

Paid Leave—A Benefit for Employers and Employees

The availability of paid leave from work for cancer screenings alleviates a significant barrier and may increase cancer screening rates. With the passage of the Affordable Care Act in 2009, most individuals have a health insurance plan that covers preventive care at no out-of-pocket cost.¹ However, without paid time off to access covered services, many employees will not fully benefit from their insurance coverage. In other words, an employee may have to choose between a potentially life-saving screening and the paycheck on which she and her family rely. Initial research suggests that employees with paid sick leave are more likely to seek non-urgent or regular healthcare and obtain recommended cancer screenings.²

Paid leave for cancer screenings that is not charged against other sick or vacation time may specifically encourage employees to obtain age-appropriate screenings. Each cancer diagnosis is estimate to annually cost a business \$1,601 in lost productivity.³ Early detection of breast, colorectal and cervical cancer dramatically improves treatment outcomes.⁴ Moreover, research suggests that employers can provide paid leave with no negative effect on profitability.⁵ In fact, employers who offer paid leave may realize a healthier and more productive workforce and spend less on direct medical costs, worker compensation and disability costs, replacement costs for ill or injured workers who are absent, and costs for recruiting and training new workers.⁶

Jurisdictions in New York and elsewhere are taking notice and offering leave to their employees or mandating leave for all employees. New York State provides most public employees four hours of paid leave for breast or prostate cancer screenings (separate from any other sick, vacation or personal leave benefits).⁷ Examples of similar or expanded employee leave include:

Broome County, NY

In October of 2013, Broome County expanded paid leave for cancer screenings for its employees.⁸ Specifically, the county added four hours of paid time off for colorectal cancer screenings in addition to the time already provided for breast and prostate cancer screenings mandated by state law. This leave is not charged against employees' accrued sick leave benefit.

Schenectady County, NY

In January of 2015, Schenectady County expanded paid leave for cancer screenings for its employees.⁹ Rather than enumerate additional screenings available under the new benefit, the county added four hours of paid leave for any cancer screenings except for those already covered by New York State law (*i.e.*, breast and prostate cancer screenings). This leave is not charged against employees' accrued sick leave benefit.

San Francisco, CA

In 2006, San Francisco became the first municipality to mandate paid sick leave for all employers (effective in 2007). As of 2010, more than 70 percent of employers participating in a survey reported no impact on profitability and two thirds of employers expressed support for the law (including those in the few industries reporting a negative impact on profitability).¹⁰ Moreover, employees reported using fewer than half of available sick days, indicating that employers are not paying in full for the benefit.¹¹

Public employer policies:

Jurisdiction/Law	Relevant Provisions	Notes
Broome County, NY BROOME CTY., NY RES. NO. 412 (2013)	Provides county employees four hours of paid leave per calendar year to obtain colorectal cancer screening.	In addition to existing state law providing county four hours of paid leave for breast and prostate cancer screenings.
Conklin, NY CONKLIN, NY RES. NO. 2013-180 (2013)	Provides city employees with four hours of paid leave per calendar year each for colorectal cancer screenings.	In addition to existing state law providing municipal four hours of paid leave for breast and prostate cancer screenings.
Schenectady County, NY SCHENECTADY CTY., NY RES. NO. 2-15 (2015)	Provides county employees four hours of paid leave per calendar year to obtain any cancer screening other than screenings for breast and prostate cancer.	In addition to the existing state law providing county four hours of paid leave for breast and prostate cancer screenings.
Boston, MA BOSTON, MA, EXEC. ORD. (1997)	Provides city employees four hours of paid leave per calendar year for several identified cancer screenings	Covered screenings include those for breast, colorectal, prostate, skin, thyroid, oral, lymph, and reproductive cancers.
Baltimore, BALTIMORE, MD, ADMIN MANUAL 203-4-1 (2005)	Provides city employees four hours of paid leave per calendar year for cancer screenings	Applies to any cancer screening.

Statutory requirements affecting private employers:

Jurisdiction/Law	Relevant Provisions
New York, NY NEW YORK, NY ADMIN. CODE tit. 20, ch. 8 (2013)	Tiered requirement: One hour paid sick leave for every 30 hours worked for employers with > five employees One hour unpaid leave for every 30 hours worked for employers with ≤ five employees
San Francisco, CA SAN FRANCISCO, CA ADMIN. CODE ch. 12W (2007)	One hour paid sick leave for every 30 hours worked Cap on maximum amount of accrued time
Washington, D.C. WASHINGTON, D.C. CODE §32-131.01 (2008)	Tiered requirement: One hour paid sick leave for every 37-87 hours worked, depending on employer size Cap on maximum amount of accrued time
Seattle, WA SEATTLE, WA MUN. CODE tit. 14, ch. 14.16 et seq. (2011)	Tiered requirement: One hour paid sick leave per 30-40 hours worked, depending on employer size

For more information about paid leave policies, please refer to the Public Health and Tobacco Policy Center report *Cancer Screenings: Workplace Policies to Improve Screening Rates*.¹²

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¹ Patient Protection and Affordable Care Act, Pub. L. No. 111-148, tit. 1, § 2713(A)(ii) (“A group health plan and a health insurance issuer offering group or individual health insurance coverage shall, at a minimum, provide coverage for and shall not impose any cost sharing requirements for (1) evidence-based items or services that have in effect a rating of ‘A’ or ‘B’; in the current recommendations of the United States Preventive Services Task Force.”); see U.S. CTRS. FOR MEDICARE & MEDICAID SERVS., *What are my preventive care benefits?*, HEALTHCARE.GOV, <https://www.healthcare.gov/what-are-my-preventive-care-benefits/>.

² Lucy A. Peipins et al., *The Lack of Paid Sick Leave as a Barrier to Cancer Screening and Medical Care-Seeking: Results from the National Health Interview Survey*, BMC PUBLIC HEALTH 1, 1 (2012), (finding that “[t]he percentage of workers who underwent mammography, Pap test, endoscopy at recommended intervals, had seen a doctor during the prior 12 months or had at least on visit to a health care provider during the prior 12 months was significantly higher among those with paid sick leave as compared with those without sick leave.”), available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3433348/pdf/1471-2458-12-520.pdf>; see Won Kim Cook, *Paid Sick Days and Health Care Use: An Analysis of the 2007 National Health Interview Survey Data*, 54 AM. J. IND. MED. 771-779, 777 (2011) (finding that “[f]or U.S. working adults with health insurance coverage, access to paid sick days benefits was significantly associated with increased use of outpatient care and reduced use of emergency care”), available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3168716/pdf/nihms305969.pdf>; see also See Fernando A. Wilson et al., *The Role of Sick Leave in Increasing Breast Cancer Screening among Female Employees in the U.S.*, 2 JOURNAL OF CANCER POLICY 89 (2014) (finding that access to paid sick leave was associated with significantly increasing odds of employed women obtaining breast cancer screening).

³ Rebecca J. Mitchell & Paul Bates, *Measuring Health-Related Productivity Loss*, 14 POPULATION HEALTH MGMT. 93, 96-97 Fig. 1 (2011), available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3128441/pdf/pop.2010.0014.pdf>; cf. Donatus U. Ekwueme et al., *Medical Costs and Productivity Losses of Cancer Survivors-United States 2008-2011*, 63 MORBIDITY AND MORTALITY WEEKLY REPORT 505, 509 Table 2 (June 13, 2014) (of cancer survivors that return to work after treatment, productivity losses average \$1459 for men and \$1330 for women, compared to those without a history of cancer).

⁴ See AMERICAN CANCER SOCIETY, CANCER FACTS AND FIGURES, 10-12, 23 (2014), available at <http://www.cancer.org/research/cancerfactsstatistics/cancerfactsfigures2014/>.

⁵ EXEC. OFFICE OF THE PRESIDENT, THE COUNCIL OF ECONOMIC ADVISORS, THE ECONOMICS OF PAID AND UNPAID LEAVE, 16-18 (June 2014), available at http://www.whitehouse.gov/sites/default/files/docs/leave_report_final.pdf.

⁶ Centers for Disease Control and Prevention, *Benefits of Health Promotion Programs* (2010), available at <http://www.cdc.gov/workplacehealthpromotion/businesscase/benefits/index.html>.

⁷ N.Y. CIVIL SERVICE LAW §§159-b, c.

⁸ BROOME CTY., NY RES. NO. 412 (2013),

⁹ SCHENECTADY CTY., NY RES. NO. 2-15 (2015).

¹⁰ Robert Drago and Vicky Lovell, *San Francisco’s Paid Sick Leave Ordinance: Outcomes for Employers and Employees*, INSTITUTE FOR WOMEN’S POLICY RESEARCH, 20-22 (February 2011), available at <http://www.iwpr.org/publications/pubs/San-Fran-PSD>.

¹¹ Robert Drago and Vicky Lovell, *San Francisco’s Paid Sick Leave Ordinance: Outcomes for Employers and Employees*, INSTITUTE FOR WOMEN’S POLICY RESEARCH, 25 (February 2011), available at <http://www.iwpr.org/publications/pubs/San-Fran-PSD>.

¹² CENTER FOR PUBLIC HEALTH AND TOBACCO POLICY, *CANCER SCREENINGS: WORKPLACE POLICIES TO IMPROVE SCREENING RATES*, available at <http://www.tobaccopolicycenter.org/documents/New%20Title%20Full%20Report.pdf>.

