civil union, or whose close  
5 relationship with the employee is the equivalent of a family  
6 relationship as determined by the employee.

7           (19) "Family and medical leave" means leave taken by a  
8 covered individual:

9           (A) to participate in the providing of care for a  
10 family member of the covered individual made necessary by  
11 a serious health condition of the family member;

12           (B) to be with a child during the first 12 months after  
13 the child's birth, the first 12 months after the placement  
14 of the child for adoption or foster care, the first 12  
15 months after the child becomes a legal ward, or the first  
16 12 months after in loco parentis status of the child is  
17 acquired;

18           (C) for the covered individual's own serious health  
19 condition, including, but not limited to, conditions in  
20 connection with pregnancy, recovery from childbirth,  
21 related conditions even though the covered individual does  
22 not receive treatment from a health care provider during  
23 the absence, including, but not limited to, absence due to  
24 morning sickness, a physical limitation arising from  
25 pregnancy, or exposure to chemicals or hazardous material  
26 that may be harmful, or any related condition;

1 (D) because of any qualifying exigency arising out of  
2 the fact that a family member is on active duty (or has  
3 been notified of an impending call or order to active  
4 duty) in the Armed Forces of the United States;

5 (E) because the covered individual's or the covered  
6 individual's family member is the victim of domestic or  
7 sexual violence and the covered individual requests leave  
8 because the victim is: (i) experiencing or has experienced  
9 an incident of or ongoing domestic or sexual violence;  
10 (ii) seeking medical attention for, or recovering from,  
11 physical, emotional, or psychological injuries caused by  
12 domestic or sexual violence; (iii) obtaining services from  
13 a victim services organization; (iv) obtaining  
14 psychological or other counseling; (v) participating in  
15 safety planning, temporarily or permanently relocating, or  
16 taking other actions to increase the safety of the victim  
17 or the victim's family members from future domestic or  
18 sexual violence to ensure safety or economic security; or  
19 (vi) seeking legal assistance or remedies to ensure the  
20 health and safety of the victim or the victim's family  
21 members, including preparing for or participating in any  
22 civil or criminal legal proceeding related to or derived  
23 from domestic or sexual violence;

24 (F) when a public health emergency or other disaster,  
25 as defined in the Disaster Relief Act or Section 11 of the  
26 Illinois Emergency Management Agency Act, has been

1 declared by a municipal, State, or federal official, and  
2 until 10 weeks following the official termination or  
3 suspension of the public health emergency or other  
4 disaster, leave under this Act shall be implemented. Such  
5 leave shall be provided for any reason related to a public  
6 health emergency or other disaster, including, but not  
7 limited to:

8 (i) the covered individual is subject to an  
9 individual or general federal, State, or local  
10 quarantine or isolation order related to a public  
11 health emergency or other disaster;

12 (ii) the covered individual has been advised by a  
13 health care provider to self-quarantine, or is  
14 otherwise under quarantine, including self-imposed  
15 quarantine, due to concerns related to a public health  
16 emergency or other disaster;

17 (iii) the employee is experiencing symptoms  
18 related to a public health emergency or other disaster  
19 and is seeking a medical diagnosis;

20 (iv) the covered individual is seeking preventive  
21 care or other care or treatment related to a public  
22 health emergency or other disaster;

23 (v) the covered individual is caring for a family  
24 member who is subject to an order described in clause  
25 (i), has been advised as described in clause (ii), is  
26 experiencing symptoms or seeking preventive care as

1 described in clause (iii) or clause (iv), or whose  
2 caregiving facility or caregiver is partially or  
3 completely unavailable due to precautions related to a  
4 public health emergency or other disaster;

5 (vi) the covered individual is caring for a child  
6 of such covered individual if the school or place of  
7 the care of the child has been partially or completely  
8 closed, or the child care provider of such child is  
9 partially or completely unavailable due to precautions  
10 related to a public health emergency or other  
11 disaster, including when the school or place of care  
12 is (I) is physically closed but providing virtual  
13 learning instruction; (II) requires or makes optional  
14 virtual learning instruction; or (III) requires or  
15 makes available a hybrid of in-person and virtual  
16 learning instruction models;

17 (vii) the covered individual is experiencing any  
18 other substantially similar condition specified by a  
19 federal, State, or local government public health or  
20 other official;

21 (viii) the covered individual's hours of work have  
22 been reduced, the covered individual has been  
23 furloughed, the covered individual has been terminated  
24 from employment, or the covered individual's contract  
25 for services has terminated; or

26 (ix) the employer is not following the recommended

1 health and safety guidance issued by a federal, State,  
2 or local public official related to a public health  
3 emergency or other disaster; or

4 (G) To care for a child if the child's school or place  
5 of care has been partially or completely closed or if the  
6 childcare provider is partially or completely unavailable  
7 to provide for the child's well-being.

8 "Family and medical leave" does not include any period of  
9 time during which a covered individual is paid benefits  
10 pursuant to the Workers' Compensation Act because the covered  
11 individual is unable to perform the duties of the covered  
12 individual's employment due to the covered individual's own  
13 disability or paid benefits pursuant to the Unemployment  
14 Insurance Act.

15 (20) "Family and medical leave benefits" means any  
16 payments that are payable to an individual for all or part of a  
17 period of family and medical leave.

18 (21) "Health care provider" means any person licensed  
19 under federal, State, or local law, or the laws of a foreign  
20 nation, to provide health care services, any other person who  
21 has been authorized to provide health care by a licensed  
22 health care provider, or any other individual determined by  
23 the Department to be capable of providing health care  
24 services.

25 (22) "Intermittent leave" means a nonconsecutive leave  
26 consisting of intervals, each of which is at least one day

1 within a consecutive 12-month period.

2 (23) "Parent" means a biological parent, foster parent,  
3 adoptive parent, stepparent, or parent-in-law of the covered  
4 individual or a person who is or was a legal guardian of, or  
5 who stood in loco parentis to, the covered individual when the  
6 covered individual was a child, or any other individual whose  
7 close association with the covered individual is the  
8 equivalent of a parent as determined by the covered  
9 individual.

10 (24) "Placement for adoption" means the time when a  
11 covered individual adopts a child or becomes responsible for a  
12 child pending adoption by the covered individual or the  
13 covered individual's family member.

14 (25) "Qualifying exigency" means a need arising out of a  
15 covered individual's family member's active duty service or  
16 notice of an impending call or order to active duty in the  
17 Armed Forces, including, but not limited to, providing for the  
18 care or other needs of the military member's family member,  
19 making financial or legal arrangements for the military  
20 member, attending counseling, attending military events or  
21 ceremonies, spending time with the military member during a  
22 rest and recuperation leave or following return from  
23 deployment or making arrangements following the death of the  
24 military member. "Armed Forces" includes the Army, Navy, Air  
25 Force, Marine Corps, Coast Guard, and National Guard or  
26 Reserves.



1           (26) "Self-employed individual" means a sole proprietor  
2 that meets the specifications under the definition of the term  
3 "employee", a member of a limited liability company or limited  
4 liability partnership, or an individual who resides in  
5 Illinois and whose net profit or loss from a business is  
6 required to be reported to the Illinois Department of Revenue.

7           (27) "Serious health condition" means an illness, injury,  
8 impairment, or physical or mental condition that requires  
9 inpatient care in a hospital, hospice, or residential medical  
10 care facility or continuing medical treatment, counseling, or  
11 continuing supervision by a health care provider or victim  
12 services organization. "Serious health condition" includes,  
13 but is not limited to, conditions in connection with  
14 pregnancy, recovery from childbirth, or any related condition.

15           (28) "Sexual assault" means any conduct proscribed by: (i)  
16 Article 11 of the Criminal Code of 2012 except Sections 11-35  
17 and 11-45; or (ii) Sections 12-13, 12-14, 12-14.1, 12-15, and  
18 12-16 of the Criminal Code of 2012.

19           (29) "Stalking" means any conduct proscribed by the  
20 Criminal Code of 2012 in Sections 12-7.3, 12-7.4, and 12-7.5.

21           (30) "Statewide average weekly wage" means the wage  
22 determined by the Department of Employment Security pursuant  
23 to paragraph 2 of subsection B of Section 401 of the  
24 Unemployment Insurance Act.

25           (31) "12-month period" means, with respect to an employee  
26 who establishes a valid claim for family and medical leave

1 benefits during a period of family and medical leave, the 365  
2 consecutive days that begin with the first day that the  
3 employee first establishes the claim.

4 (32) "Fund" means the Family and Medical Leave Insurance  
5 Fund established in Section 35.

6 (33) "Victim" or "survivor" means an individual who has  
7 been subjected to domestic or sexual violence.

8 (34) "Victim services organization" means a nonprofit,  
9 nongovernmental organization that provides assistance to  
10 victims of domestic or sexual violence, including rape crisis  
11 centers, organizations carrying out a domestic violence  
12 program, organizations operating a shelter or providing  
13 counseling services, or a legal services organization or other  
14 organization providing assistance through the legal process.

15 (35) "Wages" means any remuneration owed an individual  
16 pursuant to employment, an employment contract or agreement  
17 between 2 or more parties or a contract for services with a  
18 covered business entity, whether paid directly or indirectly,  
19 including, but not limited to, salaries, commissions,  
20 gratuities, and bonuses, and reasonable cash value of board,  
21 rent, housing, lodging, payment in kind and all remuneration  
22 paid in any medium other than cash, and whether the amount is  
23 determined on a time, task, piece, or any other basis of  
24 calculation.

25 (36) "Weekly benefit amount" means the amount of wage  
26 replacement paid to a covered individual on a weekly basis

1 while the covered individual is on family and medical leave,  
2 as provided in Section 40.

3 Section 15. Family and medical leave insurance program.

4 (a) The Department shall establish and administer a family  
5 and medical leave insurance program.

6 (b) The Department shall establish procedures and forms  
7 for filing claims for benefits under this Act.

8 (c) The Department shall use information sharing and  
9 integration technology to facilitate the disclosure of  
10 relevant information or records by the Department.

11 (d) Information contained in the files and records  
12 pertaining to an employee, an individual who contracts for  
13 services with a covered business entity, a self-employed  
14 individual, any covered individual under this Act, or a family  
15 member of such individual is confidential and not open to  
16 inspection other than by public employees in the performance  
17 of their official duties. However, the employee, an individual  
18 who contracts for services with a covered business entity, a  
19 self-employed individual, a covered individual, or an  
20 authorized representative of an employee, an individual who  
21 contracts for services with a covered business entity,  
22 self-employed individual, or covered individual may review the  
23 records or receive specific information from the records on  
24 the presentation of the signed authorization of the employee,  
25 individual who contracts for services with a covered business

1 entity, the self-employed individual, or the covered  
2 individual. An employer, covered business entity, or the  
3 employer's or covered business entity's duly authorized  
4 representative may review the records of an employee employed  
5 by the employer, individual who contracts for services with a  
6 covered business entity, or self-employed individual in  
7 connection with a pending claim, with the exception of any  
8 protected health information provided to the Department by an  
9 entity covered by the Health Insurance Portability and  
10 Accountability Act or information related to a use of leave  
11 authorized under paragraph (E) of item (19) of Section 10. At  
12 the Department's discretion, other persons may review records  
13 when such persons are rendering assistance to the Department  
14 at any stage of the proceedings on any matter pertaining to the  
15 administration of this Act. An employer and a covered business  
16 entity must keep at its place of business for not less than 5  
17 years from the date of a request for leave records from which  
18 the information needed by the Department for purposes of this  
19 Act may be obtained. The records shall at all times be open to  
20 the inspection of the Department pursuant to rules adopted by  
21 the Department. An employer or covered business entity subject  
22 to any provision of this Act shall make and preserve records  
23 that document the name, address, and occupation of each  
24 employee, individual who contracts for services with a covered  
25 business entity, or domestic worker, the wages and any other  
26 compensation paid, benefits provided, and contract for

1 services for each employee, individual with a contract for  
2 services with a covered business entity, or domestic worker,  
3 and any other information the Director may by rule deem  
4 necessary and appropriate for enforcement of this Act. An  
5 employer or covered business entity subject to any provision  
6 of this Act shall preserve those records for a period of not  
7 less than 5 years and shall make reports from the records as  
8 prescribed by rule or order of the Director, unless the  
9 records relate to an ongoing investigation or enforcement  
10 action under this Act, in which case the records must be  
11 maintained until their destruction is authorized by the  
12 Department or by court order.

13 (e) The Department shall develop and implement an outreach  
14 program to ensure that individuals who may be eligible to  
15 receive family and medical leave benefits under this Act are  
16 made aware of these benefits. Outreach information shall  
17 explain, in an easy-to-understand format, eligibility  
18 requirements, the claims process, weekly benefit amounts,  
19 maximum benefits payable, notice requirements, reinstatement  
20 and nondiscrimination rights, confidentiality, and  
21 coordination of leave under this Act and other laws,  
22 collective bargaining agreements, and employer and covered  
23 business entity policies. Outreach information shall be  
24 available in English, Spanish, Polish, Russian, Tagalog,  
25 Mandarin, and in other languages that are spoken as a primary  
26 language by a significant portion of the State's population,

1 as determined by the Department.

2 (f) An employee, individual who contracts for services  
3 with a covered business entity, or domestic worker may make a  
4 claim for benefits under this Act on and after January 1 of the  
5 year one year after the Department begins collecting employer  
6 and covered business entity premium contributions under this  
7 Act.

8 Section 20. Eligibility for benefits.

9 (a) The Department may require that a claim for family and  
10 medical leave benefits under this Act be supported by a  
11 certification. For a claim for family and medical leave under  
12 paragraph (A), (B), or (C) of item (19) of Section 10, the  
13 certification shall be issued by a health care provider of the  
14 employee's, the individual who contracts for services for a  
15 covered business entity's, or the covered individual's  
16 choosing who is providing care to the employee or the  
17 employee's family member if applicable or the individual who  
18 contracts for services with a covered business entity or such  
19 individual's family member if applicable, or covered  
20 individual or the covered individual's family member, however,  
21 for a claim under paragraph (C) for leave for conditions in  
22 connection with pregnancy, recovery after childbirth, or any  
23 related conditions, leave shall be granted even though the  
24 covered individual does not receive treatment from a health  
25 care provider during the absence. For a claim for family and

1 medical leave because of a qualifying exigency under paragraph  
2 (D), documentation shall be sufficient if it includes: (i) a  
3 copy of the family member's active duty orders; (ii) other  
4 documentation issued by the Armed Forces; or (iii) other  
5 documentation permitted by the Department. For a claim for  
6 family and medical leave under paragraph (E) of item (19) of  
7 Section 10, any one of the following is acceptable for  
8 certification, and only one of the following documents shall  
9 be required: a police report, court document, document issued  
10 by a healthcare provider, or a signed statement from an  
11 attorney, a member of the clergy, or a victim services  
12 organization or advocate. It is up to the employee, individual  
13 who contracts for services with a covered business entity, or  
14 covered individual to determine which documentation to submit.  
15 If documentation has been submitted, the Department or the  
16 employer or covered business entity shall not request or  
17 require any other documentation if the reason for the initial  
18 or subsequent claims for family and medical leave is related  
19 to the same incident of violence or the same perpetrator of the  
20 violence. For leave under paragraphs (F) and (G) of item (19)  
21 of Section 10, a statement signed by the covered individual is  
22 acceptable documentation for certification.

23 (b) The eligibility for benefits of an employee, an  
24 individual who contracts with a covered business entity, or a  
25 domestic worker is not affected by a strike or lockout at the  
26 factory, establishment, or other premises at which the

1 employee is or was last employed.

2 (c) An employee, individual who contracts for services  
3 with a covered business entity, or domestic worker who has  
4 received benefits under this Act may not lose any other  
5 employment benefits, including seniority or pension rights,  
6 accrued before the date that family and medical leave  
7 commenced. The employer or covered business entity shall  
8 maintain during any period of family and medical leave taken  
9 the health benefits of the employee and, if applicable, the  
10 dependents of the employee, the individual who contracts for  
11 services with a covered business entity, or the domestic  
12 worker in force at the time a request for family and medical  
13 leave was made, for the duration of such leave as if the  
14 employee, individual who contracts for services with a covered  
15 business entity, or domestic worker had continued to work from  
16 the date the employee, individual who contracts for services  
17 with a covered business entity, or domestic worker commenced  
18 the family and medical leave until the date the employee,  
19 individual who contracts for services with a covered business  
20 entity, or domestic worker returns to work. However, this  
21 Section does not entitle an employee, individual who contracts  
22 for services with a covered business entity, or domestic  
23 worker to accrue employment benefits during a period of family  
24 and medical leave or to a right, benefit, or position of  
25 employment other than a right, benefit, or position to which  
26 the employee, individual who contract for services with a



1 covered business entity, or domestic worker would have been  
2 entitled had the employee, individual who contracts for  
3 services with a covered business entity, or domestic worker  
4 not taken family and medical leave.

5 (d) This Act does not diminish an employer's or covered  
6 business entity's obligation to comply with a collective  
7 bargaining agreement or an employment benefits program or plan  
8 that provides greater benefits to employees, individuals who  
9 contract for services with a covered business entity, or  
10 domestic workers than the benefits provided under this Act.

11 (e) An agreement by an employee, individual who contracts  
12 for services with a covered business entity, or domestic  
13 worker to waive the rights of the employee, individual who  
14 contracts for services with a covered business entity, or  
15 domestic worker under this Section is void as contrary to  
16 public policy. The benefits under this Act may not be  
17 diminished by a collective bargaining agreement or another  
18 employment benefits program or plan entered into or renewed  
19 after the effective date of this Act.

20 (f) Subject to the requirements of this Act, an individual  
21 shall be eligible to receive benefits under this Act if that  
22 individual has been paid during the individual's base period  
23 wages equal to not less than \$1,600, provided that the  
24 individual has been paid wages equal to at least \$440 during  
25 that part of the individual's base period which does not  
26 include the calendar quarter in which the wages paid to the

1 individual were highest. "Base period" means the first 4 of  
2 the last 5 completed calendar quarters immediately preceding  
3 the Sunday immediately preceding the first day that family and  
4 medical leave under this Act commences for the covered  
5 individual. However, if an individual is not eligible to  
6 receive family and medical leave benefits or an individual's  
7 weekly benefit amount would be lower using such base period, a  
8 base period consisting of the last 4 completed quarters  
9 immediately preceding the Sunday immediately preceding the  
10 first day that family and medical leave under this Act  
11 commences shall be used to establish eligibility or a higher  
12 weekly benefit amount for the covered individual.

13 Section 25. Elective coverage; self-employed.

14 (a) For benefits payable beginning January 1, 2024, any  
15 self-employed person, including a sole proprietor, independent  
16 contractor, partner, or joint venturer, who has  
17 self-employment income for work performed in Illinois in  
18 accordance with the definition of covered individual under  
19 item (9) of Section 10 may elect coverage for an initial period  
20 of not less than 3 years and subsequent periods of not less  
21 than one year immediately following a period of coverage.  
22 Those electing coverage under this Act are responsible for  
23 payment of 100% of all premiums assessed to any employer under  
24 this Act. The self-employed person must file a notice of  
25 election in writing with the Department in a manner as

1 required by the Department by rule.

2 (b) A self-employed person who has elected coverage may  
3 withdraw from coverage within 30 days after the end of each  
4 period of coverage, or at such other times as the Department  
5 may adopt by rule, by filing a notice of withdrawal in writing  
6 with the Department, such withdrawal to take effect not sooner  
7 than 30 days after the filing the notice with the Department.

8 (c) The Department may cancel elective coverage if the  
9 self-employed person fails to make required payments or file  
10 reports. The Department may collect due and unpaid premiums  
11 and may levy additional premiums for the remainder of the  
12 period of coverage. The cancellation shall be effective no  
13 later than 30 days after the date of the notice in writing  
14 advising the self-employed person of the cancellation.

15 (d) Those electing coverage are considered employees or  
16 employers where the context dictates.

17 (e) In this Section, "independent contractor" means an  
18 individual excluded from employment under the definition of  
19 "employee" under Section 10.

20 Section 30. Disqualification from benefits.

21 (a) An employee is disqualified from family and medical  
22 leave benefits under this Act if the employee:

23 (1) willfully makes a false statement or  
24 misrepresentation regarding a material fact or willfully  
25 fails to disclose a material fact to obtain benefits; or

1           (2) seeks benefits based on a serious health condition  
2           that resulted from the employee's commission of a felony.

3           (b) A disqualification for family and medical leave  
4           benefits is for a period of 2 years and commences on the first  
5           day of the calendar week in which the employee filed a claim  
6           for benefits under this Act.

7           An employee who is disqualified for benefits is liable to  
8           the Department for a penalty of 15% of the amount of benefits  
9           received by the employee in addition to the total amount of  
10          benefits received.

11          Section 35. Family and Medical Leave Insurance Fund.

12          (a) The Family and Medical Leave Insurance Fund is created  
13          as a special fund in the State treasury. Money in the Fund may  
14          be used for the payment of family and medical leave benefits  
15          and for the administration of this Act. All interest and other  
16          earnings that accrue from investment of money in the Fund  
17          shall be credited to the Fund.

18          (b) An employer and a covered business entity shall pay a  
19          premium contribution in the amount of 0.73% of wages for all  
20          employees and individuals who contract for services with a  
21          covered business entity. The Department shall by rule provide  
22          for the collection of the employer's premium contribution. The  
23          amount of the employer's premium contribution imposed under  
24          this Section, less refunds authorized by this Act, and all  
25          assessments and penalties collected under this Act shall be

1 deposited into and credited to the Fund.

2 (c) A separate account, to be known as the Family and  
3 Medical Leave Insurance Administration Account, shall be  
4 maintained in the Fund. An amount determined by the Department  
5 sufficient for proper administration, not to exceed 0.05% of  
6 additional employer and covered business entity premium  
7 contributions as defined in this Section, shall be collected  
8 and credited to the Administration Account. The expenses of  
9 the Department in administering the Fund and its accounts  
10 shall be charged against the Administration Account. The costs  
11 of administration of this Act shall be charged to the  
12 Administration Account.

13 (d) A separate account, to be known as the Family and  
14 Medical Leave Benefits Account, shall be maintained in the  
15 Fund. The account shall be charged with all benefit payments.

16 (e) The Department may adjust rates for the collection of  
17 premiums pursuant to subsection (b) of this Section. The  
18 Department shall set rates for premiums in a manner that  
19 minimizes the volatility of the rates assessed and so that at  
20 the end of the period for which the rates are effective, the  
21 cash balance shall be an amount approximating 125% of 12  
22 months of projected expenditures from the Fund, considering  
23 the functions and duties of the Department under this Act.

24 (f) An employer or covered business entity required to pay  
25 premium contributions under this Section shall make and file a  
26 report of amounts due under this Section upon a combined

1 report form prescribed by the Department. The report shall be  
2 filed with the Department at the times and in the manner  
3 prescribed by the Department.

4 (g) If the employer or covered business entity is a  
5 temporary employment agency that provides employees or  
6 individuals who contract for services with a covered business  
7 entity on a temporary basis to its customers, the temporary  
8 employment agency is considered a joint employer with its  
9 customers for purposes of this Act.

10 (h) When an employer or covered business entity goes out  
11 of business or sells out, exchanges, or otherwise disposes of  
12 the business or stock of goods, any premiums payable under  
13 this Section are immediately due and payable, and the employer  
14 or covered business entity shall, within 10 days thereafter,  
15 pay the premiums due. A person who becomes a successor to the  
16 business is liable for the full amount of the premiums and  
17 shall withhold from the purchase price a sum sufficient to pay  
18 any premiums due from the employer until the employer produces  
19 a receipt from the Department showing payment in full of any  
20 premiums due or a certificate that no premium is due. If the  
21 premiums are not paid by the employer or covered business  
22 entity within 10 days after the date of the sale, exchange, or  
23 disposal, the successor is liable for the payment of the full  
24 amount of the premiums. The successor's payment of the  
25 premiums are, to the extent of the payment, a payment upon the  
26 purchase price, and if the payment is greater in amount than

1 the purchase price, the amount of the difference is a debt due  
2 the successor from the employer or covered business entity. A  
3 successor is not liable for any premiums due from the person  
4 from whom the successor has acquired a business or stock of  
5 goods if the successor gives written notice to the Department  
6 of the acquisition and no assessment is issued by the  
7 Department within one year after receipt of the notice against  
8 the former operator of the business.

9 (i) This Section is inoperative before January 1, 2024. At  
10 that time, the Department shall begin collecting the amounts  
11 due under this Section.

12 Section 40. Weekly benefit for family and medical leave.

13 (a) An individual's weekly benefit rate shall be  
14 determined as follows: if the average weekly wage to the  
15 employee, individual who contracts for services with a covered  
16 business entity, or domestic worker is (a) 50% or less of the  
17 statewide average weekly wage, the weekly benefit for the  
18 employee, individual with a contract for services with a  
19 covered business entity, or domestic worker is 90% of the  
20 average weekly wage of the employee, individual with a  
21 contract for services with a covered business entity, or  
22 domestic worker or (b) greater than 50% of the statewide  
23 average weekly wage, the weekly benefit for the employee,  
24 individual with a contract for services with a covered  
25 business entity, or domestic worker is the sum of: (i) 90% of

1 the average weekly wage of the employee, individual with a  
2 contract for services with a covered business entity, or  
3 domestic worker up to 50% of the statewide average weekly  
4 wage; and (ii) 50% of the average weekly wage of the employee,  
5 individual with a contract for services with a covered  
6 business entity, or domestic worker that is greater than 50%  
7 of the statewide average weekly wage. The benefit rate shall  
8 be computed to the next lower multiple of \$1 if not already a  
9 multiple thereof. The amount of benefits for each day of  
10 family and medical leave for which benefits are payable shall  
11 be one-seventh of the corresponding weekly benefit amount;  
12 provided that the total benefits for a fractional part of a  
13 week shall be computed to the next lower multiple of \$1 if not  
14 already a multiple thereof.

15 (b) The maximum weekly benefit for family and medical  
16 leave that occurs on or after January 1, 2022 shall be \$1,000.  
17 By September 30, 2024, and by each subsequent September 30th,  
18 the maximum weekly benefit shall be adjusted to 90% of the  
19 State average weekly wage. The adjusted maximum weekly benefit  
20 amount takes effect on the following January 1st.

21 (c) With respect to any period of family and medical leave  
22 taken by a covered individual, family and medical leave  
23 insurance benefits not in excess of the covered individual's  
24 maximum benefits shall be payable with respect to the first  
25 day of family and medical leave taken and each subsequent day  
26 of family and medical leave during that period of family and



1 medical leave. The maximum total benefits payable to any  
2 covered individual commencing on or after the effective date  
3 of this Act shall be 26 times the weekly benefit amount for an  
4 employee, individual with a contract for services with a  
5 covered business entity, or domestic worker in the applicable  
6 benefit year, except for individuals taking leave pursuant to  
7 paragraph (C) of item (19) of Section 10 for conditions in  
8 connection with pregnancy, recovery from childbirth, or any  
9 related condition where the maximum total benefits payable to  
10 any covered individual shall be 52 times the employee's weekly  
11 benefit amount in the applicable benefit year, provided that  
12 the maximum amount shall be computed in the next lower  
13 multiple of \$1 if not already a multiple thereof.

14 (d) The first payment of benefits must be made to a covered  
15 individual within 14 calendar days after the claim is filed  
16 and there is sufficient information to approve at least one  
17 week of benefits; subsequent payments must be made no later  
18 than semi-monthly thereafter.

19 Nothing in this Act shall be construed to prohibit the  
20 establishment by an employer or a covered business entity,  
21 without approval by the Department, of a supplementary plan or  
22 plans providing for the payment to employees, individuals with  
23 a contract for services with a covered business entity, or  
24 domestic workers or to any class or classes of employees,  
25 individuals with a contract for services with a covered  
26 business entity, or domestic workers, of benefits in addition

1 to the benefits provided by this Act. The rights, duties, and  
2 responsibilities of all interested parties under the  
3 supplementary plans shall be unaffected by any provision of  
4 this Act.

5 Section 45. Family and medical leave; duration. A covered  
6 individual may take up to 26 weeks of family and medical leave  
7 within any 12-month period for reasons identified in  
8 paragraphs (A), (B), (C), (D), and (E) of item (19) of Section  
9 10. However, a covered individual may take up to an additional  
10 26 weeks of family and medical leave within any 12-month  
11 period for which the covered individual is eligible for leave  
12 under paragraph (C) of item (19) of Section 10 taken in  
13 connection with pregnancy, recovery from childbirth, or  
14 related conditions. A covered individual may take family and  
15 medical leave consecutively or on an intermittent schedule in  
16 which all of the leave authorized under this Act is not taken  
17 sequentially.

18 Section 50. Annual reports; contents.

19 (a) The Department shall issue and make available to the  
20 public, not later than July 1, 2025 and July 1 of each  
21 subsequent year, annual reports providing data on family and  
22 medical leave benefits claims including separate data for each  
23 of the following categories of claims: the employee's,  
24 individual with a contract for services with a covered

1 business entity's, or domestic worker's own serious illness;  
2 care of newborn children; care of newly adopted and fostered  
3 children; care of seriously ill family members; because of  
4 family members on active duty in the Armed Forces; for  
5 domestic or sexual violence, and for conditions in connection  
6 with pregnancy, recovering from childbirth, or related  
7 conditions. The reports shall include, for each category of  
8 claims, the number of individuals receiving the benefits, the  
9 amount of benefits paid, the average duration of benefits, and  
10 the average weekly benefit. The report shall provide data by  
11 gender, race, ethnicity, income, and any other demographic  
12 factors determined to be relevant by the Department. The  
13 reports shall also provide, for all family and medical leave  
14 benefits, the total costs of benefits and the total cost of  
15 administration, the portion of benefits for claims during  
16 family and medical leave, and the total revenues from employer  
17 or covered business entity premium contributions and  
18 assessments, where applicable; and other sources.

19 (b) The Department may, in its discretion, conduct surveys  
20 and other research regarding, and include in the annual  
21 reports descriptions and evaluations of the impact and  
22 potential future impact of the costs and benefits resulting  
23 from this Act for:

24 (1) employees and their families, including surveys  
25 and evaluations of what portion of the total number of  
26 employees taking family and medical leave would not have

1 taken leave, or would have taken less leave, without the  
2 availability of benefits; what portion of employees return  
3 to work after receiving benefits and what portion are not  
4 permitted to return to work; and what portion of employees  
5 who are eligible for benefits do not claim or receive them  
6 and why they do not;

7 (2) employers, including benefits such as reduced  
8 training and other costs related to reduced turnover of  
9 personnel, and increased affordability of family and  
10 medical leave through the State, with special attention  
11 given to small businesses; and

12 (3) the public, including savings caused by any  
13 reduction in the number of people receiving public  
14 assistance.

15 (c) The total amount of any expenses that the Department  
16 determines are necessary to carry out its duties pursuant to  
17 this Section shall be charged to the Administration Account of  
18 the Fund.

19 Section 55. Prohibited acts; enforcement.

20 (a) No employer, employment and labor placement agency,  
21 employment agency, employee organization, covered business  
22 entity, or other person shall discharge, expel, or otherwise  
23 retaliate or discriminate against a person because the person  
24 has requested family and medical leave, attempted to claim  
25 family and medical leave benefits, taken family and medical

1 leave, filed or communicated to the employer or covered  
2 business entity an intent to file a claim, a complaint, or an  
3 appeal, or has testified or is about to testify or has assisted  
4 in any proceeding, under this Act, at any time.

5 (b) Any employer or covered business entity who violates  
6 subsection (a) shall be liable to the individual employed by  
7 or contracted for services with such a person who is affected  
8 by the violation for damages equal to the sum of:

9 (1) the amount of:

10 (A) any wages, salary, employment benefits, or  
11 other compensation denied or lost to such individual  
12 by reason of the violation; or

13 (B) in a case in which wages, salary, employment  
14 benefits, or other compensation have not been denied  
15 or lost to the individual, any actual monetary losses  
16 sustained by the individual as a direct violation,  
17 such as the cost of providing care, up to a sum equal  
18 to 60 calendar days of wages or salary for the  
19 individual; and

20 (2) the interest on the amount described under  
21 paragraph (A) of item (1) calculated at the prevailing  
22 rate; and

23 (3) an additional amount as liquidated damages equal  
24 to the sum of the amount described in item (1) and the  
25 interest described in item (2), except if a person who has  
26 violated subsection (a) proves to the satisfaction of the

1 court that the act or omission was in good faith and that  
2 the person had reasonable grounds for believing that the  
3 act or omission was not a violation of subsection (a), the  
4 court may, in the discretion of the court, reduce the  
5 amount of the liability to the amount and interest  
6 determined under paragraph (A) or (B) of item (1),  
7 respectively.

8 In addition, a court may order such equitable relief as  
9 may be appropriate, including employment, reinstatement,  
10 promotion, and reinstatement of a contract for services.

11 (c) An action to recover the damages or obtain equitable  
12 relief subsection (a) may be maintained against any person in  
13 any court on behalf of:

14 (1) the individual; or

15 (2) the individual or other individuals similarly  
16 situated.

17 (d) The court in such an action shall, in addition to any  
18 judgment awarded to the covered individual, allow reasonable  
19 attorney's fees, reasonable expert witness fees, and other  
20 costs of the action to be paid by the defendant.

21 (e) The right under subsection (c) to bring an action by or  
22 on behalf of any individual shall terminate:

23 (1) on the filing of a complaint by the Department in  
24 an action in which restraint is sought of any further  
25 delay in the payment of the amount described in item (1) of  
26 subsection (b) to such individual by the person

1 responsible under subsection (a) for the payment; or

2 (2) on the filing of a complaint by the Department in  
3 an action under subsection (f) in which a recovery is  
4 sought of the damages described in item (1) of subsection  
5 (b) owing to an individual by a person liable under  
6 subsection (a).

7 (f) Action by the Department.

8 (1) The Department may bring an action in any court to  
9 recover the damages described in item (1) of subsection  
10 (b).

11 (2) Any sums recovered under item (1) of this  
12 subsection shall be held in a special deposit account and  
13 shall be paid, on order of the Department, directly to  
14 each individual affected. Any such sums not paid to an  
15 individual because of inability to do so within a period  
16 of 3 years shall be deposited into the Fund.

17 (3) An action may be brought under this subsection not  
18 later than 3 years after the date of the last event  
19 constituting the alleged violation for which the action is  
20 brought.

21 (4) An action brought by the Department under this  
22 subsection shall be considered to be commenced on the date  
23 when the complaint is filed.

24 (5) The Department may bring an action to restrain  
25 violations of subsection (a), including the restraint of  
26 any withholding of payment of wages, salary, employment

1 benefits, or other compensation, plus interest, found by  
2 the court to be due to the individual, or to award such  
3 other equitable relief as may be appropriate, including  
4 employment, reinstatement, and promotion.

5 (g) A person aggrieved by a decision of the Department  
6 under this Act may request a hearing. The Department shall  
7 adopt rules governing hearings and the issuance of final  
8 orders under this Act in accordance with the Illinois  
9 Administrative Procedure Act. All final administrative  
10 decisions of the Department under this Act are subject to  
11 judicial review under the Administrative Review Law.

12 Section 60. Penalties.

13 (a) A person who makes a false statement or  
14 representation, knowing it to be false, or knowingly fails to  
15 disclose a material fact to obtain or increase any family and  
16 medical leave benefit during a period of family and medical  
17 leave, either for themselves or for any other person, shall be  
18 liable for a civil penalty of \$250 to be paid to the Fund. Each  
19 such false statement or representation or failure to disclose  
20 a material fact shall constitute a separate offense. Upon  
21 refusal to pay such a civil penalty, the civil penalty shall be  
22 recovered in a civil action by the Attorney General on behalf  
23 of the Department in the name of the State of Illinois. If, in  
24 any case in which liability for the payment of a civil penalty  
25 has been determined, any person who has received any benefits



1 under this Act by reason of the making of such false statements  
2 or representations or failure to disclose a material fact  
3 shall not be entitled to any benefits under this Act for any  
4 leave occurring prior to the time he or she has discharged his  
5 or her liability to pay the civil penalty.

6 (b) A person who willfully violates any provision of this  
7 Act or any rule adopted under this Act for which a civil  
8 penalty is neither prescribed by this Act nor provided by any  
9 other applicable law shall be subject to a civil penalty of  
10 \$500 to be paid to the Fund. Upon the refusal to pay such a  
11 civil penalty, the civil penalty shall be recovered in a civil  
12 action by the Attorney General on behalf of the Department in  
13 the name of the State of Illinois.

14 Section 65. Leave and employment protection.

15 (a) During a period in which an employee, individual who  
16 contracts for services with a covered business entity, or  
17 domestic worker receives family and medical leave benefits  
18 under this Act, the employee, individual who contracts for  
19 services with a covered business entity, or domestic worker is  
20 entitled to family and medical leave and, at the established  
21 ending date of leave, to be restored to a position of  
22 employment or restoration of the contract for services with  
23 the employer or covered business entity from whom leave was  
24 taken as provided under subsection (b).

25 (b) Except as provided in subsection (d), an employee,

1 individual with a contract for services with a covered  
2 business entity, or domestic worker who receives family and  
3 medical leave benefits under this Act for the intended purpose  
4 of the family and medical leave is entitled, on return from the  
5 leave:

6 (1) to be restored by the employer to the position of  
7 employment held by the employee, restored by the covered  
8 business entity to the contract for services, or restored  
9 to the position of employment or the contract for services  
10 for domestic workers when the family and medical leave  
11 commenced; or

12 (2) to be restored to an equivalent position or  
13 contract with equivalent employment benefits, pay, and  
14 other terms and conditions of employment or contract at a  
15 workplace within the same or a geographically proximate  
16 work site (such as one that does not involve a significant  
17 increase in commuting time or distance) when the family  
18 and medical leave commenced.

19 (c) The taking of family and medical leave under this Act  
20 may not result in the loss of any employment or contract  
21 benefits accrued before the date on which the family and  
22 medical leave commenced.

23 (d) Nothing in this Section entitles a restored employee,  
24 individual who contracts for services with a covered business  
25 entity, or domestic worker to:

26 (1) the accrual of any seniority or employment

1 benefits during any period of family and medical leave; or  
2 (2) any right, benefit, or position of employment  
3 other than any right, benefit, or position to which the  
4 employee would have been entitled had the employee not  
5 taken the family and medical leave.

6 (e) Nothing in this Section prohibits an employer from  
7 requiring an employee, individual who contracts for services  
8 with a covered business entity, or domestic worker on family  
9 and medical leave to report periodically, but no more than  
10 twice every 4 weeks of leave, to the employer, covered  
11 business entity on the status and intention of the employee,  
12 individual with a contract for services, or domestic worker to  
13 return to work.

14 Section 70. Pregnancy; effect of other State law. No  
15 individual shall suffer any repercussion under any Illinois  
16 law, rule, or policy for any decisions the covered individual  
17 is authorized to make under this Act regarding leave related  
18 to pregnancy, recovery from childbirth, or related conditions.

19 Section 75. Notice to employer or covered business entity.  
20 If the necessity for family and medical leave for any reason  
21 under item (19) of Section 10 is foreseeable, the employee,  
22 individual with a contract for services with a covered  
23 business entity, or domestic worker shall provide the employer  
24 or covered business entity with not less than 30 days' notice,

1 before the date the leave is to begin, of the intention of the  
2 employee, individual with a contract for services with a  
3 covered business entity to take leave, except that if the  
4 expected date requires leave to begin in less than 30 days, the  
5 employee, individual with a contract for services with a  
6 covered business entity, or domestic worker shall provide such  
7 notice as is practical.

8 Section 80. Employment by same employer or covered  
9 business entity. The right of an employee, individual who  
10 contracts for services with a covered business entity, or  
11 domestic worker to leave under this Act shall not be altered or  
12 abridged by access to leave of any other employee, individual  
13 who contracts for services with a covered business entity, or  
14 domestic worker.

15 Section 85. Coordination of leave. Family and medical  
16 leave taken under this Act must be taken concurrently with any  
17 leave taken under the federal Family and Medical Leave Act of  
18 1993, if applicable.

19 Section 90. Notice. Every employer and covered business  
20 entity covered by this Act shall post and keep posted, in a  
21 conspicuous place on the premises of the employer or covered  
22 business entity where notices to employees are customarily  
23 posted, a notice, to be prepared or approved by the Director of

1 Employment Security, summarizing the requirements of this Act  
2 and information pertaining to the filing of a charge. Every  
3 employer and covered business entity shall also provide such  
4 notice to employees, individuals with contracts for services  
5 with a covered business entity, and domestic workers through  
6 electronic transmission to the employee, individual with a  
7 contract for services with the covered business entity, or  
8 domestic worker. The Director shall furnish copies of  
9 summaries and rules to the employers and covered business  
10 entities upon request without charge. Any employer or covered  
11 business entity that fails to post the required notice or  
12 transmit such notice may not rely on this Act to claim that the  
13 employee, individual with a contract for services with a  
14 covered business entity, or domestic worker failed to inform  
15 the employer or covered business entity that the employee,  
16 individual with a contract for services with a covered  
17 business entity, or domestic worker wanted or was eligible for  
18 leave under this Act.

19 Section 95. Rules. The Department may adopt any rules  
20 necessary to implement this Act.

21 Section 105. Severability. The provisions of this Act are  
22 severable under Section 1.31 of the Statute on Statutes.

23 Section 900. The State Finance Act is amended by adding

1 Section 5.970 as follows:

2 (30 ILCS 105/5.970 new)

3 Sec. 5.970. The Family and Medical Leave Insurance Fund.

4 Section 999. Effective date. This Act takes effect January  
5 1, 2023.