

DBL-PFL ADMINISTRATIVE FORMS

The following is a listing of the current forms to be used in the administration of your New York State Mandated Disability & Paid Family Leave policy with us. For your convenience, some forms can also be obtained at our website at www.RenaissanceFamily.com/Forms or <http://www.wcb.ny.gov/content/main/forms>

NOTICE OF COMPLIANCE DB-120, PFL-120	DBL-120, PFL-120—These forms MUST , by law, be displayed by the employer in a prominent location in order for all employees to have access to the information contained in it.
Certificate of Insurance DB-120.1	DB-120.1—This form is used as requested to provide proof of your coverage.
HIPPA Notice of Privacy Practices	HIPPA Notice of Privacy Practices—This notice is for your information.
Identification Card DB-125	DB-125—Upon request, this card MUST , by law, be given to each covered employee who, upon separation from your employment, will then be unemployed. See instructions on the card for proper handling: http://www.wcb.ny.gov/content/main/forms/db125.pdf
Statement of Rights DB-271S, PFL-271S <i>Ren of NY Form Number: PFL-007A-2018-NY, DBL-007A-2018-NY</i>	DB-271S, PFL-271S—This form MUST , by law, be sent to any employee who incurred a sickness or injury – while OFF THE JOB – after they have been out of work for more than seven (7) consecutive days. These forms are also available at: http://www.wcb.ny.gov/content/main/forms
Q&A Brochure P-20	Q&A Brochure—This brochure provides answers to some of the most commonly asked (P-20) questions regarding the coverage provided by this type of policy. It can be used as a reference by employers when an employee has questions regarding disability benefits. Also available on the Internet at the following: http://www.wcb.state.ny.us/content/main/workers/wc06003.html
DBL-PFL Claim Form DB-450, PFL-1 <i>Ren of NY Form Number: DBL-002A-NY-2018, PFL-0234C-2018-NY</i>	DBL-450, PFL-1—Any questions regarding the submission and processing of claims should be directed to our Claim Division at 844-368-6485 (Option 2). Fax any Claim information to 607-773-2276. The claim forms are also available at: http://www.wcb.ny.gov/content/main/forms
PFL Opt-Out Form PFL-WAIVER <i>Ren of NY Form Number: PFL-008-2018-NY</i>	PFL-WAIVER—Employee Opt-out of Paid Family Leave Benefits.

FOR QUESTIONS OR TO REQUEST SUPPLIES PLEASE CONTACT:

Renaissance DBL-PFL Administration
 Phone: 844-368-6485 (Option 1, then Option 2)
 Fax: 607-723-8665

