

State Disability Insurance (SDI) and Paid Family Leave (PFL) Weekly Benefit Amounts

(This chart reflects maximum weekly benefit amounts for claims beginning on
or after January 1, 2005.)

This chart shows what your weekly benefit might be based on your highest quarter of earnings in your base period.

If your claim begins in	Your base period is the 12 months ending last
January, February, or March.....	September 30
April, May, or June	December 31
July, August, or September.....	March 31
October, November, or December.....	June 30

You should carefully decide the date you want your claim to begin. If you want your claim to begin later than the beginning date of your disability or family leave so that you will have a different base period, do not submit your claim before calling the appropriate office:

State Disability Insurance at 1-800-480-3287 or Paid Family Leave at 1-877-238-4373.

Wages in the High Quarter:	Weekly Benefit Amount:	Wages in the High Quarter:	Weekly Benefit Amount:	Wages in the High Quarter:	Weekly Benefit Amount:
\$75.00 - 1,374.99.....	\$50 – 59	8,249.10 - 8,485.45.....	350 – 359	15,340.01 - 15,576.36	650 – 659
1,375.00 - 1,624.99.....	60 – 69	8,485.46 - 8,721.82.....	360 – 369	15,576.37 - 15,812.72	660 – 669
1,625.00 - 1,867.27	70 – 79	8,721.83 - 8,958.18.....	370 – 379	15,812.73 - 16,049.09	670 – 679
1,867.28 - 2,103.63.....	80 – 89	8,958.19 - 9,194.54.....	380 – 389	16,049.10 - 16,285.45	680 – 689
2,103.64 - 2,340.00.....	90 – 99	9,194.55 - 9,430.91.....	390 – 399	16,285.46 - 16,521.82	690 – 699
2,340.01 - 2,576.36.....	100 – 109	9,430.92 - 9,667.27.....	400 – 409	16,521.83 - 16,758.18	700 – 709
2,576.37 - 2,812.72.....	110 – 119	9,667.28 - 9,903.63.....	410 – 419	16,758.19 - 16,994.54	710 – 719
2,812.73 - 3,049.09.....	120 – 129	9,903.64 - 10,140.00.....	420 – 429	16,994.55 - 17,230.91	720 – 729
3,049.10 - 3,285.45.....	130 – 139	10,140.01 - 10,376.36.....	430 – 439	17,230.92 - 17,467.27	730 – 739
3,285.46 - 3,521.82.....	140 – 149	10,376.37 - 10,612.72.....	440 – 449	17,467.28 - 17,703.63	740 – 749
3,521.83 - 3,758.18.....	150 – 159	10,612.73 - 10,849.09	450 – 459	17,703.64 - 17,940.00	750 – 759
3,758.19 - 3,994.54.....	160 – 169	10,849.10 - 11,085.45	460 – 469	17,940.01 - 18,176.36	760 – 769
3,994.55 - 4,230.91.....	170 – 179	11,085.46 - 11,321.82	470 – 479	18,176.37 - 18,412.72	770 – 779
4,230.92 - 4,467.27	180 – 189	11,321.83 - 11,558.18	480 – 489	18,412.73 - 18,649.09	780 – 789
4,467.28 - 4,703.63.....	190 – 199	11,558.19 - 11,794.54	490 – 499	18,649.10 - 18,885.45	790 – 799
4,703.64 - 4,940.00.....	200 – 209	11,794.55 - 12,030.91	500 – 509	18,885.46 - 19,121.82	800 – 809
4,940.01 - 5,176.36.....	210 – 219	12,030.92 - 12,267.27	510 – 519	19,121.83 - 19,358.18	810 – 819
5,176.37 - 5,412.72.....	220 – 229	12,267.28 - 12,503.63.....	520 – 529	19,358.19 - 19,594.54	820 – 829
5,412.73 - 5,649.09.....	230 – 239	12,503.64 - 12,740.00.....	530 – 539	19,594.55 - 19,830.91	830 – 839
5,649.10 - 5,885.45.....	240 – 249	12,740.01 - 12,976.36.....	540 – 549	19,830.92 and above.....	840
5,885.46 - 6,121.82.....	250 – 259	12,976.37 - 13,212.72	550 – 559		
6,121.83 - 6,358.18.....	260 – 269	13,212.73 - 13,449.09	560 – 569		
6,358.19 - 6,594.54.....	270 – 279	13,449.10 - 13,685.45	570 – 579		
6,594.55 - 6,830.91.....	280 – 289	13,685.46 - 13,921.82	580 – 589		
6,830.92 - 7,067.27.....	290 – 299	13,921.83 - 14,158.18	590 – 599		
7,067.28 - 7,303.63.....	300 – 309	14,158.19 - 14,394.54	600 – 609		
7,303.64 - 7,540.00.....	310 – 319	14,394.55 - 14,630.91	610 – 619		
7,540.01 - 7,776.36.....	320 – 329	14,630.92 - 14,867.27	620 – 629		
7,776.37 - 8,012.72.....	330 – 339	14,867.28 - 15,103.63.....	630 – 639		
8,012.73 - 8,249.09.....	340 – 349	15,103.64 - 15,340.00.....	640 – 649		

Beneficios Semanales para el Seguro Estatal de Incapacidad (SDI) y el Permiso Familiar Pagado (PFL)

(Esta tabla refleja las sumas máximas de beneficios semanales, para solicitudes que comiencen el o después del 1ro. de enero de 2005.)

Esta tabla le muestra sus posibles beneficios semanales, en base al trimestre de mayores ingresos durante su período reglamentario.

Si su solicitud de beneficios empieza en: Su período reglamentario es de 12 meses, terminando el:

Enero, febrero o marzo30 de septiembre pasado
 Abril, mayo o junio.....31 de diciembre pasado
 Julio, agosto o septiembre 31 de marzo pasado
 Octubre, noviembre o diciembre.....30 de junio pasado

Usted debe considerar cuidadosamente cuándo comenzar su solicitud de beneficios. Si Ud. desea que su solicitud comience después de la fecha de su Incapacidad o de su permiso familiar para tener un período reglamentario diferente, no presente su solicitud antes de llamar a la oficina apropiada

Seguro Estatal de Incapacidad al 1-866-658-8846 o Permiso Familiar Pagado al 1-877-379-3819.

Salarios/Jornales del trimestre de mayores ingresos:	Cantidad semanal de beneficios:	Salarios/Jornales del trimestre de mayores ingresos:	Cantidad semanal de beneficios:	Salarios/Jornales del trimestre de mayores ingresos:	Cantidad semanal de beneficios:
\$75.00 - 1,374.99	\$50 – 59	8,249.10 - 8,485.45	350 – 359	15,340.01 - 15,576.36	650 – 659
1,375.00 - 1,624.99	60 – 69	8,485.46 - 8,721.82	360 – 369	15,576.37 - 15,812.72	660 – 669
1,625.00 - 1,867.27	70 – 79	8,721.83 - 8,958.18	370 – 379	15,812.73 - 16,049.09	670 – 679
1,867.28 - 2,103.63	80 – 89	8,958.19 - 9,194.54	380 – 389	16,049.10 - 16,285.45	680 – 689
2,103.64 - 2,340.00	90 – 99	9,194.55 - 9,430.91	390 – 399	16,285.46 - 16,521.82	690 – 699
2,340.01 - 2,576.36	100 – 109	9,430.92 - 9,667.27	400 – 409	16,521.83 - 16,758.18	700 – 709
2,576.37 - 2,812.72	110 – 119	9,667.28 - 9,903.63	410 – 419	16,758.19 - 16,994.54	710 – 719
2,812.73 - 3,049.09	120 – 129	9,903.64 - 10,140.00	420 – 429	16,994.55 - 17,230.91	720 – 729
3,049.10 - 3,285.45	130 – 139	10,140.01 - 10,376.36	430 – 439	17,230.92 - 17,467.27	730 – 739
3,285.46 - 3,521.82	140 – 149	10,376.37 - 10,612.72	440 – 449	17,467.28 - 17,703.63	740 – 749
3,521.83 - 3,758.18	150 – 159	10,612.73 - 10,849.09	450 – 459	17,703.64 - 17,940.00	750 – 759
3,758.19 - 3,994.54	160 – 169	10,849.10 - 11,085.45	460 – 469	17,940.01 - 18,176.36	760 – 769
3,994.55 - 4,230.91	170 – 179	11,085.46 - 11,321.82	470 – 479	18,176.37 - 18,412.72	770 – 779
4,230.92 - 4,467.27	180 – 189	11,321.83 - 11,558.18	480 – 489	18,412.73 - 18,649.09	780 – 789
4,467.28 - 4,703.63	190 – 199	11,558.19 - 11,794.54	490 – 499	18,649.10 - 18,885.45	790 – 799
4,703.64 - 4,940.00	200 – 209	11,794.55 - 12,030.91	500 – 509	18,885.46 - 19,121.82	800 – 809
4,940.01 - 5,176.36	210 – 219	12,030.92 - 12,267.27	510 – 519	19,121.83 - 19,358.18	810 – 819
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5,412.73 - 5,649.09	230 – 239	12,503.64 - 12,740.00	530 – 539	19,594.55 - 19,830.91	830 – 839
5,649.10 - 5,885.45	240 – 249	12,740.01 - 12,976.36	540 – 549	19,830.92 y más	840
5,885.46 - 6,121.82	250 – 259	12,976.37 - 13,212.72	550 – 559		
6,121.83 - 6,358.18	260 – 269	13,212.73 - 13,449.09	560 – 569		
6,358.19 - 6,594.54	270 – 279	13,449.10 - 13,685.45	570 – 579		
6,594.55 - 6,830.91	280 – 289	13,685.46 - 13,921.82	580 – 589		
6,830.92 - 7,067.27	290 – 299	13,921.83 - 14,158.18	590 – 599		
7,067.28 - 7,303.63	300 – 309	14,158.19 - 14,394.54	600 – 609		
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7,540.01 - 7,776.36	320 – 329	14,630.92 - 14,867.27	620 – 629		
7,776.37 - 8,012.72	330 – 339	14,867.28 - 15,103.63	630 – 639		
8,012.73 - 8,249.09	340 – 349	15,103.64 - 15,340.00	640 – 649		