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## HOUSE RESOLUTION

REQUESTING THE SENATE STANDING COMMITTEE ON LABOR AND TECHNOLOGY AND HOUSE OF REPRESENTATIVES STANDING COMMITTEE ON LABOR TO CONVENE A LEGISLATIVE WORKING GROUP TO DEVELOP RECOMMENDATIONS FOR ESTABLISHING AND IMPLEMENTING A PAID FAMILY AND MEDICAL LEAVE PROGRAM FOR THE STATE.

WHEREAS, the United States is the only remaining 1 industrialized nation without mandated access to paid family and 2 medical leave benefits for the private sector employees under 3 4 federal law; and 5 WHEREAS, paid family and medical leave programs have been 6 7 enacted in thirteen states and Washington, D.C. as of January 2024; and 8 9 10 WHEREAS, existing Hawaii law does not require employers to provide paid family and medical leave to employees; and 11 12 13 WHEREAS, the federal Family and Medical Leave Act of 1993 14 (FMLA) requires employers with fifty of more employees to provide unpaid family and medical leave to their employees and 15 existing Hawaii law requires employers with one hundred or more 16 employees to provide unpaid family leave to their employees; and 17 18 19 WHEREAS, ninety-six percent of private employers in the State however, have fewer than fifty employees, and are 20 21 therefore not statutorily required to provide unpaid family and 22 medical leave under the FMLA or family leave under existing state law; and 23 24 WHEREAS, as a result, only one in four private sector 25 workers in the State have access to paid family and medical 26 leave, voluntarily provided by their employers; and 27 28 29 WHEREAS, according to a May 2020 report published by the AARP and National Alliance for Caregiving, there are nearly 30 31 forty-eight million family caregivers in the United States, of



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which sixty-one percent are working while juggling caregiving 1 responsibilities; and 2 3 4 WHEREAS, a family caregiver is a relative, partner, friend, 5 or neighbor who has a significant personal relationship with, and who provides a broad range of assistance for, an older 6 person or an adult with a chronic, disabling, or serious health 7 8 condition; and 9 10 WHEREAS, family caregivers are the backbone of the long-11 term care system in the State, especially in the context of the ongoing health care workforce shortage; and 12 13 14 WHEREAS, according to the Valuing the Invaluable: 2023 Update report published by AARP in March 2023, there are 154,000 15 16 family caregivers in the State, contributing 144 million hours of unpaid services, worth an estimated \$2.6 billion; and 17 18 19 WHEREAS, family caregivers face many physical, emotional, 20 and financial challenges, especially because they are often required to balance unpaid caregiving duties with employment and 21 22 other personal responsibilities; and 23 24 WHEREAS, a survey conducted in 2023 by AARP and S&P Global 25 showed that sixty-seven percent of family caregivers are having difficulty balancing their jobs with caregiving duties; twenty-26 27 seven percent of working caregivers have shifted from full-time to part-time work or have reduced work hours and sixteen percent 28 have turned down a promotion; sixteen percent have stopped 29 30 working entirely for a period of time; and thirteen percent have changed employers to meet caregiving responsibilities; and 31 32 33 WHEREAS, during the past two decades, heightened attention 34 has been given to the dual responsibilities of "sandwich 35 generation" caregivers, who are family caregivers sandwiched between a younger generation--children or grandchildren they 36 37 care for--and an older one--an older family member or friend for whom they also provide care; and 38 39 **40** WHEREAS, in 2019, thirty percent of family caregivers in the United States were sandwich generation caregivers, who 41 42 generally span ages thirty-five to sixty-four and are more





1 likely than other caregivers to be working while performing their caregiving responsibilities; and 2 3 4 WHEREAS, as a result of the dual-generation care demands, 5 sandwich generation caregivers report higher levels of emotional and financial strain; and 6 7 8 WHEREAS, inequity in the existing socio-economic structure 9 and support infrastructure are also subjecting working women and 10 people of color to be unequally burdened by caregiving duties 11 and economic hardships due to caregiving; and 12 13 WHEREAS, a paid family and medical leave program would 14 enable family caregivers to take a limited period of time off from work to care of loved ones without fear of losing their 15 16 jobs or income; and 17 18 WHEREAS, paid family and medical leave programs are 19 associated with improved outcomes in the earliest years of life for individuals, including higher rates of breastfeeding and 20 21 immunization and lower rates of child abuse, domestic violence, 22 and financial instability; and 23 24 WHEREAS, in the face of the current workforce shortage, a 25 paid family and medical leave programs would incentivize individuals to join the labor market and improve employee 26 27 retention, filling gaps and saving employers long-term 28 recruitment and training costs; and 29 30 WHEREAS, most small businesses in the State however, cannot finance a privately-funded paid family and medical leave 31 32 insurance program that can provide benefits for all of their 33 employees; and 34 35 WHEREAS, a state-administered paid family and medical leave program would benefit the State's workforce while reducing the 36 37 financial burden for employers compared to a privately funded 38 alternative; now, therefore, 39 40 BE IT RESOLVED by the House of Representatives of the 41 Thirty-third Legislature of the State of Hawaii, Regular Session of 2025, that the Senate Standing Committee on Labor and 42





1	Technology and House of Representatives Standing Committee on		
2	Labor are requested to convene a legislative working group to develop recommendations for establishing and implementing a pai		
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4	family an	d medical leave program for the State; and	
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6	BE I	T FURTHER RESOLVED that the working group is requested	
7	to:		
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9	(1)	Recommend parameters for a statewide paid family and	
10	· · ·	medical leave program that benefits both public and	
11		private sector workers;	
12		privace beetor workers,	
13	(2)	Review the impact of federal and state regulations on	
13	(2)		
		the establishment of a paid family and medical leave	
15		program;	
16	(2)		
17	(3)	Develop an implementation plan that outlines an	
18		administrative framework for paid family and medical	
19		leave, including departmental oversight, projected	
20		costs, employer and employee contribution rates,	
21		staffing needs, outreach to employers and employees,	
22		and potential timelines for program enactment and the	
23		initiation of benefits distribution; and	
24			
25	(4)	Examine and address how the State's Temporary	
26		Disability Insurance (TDI) program may interface with	
27		or complement the paid family and medical leave	
28		program, including the feasibility, cost-benefit	
29		analysis, and a general roadmap for transitioning the	
30		existing private TDI program to an expanded public	
31		program that includes or complements paid family and	
32		medical leave benefits; and	
33		medical leave benefics, and	
33 34	סד ד	T FUDTHED DECOLVED that the newline many is remarked	
		T FURTHER RESOLVED that the working group is requested	
35	to be com	posed of the following members:	
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37	(1)	The Director of Labor and Industrial Relations, or the	
38		Director's designee, to serve as chairperson of the	
39		working group;	
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41	(2)	The Chair of the House of Representatives Standing	
42		Committee on Labor, or the Chair's designee;	



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1 2 (3) The Chair of the Senate Standing Committee on Labor 3 and Technology, or the Chair's designee; 4 5 (4) The Director of Human Resources Development, the directors of the central personnel agencies of the 6 7 State, the City and County of Honolulu, the County of 8 Hawaii, the County of Maui, the County of Kauai, the Judiciary, the Department of Education, the University 9 10 of Hawaii, and the Hawaii Health Systems Corporation, 11 or their designees; 12 13 (5) A representative from the Hawaii State Teachers 14 Association, to be invited by the chairperson of the 15 working group; 16 A representative from the United Public Workers, 17 (6) 18 AFSCME Local 646, AFL-CIO, to be invited by the 19 chairperson of the working group; 20 21 (7) A representative from the Hawaii Government Employees Association, to be invited by the chairperson of the 22 23 working group; 24 (8) A representative from Aloha United Way, to be invited 25 by the chairperson of the working group; 26 27 (9) 28 A representative from the American Association of 29 University Women of Hawaii, to be invited by the chairperson of the working group; 30 31 32 (10)A representative from an organization representing the 33 interests of businesses with fewer than fifty 34 employees, to be selected and invited by the Senate 35 President; 36 37 (11)A representative from an organization representing the 38 interests of businesses with fewer than fifty 39 employees, to be selected and invited by the Speaker 40 of the House of Representatives; 41



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1 2 3	(12)	A representative from AARP Hawaii, to be invited by the chairperson of the working group;
4 5 6 7	(13)	A representative from Hawaii Children's Action Network Speaks!, to be invited by the chairperson of the working group; and
8 9 10 11 12	(14)	A representative from a private insurance company offering Temporary Disability Insurance benefits in the State or an association of insurers, to be selected and invited by the Governor; and
12 13 14 15 16	to identi	T FURTHER RESOLVED that the working group is requested fy parameters for a paid family and medical leave including:
17 18 19	(1)	A minimum duration of leave that meets the needs of the State's workers;
20 21	(2)	A system of wage replacement;
21 22 23 24 25 26 27	(3)	Coverage for a worker's serious illness, caring for a loved one with a serious illness, bonding with a new child, and needs arising from military deployment and the effects of domestic violence, stalking, and sexual assault;
28 29 30	(4)	Coverage for all employees of employers who employe one or more employees, and a mechanism for the participation of the self-employed;
31 32 33 34 35 36 37	(5)	A definition of "family" or "family member" for whom an individual may take leave for purposes of providing care that is at least as broad as the definition in chapter 398, Hawaii Revised Statutes, the existing Hawaii Family Leave Law; and
38 39 40 41	(6)	Employment protections to ensure use of paid family and medical leave does not adversely impact employment; and



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1 BE IT FURTHER RESOLVED that the working group is requested 2 to review independent studies, research, and other information regarding paid family and medical leave; and 3 4 5 BE IT FURTHER RESOLVED that the working group is requested to utilize independent consultants and administrative 6 facilitators, including the Legislative Reference Bureau, as 7 8 needed to assist in the performance of its duties, including but not limited to the preparation of the report to the Legislature; 9 10 and 11 12 BE IT FURTHER RESOLVED that the working group is requested to submit a report of its findings and recommendations, 13 14 including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session 15 of 2026; and 16 17 18 BE IT FURTHER RESOLVED that certified copies of this 19 Resolution be transmitted to the Governor, President of the 20 Senate, Speaker of the House of Representatives, Chair of the Senate Standing Committee on Labor and Technology, Chair of the 21 House of Representatives Standing Committee on Labor, Director 22 23 of the Legislative Reference Bureau, Director of Labor and Industrial Relations, and Director of Human Resources 24 25 Development. 26 27 28

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