

GUIDE TO RETIREMENT

Information included in this Guide to Retirement will help you begin the process of retiring from Multnomah County, but may not include all the information you need to make a decision about beginning your life as a retired individual. You may also want to consult with Social Security, PERS, your Deferred Compensation representative, a tax accountant, or a retirement planning consultant.

Multnomah County Retiree Benefits

Mailing Address: 501 SE Hawthorne, Suite 320 Portland, Oregon 97214 Physical Address: 501 SE Hawthorne, Suite 300 Interoffice Address: 503/4/Retiree Benefits Telephone: 503-988-5651 E-mail: <u>retiree.benefits@multco.us</u>

Website: www.multco.us/retirees



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Multnomah County Retirement Process and Options

Beginning the Process

When to Request the Multnomah County Retiree Benefits Enrollment Packet:

At least 30 days before your last working day, submit a <u>Retiree Benefits Information Request</u>. We will email a personalized insurance quote and enrollment forms to the email address you provide.

This request is confidential and is only shared with you. The Employee Benefits Office (EBO) does not discuss retirement with an employee's supervisor or other County employees. EBO may contact your Department Human Resources (HR) for employment information from your employee personnel file. EBO must research employment history to determine eligibility for a PERS pension, the medical subsidy, and the County retiree life insurance policy. You should review all the information in the packet, complete the enrollment forms, and submit them to EBO prior to separation from County employment.

You are responsible for notifying your HR department of your intent to retire.

Questions Regarding Multnomah County Benefits:

The Multnomah County Retiree Benefits Enrollment Packet will include an explanation of the County retiree health and life insurance benefits you are eligible to receive. After reviewing your packet, contact EBO at <u>retiree.benefits@multco.us</u> or 503-988-5651 with any further questions.

Your HR department can assist you with questions about vacation, sick time, and your final paycheck.

EBO may contact you if we have questions regarding your completed forms. We prefer to communicate with our retirees via email. Please provide a current personal email address on the enrollment form.

Confirmation of Benefits Enrollment:

After you have submitted your completed retiree enrollment forms, EBO will send you a confirmation letter, which will include your health insurance enrollment choice(s), premium cost(s), and start date. You may contact our office to discuss making enrollment changes prior to the date your health insurance becomes effective. Once your County retiree health insurance coverage begins, enrollment changes may only be made during an open enrollment period or if a qualifying event occurs during the health plan year.

Health Insurance Eligibility Requirements

The Multnomah County Retiree Health Insurance Program is available to eligible former County employees and their dependents. The Retiree Health Insurance Program includes medical and dental insurance coverage. Medical insurance coverage includes prescription and vision benefits on all plans except Moda Major Medical.

A retiring County employee has the option to elect medical and/or dental insurance coverage through Multnomah County's health plans if the following two requirements are met:

- The County employee must be eligible for retirement from the PERS pension upon their last day worked. Contact PERS Customer Service at 888-320-7377 for information on your PERS pension. "Eligibility for retirement" means:
 - Employee is vested in the PERS pension system, and
 - Employee is eligible to begin an early (reduced) or full PERS pension (for the County Retiree Health Insurance Program, employee does not need to submit a PERS pension application),

OR

- Employee is vested in the PERS pension system, and
- Employee has been approved for a PERS disability retirement.
- 2) At the time of retirement, the County employee must be in a benefit eligible position and:
 - Have continuous Multnomah County-sponsored health insurance coverage, or
 - Have opted out of active County employee medical and/or dental, or
 - Be enrolled in County-paid COBRA health coverage

Continuous County-sponsored Medical and/or Dental Insurance

Except as outlined in the "Deferring Enrollment" section below or when enrolled in County-paid COBRA health coverage, County retiree medical and/or dental insurance coverage must immediately begin at the time active County employee health insurance coverage ends. In the case of County-paid COBRA, retiree medical and/or dental insurance coverage must immediately begin at the time County-paid COBRA health coverage ends. If your medical/dental insurance coverage has lapsed, you will not be allowed to enroll in Multnomah County retiree benefits.

Termination of Active County Employee Health Insurance Coverage

A County retiree must immediately enroll in County retiree medical and/or dental insurance coverage at the time active County employee health insurance coverage ends.

Active employee health insurance coverage ends as follows .		
Last Day in Paid Status	Employee Health Insurance Ends	
1 st – 15 th of the month	End of the month	
16 th – 31 st of the month	End of the following month	

Active employee heal	h insurance coverage	ends as follows*:
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^{*}Information on when active County employee health insurance ends is located in Personnel Rule 4-20 (for non-represented County employees) and labor contracts (for represented employees).

Example:		
Last Day in Paid Status	Employee Health Insurance Ends	Retiree Health Insurance Must Begin
March 15	March 31	April 1
March 16	April 30	May 1

The health insurance provider may mail notification of health insurance coverage ending. This is notice that active County employee health insurance is ending; this notice is generated automatically even if an individual is enrolling in the County Retiree Health Insurance Program. The County retiree health insurance confirmation letter, sent by EBO, verifies enrollment in County Retiree Health Insurance coverage.

Deferring Enrollment

County Sponsored Health Insurance Enrollment:

A County retiree may defer health plan enrollment when County employment ends or opt out of County retiree health insurance and reenroll at a later date if the:

- retiree is enrolled as a dependent (through marriage or domestic partnership) under another active employee's Multnomah County health insurance coverage, or
- retiree is enrolled as a dependent (through marriage or domestic partnership) under another retiree's Multnomah County retiree health insurance coverage, or
- retiree is rehired by Multnomah County into a benefit eligible regular or limited duration appointment (LDA) position

Future participation in the County Retiree Health Insurance Program requires continuous and uninterrupted coverage under a County-sponsored health plan. Should there be a lapse in health insurance coverage, the County retiree will have forfeited the option to enroll in a County retiree health insurance plan.

A County retiree who has deferred their County retiree health plan enrollment may choose to terminate the deferral and enroll in a County retiree medical and/or dental plan at the annual open enrollment period or when an event occurs causing a loss of coverage under the other County health plan coverage. It is the responsibility of the retiree to contact EBO to activate County retiree medical and/or dental insurance coverage prior to their loss of other active employee/dependent/retiree health insurance coverage.

Other Group Health Insurance Enrollment:

Members of the following unions are allowed to leave coverage and opt back into the County retiree health plans as a one-time opportunity. The retiree is eligible to defer enrollment in the Multnomah County Retiree Health Insurance Program at the time of retirement or at a later date if enrolling in other group medical insurance. As of July 1, 2023, this includes:

- MCCDA Retirees who retire on or after **February 1, 2018**
- MCDSA/Civil Deputy Retirees who retire on or after October 15, 2018
- Local 88 & JCSS Retirees who retire on or after April 15, 2021
- Physicians Local 88-2 Retirees who retire on or after June 10, 2021
- FOPPO Retirees who retire on or after June 21, 2021
- IUOE Retirees who retire on or after **September 29, 2022**
- ONA Retirees who retire on or after **December 15, 2022**
- Pharmacists, Prosecuting Attorneys, Non-Represented, Elected Official & Elected Official Staff Retirees regardless of retirement date

The retiree must sign and return a Defer Health Insurance Enrollment Form to EBO when exercising this option. The retiree must remain continuously covered in an employer-sponsored group health insurance plan and demonstrate continuous coverage under another employer-sponsored group health plan and enroll for coverage to begin within sixty (60) calendar days of loss of other coverage or qualifying event.

Retirees that have opted out may re-enroll due to a loss of group health insurance coverage, due to a qualifying event, or at annual benefits open enrollment. The effective date of County coverage will be

the first day of the month on or after receipt of all enrollment forms (or January 1 if enrollment is during benefits annual open enrollment.) It is the responsibility of the retiree to contact EBO to activate County retiree medical and/or dental insurance coverage.

County Retiree Health Insurance Enrollment Decisions

County retiree health insurance includes the same medical/vision/prescription and dental plans provided to active County employees plus additional Medicare plan options. When enrolling in the County Retiree Health Insurance Program, eligible County retirees may enroll in the same level of coverage, or they may change their coverage at the time County retiree health insurance begins. Some details to consider:

Pick and Choose What You Need:

Medical and dental plans are elected independently of each other. You can choose to enroll in the medical plan, but not the dental, and vice versa. If you choose not to enroll in a medical plan, you will not be able to add medical coverage later. If you choose not to enroll in a dental plan, you will not be able to add dental coverage later.

Enroll in More Cost Affordable Coverage:

County retiree premiums are the same rates Kaiser and Moda establishes for active County employee health insurance. Up until retirement, County employees pay a much smaller portion of the monthly premium (the employee cost share) than required under the County Retiree Health Insurance Program. County retirees may be responsible for paying the full monthly premium unless they receive a reduction (medical subsidy) on the medical premium.

County retirees have the option at the time County retiree health insurance begins to:

- Enroll in a lower cost medical plan offered by the health insurance provider you had as an active County employee. Keep in mind that while the premiums are lower for these plans, the coverage may not be as comprehensive as your active County employee plan.
- Drop family member(s) from medical and/or dental insurance coverage. If family member(s) have other health insurance, double coverage may not be necessary. The County retiree may have the option to re-enroll eligible family member(s) in County retiree health insurance during an open enrollment period or if family member(s) lose coverage under a different group health insurance plan.

Medicare Eligibility:

If you are eligible for Medicare when you retire from Multnomah County, you will need to enroll in Medicare Parts A & B as of the 1st of the month following the end of your employee medical coverage. For example, if your employee medical coverage ends April 30th, your Medicare Parts A & B coverage will need to be active as of May 1st.

For those who are eligible for Medicare at retirement, the Employee Benefits Office will include a completed "Request for Employment Information" form (CMS-L564) in your retiree benefits packet. You will need to submit the CMS-L564 form along with your Medicare Part B application to Social Security Medicare to show proof of coverage since becoming entitled to Medicare to avoid the late enrollment penalty.

Multnomah County currently has a Moda Medicare Advantage (beginning January 1, 2024) and a Kaiser Senior Advantage plan available to retirees who are enrolled in Medicare Parts A & B. If you are non-represented, or your union permits participation in the County's retiree program after reaching Medicare age, you may choose to enroll in one of the Medicare Advantage plans at retirement or when you become

eligible for Medicare. Even if you choose to purchase your Medicare coverage elsewhere, you may continue your dental coverage through Multnomah County. There are other options for supplemental Medicare plans:

- PERS offers plans through PERS Health Insurance Program PHIP.
- Plans are available directly from health care providers.

For additional information about Medicare, see the "Additional Medicare Information" section below.

Retirement Residence Address:

Kaiser Permanente:

- To be eligible for Kaiser medical and/or dental coverage, the retiree must reside within the Kaiser Permanente Northwest service area at least 50% of the time. If you are unsure if you live within the northwest service area, please contact EBO for a current Kaiser Permanente NW service area zip code list.
- If a County retiree moves outside the Kaiser Permanente NW service area, the retiree must change to another medical and/or dental plan option. The retiree must contact EBO once residing in the new area to request an enrollment change form.
- Kaiser may end health insurance coverage if the retiree resides outside of the NW Service Area. If Kaiser terminates coverage, the participant forfeits their right to participate in the County Retiree Health Insurance Program, and Multnomah County will be unable to re-enroll the retiree or family members in County-sponsored health insurance coverage.

Willamette Dental:

- Other than the exceptions noted below, Willamette Dental only provides coverage for services obtained from a participating provider, which means Willamette Dental Group, P.C., and the dentists and denturists who are employees of Willamette Dental Group, P.C.
- Willamette Dental has offices with participating providers in Oregon, Washington and Idaho.
- Willamette Dental will provide benefits for covered services provided by a specialist or nonparticipating provider if:
 - A Willamette Dental participating provider refers the enrollee;
 - The covered services are specifically authorized by the Willamette Dental participating provider's referral; AND
 - The covered services are listed as covered in the plan documents and are not otherwise limited or excluded.
- Willamette Dental enrollees may seek treatment for a dental emergency from a non-participating provider if the enrollee is more than 50 miles from any participating provider office.

Moda/Delta Dental:

- You must use providers within Moda's network to receive the highest level of benefits under your plan for most services.
- For Oregon and SW Washington residents enrolled in Moda medical coverage, Moda has a very robust network called Connexus.
- Moda has contracted with Aetna to provide members enrolled in Moda medical coverage who live
 outside of the Moda service area with access to a national network of providers. Access to the
 national network is contingent on having an address on file that is outside of the Moda Oregon
 and SW Washington service area. Please reference the Moda Retiree National Network Brochure
 for details about accessing the Aetna national network.
- To be eligible for the Moda Medicare Advantage plan, the retiree must reside within Oregon at least 6 months of the calendar year.

- If a County Medicare retiree moves outside of Oregon, the retiree must change to another plan. The retiree must contact EBO once residing in the new area to request an enrollment change form.
- Moda may end Medicare Advantage insurance coverage if the retiree resides outside of Oregon for more than 6 months out of the calendar year. If Moda terminates coverage, the participant forfeits their right to participate in the County Retiree Health Insurance Program, and Multnomah County will be unable to re-enroll the retiree or family members in County-sponsored health insurance coverage.

Health Insurance Premiums and Payments

County retiree health insurance plan premiums are the same rates established for active County employee plans. However, unless you are eligible for a medical premium subsidy, retirees pay 100% of the premiums for their health coverage (see medical premium subsidy information below). Annual changes to active County employee health plans and rates also apply to retirees enrolled in County retiree health coverage. Rate sheets are located on the <u>Retiree website</u>.

County retirees pay their monthly premiums directly to Multnomah County. However:

- If the retiree is enrolled in the Kaiser Senior Advantage plan (Kaiser's Supplemental Medicare Plan), then the retiree will pay their medical premiums directly to Kaiser, but dental premiums will still be paid to Multnomah County.
- If the retiree is enrolled in the Moda Medicare Advantage plan, then the retiree will pay their Medicare Advantage premiums directly to Moda, but premiums for dental and non-Medicare medical coverage will still be paid to Multnomah County.

Payment by EFT to Multnomah County

County retirees are encouraged to pay their medical and dental insurance premiums by an automatic withdrawal of funds from a bank account (Electronic Fund Transfer [EFT]). The enrollment form will be included in your retiree packet. County retirees participating in automatic payments may change the account retiree premium funds are withdrawn from by submitting a new <u>EFT Authorization Form</u> to <u>retiree.benefits@multco.us</u>. This method of payment eases the burden of remembering to send payments on time and for the correct amount, thereby reducing the potential for cancellation due to non-payment of premiums. Multnomah County will automatically update the deduction amount if rates change.

EBO processes the withdrawal of funds on the 5th day of the month for the current month of health insurance coverage. If the 5th of the month is a holiday or weekend, the EFT withdrawal occurs on the next regular business day. <u>*Example*</u>: The 5th of the month is Sunday, EFT withdrawal occurs on the 6th (Monday).

Manual Payments

We do not encourage making payments by cash or check, since it results in greater processing times, lost payments, incorrect payment amounts, late payments and a higher rate of cancellations due to non-payment. However, if you choose to pay your premiums manually, payments must be made out to "Multnomah County" and mailed to Multnomah County Benefits, 501 SE Hawthorne Blvd Suite 320, Portland, OR 97214. Manual payments are due by the 20th of the month for the following month's premiums. For example, April's payment is due March 20th. Failure to pay your premium on time and for the correct amount may result in cancellation of your healthcare coverage.

Medical Premium Subsidy

Retirees may qualify for a reduction (medical subsidy) of the monthly medical insurance premium based on age and years of County service. Information on the age and years of County service requirements are located in <u>labor contracts</u> (for represented County employees) and in <u>Multnomah County Code (MCC)</u> <u>9.530</u> (for non-represented County employees). Labor contracts and MCC specify whether retirees are eligible for a 50% medical subsidy or a 100% medical subsidy (limited to specific ONA members), and whether the subsidy applies to the total monthly medical insurance premium or the County's contribution it makes for an active employee on the same plan and participation level.

The medical subsidy calculation is applied to the premium for the retiree and family member(s) enrolled in Multhomah County medical coverage up front, so participants only pay the remaining premium. The medical subsidy ends when the retiree becomes eligible for Medicare due to age or disability.

There is no subsidy for County retiree dental insurance.

Life Insurance – County Retiree Insurance Plan

Employees who, at the time of separation from the County, are eligible for PERS pension benefits, and have service that satisfies the years of County service requirement outlined in the Personnel Rules, Section 4-30-060 or their bargaining unit agreement, are enrolled in the County Retiree Life Insurance Program. (Note: Elected Officials and the District Attorney do not have the option of receiving benefits under the County Retiree Life Insurance Program – see Personnel Rules, Section 4-20-010.)

The retiree must complete a Retiree Life Insurance Beneficiary form and return it to EBO to designate the party(ies) who will receive the proceeds from this life insurance policy. We recommend that you keep a copy of the beneficiary form in your personal records.

	Years of service	Benefit
Union	requirement*	Amount
Corrections Deputy Association (MCCDA)	0	\$5 <i>,</i> 000
Deputy Sheriff's Association (MCDSA_Civil Deputies)	0	\$5,000
Oregon Nurses Association (ONA)	5	\$2,000
Employees Union Local 88-5, AFSCME AFL-CIO (Dentists Unit)	10	\$2,000
Federation of Oregon Parole and Probation Officers (FOPPO)	10	\$2,000
Employees Union Local 88-6, AFSCME AFL-CIO (Juvenile)	10	\$2,000
Employees Union Local 88, AFSCME AFL-CIO (Local 88)	10	\$2,000
Non-Represented/Management	10	\$2,000
Employees Union Local 88-2, AFSCME AFL-CIO (Physicians Unit)	10	\$2,000
Prosecuting Attorneys Association	10	\$2,000
International Brotherhood of Electrical Workers Local 48 AFL-CIO (IBEW)	15	\$2,000
International Union of Operating Engineers Local 701 AFL-CIO (IUOE)	15	\$2,000
International Union of Painters and Allied Trades District Council 5, AFL-		
CIO Local Union 1094 (Painters)	15	\$2,000

Here is a summary of the life insurance amounts and years of County service requirements:

* Part-time service pro-rated as half. Part-Time is less than 32 hours/week for 8 hr/day schedule and less than 30 hours/week for 10 hr/day schedule.

Dated 2/9/2024

Maintaining Your Retiree Coverage

Late or Bounced Payments

Medical and dental insurance premium payments made to Multnomah County must be processed by the County on the due date. These due dates meet the County's financial obligations to the medical and dental insurance carriers. If premiums are not received by the due date, EBO will send a letter notifying you that premiums were not received, and your coverage may end. If the current month of health insurance coverage ends with no receipt of payment, you will not have the option of reactivating your coverage with Multnomah County.

If Multnomah County processes your payment and receives notification from your bank of non-sufficient funds in the account (or closed bank account), Multnomah County will notify you that payment must be made by check to Multnomah County. (Note: For the EFT Payment Method, it is not possible to process an individual withdrawal.) A \$25.00 processing fee results when payments default; payment of this fee becomes the responsibility of the retiree. If Multnomah County does not receive payment and your health insurance coverage lapses, your participation in the County Retiree Health Insurance Program will end with no option to re-enroll at a later time.

When County retiree health insurance coverage lapses, Multhomah County will end health insurance coverage on the last day of the month for which full payment was received. If medical services were used after that date, you will become responsible for payment of these services directly to the health care provider.

Annual Open Enrollment

County health plan years run from January 1 through December 31. County retirees receive an annual open enrollment notification in the fourth quarter of each year. This is the period of time when County retirees may add or drop eligible family members or change medical and/or dental insurance plans. All open enrollment information and materials may be downloaded from our website.

Elected plan or enrollment changes are effective on January 1 of the following health plan year.

Premium changes are also announced in the open enrollment notification. Even if retirees do not make any plan or enrollment changes, the new premiums are effective on January 1.

Mid-Year Health Plan Changes

During the health plan year, retirees may have the option to make changes to their County Retiree Health Insurance coverage under the circumstances noted below. Unless otherwise stated, mid-year changes will be effective the first of the month following written notification of the health plan change and receipt of documentation of the qualifying event.

If the retiree pays premiums by an electronic funds transfer to the County, Multnomah County will automatically adjust the EFT withdrawals based on how the health insurance enrollment change impacts the monthly premium. If the retiree ends County retiree medical and dental insurance coverage, EBO will automatically end the EFT withdrawal from the retiree's bank account. If the retiree is enrolled in Kaiser Senior Advantage or Moda Medicare Advantage and pays medical insurance premiums directly

to Kaiser Permanente/Moda, the retiree must contact Kaiser/Moda in order to follow Kaiser's/Moda's procedure to end the automatic withdrawal.

County retirees may make health plan changes during the health plan year for the following reasons:

1) <u>Medicare Eligibility</u>: Depending on the retiree's union contract and date of initial retirement from Multnomah County, the retiree may enroll in the County's group Medicare Advantage plan when they become eligible for Medicare. An enrolled participant may also choose to drop County retiree medical and/or dental insurance coverage in order to purchase a supplemental Medicare plan through another provider. If the retiree ends medical and/or dental insurance coverage, it is not possible to re-enroll in coverage at a later time. If a County retiree drops health insurance coverage due to eligibility for Medicare, family members (who are not eligible for Medicare) may remain enrolled in County Retiree health insurance following the regulations under the Oregon Revised Statute 243.303.

Refer to the "Additional Medicare Information" section of this document for: a) additional information regarding ORS 243.303, and b) additional information on the County Retiree Health Insurance Program requirements.

- 2) <u>Medical and/or Dental Insurance Coverage Terminations</u>: A County retiree must submit advanced written notice to Multnomah County to end health insurance coverage. Multnomah County will process the termination to be effective no earlier than the first of the month after receipt of written notification from the County retiree. Notice may be submitted by filling out a Multnomah County enrollment change form or sending an email to <u>retiree.benefits@multco.us</u>. If the retiree ends medical and/or dental insurance coverage, it is not possible to re-enroll in coverage at a later time.
- <u>Changes in Family Status</u>: County health plans are organized under IRS Code Section 125. The IRS
 provides for family status changes mid-year based on specific criteria. Events qualifying for a change
 in health insurance coverage include:
 - A. Legal Marital Status: An event that changes a Participant's legal marital status, including marriage, death of spouse/domestic partner, divorce, or annulment, may create a change opportunity.
 - <u>Marriage or New Domestic Partnership</u>: You may add a spouse/domestic partner and their dependent child/ren. You have 60 days from the date of marriage, domestic partner registration (State or County), or satisfying the 6 month waiting period of shared residency to report the event, and coverage may be effective the first of the month following receipt of your paperwork. You may also change to a different health plan.
 - <u>Death of Spouse/Domestic Partner</u>: Your deceased spouse/domestic partner will be removed from coverage as of the first of the month following their date of death. You cannot change plans based on this event.
 - <u>Divorce</u>, <u>Annulment or End of Domestic Partnership</u>: You must remove your former spouse/domestic partner and any children who were eligible for coverage as a result of the marriage or domestic partnership from coverage. You cannot make any other change to your coverage. Your former spouse/domestic partner and any children who lose eligibility will be removed from coverage as of the first of the month following the date of divorce (signature date of Judge) or termination of domestic partnership. You must report this event promptly; any delay may cause a significant financial impact.

- B. **Number of Dependents**: An event that changes the number of a participant's dependents, including birth, adoption, placement for adoption, commencement or termination of adoption, or death of a dependent, may create a change opportunity.
 - <u>Birth, Adoption or Placement for Adoption</u>: You may add your new child to coverage and enroll your spouse/domestic partner if they were not already enrolled. You may also change to a different plan. You cannot add any other children who are eligible but not currently enrolled. If reported within 60 days of birth/adoption/placement, coverage for a new child will be effective retroactively to the birth/adoption/placement date.
 - <u>Termination of Adoption or Death of a Dependent</u>: You must remove the child from coverage. You cannot make any other change to your coverage. Regardless of when reported, coverage ends retroactively at the end of the month in which the event occurred. You must report this event promptly; any delay may cause a significant financial impact.
- C. Eligible Family Member Loss or Gain of Other Coverage: Any event that changes the employment status of an eligible spouse/domestic partner or dependent, including termination or commencement of employment, a strike or lockout, the commencement or return from an unpaid leave of absence, a change in worksite, and any other change in the employment status (e.g., a switch from salaried to hourly pay) of the spouse/domestic partner or dependent that results in any one of these individuals gaining or losing eligibility for coverage under an accident or health plan.
 - If your spouse/domestic partner or dependent gains eligibility for other health coverage You may remove from coverage any individual who has gained coverage under the other plan (your spouse/domestic partner and any dependents). You cannot make any other change to your coverage.
 - If your spouse/domestic partner or dependent loses eligibility for other health coverage You may add any individual who has lost coverage under the other plan (your spouse/domestic partner and any dependents) if they weren't already enrolled under your County retiree health coverage. You cannot make any other change to your coverage.
- D. **Dependent Child Status**: An event that causes a Participant's dependent child to satisfy or cease to satisfy the eligibility requirements for coverage due to attainment of age or other circumstances may create a change opportunity.
 - Your child turns age 26, or ceases to be disabled (if granted an extension due to disability) or loses eligibility for any other reason You must remove the child from your coverage. You cannot make any other coverage changes. Regardless of when reported, coverage ends retroactively at the end of the month in which the event occurred. You must report this event promptly; any delay may cause a significant financial impact.
- E. **Gain or Loss of Eligibility**: A Participant's dependent loses or gains eligibility for coverage in certain governmental programs.
 - Your dependent loses eligibility for coverage through Medicare, Medicaid or the Children's Health Insurance Program (CHIP.) You may add the dependent to your existing County retiree health plan coverage. You cannot make any other coverage changes.
 - Your dependent gains eligibility for coverage through Medicare, Medicaid or the Children's Health Insurance Program (CHIP.) You may remove the dependent from your County retiree health plan coverage. You cannot make any other coverage changes.
 - You or your dependent gains eligibility for a state premium assistance program. You may add the dependent to your existing County retiree health plan coverage. You cannot make any other coverage changes.

If your qualifying event occurred more than 60 days ago, you'll generally need to wait until Open Enrollment (October - November) to make changes to your coverage, which will take effect on January 1st of the following year.

If you have a qualifying life event or are unsure if your event qualifies, please don't hesitate to reach out to us at <u>retiree.benefits@multco.us</u> or 503-988-5651.

BENEFIT CHANGE PROCESS

You will need to complete a Benefit Change form. Contact Retiree Benefits at 503-988-5651 or visit <u>www.multco.us/retirees</u> to obtain a Benefit Change form. In addition, if you are:

- Enrolling a spouse/domestic partner who has not previously had coverage, you will need to complete the Affidavit of Marriage/Domestic Partnership.
- Terminating family member's coverage due to family member's obtaining employment and other coverage, you will need to provide proof of employment and proof of coverage.
- Enrolling family member due to a loss of other coverage, you will need to include proof of the loss of coverage.
- Enrolling due to an adoption/placement for adoption, you will need to include a copy of the adoption order or placement order for your adopted child.

Your completed Benefit Change form and documentation must be submitted to the County Retiree Benefits Administrator within 60 days of the Change in Status event. If a dependent is losing eligibility for coverage, paperwork may need to be received within 60 days to preserve COBRA rights. Unless otherwise specified in this guide, coverage will begin the first of the next month following receipt of your paperwork and any required documentation. We encourage retirees to submit changes promptly.

Change of Address and/or Health Insurance Eligibility Notification Requirement

Multhomah County retirees are responsible for promptly notifying the Employee Benefits Office of any changes in the retiree's current address (including changes in phone numbers and email address) and of any changes in retiree or dependent's eligibility for coverage. Multhomah County will automatically update address changes with the health insurance provider(s).

Returning to Multnomah County Employment

Multnomah County retirees may have the option of ending County employment and then returning to County employment in an "on call" or "temporary" position.

Limitations on Hours Worked

PERS may limit how many hours a retiree may work for a PERS employer. If the limitation on hours worked is exceeded, the retiree's PERS pension benefits may be impacted. If the retiree received PERS pension funds in a lump sum payment, there may be a limitation on how soon the retiree may return to work for a PERS employer.

Retirees should contact PERS directly (888-320-7377) to discuss offers of employment by PERS employers.

County Retiree's Paycheck

Retirees who retire from County service and are immediately offered an "on call" or "temporary" position at Multnomah County should notify Payroll prior to receiving their first paycheck. Payroll may need to manually adjust the first payroll check in order to prevent deductions which should only occur for regular status County employees.

County Retiree Health Insurance Program

If you are enrolled in the County Retiree Health Insurance Program, your hiring supervisor must execute a Memorandum of Understanding with you explaining your return to work status and whether County benefits may be available while working in this position.

Health Insurance benefits will continue through the County Retiree Health Insurance Program. Active County employee health insurance coverage will not be reinstated while employed as an "on call" or "temporary" employee.

The Memorandum of Understanding form is available on the <u>County website</u> or by contacting the Employee Benefits Office at 503-988-5651.

Regular Status or Limited Duration Appointment (LDA) Position Rehires

Retirees who are rehired into a benefit eligible Regular or Limited Duration Appointment (LDA) position will be transitioned off of the Retiree Benefits Program and back onto active employee benefits as of the first day of the month following the date of rehire. Active employee medical and dental insurance will replace retiree medical and dental insurance. County-paid active employee life insurance will replace retiree life insurance. When the retiree's Regular or LDA position ends, the retiree will have the opportunity to reenter into the retiree benefits program.

Fiscal Administrator / Power of Attorney

A County retiree may appoint a Fiscal Administrator or Attorney-in-Fact to provide assistance in handling their personal affairs. A County retiree must provide written notification to EBO if the retiree is authorizing another individual to act on the retiree's behalf regarding the administration of County retiree health insurance benefits. The retiree may contact Multnomah County to request an Authorization for Fiscal Administrator or Attorney-in-Fact form. By submitting this form to Multnomah County, the Fiscal Administrator or Attorney-in-Fact will immediately begin receiving County Retiree health insurance correspondence pertaining to the retiree. The County retiree may instead submit an executed Power of Attorney specifying agent has decision making authority regarding retiree's health and/or life insurance coverage including the payment of premiums.

Other Employee Benefits

Life Insurance – Active County Employee Insurance Plan

All benefit-eligible County employees receive an Active Employee Basic Life Insurance policy while employed at Multnomah County. Some County employees may also receive an Accidental Death & Dismemberment (AD&D) Insurance Policy. Multnomah County pays the monthly premiums on these policies.

County employees may also have the option of purchasing supplemental life insurance, which is additional life insurance coverage for the County employee and/or spouse/domestic partner. County employees pay the monthly premium for supplemental life insurance through a payroll deduction.

Life Insurance Election of Portability

When Multnomah County active employment ends, a Life Insurance Election of Portability Coverage form will be available from The Standard Insurance Company. The portability offer allows the individual to continue to purchase life insurance coverage from The Standard Insurance Company on an individual basis and at the County's group rates. The amount of coverage offered as portable on the form will include the Basic Life, Supplemental Life and/or AD&D insurance you may have carried as an active employee. If you are considering porting your life insurance, \$5,000 is the minimum amount allowed by Standard. You may be eligible to port up to the maximum value of your insurance. You may also have the option to purchase additional life insurance.

You will have 31 days from the date your active employee coverage ends to elect to port life insurance coverage. The portability election form must be submitted directly to The Standard Insurance Company along with the first monthly premium payment. For more information in regards to portability, please contact The Standard at 800-378-4668.

Life Insurance Portability Rates

Your rate will increase when you move to the next age bracket as of July 1st each year. There is a reduction in coverage after you turn age 70. See the policy for details.

Age Bracket	Rate for \$10,000 for Employee & Spouse/DP
To 29	\$.60
30 to 34	\$.80
35 to 39	\$.90
40 to 44	\$1.00
45 to 49	\$1.70
50 to 54	\$2.90
55 to 59	\$4.70
60 to 64	\$7.60
65 to 69	\$12.70
70+	\$20.60

HRA VEBA

The HRA VEBA plan is a tax-free health reimbursement arrangement (HRA) for public employees. If Multnomah County contributed to an HRA VEBA account on your behalf while working for Multnomah County, you will continue to have access to this account after your employment ends. Your VEBA account may be used to reimburse your out-of-pocket health care costs, such as retiree or COBRA health insurance premiums, co-pays, co-insurance, or other qualifying healthcare expense. Contact HRA VEBA or log on at <u>www.hraveba.org</u> for a full list of reimbursable expenses.

Individuals participating in the HRA VEBA Program have a reimbursement account – meaning, you incur health care expenses before you receive funds from your VEBA account.

For regular expenses, such as your monthly retiree health insurance premiums, you may have the option to set up an automatic reimbursement through HRA VEBA. With supporting documentation, you can set up your automatic reimbursement and make updates through your HRA VEBA online account or through the HRA VEBA mobile app. Contact the Retiree Benefits Office for a benefit statement that shows your current monthly rate as supporting documentation.

If you don't have enough funds in your HRA VEBA account to set up a monthly reimbursement, you can contact the Retiree Benefits Office to request a premium payment receipt. You can then include this receipt with your completed Claim form to the HRA VEBA vendor to be reimbursed for your premium payment.

By definition, HRA VEBA Programs are a health plan and are subject to Medicare's coordination of benefits rules. These rules affect Medicare-eligible individuals who are still working and covered under active employee health insurance. If you are <u>separated</u> from the employer that made contributions to your HRA VEBA account, contact HRA VEBA to confirm your separation date is on file and has been (or will be) reported to the Center for Medicaid and Medicare Services (CMS). This will insure your correct information is on file so that CMS will not delay your Medicare benefits.

For your account information, including balance, account number and forms, contact HRA VEBA at:

Telephone: 1-888-659-8828 Email: <u>customercare@hraveba.org</u> Address: PO Box 80587, Seattle, WA 98108

Long Term Care Insurance

If you are enrolled in Long Term Care Insurance (LTC) through UNUM, you may continue the coverage for yourself and your eligible dependents. If you decide to continue the policy, you must pay the premiums directly to UNUM. A form will be mailed to your home address shortly after your employment ends with Multnomah County. If you wish to obtain your LTC continuation application before your final day of employment, you may contact the Employee Benefits Office at employee.benefits@multco.us or 503-988-3477.

Public Employee Retirement System (PERS)

You must contact the Public Employees Retirement System (PERS) for complete information on your PERS pension.

- 1) Contact a PERS Customer Service representative at 888-320-7377.
- 2) Log on to the PERS website at <u>www.oregon.gov/PERS</u>. Download a "Pre-retirement Guide."
- 3) Attend a PERS retirement education session: https://www.oregon.gov/pers/mem/pages/education-sessions.aspx
- 4) You may email questions to PERS Member Services.

The explanation of Multnomah County's pension contribution arrangements with PERS is found in:

- 1) Personnel Rule 4-20 (Benefits).
- 2) Personnel Rule 4-30 (Paid Sick Leave).
- 3) Bargaining unit contracts.

Accrued (Unused) Sick Leave

The County Personnel Rules and bargaining contracts include information that Multnomah County has entered into an agreement with PERS to include unused sick leave in the PERS Tier One and Tier Two pension calculations as provided by Oregon Revised Statute 238.350. PERS includes the value of one-half of the accumulated unused sick leave in the Tier One and Tier Two pension calculations. When a PERS pension application is submitted, PERS automatically contacts Multnomah County's Finance Department for verification of an employee's unused leave and salary in order to calculate the monthly pension amount.

Ready to Retire??

Within 90 days of retirement, schedule a PERS *Retirement Application Assistance Session* to meet with a PERS staff member for a one-on-one review of your PERS application: https://www.oregon.gov/pers/mem/pages/retirement-application-assistance-sessions.aspx

Register at <u>https://pers.timetap.com/#/</u> or call 888-320-7377

Multnomah County 457(b) Deferred Compensation Program

If you have a deferred compensation account or would like to utilize any of the benefits below through Multnomah County's 457(b) Deferred Compensation Program, you may want to consider the following as you plan for retirement. Contact Multnomah County deferred comp at <u>deferred.comp@multco.us</u> or 503-988-0396 for additional details.

Final Paycheck Deferral:

Do you want to increase, decrease or make one final contribution to your deferred compensation account from your final paycheck?

Unused vacation leave is paid out on the final paycheck for most unions and non-represented employees. Some employees calculate the value of the vacation leave in order to contribute all or a portion of this payout to their 457(b) deferred compensation account (subject to annual contribution limits). If you want to defer an amount different from what you normally defer, you must turn in <u>new paperwork</u> to the deferred compensation team in County Payroll at least <u>30 days</u> before your final day of work.

Withdrawing Funds:

How soon will you need to access the funds in your account?

Funds are generally available 30 days after employment ends. In order to avoid delays in accessing your funds, contact your deferred compensation provider prior to leaving County employment to discuss the necessary forms. Completed forms are submitted directly to your deferred compensation provider.

NOTE: Being rehired as a Multnomah County employee after you've retired/terminated employment, may prohibit you from being eligible to withdraw your deferred comp funds.

Retirement Accounts:

Do you have other retirement accounts (including an account in the PERS Individual Account Program (IAP))?

You may have the option of rolling the PERS IAP or other qualified retirement plans into the County's 457(b) deferred compensation plan, a traditional IRA, or other qualified retirement plan. Your deferred compensation provider will discuss the option and tax implications of moving funds from your PERS IAP account to your deferred compensation account. They can assist in completing the required paperwork for both PERS and the provider.

Did you know you could use your deferred comp to purchase waiting or refunded time for PERS? It is necessary to contact your deferred comp provider at least one month PRIOR to your retirement date to discuss the option of transferring your funds directly from your Pre-Taxed account to PERS and complete both the PERS and provider paperwork.

3 Months Prior to Retirement:

It is recommended you contact Voya Financial Advisors about 3 months before you leave County employment in order to discuss your existing deferred compensation account. Voya provides notary service for their participants.

VOYA Financial Partners 503-937-0378 www.multco.us/finance/deferred-compensation

Resources

Additional Medicare Information

Medicare is medical insurance coverage provided by the Federal government through the Social Security Administration. Typically the initial opportunity to enroll in Medicare occurs due to one of the following events:

- <u>Eligibility based on age</u> triggered by approaching your 65th birthday. Medical eligibility occurs on the first of the month of the 65th birthday. If birth date is the first of the month, Medicare eligibility is the first of the preceding month.
- 2) <u>Eligibility due to disability</u> triggered for person of any age 24 months after award of Social Security Disability Income.
- 3) <u>Eligibility due to End-Stage Renal Disease</u> triggered for person of any age based on period of treatment for End-Stage Renal Disease.
- ALS (Lou Gehrig's Disease) triggered when you are diagnosed with Amyotrophic Lateral Sclerosis (ALS), commonly known as Lou Gehrig's disease, and you begin to receive Social Security Disability Insurance (SSDI) or a railroad disability annuity check.

You should contact the Social Security Administration at least three (3) months prior to your Medicare eligibility date to begin the application process. Applications may be completed on-line at <u>www.medicare.gov</u> or applications may be picked up at a local Social Security Administration Office.

If you or one of your covered dependents become eligible for Medicare, you/they may delay enrolling in Medicare Parts A, B and D for as long as you or your dependent is covered under an employer-sponsored medical insurance plan. Active County employee medical insurance meets the IRS definition of an employer-sponsored plan. If the individual is receiving a Social Security pension or Railroad retirement pension, they may be enrolled automatically in Medicare Part A when they become eligible for Medicare.

If a County employee or dependent enrolls in Medicare Parts A or B, employer-sponsored health insurance coverage will remain the primary medical insurance plan. The active County employee health insurance provider will process medical claims first; the remaining balance of the claim may then be submitted to Medicare for processing and payment.

Domestic Partners:

Federal regulations do not allow for a domestic partner enrolled as a dependent under active County employee medical insurance to delay enrollment in Medicare. If a domestic partner enrolls in Medicare, employer-sponsored health insurance coverage is the secondary medical insurance plan. Medicare will process the medical claim first, and then the remaining balance of the claim may be submitted to the active County employee health insurance provider for processing/payment. Domestic partners should enroll in Medicare Part B during the Initial Enrollment Period, which occurs at the time an individual becomes eligible for Medicare. For additional information contact Medicare at 1-800-633-4227 or www.medicare.gov.

Medicare Part A, B and D

Medicare coverage includes three (3) components:

<u>Medicare Part A</u>: Provides coverage for inpatient hospitalization expenses. There is usually no monthly premium to the individual for this coverage.

<u>Medicare Part B</u>: Provides coverage for outpatient care, including physician visits, x-ray/lab services, outpatient hospital care, etc. There is a monthly premium required to participate in the Medicare Part B program – premium is paid directly to CMS or collected from your monthly Social Security check.

<u>Medicare Part D</u>: Provides prescription drug coverage. The County health plans all provide prescription drug coverage that is at least as good as Medicare Part D. For that reason, you can elect to decline enrollment under Medicare Part D, while you are enrolled in a County-sponsored medical insurance plan, and not suffer any premium penalty for later enrollment under Medicare Part D. If you enroll in Medicare Part D in the future, the Medicare Part D documentation in the Reference Section of this Guide should be included with your Medicare Part D application in order to avoid paying a delayed enrollment penalty.

Since Medicare Parts A, B and D provide a minimum level of coverage, most people choose to enroll in a Medicare Advantage (Part C) or Supplemental (Medigap) plan through Multnomah County, PERS or directly with an insurance company.

Contact Information for Medicare

For questions, contact the Center for Medicaid and Medicare at 1-800-633-4277.

The Social Security Administration processes Medicare applications submitted online, in person or by mail. If you mail in the Medicare application to the Social Security Administration, you should contact your Social Security Administration Office to confirm they received and are processing the application.

Senior Health Insurance Benefits Assistance (SHIBA) Program

The Senior Health Insurance Benefits Assistance Program is a federally-funded program that provides free counseling to people transitioning onto Medicare. SHIBA uses trained volunteers to help people make health insurance decisions.

SHIBA volunteers can help retirees:

- Select a Medicare prescription drug plan.
- Find out if the retiree is receiving all possible benefits.
- Compare supplemental health insurance policies.
- Review retiree's medical bills and file appeals or insurance complaints.

Call SHIBA at 1-800-722-4134 to receive one-on-one counseling and assistance from state office staff or trained SHIBA volunteers in your area.

Enrolled in County Retiree Medical Insurance

The Benefits Office monitors County retirees and enrolled family members for Medicare eligibility based on age. The County contacts retiree plan participants by mail approximately six to eight weeks prior to the participant's 65th birthday to explain the County plan requirements and provide assistance with questions about Medicare enrollment. It is your responsibility to notify the County Retiree Benefits Office about Medicare eligibility if you or enrolled family member becomes eligible for Medicare prior to age 65.

Medical insurance plans under the County Retiree Health Insurance Program do not meet the IRS definition of an employer-sponsored plan. If an individual delays enrolling in Medicare, they may be required to pay a monthly penalty fee once Medicare is activated.

If an individual becomes eligible for Medicare due to receiving treatment for End-Stage Renal Disease, it is a County and Federal requirement they enroll in Medicare. If the retiree was approved for the County medical subsidy prior to enrolling in Medicare, the medical subsidy will continue until the date retiree would have become eligible for Medicare based on age.

Kaiser Senior Advantage

Kaiser Senior Advantage 10/20 is a Medicare Advantage plan available to Multhomah County Medicare eligible retirees. If you are enrolled in a Kaiser medical insurance plan when you become eligible for Medicare, Kaiser will require you to enroll in Medicare Parts A and B and the Kaiser Senior Advantage plan if you wish to remain covered with Multhomah County for your medical insurance.

To remain eligible for the Kaiser Senior Advantage plan under the County Retiree Health Insurance Program, you must reside inside the Kaiser Northwest Service Area at least 50% of the time. Kaiser will automatically dis-enroll Medicare eligible members who residing outside of the Northwest Service Area, and you will not have the option to re-enroll in medical coverage through Multnomah County.

County retirees who are enrolled in Kaiser Senior Advantage medical insurance must make their monthly medical insurance premium payments directly to Kaiser. Medical insurance premiums due to Kaiser may include the portion of the premium for non-Medicare eligible spouse/domestic partner and dependents enrolled in Kaiser medical insurance coverage. Kaiser will mail a Welcome Packet with payment method enrollment forms. The County retiree will continue to make dental insurance premium payment to Multnomah County.

Moda Medicare Advantage

Moda Medicare Advantage is a Medicare Advantage plan available to Multnomah County Medicare eligible retirees. If you are enrolled in a Moda medical insurance plan when you become eligible for Medicare, Moda will require you to enroll in Medicare Parts A and B. You can then choose to remain on your Non-Medicare plan as secondary to Medicare, or you may enroll in the Moda Medicare Advantage plan. If you choose to remain enrolled in Moda medical insurance after becoming eligible for Medicare, Moda will become secondary medical insurance to Medicare.

To remain eligible for the Moda Medicare Advantage plan under the County Retiree Health Insurance Program, you must reside inside Oregon at least 50% of the time. Moda will automatically dis-enroll Medicare eligible members who residing outside of Oregon, and you will not have the option to re-enroll in medical coverage through Multnomah County.

County retirees who are enrolled in the Moda Medicare Advantage plan must make their monthly Medicare Advantage insurance premium payments directly to Moda. Medicare Advantage premiums due to Moda will not include any portion of the premium for non-Medicare eligible spouse/domestic partner and dependents enrolled in Moda medical insurance coverage. Moda will mail a Welcome Packet with payment method enrollment forms. The County retiree will continue to make dental and non-Medicare medical insurance premium payment to Multnomah County.

Family Member(s) Continuation of Coverage (Oregon Revised Statute 243.303)

If a County retiree elects to discontinue County health insurance in order to purchase a Medicare plan through another health insurance provider at the time the retiree becomes Medicare eligible, the retiree's spouse/domestic partner (and any enrolled dependent children who have not turned age 18) may continue health insurance coverage through the County Retiree Health Insurance Program. Enrolled family members may receive County Retiree Health Insurance coverage as long as the marriage/domestic partnership remains in effect and until:

- 1. Spouse/domestic partner is eligible for Medicare.
- 2. Dependent children turn age 18.

You are required to provide written notification to Multnomah County when/if your marriage/domestic partnership ends or when your children are no longer eligible for coverage. At that time, participants will be offered an option to elect continuation of health insurance coverage through COBRA.

COBRA- Health Insurance and MERP

Employers are required by Federal law to mail COBRA notices to individuals when active employee health insurance coverage ends. COBRA notices provide for: 1) continuation of an existing Medical Expense Reimbursement Account (MERP), and 2) continuation of health insurance coverage.

Former County employees may continue existing MERP accounts for the remainder of the current plan year. MERP contributions through COBRA are post-tax contributions.

Former County employees may elect to continue health insurance coverage through COBRA for up to 18 months. Eligible family members may have the option to continue COBRA for up to 36 months; eligible spouse/domestic partners age 55+ may have the option to continue health insurance coverage up to age 65 or eligibility for Medicare (whichever occurs first). Continuation of health insurance coverage is offered to eligible family members if a qualifying event occurs (loss of health insurance due to end of employment, divorce, end of domestic partnership, death of spouse/domestic partner).

Health insurance coverage through COBRA includes the same plans offered to active County employees. The cost for coverage is the full monthly medical and/or dental insurance premium plus a two percent (2%) administration fee.

It is not necessary to continue health insurance coverage under COBRA if a County retiree is enrolling in County Retiree Health Insurance coverage. County retirees in this category may disregard the COBRA notification unless they are interested in continuing their existing MERP participation for the remainder of the current plan year.

Retirement Checklist

This checklist is intended to serve as a general guide for employees who are retiring from Multnomah County. Please note that this is not an exhaustive list and not all items on this checklist may pertain to your situation. If you have questions regarding retiree health or life insurance, contact Retiree Benefits in the Employee Benefits Office at 503-988-5651 or retiree.benefits@multco.us.

PERS Retirement Pension

www.oregon.gov/PERS/

- When you are more than 3 years from PERS retirement, attend an *Introduction to PERS Retirement* (Tier 1 & 2 members) or *All About OPSRP* (OPSRP members) presentation
- When you are within 3 years of PERS retirement:
 - Attend a *Retirement Readiness* (Tier 1 & 2 members) or *All About OPSRP* (OPSRP members) presentation, and
 - Read the <u>PERS</u> or <u>OPSRP</u> Preretirement Guide
- When you are within 90 days of PERS retirement, schedule a <u>Retirement Application Assistance</u> <u>Session</u> to meet with PERS staff for a one-on-one review of your PERS retirement application

Deferred Compensation Account

https://multnomah.beready2retire.com/

- When you are within 3 months of retirement, contact a Deferred Compensation representative to discuss your existing deferred compensation account
- When you are within 1 month of retirement, Contact a Deferred Comp representative to use Deferred Comp funds to purchase PERS waiting time or forfeited credit, if applicable
- If you are electing to make a final contribution to your existing deferred compensation account with your vacation leave payout, submit the required paperwork to <u>deferred.comp@multco.us</u> at least 30 days prior to separating from County service

Separation from Multnomah County Employment

- Contact your Human Resources Department for instruction on the process your department follows when employment with Multnomah County ends, including providing notice of separation from County employment
- Prior to your employment ending, make arrangements with your supervisor and/or HR Department on how to obtain your final paycheck
- Contact Payroll at 503-988-3309 or at central.payroll@multco.us with questions regarding final paycheck and what happens to unused accrued leave (vacation, comp time, holiday and personal holiday

County Retiree Health and/or Life Insurance

- Read the Multnomah County Guide to Retirement
- o At least 30 days before your last working day, submit a Retiree Benefits Information Request
- Before your last working day, submit all required retiree health and/or life insurance enrollment forms to <u>retiree.benefits@multco.us</u>

Medicare

https://www.ssa.gov/medicare

If you delayed enrolling in Medicare Parts A and/or B due to continuing County employment and active County employee medical insurance coverage:

Dated 2/9/2024

Retirement Checklist

- Within 90 days of your retirement date, contact <u>retiree.benefits@multco.us</u> to ask for a completed "Request for Employment Information" form
- Within 90 days of your Medicare coverage effective date, submit a <u>Medicare application</u> and the completed "Request for Employment Information" form to the Social Security Administration
- Schedule an appointment with a <u>Senior Health Insurance Benefits Assistance</u> if you need additional assistance with Medicare

If you are retiring when you are first becoming eligible for Medicare:

- Within 90 days of your Medicare coverage effective date, submit a <u>Medicare application</u> to the Social Security Administration
- Schedule an appointment with a <u>Senior Health Insurance Benefits Assistance</u> if you need additional assistance with Medicare

County-Sponsored Life Insurance

 If you are applying to continue your employee and/or supplemental life insurance, return the completed portability form to the Standard Insurance within 31 days from separation of County employment

HRA VEBA

https://www.hraveba.org/

- If you are setting up an automatic reimbursement of retiree insurance premiums through your HRA VEBA account:
 - Request a benefit statement that shows your current monthly rate as supporting documentation from <u>retiree.benefits@multco.us</u> (or whoever will administer your retiree health coverage), and
 - Set up your automatic reimbursement through your HRA VEBA online account or through the HRA VEBA mobile app
- Contact HRA VEBA at 1-888-659-8828 for additional information about accessing your HRA VEBA account after retirement

Long Term Care Insurance

 If you are enrolled in Long Term Care Insurance (LTC) through UNUM, submit your completed LTC continuation application to UNUM within 30 days after separation of Multnomah County Employement

Social Security Retirement Income

https://www.ssa.gov/

 If you will be initiating your Social Security retirement income benefits, submit a <u>Social Security</u> <u>Benefits</u> application

Rehired to Multnomah County Employment

- If you will return to County employment as an "on call" or "temporary" employee, you will need to complete the appropriate <u>Return to Work Memorandum of Understanding</u> document with your hiring department HR
- If you will return to County employment as a "Regular" or "Limited Duration Assignment" employee, contact <u>retiree.benefits@multco.us</u> to discuss the impacts to your retiree insurance coverage

Dated 2/9/2024

Benefit Vendor Contact Information

Multnomah County Retiree Benefits

Walk-Ins: Multnomah Building, Room 300Mailing:501 SE Hawthorne Blvd, Suite 320
Portland, Oregon 97214Phone:(503) 988-5651Fax:(503) 988-6257Email:retiree.benefits@multco.us

Kaiser Permanente

Medical and Dental Insurance Address: 500 NE Multnomah Street, Suite 100 Portland, OR 97232 Phone: (800) 813-2000 http://www.kp.org/

Moda Medical & Delta Dental

Medical and Dental Insurance Address: 601 SW Second Avenue Portland, OR 97204 Phone: (888) 445-7413 (Medical) (888) 447-8194 (Dental) http://www.deltadental.com/

PacificSource Administrators

COBRA and Flexible Spending Account (FSA) Address: PO Box 2797 Portland, OR 97208 Phone: (877) 355-2760 (COBRA) (800) 422-7038 (FSA) https://pacificsource.com/members/fsa-hra

The Standard Insurance Company

Life and Disability Insurance Address: 1100 SW Sixth Avenue Portland, OR 97204 Phone: (800) 368-2859 (Disability) (800) 628-8600 (Life and AD&D) https://www.standard.com/

UNUM Provident Corporation

Long Term Care (LTC) Insurance Address: 2211 Congress Street Portland, ME 04122 Phone: (800) 227-4165 Fax: (207) 542-7606 email: <u>GLTCtask@unum.com</u> http://unumprovident.com/

<u>Welldyne</u>

Moda Pharmacy Benefit Address: PO Box 90369 Lakeland, FL 33804 Phone: (888) 479-2000 https://welldyne.com/

VSP Vision Care

Moda Vision Benefit Address: PO Box 495918 Cincinnati, OH 45249 Phone: (800) 887-7195 www.vsp.com

Willamette Dental Group

Dental Insurance Address: 6950 NE Campus Way Hillsboro, OR 97124 Phone: (855) 433-6825 https://willamettedental.com/

Gallagher, Inc.

HRA VEBA Address: PO Box 4389 Clinton, IA 52733 Phone: (888) 659-8828 www.hraveba.org

CompPsych

Employee Assistance Program (EAP) Address: 455 N Cityfront Plaza Drive Chicago, IL 60611 Phone: (866) 483-1493 https://www.guidanceresources.com/

VOYA Financial

457(b) Deferred Compensation Plan Address: 5331 S. Macadam Avenue, Suite 207 Portland, OR 97239 Phone: (503) 937-0378 https://multnomah.beready2retire.com/

Oregon PERS Public Services

PERS or OPSRP Retirement Plan Address: PO Box 23700 Tigard, OR 97281-3700 Phone: (503) 598-PERS (7377) http://www.pers.state.or/