Medical Extensions
If your patient's expected recovery date is less than six weeks, you may receive a Supplementary Certificate to complete and return in the event that your patient requires additional care/support from their family member (PFL claimant).

Disclosure of Medical Information
Family members with serious health conditions (care recipients) authorize disclosure of their medical information to us by their physicians/practitioners when they sign the PFL claim form. Because the PFL claim must be completed before any benefits are paid, the EDD will not contact you to discuss your patient’s conditions without their prior authorization. If the EDD needs to contact you, questions will be limited to the information you provided about the care recipient on the claim form.

Additional Medical Information
If the estimated period of care necessary for your patient (the care recipient) is significantly longer than normal, the EDD may contact you by telephone or letter to obtain additional medical information to substantiate your patient’s extended illness/disability period.

Integrity of Paid Family Leave
The fiscal integrity of PFL depends on the accuracy of information provided to the EDD. As guardian of the Disability Fund, the EDD practices fiscal responsibility and applies a series of control measures designed to verify the validity of the claim. The EDD reviews your diagnosis/ICD coding, and estimated dates of necessary care to determine whether it is consistent with the normal expectancy for the illness indicated on the claim form. For your convenience, PFL claim information may be filed electronically through SDI Online, which can be accessed by visiting www.edd.ca.gov/disability or you may request the paper claim form online or by calling 877-238-4373.

Additional information regarding PFL can also be accessed at www.edd.ca.gov/disability.

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What is Paid Family Leave?
Paid Family Leave (PFL) is a component of State Disability Insurance (SDI) which is a partial, short-term, wage-replacement insurance plan for eligible California workers. Unlike Disability Insurance (DI), which partially covers employee wage loss due to a personal disability, injury, or pregnancy, PFL covers employee wage loss of approximately 55 percent of employee’s income for individuals who need to care for a seriously ill family member or bond with a new child. Benefits are available for a maximum of six weeks in a 12-month period. PFL and DI are both administered by the Employment Development Department (EDD) and funded entirely by California workers’ payroll deductions.

Definition of Family Member
Individuals can file a PFL claim to care for a child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner.

Serious Health Condition
For PFL purposes, a serious health condition means an illness, injury, impairment, or physical or mental condition that involves inpatient care in a hospital, hospice, residential health care facility, or continuing supervision by a health care provider.

Parental Bonding
Individuals may file a PFL claim to bond with a new child, the new child of a spouse or registered domestic partner, or to bond with a newly placed foster or adopted child, or legal ward.

Paid Family Leave is not FMLA or CFRA
The federal Family Medical Leave Act (FMLA) and the California Family Rights Act (CFRA) require some employers to grant unpaid leave to their employees for up to 12 weeks to care for a seriously ill family member or bond with a new child. PFL is not FMLA or CFRA. It is not a mandated leave and it does not provide job protection rights.

Benefits That Conflict With Paid Family Leave
Individuals receiving PFL cannot receive DI or Unemployment Insurance (UI) for the same period. In addition, PFL and Workers’ Compensation benefits cannot be paid to an individual for the same period except under specific circumstances.

The Physician/Practitioner’s Role
As your patient’s physician/practitioner, you determine whether your patient’s physical or mental health condition requires physical care or emotional support from a family member.

Please note: In certain instances, more than one individual may be eligible to receive PFL benefits to care for the same family member.

Your medical certification must include:
• Patient’s diagnosis and corresponding International Classification of Diseases (ICD) code.
• Your medical license number.
• Patient’s estimated date care is no longer required.
• Estimated duration (including number of hours per day) your patient will need care provided by a family member.

Who Can Certify to the Care Recipient’s Serious Illness?
The following authorized physicians/practitioners can complete and sign the Physician/Practitioner’s Certification verifying the PFL claimant’s need to care for a seriously ill family member:
• Licensed medical or osteopathic physician/surgeon.
• Medical Officer of a U.S. government facility or registrar of a county hospital in California.
• Chiropractor.
• Podiatrist.
• Optometrist.
• Dentist.
• Designated Psychologist.
• Accredited Religious Practitioner.
• Nurse Practitioner after examination and collaboration with a physician and/or surgeon.

Claim Processing
The following steps occur as part of the normal PFL claim eligibility process:
• You and your patient’s care provider (PFL claimant) must certify (via electronic or hard copy signature) to the accuracy of the claim information provided.
• PFL staff review the claim form to ensure that all eligibility requirements are met.
• Properly completed forms are processed within two weeks after receipt.

Claim Form Completion
To receive timely payments, your patient’s care provider (PFL claimant) depends on your prompt completion of the Physician/Practitioner’s Certification portion of the claim form either electronically via SDI Online or by completing the Optical Character Recognition Claim for Paid Family Leave (PFL) Benefits, DE 2501F.

Causes for Claim Delays
The following missing information will result in PFL claim processing delays:
• Physician/Practitioner’s original signature.
• Physician/Practitioner’s license number.
• Physician/Practitioner’s name.
• Diagnosis/ICD coding (incomplete or omitted).
• Estimated date care is no longer necessary/prognosis date.