# Teradyne Massachusetts Paid Family and Medical Leave Policy

## **Policy Contents**

This document describes the rights and obligations of Teradyne employees eligible for the Massachusetts Paid Family and Medical Leave (MA PFML) program. It contains information about:

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## **Policy Purpose**

Beginning January 1, 2021, Teradyne's self-insured MA PFML policy provides partial wage replacement and job protection to covered employees who need time away from their jobs to: bond with a newly born, adopted, or fostered child; care for a family member with a serious health condition or who is a covered service member; assist a family member on active military duty or called to duty; or for your own serious health condition.

## **Covered Employees**

This policy applies to all Massachusetts-based employees including full-time, part-time, permanent or seasonal. Participation in the MA PFML program is not optional. Covered employees contribute to the cost of the program with wage withholdings beginning January 1, 2020. Benefits are first available beginning January 1, 2021 for covered employees and former covered employees if the qualifying leave begins within the first 26 weeks after separation from Teradyne.

**Contributions.** The program's partial wage replacement benefits are funded by employee and employer contributions. Employee contributions are made through payroll deductions beginning January 1, 2020. The total contribution for the Teradyne MA PFML program is 0.63% of wages. The Family Leave contribution is 0.11% of the 0.63% and is 100% employee paid. The Medical Leave contribution is 0.52% of the 0.63%. Teradyne is responsible for 60% of the medical leave contribution and covered employees are responsible for the remaining 40%. Covered employee contributions are capped by the Social Security income limit.

These rates may be adjusted annually.

## **Policy Details**

**Qualifying conditions.** If you are an eligible employee, you are entitled to take job-protected leave of absence with partial wage replacement for one or more of the following qualifying conditions:

Family Leave

- To bond with a child during the first 12 months after the child's birth, adoption, or foster care placement.
- To care for a family member with a serious health condition.
- To care for a family member who is a covered service member.
- To manage a qualifying exigency arising out of a family member's active duty or impending call to active duty in the Armed Forces.

Medical Leave

• Your own serious health condition that incapacitates you from performing the essential functions of your job.

**Family Member.** Family member has the same meaning as that in the Massachusetts Family and Medical Leave Law, M.G.L. c. 175M and regulations, including:

- Spouse
  - Domestic partner
  - Child (biological, adopted or foster child, a step-child or legal ward, a child to whom the covered employee stands *in loco parentis*, or a person to whom the covered employee stood *in loco parentis* when the covered employee was a minor child)
  - Parent or parent of a spouse or domestic partner (biological, foster, adoptive, or step-parent)
  - Person who stood in loco parentis when the covered employee was a minor child
  - Grandparent
  - Grandchild
  - Sibling (biological, adoptive, or step-sibling)

**Serious health condition.** Serious health condition has the same meaning as that in the Massachusetts Family and Medical Leave Law, M.G.L. c. 175M and regulations: an illness, injury, impairment, or physical or mental condition that involves:

- inpatient care in a hospital, hospice, or residential medical facility; or
- continuing treatment by a health care provider.

**Qualifying Exigency.** Qualifying exigency has the same meaning as that in the Massachusetts Family and Medical Leave Law, M.G.L. c. 175M and regulations: a need arising out of a covered employee's family member's active duty service or notice of an impending call or order to active duty in the Armed Forces, including, but not limited to, providing for the care or other needs of the military member's child or other family member, making financial or legal arrangements for the military member, attending counseling, attending military events or ceremonies, spending time with the military member during a rest and recuperation leave or following return form deployment or making arrangements following the death of the military member.

MA PFML cannot be used for one's own active duty or call to duty in the Armed Forces. For information on leave for one's own uniformed service, please contact the Teradyne HR Service Center.

**Leave duration.** The leave duration effective for leaves beginning on or after January 1, 2021 is as follows:

- 20 weeks of paid medical leave in a benefit year for a covered employee's own serious health condition that incapacitates them from work;
- 12 weeks of paid family leave in a benefit year to care for a family member with a serious health condition, bond with new child, or for a qualifying exigency;
- 26 weeks of paid family leave in a benefit year to care for a family member who is a covered service member (as defined by the Massachusetts Family and Medical Leave Law, M.G.L. c. 175M and regulations).

A covered employee is eligible for a combined maximum of 26 weeks of paid leave in a benefit year, which is defined under the MA PFML as 52 weeks beginning on the Sunday immediately preceding the first day a leave commences.

**Wage replacement benefits.** The weekly benefit is a percentage of the covered employee's average weekly wage and is calculated as follows:

- The portion of a covered employee's average weekly wage that is equal to or less than 50% of the state average weekly wage shall be replaced at a rate of 80%; and
- The portion of a covered employee's average weekly wage that is more than 50% of the state average weekly wage shall be replaced at a rate of 50%.
- The maximum weekly benefit is \$850. The maximum is 64% of the state average weekly wage, and subject to adjustment annually.

The weekly benefit amount is prorated for intermittent leave or reduced leave schedules.

**Intermittent leave.** Generally, you may take MA PFML intermittently or on a reduced leave schedule unless you are utilizing MAP FML for child bonding. Intermittent leave for child bonding requires approval from your supervisor and the Teradyne HR service center. Intermittent medical leave and intermittent leave to care for a covered service member or family member with a serious health condition is available if medically necessary.

**Continued health coverage.** During an approved MA PFML leave your health plan coverage will remain in force if you continue timely paying your share of the cost. In some cases, your payment may need to be made by personal check or other means to maintain the coverage without interruption. You will be notified at the outset of your approved leave in that case.

**Return to work.** An eligible employee who takes leave under MA PFML and returns to work on or before the approved leave's end date will be entitled to return to his or her former job or to an equivalent job with the same benefits, pay, length-of-service credit and seniority as of the date of leave. Taking MA PFML won't result in the loss of any employment benefit accrued prior to the date the leave began. This policy intends to provide the equivalent job and benefit protections as provided in M.G.L. c. 175M, § 2 and its implementing regulations.

**Anti-retaliation provision.** Covered employees will not be discharged, fired, suspended, expelled, disciplined, through the application of attendance policies or otherwise, threatened or in any other manner discriminated against for exercising any right to which such covered employee is entitled under M.G.L. c. 175M or with the purpose of interfering with the exercise of any right to which such employee

is entitled under M.G.L. c. 175M. This policy incorporates by reference the non-retaliation provisions of M.G.L. c. 175M, § 9 and its implementing regulations.

# Applying for benefits

Employees seeking MA PFML must notify Lincoln Financial Group by calling **888-408-7300** or at **www.mylincolnportal.com** about their need for leave and submit an application for approval. The application must state the reason for the leave, its anticipated starting and ending dates, and whether the leave will be continuous or intermittent. If the request is for family leave, a statement regarding the family relationship is also required. All presumptions will be made in favor of the availability of leave and the payment of leave benefits.

**Notice.** You must provide at least 30 days' advance notice for a foreseeable leave (for example, the birth of a child or scheduled medical procedure) or your claim may be delayed or denied. In the case of an unforeseeable absence (like a medical emergency) you must provide notice as soon as practical. When planning medical treatment, you must consult with your supervisor and make a reasonable effort to schedule the treatment so as not to unduly disrupt operations.

**Documentation and certification.** The documents and certifications needed to support the leave application vary, depending on the type of leave requested. Contact Lincoln Financial Group by calling **888-408-7300** or at **www.mylincolnportal.com** for details.

## **Coordination with other leaves**

Teradyne, along with state and federal laws, provide many options for employees to take leave to attend to personal matters. In general, if you are eligible for more than one type of leave and the leave qualifies under more than one program, that leave will count toward every qualifying leave program. That is, a work absence will reduce your available leave allotment under all leave programs for which the absence qualifies.

#### Federal Family and Medical Leave Act

If you are eligible for leave under MA PFML and the federal Family and Medical Leave Act (FMLA), the leave will count as both MA PFML and federal FMLA leave if the leave qualifies under both laws.

#### **Disability**

Massachusetts employees have short-term disability coverage under both MA PFML and Teradyne's short-term disability program. Leave taken for the employee's own serious health condition is taken under these combined programs.

#### Company paid parental leave program

Teradyne's Paid Parental Leave Policy provides employees with paid time off to bond with a new child following birth, adoption, or placement of foster care. Leave taken under Teradyne's Paid Parental Leave Policy will also apply to the MA PFML if the leave qualifies under both programs. For more on the Teradyne program, please visit your division specific internal website or contact the Teradyne HR Service Center.

#### **Company Flex time-off**

You have the option to use accrued, unused Flex Time-Off during MA PFML leave by charging all or part of the MA PFML to accrued but unused Flex Time-Off, and receiving full salary. Employees who choose this option will reduce their available MA PFML allotment by the amount of Flex Time-Off used. For more on the Teradyne program, please visit your division specific internal website or contact the Teradyne HR Service Center.