Inter-City Insurance Fund

421 Waverly Ave, Mamaroneck, NY 10543 914-698-5188 F: 914-698-4787 Email: ssdgny@ssdgny.org

2025 NY Paid Family Leave Annual Billing

The maximum employee contribution in 2025 should be 0.388% of an employee's weekly wage up to the annualized New York State Average Weekly Wage of \$1,757.19.

This means in 2024 a maximum contribution of \$6.82 per week for employees earning the currently NYSAWW or above. The employee contribution is capped at \$354.64 for the year.

Example	Salary		Employer Pre-Paid Annual NYPFL Premium	Employee Reimbursed Weekly Deduction
Employee 1	\$35,280.	x 0.388%	\$136.89	(\$136.89 ÷ 52 weeks) \$2.63

Your station is currently enrolled in DBL through the Association with ShelterPoint Life Insurance Company. Your DBL premium of \$2.44 per covered owner/employee per month will be billed annually under a separate annual self-billing form.

To calculate the annual premium, you must use the employer/employee's current salary.

OWNERS: If you currently only have yourself covered under your DBL policy you must also carry NYPFL for yourself. If you do not, your DBL policy will be termed.

Please fill in the self-bill form below and return with annual premium payment made payable to Inter-City Insurance Fund for your NY Paid Family Leave coverage.

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Employee	Salary	x 0.388%	Annual NYPFL Premium
1		x 0.388%	
2		x 0.388%	
3		x 0.388%	
4		x 0.388%	
5		x 0.388%	
6		x 0.388%	
7		x 0.388%	
8		x 0.388%	
9		x 0.388%	
10		x 0.388%	
			TOTAL:

(Please add any additional employees to the backside of this paper)

SUM of Annual Paid Wages for Employees earning BELOW \$91,373.88

Total number of employees with Annual Paid Wages <u>ABOVE</u> \$91.373.88 _____

Should you have any questions about the Annual Paid Family Leave, or the annual billing please contact our office at the above number.