A-Engrossed House Bill 3087

Ordered by the House April 24 Including House Amendments dated April 24

Sponsored by Representatives WILLIAMSON, ALONSO LEON, HERNANDEZ; Representatives KENY-GUYER, LININGER, MALSTROM, MARSH, PILUSO

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure

Creates family and medical leave insurance program to provide covered employee with portion of wages while on family medical leave or military leave. Requires employer and employee contributions to fund program. Allows self-employed individuals to opt into program. Directs Director of Department of Consumer and Business Services to determine contribution amounts and weekly benefit amounts. Establishes Family and Medical Leave Insurance Fund. Amends Oregon family leave law to allow for leave after employee has been employed for 90 days with employer to match waiting period for benefits.

Protects employee's position of employment with employer while employee is on leave. Prohibits employer from retaliating against employee who invokes program and from interfering with employee rights under program. Requires director to work with other agencies and promulgate rules for administration of program. Directs Department of Revenue to administer collection and reporting requirements of contribution provisions. [Allows director to contract with outside entities for remittance and other actions necessary for administration of program.] Takes effect on 91st day following adjournment sine die.

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A BILL FOR AN ACT

- 2 Relating to family medical leave insurance benefits; creating new provisions; amending ORS
- 3 659A.156 and 659A.885; prescribing an effective date; and providing for revenue raising that re-
- 4 quires approval by a three-fifths majority.

5 Be It Enacted by the People of the State of Oregon:

6 SECTION 1. Definitions. As used in sections 1 to 17 of this 2017 Act:

(1) "Average weekly wage" means the amount calculated by the Employment Department 7 under ORS 657.150 (4)(d) as determined not more than once per year. 8

9 (2) "Base year" means the first four of the last five completed calendar quarters pre-10 ceding the benefit year.

(3) "Benefit year" means the 12-month period beginning on the first day of the week in 11 12which a covered individual files an application for family and medical leave insurance bene-13 fits.

- (4) "Covered individual" means: 14
- (a) An eligible employee who: 15
- 16 (A) Files an application for family and medical leave insurance benefits; and

17(B) Contributes an amount determined by the Director of the Department of Consumer

and Business Services to the Family and Medical Leave Insurance Fund during the base year 18

- 19 prior to filing an application; or
- 20 (b) A self-employed individual who:

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(A) Elects coverage under section 13 of this 2017 Act; 1 2 (B) Files an application for family and medical leave insurance benefits; and (C) Contributes an amount determined by the Director of the Department of Consumer 3 and Business Services to the Family and Medical Leave Insurance Fund during the base year 4 prior to filing an application. 5 (5) "Covered service member" means an employee who is eligible for leave under ORS 6 659A.093 or the federal Family and Medical Leave Act of 1993, as amended and in effect on 7 the effective date of this 2017 Act. 8 9 (6) "Eligible employee" means an employee who has worked for at least 90 days with the employer. 10 (7) "Eligible employee's average wage" means an amount determined by the director 11 12 based on an eligible employee's average wages per week during the base year. (8)(a) "Employee" means an individual employed for remuneration or under any contract 13 of hire, written or oral, express or implied, by an employer. 14 15 (b) "Employee" does not include: 16 (A) An independent contractor as defined in ORS 670.600 who is not a covered individual. (B) A participant in a work training program administered under a state or federal as-17 sistance program. 18 19 (C) A participant in a work-study program that provides students in secondary or post-20secondary educational institutions with employment opportunities for financial assistance or vocational training. 2122(D) A railroad worker exempted under the federal Railroad Unemployment Insurance 23Act. (E) A volunteer. 94 25(9)(a) "Employer" means any person that employs one or more employees working anywhere in this state, a political subdivision of the state and any county, city, district, au-2627thority, public corporation or entity, and any instrumentality of a county, city, district, authority, public corporation or entity, organized and existing under law or charter. 28(b) "Employer" does not include the federal government or a tribal government. 2930 (10) "Family and medical leave insurance benefits" means the insurance benefits provided 31 under the terms of sections 1 to 17 of this 2017 Act. (11) "Family member" means: 32(a) A family member as defined in ORS 659A.150; or 33 34 (b) An individual related by blood or affinity to the employee whose close association with 35the employee is the equivalent of a family member. (12) "Health care provider" has the meaning given that term in ORS 659A.150. 36 37 (13) "Next of kin" has the meaning given that term in 29 C.F.R. 825.127. 38 (14) "Parental leave" means leave taken to care for a new child during the first year after the birth, adoption or placement through foster care of the child. 39 (15) "Qualifying exigency leave" has the meaning described in 29 C.F.R. 825.126. 40 (16) "Self-employment income" has the meaning given that term in section 1402(b) of the 41 Internal Revenue Code as amended and in effect on December 31, 2016. 42 (17) "Self-employed individual" is an individual who has self-employment income. 43 (18) "Serious health condition" has the meaning given that term in the federal Family 44 and Medical Leave Act of 1993. 45

 (19) "Wages" has the meaning given that term in ORS 657.105.
 (20) "Week" means a period of seven consecutive calendar days as determined by the director.
 <u>SECTION 2.</u> Eligibility for benefits. (1) Family and medical leave insurance benefits are payable to an eligible employee, regardless of the number of employees employed by the employer, who:

7 (a) Is taking parental leave;

8 (b) Is caring for a family member with a serious health condition;

9 (c) Has a serious health condition, including pregnancy;

10 (d) Is caring for a covered service member who is the eligible employee's next of kin;

11 (e) Is taking military family leave described under ORS 659A.090 to 659A.099;

12 (f) Is taking qualifying exigency leave; or

13 (g) Is taking leave for any reason set forth in ORS 659A.159.

(2) Family and medical leave insurance benefits are payable to a covered individual who
is a self-employed individual and who takes leave for a reason described in subsection (1)(a)
to (g) of this section.

(3) A covered individual who receives family and medical leave insurance benefits under this section must, upon request by the covered individual's employer or the Director of the Department of Consumer and Business Services, provide verification of the need for leave in a manner determined by the director. The director, upon request by an employer, shall provide any verification that the director has received under this subsection to the employer.

22 <u>SECTION 3.</u> Duration of benefits. (1)(a) A covered individual may qualify for up to 12 23 weeks of family and medical leave insurance benefits per benefit year.

(b) In addition to the 12 weeks of family and medical leave insurance benefits described
in paragraph (a) of this subsection, a covered individual may qualify for six weeks of benefits
for parental leave.

(2) Except as provided in section 6 of this 2017 Act, family and medical leave insurance
benefits are not payable for leave of less than one week.

(3) The first payment of benefits must be made to a covered individual within two weeks
 after the individual files a claim and subsequent payments must be made every two weeks.

(4) An employer may not require an eligible employee to take more leave than the eligible
 employee requests.

(5) A covered individual may take less leave than available to the individual under this
 section.

35 <u>SECTION 4.</u> Amount of benefits and applicability of tax laws. (1) The Director of the 36 Department of Consumer and Business Services shall determine the amount of family and 37 medical leave insurance benefits an eligible employee qualifies for, as follows:

(a) The director shall determine the eligible employee's average wage based on the eligible employee's wages earned during the base year.

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(b) The director shall set the weekly benefit amount at:

(A) If the eligible employee's average wage is more than the average weekly wage, 90
percent of the average weekly wage plus 50 percent of the difference between the eligible
employee's average wage and the average weekly wage.

(B) If the eligible employee's average wage is equal to or less than the average weekly
wage, 90 percent of the eligible employee's average wage.

1 (c) The director shall establish a maximum weekly benefit amount of 130 percent of the 2 average weekly wage.

3 (d) The director may adjust the maximum weekly benefit amount described in paragraph
4 (c) of this subsection on an annual basis if necessary to maintain fiscal solvency of the
5 Family and Medical Leave Insurance Fund.

6 (2) The director shall determine the amount of family and medical leave insurance bene-7 fits a self-employed individual qualifies for based on the self-employed individual's contribu-8 tion amount described in section 5 of this 2017 Act.

9 (3) Family and medical leave insurance benefits are payable only to the extent that 10 moneys are available in the Family and Medical Leave Insurance Fund for that purpose. The 11 state, any political subdivision of the state or any state agency is not liable for any amount 12 in excess of this limit.

(4) Except as otherwise provided in sections 1 to 17 of this 2017 Act or where the context requires otherwise, the provisions of ORS chapters 305 and 314 as to the audit and examination of returns, periods of limitation, determination of and notices of deficiencies, assessments, collections, liens, delinquencies, claims for refund and refunds, conferences, appeals to the Oregon Tax Court, stays of collection pending appeal, confidentiality of returns and the penalties relative thereto, and the procedures relating thereto, apply to the determinations of taxes, penalties and interest under sections 1 to 17 of this 2017 Act.

SECTION 5. Contributions. (1) The Director of the Department of Consumer and Busi-20ness Services shall deposit moneys collected under this section into the Family and Medical 2122Leave Insurance Fund. Subject to the limits in this section, the amount of the contributions 23provided in this section may be adjusted to meet the needs of the Family and Medical Leave Insurance Fund for the expenditures of the Department of Consumer and Business Services 24 in carrying out its functions and duties pursuant to sections 1 to 17 of this 2017 Act. In 25making adjustments under this subsection, the department shall consider the cash balance 2627of the Family and Medical Leave Insurance Fund and other factors as determined by the director. 28

(2)(a) Payroll contributions from an eligible employee may not exceed 0.5 percent of the employee's wages. Payroll contributions shall be paid by employers and employees in equal amounts at a rate determined by the director under subsection (3) of this section. The director shall evaluate and determine on an annual basis the amount of payroll contributions, timing of payroll contributions and maximum employee contributions necessary to finance sections 1 to 17 of this 2017 Act.

(b) Contributions from a self-employed individual who elects coverage under section 13
 of this 2017 Act must be equivalent to an amount determined by the director by rule.

(3) The director shall set rates for the collection of payroll contributions consistent with
 subsection (2) of this section in a manner such that:

(a) At the end of the period for which the rates are effective, the balance of moneys in
the Family and Medical Leave Insurance Fund is an amount not less than six months' worth
of projected expenditures from the fund for performance of the director's functions and duties under sections 1 to 17 of this 2017 Act; and

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(b) The volatility of the rates assessed is minimized.

(4) The director may adjust the assessment rate, subject to the limitations in subsection
(5) (2) of this section, if the director determines that a different rate is necessary to avoid un-

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intentional program or benefit reductions in the time period immediately following the period 1

2 for which the rate is being set.

3 (5) An employer shall remit the moneys described under subsection (2) of this section in a manner determined by the director in coordination with the Department of Revenue. 4

(6) Every employer or temporary employment agency that collects any amount under this 5 section shall hold the same in trust for the State of Oregon and for the payment thereof to 6 the Department of Revenue in the manner determined by the department by rule. 7

(7) At any time an employer or temporary employment agency fails to remit any amount 8 9 collected, the Department of Revenue may enforce collection by the issuance of a distraint warrant for the collection of the delinquent amount and all penalties, interest and collection 10 charges accrued thereon. The warrant shall be issued, recorded and proceeded upon in the 11 12 same manner and shall have the same force and effect as is prescribed with respect to warrants for the collection of delinquent income taxes. 13

(8)(a) In the case of an employer or temporary employment agency that is assessed pur-14 15 suant to the provisions of ORS 305.265 (12) and 314.407 (1), the Department of Revenue may 16 issue a notice of liability to any officer, employee or member of the employer or temporary employment agency within three years from the time of assessment. Within 30 days from the 17 18 date the notice of liability is mailed to the officer, employee or member, the officer, employee or member shall pay the assessment, plus penalties and interest, or advise the department 19 20in writing of objections to the liability and, if desired, request a conference. A conference shall be governed by the provisions of ORS 305.265 pertaining to a conference requested from 2122a notice of deficiency.

23(b) After a conference or, if no conference is requested, a determination of the issues considering the written objections, the department shall mail the officer, employee or mem-24 ber a conference letter affirming, canceling or adjusting the notice of liability. Within 90 days 25from the date the conference letter is mailed to the officer, employee or member, the officer, 2627employee or member shall pay the assessment, plus penalties and interest, or appeal to the tax court in the manner provided for an appeal from a notice of assessment. 28

(c) If the department does not receive payment or written objection to the notice of li-2930 ability within 30 days after the notice of liability was mailed, the notice of liability becomes 31 final. In that event, the officer, employee or member may appeal the notice of liability to the tax court within 90 days after it became final in the manner provided for an appeal from a 32notice of assessment. 33

34 (9)(a) In the case of a failure to file a report on the due date, governed by the provisions 35of ORS 305.265 (10) and 314.400, the Department of Revenue, in addition to any action described in the provisions of ORS 305.265 (10) and 314.400, may send notices of determination 36 37 and assessment to any officer, employee or member any time within three years after the 38 assessment. The time of assessment against the officer, employee or member is 30 days after the date the notice of determination and assessment is mailed. Within 30 days from the date 39 the notice of determination and assessment is mailed to the officer, employee or member, 40 the officer, employee or member shall pay the assessment, plus penalties and interest, or 41 advise the department in writing of objections to the assessment and, if desired, request a 42 conference. A conference shall be governed by the provisions of ORS 305.265 pertaining to a 43 conference requested from a notice of deficiency. 44

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(b) After a conference or, if no conference is requested, a determination of the issues

considering the written objections, the department shall mail the officer, employee or mem-

ber a conference letter affirming, canceling or adjusting the notice of determination and assessment. Within 90 days from the date the conference letter is mailed to the officer,
employee or member, the officer, employee or member shall pay the assessment, plus pen-

alties and interest, or appeal in the manner provided for an appeal from a notice of assess ment.

7 (c) If the department does not receive payment or written objection to the notice of de-8 termination and assessment within 30 days after the notice of determination and assessment 9 was mailed, the notice of determination and assessment becomes final. In that event, the 10 officer, employee or member may appeal the notice of determination and assessment to the 11 tax court within 90 days after it became final in the manner provided for an appeal from a 12 notice of assessment.

(10)(a) More than one officer or employee of a corporation may be held jointly and se verally liable for payment of unpaid contributions.

(b) Notwithstanding the confidentiality provisions of section 11 of this 2017 Act, if more than one officer or employee of a corporation may be held jointly and severally liable for payment of unpaid contributions, the Department of Revenue may require any or all of the officers, members or employees who may be held liable to appear before the department for a joint determination of liability. The department shall notify each officer, member or employee of the time and place set for the determination of liability.

(c) Each person notified of a joint determination under this subsection shall appear and present such information as is necessary to establish that person's liability or nonliability for payment of unpaid contributions to the department. If a person who was notified fails to appear, the department shall make its determination on the basis of all the information and evidence presented. The department's determination is binding on all persons notified and required to appear under this subsection.

27(d)(A) If an appeal is taken to the Oregon Tax Court by any person determined to be liable for unpaid contributions under this subsection, each person required to appear before 28the department under this subsection shall be impleaded by the plaintiff. The department 2930 may implead any officer, employee or member who may be held jointly and severally liable 31 for the payment of unpaid contributions. Each person impleaded under this paragraph shall be made a party to the action before the tax court and shall make available to the tax court 32the information that was presented before the department, as well as other information that 33 34 may be presented to the court.

(B) The court may determine that one or more persons impleaded under this paragraph
 are liable for unpaid contributions without regard to any earlier determination by the de partment that an impleaded person was not liable for unpaid contributions.

(C) If a person required to appear before the court under this subsection fails or refuses to appear or bring such information in part or in whole, or is outside the jurisdiction of the tax court, the court shall make its determination on the basis of all the evidence introduced. Notwithstanding the confidentiality provisions of section 11 of this 2017 Act, the evidence constitutes a public record and shall be available to the parties and the court. The determination of the tax court is binding on all persons made parties to the action under this subsection.

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(e) This section may not be construed to preclude a determination by the department or

1 the Oregon Tax Court that more than one officer, employee or member are jointly and se-2 verally liable for unpaid contributions.

(11)(a) Every employer required to make contributions under this section shall make and
 file a report of wages earned and payroll contributions and employer contributions made
 under this section upon a combined report form prescribed by the Department of Revenue.

6 (b) The report shall be filed with the department at the times and in the manner pre-7 scribed in ORS 316.168 and 316.197.

8 (c) The department may assess a penalty in an amount not to exceed \$1,000 for an 9 employer's failure to comply with this subsection.

(12) Moneys collected under this section shall be deposited in the Family and Medical
 Leave Insurance Fund for the purpose of carrying out the functions and duties of the direc tor under sections 1 to 17 of this 2017 Act.

(13) A temporary employment agency that provides employees on a temporary basis to
 its customers is responsible for collection of payroll contributions under this section.

(14)(a) If an employer quits business or sells out, exchanges or otherwise disposes of the business or stock of goods, any payroll contribution payable under this section is immediately due and payable, and the employer shall, within 10 calendar days, pay the payroll contributions due. Any person who becomes a successor to the business is liable for the full amount of the contribution.

(b) The director shall adopt rules for compliance with sections 1 to 17 of this 2017 Act
 related to payroll contributions from an employer's successor in interest.

22 <u>SECTION 6.</u> <u>Benefits for reduced leave.</u> (1) A covered individual may use family and 23 medical leave insurance benefits for leave taken in increments of less than 40 hours, provided 24 that:

(a) Leave is taken in increments no shorter than eight hours;

(b) Leave that is taken in an increment of less than 40 hours is predictable on a weekly
basis and verified by the covered individual under section 2 of this 2017 Act;

(c) Benefit amounts, as calculated under section 4 of this 2017 Act, are prorated to in crements of no less than eight hours; and

30 (d) Benefits are payable in increments of 40 hours.

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(2) An eligible employee shall make a reasonable effort to schedule paid family and med ical leave under this section so as not to unduly disrupt the operations of the employer. The
 eligible employee shall provide the employer with prior notice of the schedule on which the
 eligible employee will be taking the leave, to the extent practicable.

(3) An employer or self-employed individual shall notify the Director of the Department
 of Consumer and Business Services, upon request, of the actual amount of leave taken each
 week for the purpose of verifying the amount of benefits that are payable to the covered
 individual.

(4) Paid family and medical leave taken under this section shall not result in a reduction
of the total amount of leave to which a covered individual is entitled beyond the amount of
leave actually taken.

42 (5) Nothing in this section shall be construed to entitle a covered individual to a benefit 43 amount that is more than required under section 3 of this 2017 Act.

44 <u>SECTION 7.</u> Notice to employer. (1) Except as provided in subsection (2) of this section, 45 an employer may require an eligible employee to give the employer written notice at least

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1 30 days before commencing leave. The employer may require the employee to include an ex-2 planation of the need for the leave in the notice.

3 (2) An eligible employee may commence taking leave without 30 days' advance notice if
4 the leave is not foreseeable, including under the following circumstances:

(a) An unexpected serious health condition of the employee or a family member of the
employee;

7 (b) An unexpected illness, injury or condition of a child of the employee that requires
8 home care;

9 (c) A premature birth, unexpected adoption or unexpected foster placement by or with
 10 the employee; or

11 (d) The death of a family member of the employee.

(3) If an employee commences leave without advance notice under subsection (2) of this
 section:

(a) The employee shall give notice to the employer as soon as practicable, but in no event
 later than 45 days after the first date of illness or injury, in a manner determined by the
 Director of the Department of Consumer and Business Services; and

(b) The employee shall receive family and medical leave insurance benefits for the period
 that begins on the first date of illness or injury.

(4) The notice described in subsection (3) of this section may be given by a family member, health care provider or authorized representative on behalf of the employee taking the
leave.

22SECTION 8. Employment protection; retaliation prohibited. (1) After returning to work, 23an eligible employee is entitled to be restored to the position of employment held by the employee when the leave commenced if that position still exists, without regard to whether 94 the employer filled the position with a replacement worker during the period of leave taken 25under section 3 of this 2017 Act. If the position held by the employee at the time leave 2627commenced no longer exists, the employee is entitled to be restored to any available equivalent position with equivalent employment benefits, pay and other terms and conditions of 2829employment.

30 (2) During any leave taken pursuant to section 3 of this 2017 Act, the employer shall 31 maintain any health care benefits the eligible employee had prior to taking such leave for the 32 duration of the leave as if the employee had continued in employment continuously from the 33 date the employee commenced the leave until the date the family and medical leave insur-34 ance benefits terminate.

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(3) This section does not entitle any employee to:

(a) Any accrual of seniority or employment benefits during a period of leave taken under
 section 3 of this 2017 Act; or

(b) Any right, benefit or position of employment other than the rights, benefits and position that the employee would have been entitled to had the employee not taken the leave
under section 3 of this 2017 Act.

(4) During a period of an eligible employee's using family and medical leave insurance
benefits, the Director of the Department of Consumer and Business Services or an employer
may require the employee or a family member, health care provider or authorized representative of the employee to report periodically to the director or the employer on the
employee's status and on the employee's intention to return to work.

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1 (5) It is an unlawful practice for a person to:

2 (a) Violate subsections (1) to (4) of this section;

3 (b) Interfere with a right to which a covered individual is entitled under sections 1 to 17
4 of this 2017 Act; or

5 (c) Retaliate or in any way discriminate against an individual with respect to hire or 6 tenure or any other term or condition of employment because the individual has inquired 7 about the provisions of sections 1 to 17 of this 2017 Act, filed an application for coverage or 8 invoked any provision of sections 1 to 17 of this 2017 Act.

9 <u>SECTION 9.</u> Coordination of benefits. (1) For employees eligible for leave under ORS 10 659A.150 to 659A.186, leave taken under sections 1 to 17 of this 2017 Act shall run concur-11 rently with leave under ORS 659A.150 to 659A.186.

(2)(a) Sections 1 to 17 of this 2017 Act do not diminish an employer's obligation to comply
 with a collective bargaining agreement, an employer policy or local, state or federal law.

(b) An eligible employee's right to family and medical leave insurance benefits under
 sections 1 to 17 of this 2017 Act may not be diminished by a collective bargaining agreement
 entered into or renewed, or an employee policy adopted or retained, after the effective date
 of this 2017 Act.

(c) The eligibility of an employee for benefits is not affected by a strike or lockout at the
 store, factory, establishment or other premises at which the employee is or was last employed.

(d) An employee who has received benefits under sections 1 to 17 of this 2017 Act may not lose any other employment benefits, including seniority or pension rights, accrued before the date that leave commenced. However, this section does not entitle an employee to accrue employment benefits during a period of leave or to a right, benefit or position of employment other than a right, benefit or position to which the employee would have been entitled had the employee not taken leave.

(3)(a) An employer may not require an employee to use paid sick time, paid vacation time
or any other paid time off before or as a condition of using family and medical leave insurance benefits.

(b) An eligible employee is entitled to use any paid accrued sick time or other paid leave
 without a reduction in paid family and medical leave insurance benefits.

(4) Family and medical leave taken under sections 1 to 17 of this 2017 Act does not in clude leave taken by an eligible employee who is unable to work because of a disabling
 compensable injury, as defined in ORS 656.005, unless the employee has refused a suitable
 offer of light duty or modified employment as defined by the Director of the Department of
 Consumer and Business Services.

(5) An employer's failure to provide information to the Department of Consumer and
Business Services upon written request by the director or the director's authorized representative to assist with the processing of a claim under sections 1 to 17 of this 2017 Act shall
constitute interference under section 8 of this 2017 Act.

41 <u>SECTION 10. Notice to employees.</u> An employer shall display and provide written notice 42 of employee rights under sections 1 to 17 of this 2017 Act in a manner determined by the 43 Director of the Department of Consumer and Business Services. Such notice shall include:

(1) The employee's right to apply for and receive family and medical leave insurance
 benefits under sections 1 to 17 of this 2017 Act and the terms under which the benefits may

1 be used;

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2 (2) The criteria used to determine eligibility for and the amount of family and medical 3 leave insurance benefits;

(3) The procedure for filing a claim for benefits;

5 (4) The right to job protection and benefits continuation under section 8 of this 2017 Act;

6 (5) That discrimination and retaliatory personnel actions against an individual for re-7 questing, applying for or using family and medical leave insurance benefits is prohibited un-8 der section 8 of this 2017 Act; and

9 (6) That the employee has a right to file a complaint for violation of section 8 of this 2017
10 Act.

11 <u>SECTION 11.</u> Enforcement. (1) Notwithstanding ORS 183.635, the Director of the De-12 partment of Consumer and Business Services shall establish a system for enforcement and 13 appeal of contested cases involving family and medical leave insurance benefit claims under 14 ORS chapter 183. In establishing the system, the director may utilize any and all procedures 15 and appeals mechanisms.

(2) The director shall implement procedures to ensure confidentiality of all information
 related to any claims filed or appeals taken to the maximum extent permitted by applicable
 laws.

(3) All information in the records of the Department of Consumer and Business Services
 pertaining to the administration of sections 1 to 17 of this 2017 Act:

(a) Is confidential and for the exclusive use and information of the director in adminis tering sections 1 to 17 of this 2017 Act;

(b) May not be used in any court action or in any proceeding pending in the court unless the director or the state is a party to the action or proceeding or unless the action or proceeding concerns the establishment, enforcement or modification of a support obligation and support services are being provided by the Division of Child Support or the district attorney pursuant to ORS 25.080; and

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(c) Is exempt from disclosure under ORS 192.410 to 192.505.

(4) At the discretion of the director and subject to an interagency agreement, the director may disclose information to a public official in the performance of the public official's
official duties administering or enforcing laws within the public official's authority and to
an agent or contractor of a public official. The public official shall agree to assume responsibility for misuse of the information by the official's agent or contractor.

<u>SECTION 12.</u> <u>Noncompliance and erroneous payments.</u> (1) An employer or individual acting on behalf of an employer may not willfully make or cause to be made false statements or willfully fail to report a material fact regarding the claim of an eligible employee or regarding an employee's eligibility for benefits under sections 1 to 17 of this 2017 Act.

(2) The Director of the Department of Consumer and Business Services may assess a civil
 penalty in an amount not to exceed \$1,000 against an employer for each occurrence that vi olates subsection (1) of this section.

(3)(a) An eligible employee is disqualified from family and medical leave insurance benefits for one year if the employee is determined by the director to have willfully made a false
statement or willfully failed to report a material fact to obtain benefits under sections 1 to
17 of this 2017 Act.

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(b) A self-employed individual is disqualified from family and medical leave insurance

1 benefits for three years if the individual is determined by the director to have willfully made

2 a false statement or willfully failed to report a material fact to obtain benefits under sections

3 1 to 17 of this 2017 Act.

4 (4) If family and medical leave insurance benefits are paid erroneously or as a result of 5 willful misrepresentation, or if a claim for family and medical leave insurance benefits is 6 rejected after benefits are paid except for matters that have been timely appealed, the di-7 rector:

8 (a) May seek repayment of benefits from an eligible employee upon issuance of a final
 9 order in a manner provided by rule;

(b) May seek repayment of benefits from a self-employed individual and may also seek
 payment of a penalty of up to 100 percent of the amount of benefits that the self-employed
 individual erroneously received upon issuance of a final order, in a manner provided by rule;
 and

(c) Shall exercise the director's discretion to waive, in whole or in part, the amount of
 any such payments where the recovery would be against equity, good conscience or admin istrative efficiency.

17 <u>SECTION 13.</u> Elective coverage. (1) A self-employed individual may elect coverage under 18 sections 1 to 17 of this 2017 Act. The self-employed individual must file a notice of election 19 in writing with the Director of the Department of Consumer and Business Services, as re-20 quired by the director, and contribute to the Family and Medical Leave Insurance Fund in 21 a manner determined by the director. The election becomes effective on the date of filing the 22 notice. The self-employed individual must agree to supply any information concerning income 23 that the director deems necessary.

(2) A self-employed individual who has elected coverage may withdraw after three consecutive years of coverage, or at times as the director may prescribe by rule, including at a change in the self-employed individual's employment status, by filing written notice with the director. The withdrawal may not take effect sooner than 30 days after filing the notice.

(3) Notwithstanding subsection (2) of this section, a self-employed individual who has
elected coverage may terminate coverage on the date of filing a voluntary or involuntary
bankruptcy petition. The self-employed individual's elective coverage terminates on the date
the self-employed individual provides to the director documentation to support the selfemployed individual's filing of the bankruptcy petition and files written notice with the director. At any time thereafter, the self-employed individual may reelect coverage under this
section.

35 <u>SECTION 14.</u> <u>Administration.</u> (1) The Director of the Department of Consumer and 36 Business Services shall adopt rules for the establishment and administration of sections 1 37 to 17 of this 2017 Act.

(2) The director may enter into interagency agreements to establish and administer
 sections 1 to 17 of this 2017 Act.

(3) All agencies of state government, as defined in ORS 174.111, are directed to assist the
Department of Consumer and Business Services upon request in the performance of its duties under sections 1 to 17 of this 2017 Act, including outreach, technical assistance and
training.

44 <u>SECTION 15.</u> Family and Medical Leave Insurance Fund. (1) The Family and Medical 45 Leave Insurance Fund is established in the State Treasury, separate and distinct from the

General Fund. The Family and Medical Leave Insurance Fund consists of moneys deposited 1

2 in the fund under sections 1 to 17 of this 2017 Act and may include fees, revenues or other income deposited in the fund. 3

(2) Interest earned by the fund shall be credited to the fund. All moneys in the fund are 4 continuously appropriated to the Director of the Department of Consumer and Business 5 Services for the purposes of carrying out sections 1 to 17 of this 2017 Act, including repay-6 ment of any funds used for start-up costs. 7

(3) Notwithstanding any other provision of sections 1 to 17 of this 2017 Act, if the director 8 9 determines at any time that there are insufficient moneys in the fund to pay the expenses of programs for which expenditure of the fund is authorized, the director may reduce the 10 level of family and medical leave insurance benefits payable accordingly. 11

12(4) Whenever, in the judgment of the director, there is in the fund an amount of moneys in excess of the amount sufficient to meet the current expenditures for a self-sustaining in-13 surance account, the director shall have full power to invest, reinvest, manage, contract, sell 14 15 or exchange investments acquired with such excess funds to reduce contribution rates.

16 (5) Contributions under section 5 of this 2017 Act that are intended for the fund and moneys in the fund may not be subject to execution, attachment or any other process or to 17 18 the operation of any bankruptcy or insolvency law.

19 (6) Expenditures from the fund may not be used for purposes other than the family and 20 medical leave insurance program.

SECTION 16. Reports. (1) The Director of the Department of Consumer and Business 2122Services shall submit a report in the manner provided by ORS 192.245, and may include rec-23ommendations for legislation, to the interim committees of the Legislative Assembly related to workforce or business and labor no later than January 1, 2020, and January 1 of every 94 even-numbered year thereafter. 25

(2) The Department of Consumer and Business Services shall conduct a study to deter-2627mine how to implement the provisions of sections 1 to 17 of this 2017 Act, as those provisions pertain to self-employed individuals who elect coverage under section 13 of this 2017 Act. The 28study shall include procedures for determining the amount of payroll contributions that a 2930 self-employed individual must make and the amount of family medical leave insurance bene-31 fits that a self-employed individual shall receive. The director shall include recommendations based on that study in the report described in subsection (1) of this section. 32

(3) The director shall include in reports submitted after January 1, 2022, analysis of data 33 34 regarding program participation, reasons for leave, gender of covered individuals taking leave, contribution rates, balances in the Family and Medical Leave Insurance Fund, out-35reach efforts and, if applicable, family members for whom leave was taken to provide care. 36

37 SECTION 17. Sharing technology. The Director of the Department of Consumer and 38 Business Services is encouraged to use state data collection and technology to the extent possible and to integrate the program with existing state policies. 39

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SECTION 18. ORS 659A.156 is amended to read:

659A.156. (1) All employees of a covered employer are eligible to take leave for one of the pur-41 poses specified in ORS 659A.159 (1)(b) to (e) except: 42

(a) An employee who was employed by the covered employer for fewer than [180] 90 days im-43 mediately before the date on which the family leave would commence. 44

(b) An employee who worked an average of fewer than 25 hours per week for the covered em-45

1 ployer during the [180] **90** days immediately preceding the date on which the family leave would 2 commence.

3 (2) All employees of a covered employer are eligible to take leave for the purpose specified in 4 ORS 659A.159 (1)(a) except an employee who was employed by the covered employer for fewer than 5 [180] **90** days immediately before the date on which the family leave would commence.

6 <u>SECTION 19.</u> ORS 659A.885, as amended by section 5, chapter 73, Oregon Laws 2016, is 7 amended to read:

659A.885. (1) Any person claiming to be aggrieved by an unlawful practice specified in sub-8 9 section (2) of this section may file a civil action in circuit court. In any action under this subsection, the court may order injunctive relief and any other equitable relief that may be appropriate, in-10 cluding but not limited to reinstatement or the hiring of employees with or without back pay. A 11 12 court may order back pay in an action under this subsection only for the two-year period imme-13 diately preceding the filing of a complaint under ORS 659A.820 with the Commissioner of the Bureau of Labor and Industries, or if a complaint was not filed before the action was commenced, the two-14 15 year period immediately preceding the filing of the action. In any action under this subsection, the 16 court may allow the prevailing party costs and reasonable attorney fees at trial and on appeal. Except as provided in subsection (3) of this section: 17

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(a) The judge shall determine the facts in an action under this subsection; and

(b) Upon any appeal of a judgment in an action under this subsection, the appellate court shall
 review the judgment pursuant to the standard established by ORS 19.415 (3).

(2) An action may be brought under subsection (1) of this section alleging a violation of ORS
10.090, 10.092, 25.337, 25.424, 171.120, 408.230, 408.237 (2), 475B.233, 476.574, 652.355, 653.060, 653.601
to 653.661, 659.852, 659A.030, 659A.040, 659A.043, 659A.046, 659A.063, 659A.069, 659A.082, 659A.088,
659A.103 to 659A.145, 659A.150 to 659A.186, 659A.194, 659A.199, 659A.203, 659A.218, 659A.228,
659A.230, 659A.233, 659A.236, 659A.250 to 659A.262, 659A.277, 659A.290, 659A.300, 659A.306,
659A.309, 659A.315, 659A.318, 659A.320, 659A.355, 659A.421, 653.547 or 653.549.

(3) In any action under subsection (1) of this section alleging a violation of ORS 25.337, 25.424,
659.852, 659A.030, 659A.040, 659A.043, 659A.046, 659A.069, 659A.082, 659A.103 to 659A.145, 659A.199,
659A.203, 659A.228, 659A.230, 659A.250 to 659A.262, 659A.290, 659A.318, 659A.421, 653.547 or 653.549
or section 8 of this 2017 Act:

(a) The court may award, in addition to the relief authorized under subsection (1) of this section,
 compensatory damages or \$200, whichever is greater, and punitive damages;

33 (b) At the request of any party, the action shall be tried to a jury;

(c) Upon appeal of any judgment finding a violation, the appellate court shall review the judg ment pursuant to the standard established by ORS 19.415 (1); and

(d) Any attorney fee agreement shall be subject to approval by the court.

(4) In any action under subsection (1) of this section alleging a violation of ORS 652.355 or
653.060, the court may award, in addition to the relief authorized under subsection (1) of this section,
compensatory damages or \$200, whichever is greater.

(5) In any action under subsection (1) of this section alleging a violation of ORS 171.120, 476.574
or 659A.218, the court may award, in addition to the relief authorized under subsection (1) of this
section, compensatory damages or \$250, whichever is greater.

(6) In any action under subsection (1) of this section alleging a violation of ORS 10.090 or 10.092,
the court may award, in addition to the relief authorized under subsection (1) of this section, a civil
penalty in the amount of \$720.

(7) Any individual against whom any distinction, discrimination or restriction on account of 1 2 race, color, religion, sex, sexual orientation, national origin, marital status or age, if the individual is 18 years of age or older, has been made by any place of public accommodation, as defined in ORS 3 659A.400, by any employee or person acting on behalf of the place or by any person aiding or 4 abetting the place or person in violation of ORS 659A.406 may bring an action against the operator 5 or manager of the place, the employee or person acting on behalf of the place or the aider or abettor 6 of the place or person. Notwithstanding subsection (1) of this section, in an action under this sub-7 section: 8

9 (a) The court may award, in addition to the relief authorized under subsection (1) of this section,
10 compensatory and punitive damages;

(b) The operator or manager of the place of public accommodation, the employee or person
acting on behalf of the place, and any aider or abettor shall be jointly and severally liable for all
damages awarded in the action;

14 (c) At the request of any party, the action shall be tried to a jury;

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5 (d) The court shall award reasonable attorney fees to a prevailing plaintiff;

(e) The court may award reasonable attorney fees and expert witness fees incurred by a defendant who prevails only if the court determines that the plaintiff had no objectively reasonable
basis for asserting a claim or no reasonable basis for appealing an adverse decision of a trial court;
and

20 (f) Upon any appeal of a judgment under this subsection, the appellate court shall review the 21 judgment pursuant to the standard established by ORS 19.415 (1).

22(8) When the commissioner or the Attorney General has reasonable cause to believe that a person or group of persons is engaged in a pattern or practice of resistance to the rights protected 23by ORS 659A.145 or 659A.421 or federal housing law, or that a group of persons has been denied 24 any of the rights protected by ORS 659A.145 or 659A.421 or federal housing law, the commissioner 25or the Attorney General may file a civil action on behalf of the aggrieved persons in the same 2627manner as a person or group of persons may file a civil action under this section. In a civil action filed under this subsection, the court may assess against the respondent, in addition to the relief 28authorized under subsections (1) and (3) of this section, a civil penalty: 29

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(a) In an amount not exceeding \$50,000 for a first violation; and

(b) In an amount not exceeding \$100,000 for any subsequent violation.

(9) In any action under subsection (1) of this section alleging a violation of ORS 659A.145 or 659A.421 or alleging discrimination under federal housing law, when the commissioner is pursuing the action on behalf of an aggrieved complainant, the court shall award reasonable attorney fees to the commissioner if the commissioner prevails in the action. The court may award reasonable attorney fees and expert witness fees incurred by a defendant that prevails in the action if the court determines that the commissioner had no objectively reasonable basis for asserting the claim or for appealing an adverse decision of the trial court.

(10) In an action under subsection (1) or (8) of this section alleging a violation of ORS 659A.145
 or 659A.421 or discrimination under federal housing law:

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(a) "Aggrieved person" includes a person who believes that the person:

42 (A) Has been injured by an unlawful practice or discriminatory housing practice; or

(B) Will be injured by an unlawful practice or discriminatory housing practice that is about tooccur.

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(b) An aggrieved person in regard to issues to be determined in an action may intervene as of

right in the action. The Attorney General may intervene in the action if the Attorney General cer-1 2 tifies that the case is of general public importance. The court may allow an intervenor prevailing party costs and reasonable attorney fees at trial and on appeal. 3 SECTION 20. Operative date. (1)(a) Sections 1 and 3 to 12 of this 2017 Act and the 4 amendments to ORS 659A.156 and 659A.885 by sections 18 and 19 of this 2017 Act become 5 operative on January 1, 2019. 6 (b) Sections 2 and 13 of this 2017 Act become operative on January 1, 2021. 7 (2) The Department of Consumer and Business Services, the Bureau of Labor and In-8 9 dustries, the Employment Department and the Department of Revenue may take any action before the operative date specified in subsection (1) of this section that is necessary to enable 10 the bureau and departments to exercise, on and after the operative date specified in sub-11 12 section (1) of this section, the duties, functions and powers conferred on the bureau and departments by sections 1 to 17 of this 2017 Act and the amendments to ORS 659A.156 and 13

14 659A.885 by sections 18 and 19 of this 2017 Act.

15 <u>SECTION 21. Captions.</u> The section captions used in this 2017 Act are provided only for 16 the convenience of the reader and do not become part of the statutory law of this state or 17 express any legislative intent in the enactment of this 2017 Act.

18 <u>SECTION 22.</u> Effective date. This 2017 Act takes effect on the 91st day after the date on
 19 which the 2017 regular session of the Seventy-ninth Legislative Assembly adjourns sine die.

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