State of Working Ohio 2026
Paid Family Medical Leave

At some point in their career, every Ohio worker will need paid family and/or medical leave (PFML), but only a small percentage of Ohio workers have access to PFML programs. PFML refers to a range of policies mandating at least partial payment to workers taking time off to care for a new child, care for a family member with a medical condition, or address their own health needs.[1] There is no nationwide PFML program; any paid family and medical leave options available to workers are either provided by their employers, or legislated by states or municipalities: 14 states and D.C. have adopted or implemented PFML policies.[2]

More than ten municipalities across Ohio offer parental leave to workers employed by the municipality.[3] In 2023, Cleveland City Council passed legislation providing paid parental leave for full-time municipal employees, including up to 20 hours of paid leave for prenatal or pre-adoption appointments.[4]

While this policy is a huge step forward in raising working standards, it does not include coverage for caregiving or medical leave. According to a 2018 U.S. Department of Labor survey, 75% of those who utilized the Family Medical Leave Act (FMLA, the law that requires workers receive 12 weeks of *un*paid, job-protected leave) did so for the medical leave aspect, not related to the arrival of a new child.[5]

These policies only cover city employees — others who work *in* the municipality but not *for* it are excluded. Ohio needs a statewide PFML policy so all workers, regardless of where they live or who they work for, can care for themselves or their loved ones unencumbered by financial strain.

Affordability: Workers are forced to choose between health and income

Reasons for taking medical leave are varied and common: PFML covers leave due to pregnancy, short-term or long-term illness, old age, surgery recovery, chronic pain, cancer and cancer treatment, and more. PFML also covers leave taken to provide care to a family member or friend with complex medical conditions or disabilities — which nearly a quarter of Ohioans do at some point in their careers.[6] Being able to address family and medical health needs, while maintaining income and a job, is critical to prevent economic disruption for families.

---

[1] The Urgent Need for Paid Family Leave in Ohio. *Elevate Advocacy LLC.* Time to Care Ohio. November 2025.
[2] State Paid Family and Medical Leave Programs Cover Nearly 50 Million Workers. J. Mason and K. Gallagher Robbins. *National Partnership for Women and Families.* April 2026.
[3] The Urgent Need for Paid Family Leave in Ohio. *Elevate Advocacy LLC.* Time to Care Ohio. November 2025.
[4] Paid Parental Leave Available to City of Cleveland Employees. *Cleveland City Council.* July 18, 2023.
[5] Employee and Worksite Perspectives of the Family and Medical Leave Act: Results from the 2018 Surveys. Exhibit 4-4. *U.S. Dept. of Labor.* July 2020.
[6] Caregiving in the US 2025: Ohio. *National Alliance for Caregiving.* October 2025.

While the need for PFML is near universal, access to it is a different story. In Ohio roughly 77% of workers are not provided a paid leave policy through their employer.[7] Across the country, low-paid workers are the least likely to have access to PFML benefits: 5% of the lowest decile of wage earners ($14/hour or less) have access to paid family leave through their employer while 51% of the highest decile of wage earners ($55.29/hour or more) have access, as of 2023.[8] More employers have begun to recognize the importance of PFML: from 2013 to 2022, the share of private sector workers with access to paid leave doubled from 12% to 24%. Still, a majority of workers remain without PFML from their employers.[9]

Unequal impacts: Women, caregivers, and low-paid workers have the least access to leave

Lack of access to PFML has far-reaching implications for the economy, public health, and family life. We know women and people of color are disproportionately represented among minimum-wage and low-paid workers.[10] Minimum- and low-wage jobs also tend to not have employer-sponsored access to PFML, adding to the many economic disparities among Ohioans.[11] Paid family or medical leave especially impacts women's labor market attachment, low-wage workers, Black workers, and Hispanic workers.

Pew Research Center reports about a quarter of U.S. adults are part of the "sandwich generation": adults who are caring for both their children and aging parents.[12] Ohio's aging population[13] further illustrates the need for widespread access to PFML.

Caregiving responsibilities disproportionately fall to women,[14] which impacts their labor force participation.[15] Research on maternal labor market attachment post-birth in states with paid family leave policies found that the implementation of a policy reduces **labor market detachment** – when workers leave the labor force with no intention of returning — by 20% in the year of birth.[16] The same study determined this impact can last for up to

---

[7] The Urgent Need for Paid Family Leave in Ohio. *Elevate Advocacy LLC.* Time to Care Ohio. November 2025.
[8] A Nation of Paid Family Leave Have- and Have-Nots Characterizes the United States in 2023. V. Shabo. *New America.* September 21, 2023.
[9] Same as above.
[10] See: "Women's work" and the gender pay gap. Jessica Schieder and Elise Gould. *Economic Policy Institute.* July 20, 2016. Chasing the dream of equity. Adewale A. Maye. *Economic Policy Institute.* August 1, 2023.
[11] "The Paid Family and Medical Leave Opportunity: What Research Tells Us About Designing a Paid Leave Program that Works for All." K. Grant, C. Brumfield, S. Khan, F. Aderonmu, I. Dutta-Gupta. *Georgetown Center on Poverty and Inequality and PL + US.* July 2019.
[12] More than half of Americans in their 40s are 'sandwiched' between an aging parent and their own children. Juliana Menasce Horowitz. *Pew Research Center.* April 8, 2022.
[13] EPI, State of Working America Data Library, "Civilian population - Count of civilian population, ages 16+," 2026.
[14] "Caregiving in the US 2025: Caring Across States." *National Alliance for Caregiving and AARP.* October 2025.
[15] Labor force participation (LFP) describes the share of people who either are working, attached to a job but on leave/vacation, or report actively looking for work. The economic impact of PFML is measured using LFP, since it counts both those working and wanting work, whereas a measure like the employment-to-population ratio only counts those working. Labor force participation can be dependent on PFML availability, especially if someone must leave the labor force to care for themselves or a loved one.
[16] Jones, Kelly; Wilcher, Britni (2019). 2019-07 Reducing maternal labor market detachment. American University (Washington, D.C.). Dept. of Economics.

five years — meaning mothers continued to return to the labor force each year following birth at greater rates after the implementation of a paid family leave policy.

Between 1984 and 2013, 20% of the widening racial wealth gap is due to racial disparities in access to job benefits like PFML.[17] According to analysis of 2011 data from the Bureau of Labor Statistics, while nearly 50% of white and AAPI workers had access to paid parental leave at that time, 43.3% of Black workers and only 25.1% of Hispanic workers had access.[18] Later research from 2021 explored the shares of women who received pay while on leave in the Bay Area.[19] It found 10% of white and 13% of AAPI women receive no pay while on leave, compared to 25% of Hispanic women and 33% of Black women. A statewide PFML program that covers all workers would ensure workers typically left out are given the same opportunity to take paid time off to care for themselves or their loved ones.

Ohioans of color historically have greater unemployment rates than white Ohioans, which may be a byproduct of lack of access to PFML. Without job-protected leave, taking time off can quickly turn into bouts of unemployment for Ohioans who already get the short end of the stick in terms of pay and benefits.

Lessons from other states: Paid leave programs improve worker and family well-being

Massachusetts' PFML policy went into effect in 2021 and grants up to 20 weeks of paid medical leave, 12 weeks for paid family and caregiving leave, and 26 weeks of paid family caregiving leave for covered service members.[20] Weekly benefit payments are based on the individual's average weekly wage, the Massachusetts average weekly wage, when the individual is taking leave, and on what schedule. The median hourly wage in Massachusetts was $31.39 in 2025,[21] or $65,291 working full-time year-round. Using Massachusetts' Benefit Calculator, a family with one income earner at this wage would be eligible to receive $916 weekly—approximately 73% of their normal income. Depending on what kind of leave they are taking, they could be eligible for anywhere between 12 and 26 weeks of paid leave.

---

[17] "The Paid Family and Medical Leave Opportunity: What Research Tells Us About Designing a Paid Leave Program that Works for All." K. Grant, C. Brumfield, S. Khan, F. Aderonmu, I. Dutta-Gupta. *Georgetown Center on Poverty and Inequality and PL + US.* July 2019. See also: The Roots of the Widening Racial Wealth Gap: Explaining the Black-White Economic Divide. T. Shapiro, T. Meschede, S. Osoro. *Institute on Assets and Social Policy.* February 2013.

[18] Latinos Least Likely to Have Paid Leave or Workplace Flexibility. Sarah Jane Glynn and Jane Farrell. *Center for American Progress.* November 20, 2012.

[19] Goodman JM, Williams C, Dow WH. Racial/Ethnic Inequities in Paid Parental Leave Access. Health Equity. 2021 Oct 13;5(1):738-749. doi: 10.1089/heq.2021.0001. PMID: 34909544; PMCID: PMC8665807.

[20] Paid Family and Medical Leave (PFML) overview and benefits. *Massachusetts Department of Family and Medical Leave.* Accessed March 18, 2026.

[21] EPI, State of Working America Data Library, "Hourly wage, median - Median real hourly wage (2025$)," 2026.

Massachusetts' policy has resulted in thousands of state residents getting access to PFML. In the first six months of the program, 43,440 applicants received benefits.[22] In 2025, over 130,000 applicants received benefits, some more than once in a fiscal year.[23]

Access to PFML has led to better health outcomes in the state. A report from the National Partnership of Women & Families found workers with depression and coronary heart disease reported fewer poor health days after the implementation of Massachusetts' PFML policy.[24] Emerging research in the U.S. shows that paid family and medical leave policies, specifically paid maternity leave, are correlated with decreases in infant mortality rates;[25] however, more research needs to be done to measure all contributing factors to reducing a state's infant mortality, including safe sleep education, lead abatement programs, and state investment in healthcare access.

Having the ability to take job-protected, paid leave allows Massachusetts workers to participate to their fullest potential in the labor market, while balancing their health needs. For Ohio to improve its residents' health outcomes, break down racial barriers in access to care, and improve labor force participation among its workers, it ought to consider a similar policy.

Federal landscape: Federal inaction leaves Ohio workers behind

In 1993, the FMLA became federal law, mandating 12 weeks of unpaid, job-protected leave and continued health insurance coverage nationally.[26] However, this leave is not a statutory right and approximately 44% of workers are not eligible because of their hours, duration in their position, or size of their employer.[27]

Because FMLA does not require employers to pay workers while they are on leave, many workers simply cannot afford to utilize the program even when they need it: In 2025, about 11.3 million workers needed leave and did not take it. In a survey of those workers, two-thirds of respondents said it was because they could not afford to take unpaid leave.[28]

---

[22] FY2021 Annual Report for the Massachusetts Paid Family and Medical Leave (PFML). *Massachusetts Department of Family and Medical Leave.* January 11, 2022.
[23] FY2025 Annual Report for the Massachusetts Paid Family and Medical Leave (PFML). *Massachusetts Department of Family and Medical Leave.* December 1, 2025.
[24] The Impact of Paid Leave on the Health of Massachusetts. A. Majumder and J. Mason. *National Partnership for Women & Families.* February 2025.
[25] Heymann J, Sprague AR, Nandi A, Earle A, Batra P, Schickedanz A, Chung PJ, Raub A. Paid parental leave and family wellbeing in the sustainable development era. Public Health Rev. 2017 Sep 15;38:21. doi: 10.1186/s40985-017-0067-2. PMID: 29450093; PMCID: PMC5810022. See also: Montoya-Williams D, Passarella M, Lorch SA. The impact of paid family leave in the United States on birth outcomes and mortality in the first year of life. *Health Serv Res.* 2020 Oct; 55 Suppl 2(Suppl 2):807-814. doi: 10.1111/1475-6773.13288. Epub 2020 Apr 5. PMID: 32249413; PMCID: PMC7518811. Alyse M. Carlson, James Ebert, Elizabeth Hisle-Gorman; Length of Maternity Leave Impact on Child Health Outcomes. *Pediatrics* February 2022; 149 (1 Meeting Abstracts February 2022): 973.
[26] Fact Sheet #28: The Family and Medical Leave Act. *U.S. Dept. of Labor Wage & Hour Division.* Revised March 2025.
[27] Key Facts: The Family and Medical Leave Act. *National Partnership for Women & Families.* January 2026.
[28] Same as above.

In 2020, federal workers were granted 12 weeks of Paid Parental Leave (PPL) to use within 12 months after the birth or placement (through adoption or foster care) of a new child.[29] Eligible federal workers receive the same pay they would if using vacation or sick time, with some exceptions. The Office of Personnel Management reported[30] slightly higher usage compared to initial estimates, with 4% of federal employees using PPL sometime between October 2020 and July 2022. Of those employees who used or planned to use PPL, 81% used all 12 weeks available to them. Most notably, PPL had a "great" or “moderate" influence on 55% of workers under 40 years old deciding whether to remain employed with the federal government.

The cost of inaction: Ohio workers lose economic security without paid leave

Paid family and medical leave benefits help families navigate temporary absences from work like welcoming a new baby or recovering from surgery. PFML also helps keep local economies strong by ensuring families can continue to afford the basics, keeping funds flowing through the economy, even when a person takes time to care for themselves or others.

The Center for Law and Social Policy (CLASP) examined government data to determine the total wages lost by workers in Ohio due to unpaid or partially paid leave, breaking it down by those taking leave for their own health, a family member’s health, or a new family addition. They use a model developed by the United States Department of Labor (*Worker Paid Leave Usage Simulation* model) to develop the estimates based on the 2020 5-year American Community Survey. We adjusted their estimates for inflation to 2025 dollars.[31]

According to this model and our inflation adjustments, Ohioans lose out on wages for unpaid or partially paid leave to the tune of **$2.32 billion** per year. Those are wages that could help families stay caught up on bills, cover medical costs, and maintain household economy stability. Table 5.1 breaks down those lost wages by type of leave.

[29] Paid Parental Leave. *U.S. Office of Personnel Management.* Accessed March 23, 2026.
[30] Paid Parental Leave: OPM Should Take Steps to Further Raise Awareness of the Program. *U.S. Government Accountability Office.* January 2024.
[31] CLASP inflated 2020 estimates to 2023 dollars using the CPI-U. At Policy Matters Ohio, we prefer to use the C-CPI-U inflation measure for its responsiveness to changes in consumer behavior due to relative price changes. To determine the 2025 value, we deflated the 2023 estimation from CLASP back to its 2020 value using the CPI-U. Then we inflated the 2020 estimate to 2025 dollars using the C-CPI-U. See their methodology here: Working People Need Access to Paid Leave, Emily Andrews, Sapna Mehta, and Jessica Milli. *CLASP.* September 25, 2024.

Table 5.1
Without paid leave, Ohio workers lose out on billions each year

Reason for leave	Annual wages lost
Own Health	$1,323,373,182
Family Caregiving	$214,916,971
Parental	$779,867,832
Total	**$2,318,157,985**

Policy Matters analysis of CLASP date — See note 201.

Policy recommendations

Polling indicates strong support for PFML policy. Eighty-five percent of respondents in battleground states (including Ohio) favor PFML, with 64% strongly in favor.[32] Ohio legislators have the opportunity to pass a statewide PFML policy with Senate Bill 396, the bipartisan legislation introduced by Senators Blessing and Liston in collaboration with the Time to Care Ohio Coalition.

The bill[33] would create a PFML insurance fund that is supported through a small payroll contribution split between employers and employees. Employers with fewer than 15 employees would be exempt from the employer contribution, while their employees would still contribute and remain eligible for leave. Employees would then be able to use up to 14 weeks of paid leave over a 12-month period for their own serious health condition, a loved one's serious health condition, new family addition, or qualifying military-related reason. If an employee has a second qualifying incident in the 12-month period, they could access an additional four weeks of paid leave.

Establishing PFML as an insurance fund is considered a best practice by experts and advocates to spread out costs to fund the program, provide universal access to all workers, and sustain predictability and sustainability of the program. All 14 states and D.C. that have passed PFML policies have structured their policies this way.[34] As the bill is currently written, the payroll contribution rate can be amended by the Department of Jobs and Family Services to ensure the fund's solvency, based on usage and contribution rates.

[32] Survey Findings Show Broad and Deep Support for Paid Parental, Family and Medical Leave. *Lake Research Partners and Paid Leave for All Action.* November 2023.
[33] Senate Bill 396. Louis Blessing III & Beth Liston. *Ohio Legis. 136th General Assembly.* Introduced Mar. 23, 2026.
[34] Overview of Family Leave Laws in the United States. *A Better Balance.* Accessed May 27, 2026.

The initial proposal[35] suggests 0.8% split evenly between employers and employees, which would cost an Ohio worker earning the median wage less than $210 per year, while paying out crucial benefits during times of leave.

While on PFML, employees would receive up to 85% of their average weekly earnings from the state fund, while being assured their same position or an equivalent one when they return to work. The policy caps wage replacement to families at 90% of the statewide average weekly wage to promote an equitable distribution of public funds.

To ensure millions more Ohioans have access to paid family and medical leave, not just those lucky enough to work at an employer with such a policy, Ohio legislators ought to pass Senate Bill 396, or similar legislation.

[35] Senators Blessing and Liston Introduce Paid Family Leave Legislation. *The Ohio Senate 136th General Assembly.* April 23, 2026.