# Notification of Death



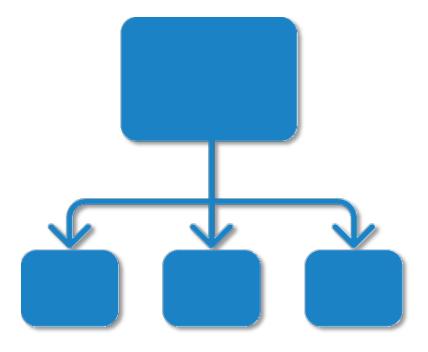


### Today's Topics

- Benefits Overview
- Beneficiaries
- Benefits Payable
- Notifying KPERS through the EWP
- Retiree Passing



### Benefits Overview





### Publications







### When a member reports an illness, what are their options?

- Disability
- Retirement
- Accelerated Life Insurance
- Accidental Death & Dismemberment



### Disability

- Allows member to **continue** to earn retirement benefits.
- Still covered by Basic Group Life insurance (BGLI) and can continue Optional Group Life Insurance (OGLI) if offered.
- **180**-day waiting period.
- Notices of Disability are reported on EWP.
- Members can be on the payroll and receive wages but cannot be working.



First, Last M.I. 000-00-0000 10/26/1993 <u>Report Death</u> <u>Report Disability</u> Member Type



### Retirement Eligibility

#### KPERS 1

- Age 65 with 1 year
- Age 62 with 10 years
- Any age when **age** & **years** of service equal **85 points**

### KPERS 2 and 3

- Age 65 with 5 years
- Age 60 with 30 years

All members can retire at age 55 with 10 years of service. Benefits will be reduced.



- Receives \$4,000 death benefit.
- Can **port/convert** (BGLI) and (OGLI).
- If member chooses not to continue and passes within **60 days** of last day on payroll, life insurance is still payable.



### Accelerated Life Insurance

- If member diagnosed as terminally ill with a life expectancy of **24 months** or less.
- Can accelerate **up to 100%** of BGLI and OGLI.
- If member **returns to work**, any coverage not paid stays in effect as long as the member is active and continues paying premiums.
- Complete **application** and fax to The Standard.
- Application can be found under <u>Forms and Publications</u> on the KPERS website.
- Member can continue coverage for Spouse and Dependent child coverage.

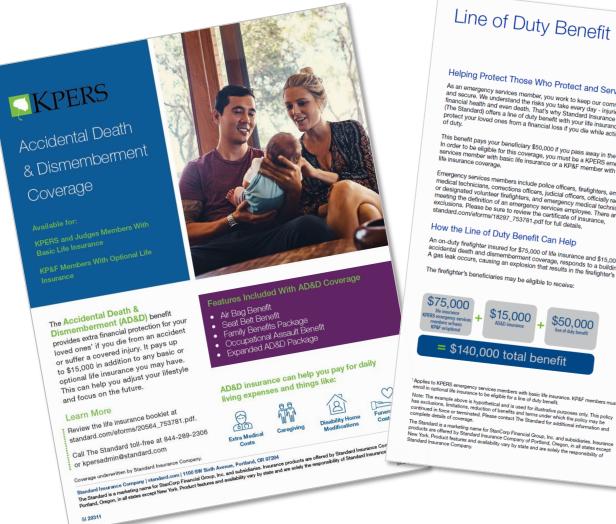


### Accidental Death & Dismemberment

Tł	neS	Standard <sup>®</sup>	<b>KPERS</b>	
5tan 344-	dard In 289-230	surance Company 6 Tel 971-321-5033 Fax son, Ste 1110, Topeka, KS 66612	Accelerated Benefit Instructions	
Ple	ease I	Read Carefully		
1.	ben you	ne receipt of an Accelerated Benefit may be taxable and may affect your eligibility for Medicaid or other government nefits or entitlements. If you meet the definition of "terminally ill individual" in the Internal Revenue Code Section 101, ur accelerated benefit may be non-taxable. You should consult your personal tax advisor and/or legal advisor before you ply for an Accelerated Benefit.		
2.	insu	Your Group Policy provides a benefit which allows you to receive an early payment of a portion of your group life insurance during your lifetime, if you meet certain requirements. Please consult the Accelerated Benefit provision of your certificate for details.		
3.		o be eligible for this benefit, you must have a Qualifying Medical Condition as defined in the group policy. If you have uestions regarding the Qualifying Medical Conditions, please contact your local office.		
4.	If yo	you are eligible for this benefit, you may apply to receive part of your Life Insurance Benefit as an accelerated benefit.		
5.	The	e minimum Accelerated Benefit is \$5,000 or 10% of your group life insurance, whichever is greater.		
6. In order to apply for the benefit, you must submit a completed claim packet. Your of All questions on these forms are important. Please answer them to the best of your you, or the information is unavailable, please indicate that in the space provided.			f your ability. If a section does not apply to	
Гhe	e three	e forms in your claim packet are:		
	1.	Employee's Statement/Payment Consent		
		You must fill out this Statement completely. If not enough space is giv sheet. Remember to sign and date the Statement. An unsigned Stateme		
	2.	Authorization to Obtain and Release Information		
		Please sign and date this form and attach it to the Employee's Statem Standard Insurance Company to obtain the information necessary to o The Authorization also allows us to release this information to othe Authorization. You will receive a copy of this Authorization upon your re	determine your eligibility for this benefit. er parties for purposes specified on the	
	3.	Attending Physician's Statement		
		<ul> <li>Part A should be completed by you.</li> <li>Part B should be completed by your physician. If you have seen mor statement should be completed by each physician. Your physician(s) to The Standard.</li> </ul>		



### Accidental Death & Dismemberment







### Accidental Death & Dismemberment

- Can pay up to \$15,000 in addition to any basic or optional life insurance coverage.
- Employers are not responsible for collecting information or reporting the manner of death being an accident.
- This is separate from a service-connected death.
- The Standard will be collecting information directly from the beneficiaries. All questions or concerns should be directed to contacting The Standard.

### Beneficiaries





### Are Beneficiaries Up-To-Date?

- Member Web Portal
- Annual Statement
- Employer Web Portal

Beneficiaries			
<b>Retirement Benefits</b>		Life Insurance	
Primary	Contingent	Primary	Contingent
Jane Sunflower	John Sunflower Jr Suzy Sunflower	Jane Sunflower	John Sunflower Jr



Make sure the member understands the difference between the two types of beneficiaries.

- **Primary Beneficiary** the first person(s) in line to receive accumulated retirement account balance and/or life insurance.
- Contingent Beneficiary will receive accumulated account balance and/or life insurance if the primary beneficiary is no longer living (with proof of original death certificate).



### Understanding the Beneficiary Form

- Listing a **minor child** as Beneficiary will need Letters of Conservatorship if either the account balance or insurance benefits are greater than \$10,000.
- Member may designate **different** beneficiaries for retirement account balance vs life insurance.
- BGLI and OGLI must have the **same** beneficiary listed.



- When beneficiaries are updated, a **letter** will be mailed to the employer and should be **forwarded** to members.
- Members should check the letter for **accuracy**.
- A **primary** beneficiary should be listed for **each** benefit
  - Retirement
  - Insurance



# If form is not completed correctly, benefits will be paid according to the **line of descendancy**.

- Surviving spouse
- Dependent children
- Dependent Parents
- Nondependent children
- Nondependent parents
- Estate



### Benefits Payable





- Return of Contributions **and** Interest
  - **Surviving spouse** may be entitled to monthly retirement benefits
- Basic Group Life Insurance
- Optional Group Life Insurance



- Final payroll must be **submitted** to KPERS before letters can be mailed to the beneficiary(ies).
- Contributions may be **paid directly** to the beneficiary or **rolled** over to a qualified account.



- If spouse is **sole primary beneficiary** for retirement benefit, spouse will have the option to receive monthly benefit.
- Monthly benefits begin when the deceased would have been eligible for retirement:
  - KPERS 1 & 2 must have **10** years of service and age **55**
  - KPERS 3 must have **5** years of service and age **65**
- Cannot roll over the balance into their own KPERS plan.



### Basic Group Life Insurance

- Active KPERS members covered at employer's expense.
- Covered at **150%** of annual salary.
- KPERS looks at whichever is **highest**:
  - Employee's current annual rate of pay/hourly or salary.
  - Employee's previous 12 months of pay prior to month of death.

RENEEITS	<b>KPERS</b>	
<b>BENEFITS</b> at a glance	For KPERS 1 Members Hired Before July 2009	
Throughout your career, you make contributions to KPERS. We invest the money and pay you interest. Your employer also helps fund the System. When you retire, KPERS pays you a guaranteed monthly benefit for life. And while you're still working, you have life insurance and disability benefits. <b>RETIREMENT BENEFITS</b>	KPERS Won't Be Enough KPERS and Social Security won't be enoug for a sound retirement. You need to save on your own, too. The easiest way to save is through a tax-sheltered employer plan like a 457(b) deferred compensation or a 403(b) annuity plan. Check with your	
You contribute 6% of your salary from each paycheck. It's automatic and pretax. Your contributions earn 4% interest annually, unless you became a member before July 1993. If you leave employment you can withdraw your account balance, but you can't take a loan from your account while you are still working.	employer about options where you work. The State of Kansas and many local public employers offer KPERS 457, a deferred com pensation savings plan. Contributions are automatically deducted from your pay, and	
Vesting After five years of service you are guaranteed a retirement benefit, even if you leave employment. This is called "vesting" your benefit.	you can get started with as little as \$12 per pay period. Visit kpers457.org for more info	
Retirement Benefits Your benefits are based on a formula with three parts: final average salary, multiplier and years of service.	However you choose to save, the importan thing is to start. The sooner you begin, the more time your money has to grow. Sockin away even a sliver of your salary could	
1     For most members, final average salary is an average of your three highest years.       2     The multiplier is set by statute.       • Years before 2014     1.75%       • Years 2014+     1.85%	have a big impact on your retirement. Most financial experts suggest replacing a least 80% of your income for retirement.	
<ul> <li>You automatically earn service credit for the years you work in a covered position.</li> <li>How Your Benefit is Calculated</li> <li>FAS × multiplier × years of service = annual benefit Example: \$30,000 × 1.75% × 30 = \$15,750 annual benefit</li> </ul>	Pennal your retirement income	
	Increasing healthcare costs and living long may mean you need to save even more.	



Additional coverage beyond Basic Life Insurance.

- Employer **must affiliate** to offer optional life.
- Coverage is available for the **member**, **spouse**, **and/or child**.
- Member decides the amount of coverage.
- Member pays premium through payroll deduction.



### Optional Group Life Insuance

	Enrollment Period	Employee	Spouse	Child
Anytime Coverage health questions	n/a	Up to \$400,000	Up to \$100,000	Only available with new hire, open enrollment or family status change
	New employee (within 31 days)	Up to \$250,000	Up to \$25,000	\$10,000 \$20,000
uaranteed Coverage health questions	Family Status Change (within 31 days)	New or increase up to \$50,000 (\$250,000 max)	New or increase up to \$25,000 (\$25,000 max)	\$10,000 \$20,000
- D D H O H O H O	Annual Open Enrollment	New or increase up to \$50,000 (\$250,000 max)	New or increase up to \$25,000 (\$25,000 max)	\$10,000 \$20,000



#### Paper Forms are needed for Enrollment of:

- New Members
- Family Status Change
- Changing coverage reduction or increase
- Kansas Board of Regents members



### Spouse or Child Optional Group Life Claims

- Contact KPERS directly.
- What will be needed to complete the claim:

#### **Spousal Coverage**

- Name and social security number
- Death certificate

### **Child Coverage**

- Name and social security number
- Copy of birth certificate
- Death certificate

### Notifying KPERS





Need an obituary or accident report to report the members passing...

• Fiction

Need a death certificate to report the members passing...

• Fiction

Need to know the amount of the final paycheck to report the members passing...

• Fiction



- Check beneficiaries on file in the **Employer Web Portal**.
- Get as much contact information from **family members** as possible.
  - Best contact person
  - Address
  - Phone number



### Do NOT Enter an End Date

### **DO NOT** put in an **End Date**!



Start Date	End Date
06/15/1998	<u>Enter Date</u>



### What to do if end date was entered

- Send an email to enrollment\_end\_dates@kpers.org.
- Provide a brief explanation that member passed and need end date removed to report the passing through EWP.

If member passed within 60 days of their last day on payroll, call KPERS to report passing. <u>**DO NOT**</u> request to have the end date removed. Someone from the Active Member Death team will reach out to you directly with next steps.



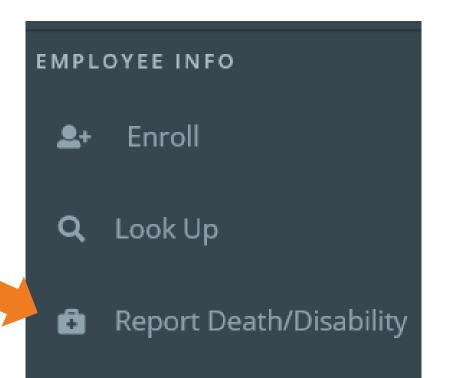
## Report Death in Employee Record in the Employer Web Portal.

Employee Info

First, Last M.I. 000-00-0000 10/26/1993 <u>Report Death</u> <u>Report Disability</u> Member Type



#### Report Death in the Employee Info section located on the Homepage in the Employer Web Portal.





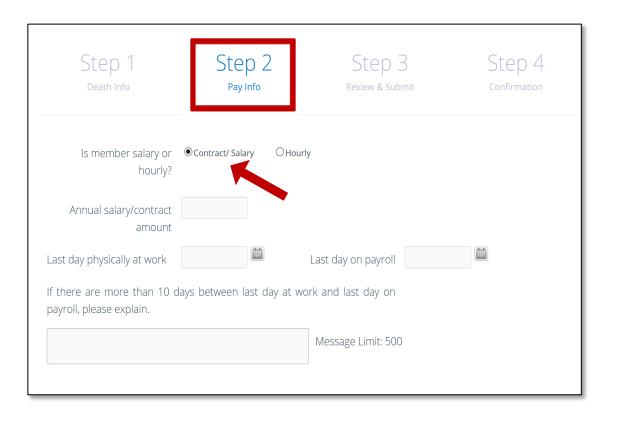
### Report Death

- Enter beneficiary's **mailing address**.
- Enter date of death.
- If agency determines death is **job-related**, please explain.

Step 1 Death Info	Step 2 Pay Info	Step 3 Review & Submit	Step 4 confirmation
	212 Disney Way	City Topeka State Kansas 💟	
Date of death 0	1/25/2021		
If death is job-related, please exp		Message Limit: 500	
		Next	

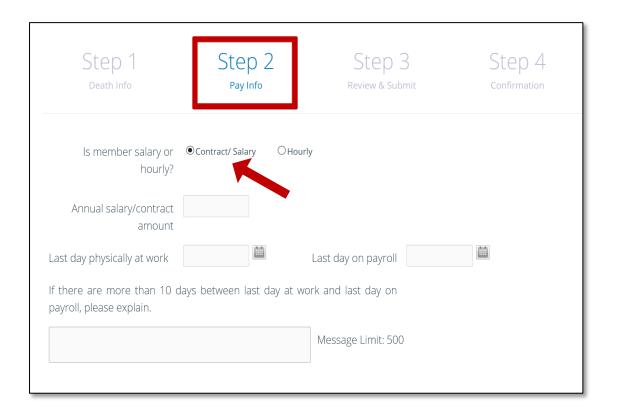


- If Contract/Salary is used, include **current** salary only.
- Supplemental pay should be included for those on contract.
- Do **not** include add-on pay, overtime pay, etc.
- Comments may be useful but aren't required.





- If Hourly is used, include current hourly rate only.
- List expected hours for the position.
- Do **not** include add-on pay, overtime pay, etc.





#### Employee works 1200 hours per year X \$12.35 per hour = CAR

- KPERS compares the reported CAR to the previous 12 months to calculate Basic Life Insurance. If difference between CAR and previous 12 months is greater than \$2,500 KPERS will contact the agency for additional information.
- Differences could be caused by overtime, additional duties, interim positions, bonuses etc.
- KPERS staff may be contacting the agency with questions about the compensation to ensure KPERS is paying the family the correct amount.



#### Non- School Example:

CAR is \$60,000 and previous 12 months pay is \$75,000. Agency must explain the difference in pay of \$15,000. Differences could be caused by overtime (please provide dollar amount), additional duties, interim positions, longevity, bonuses (please provide bonus type and dollar amount), etc.

BGLI \$75,000 X 150% = \$112,500



#### School Example:

CAR is \$45,000 and previous 12 months pay is \$50,000. Agency must explain the difference in pay of \$5,000. The decedent was a teacher and coach, however when reporting the CAR agency did not include supplemental contract of \$5,000 for coaching job.

BGLI \$50,000 X 150% = \$75,000



#### Review data entry for accuracy and submit.

Step 1 Death Info		Step 2 Pay Info		Step 3 Review & Submit	Step 4 Confirmation
Death Info - Review					
Name	FirstName_147955 LastName_147955	SSN	000-14-7955		
Date of birth	11/18/1953	Plan	KPERS		
Mailing address	1529 SW Topek	City	Topeka		
State	Kansas	Zip Code	66603		
Date of death	03/01/2021				
Was death in the course of the employee	e performing duties for your employer?				
No					
Reason, if death is job related					
Pay Info - Review					
	Position Type Contract/ Salary				
Contract/Salary Amount	\$50,000.00				
Last day physically at work	02/17/2021	Last day on payroll		02/17/2021	
Please type your name as signature					
	I	Back	Submit		



## Confirm

- KPERS acknowledges receipt of notification through EWP Message Board.
- No need to contact KPERS.
- Can download PDF for confirmation of completion
- Remember: **DO NOT** put in an **End Date!**

Step 1 Death Info		Step 2 Pay Info		Step 3 Review & Submit	Step 4 Confirmation
Name	FirstName_147955 LastName_147955	SSN	000-14-7955		
Date of birth	11/18/1953	Plan	KPERS		
Mailing address	1529 SW Topek	City	Topeka		
State	Kansas	Zip Code	66603		
Date of death	03/01/2021				
Was death in the course of the employee	e performing duties for your employer?				
No					
Reason, if death is job related					
Position Type	Contract/ Salary				
Contract/Salary Amount	\$50,000.00				
Last day physically at work	02/17/2021	Last day on payroll	02/17/2021		
Submitted by	P. Ashley	Submitted date	03/17/2021		
Employer name	Agn_483	Employer #	1019		
Download Report (PDF)					
Return to Dashboard					
Upload Support Document					



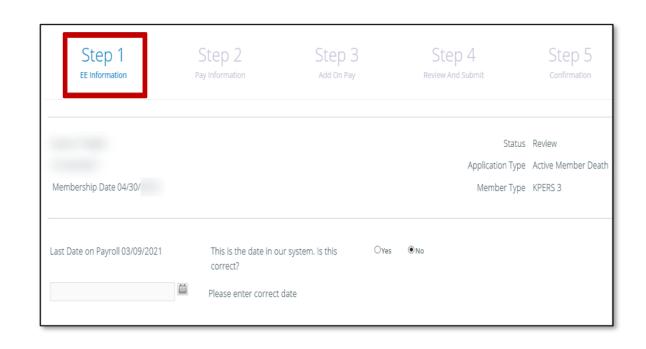
After the application has been verified by KPERS, a certification will become available.

To Do
<ul> <li>Active Death Certification (1)</li> </ul>
<ul> <li>OGLI REPORT (1)</li> </ul>
<ul> <li>Pay Reports (4)</li> </ul>



#### Certification – Non-School

- Verify last day on payroll is last day compensation earned or date of death.
- If member passed on weekend and does not earn wages, report last day on payroll as the Friday prior to death.





### Certification – School

- Verify last day on payroll is last day compensation is earned.
  - Licensed employees: last day of the contract
  - Classified employees: last day earning compensation
- School questions **must** be answered.

Last Day on Contract          Last Day on Contract         Last Date on Payroll 01/31/2021         This is the date in our system. Is this         ONo         :orrect?	
Does member work 9,10,12 months?	
O9 O10 O12	
Is this member paid in 9, 10, or 12 monthly installments?	
O9 O10 O12	
How was the employee paid in previous school year?	
O9 O10 O12	
Has member received all money due within one pay period of the last day on payroll? OYes ONo	



## Pay Information

Step 1 EE Information	Step 2 Pay Information	Step 3 Add On Pay	Step 4 Review And Submit	Step 5 Confirmation
				Review Active Member Death KPERS 1
Last Date on Payroll 11/21	/2020 This is the date ir this correct?	n our system. Is OY	es ONo	
		Next		



## Pay Information

Step 1 EE Information				· · · ·	Step 3 Add On Pay		Step 4 Review And Submit		Step 5 confirmation	
Dtl ID	Рау	Date	Gross Salary	Adjustment to Gross	KPERS Wages	Member Reported Contributions	Employee Contributions	Employer Contributions	Insurance	Service Purchase
80426	03/3	30/2018	\$1,000.00	\$0.00	\$1,000.00	\$71.50	\$71.50	\$200.90	\$0.00	\$0.00
80427	04/1	13/2018	\$1,000.00	\$0.00	\$1,000.00	\$71.50	\$71.50	\$200.90	\$0.00	\$0.00
Message ID Message Severity		/								
No recor										



## Add-On Pay

- Report add-on pay only for members hired
   **before** July 1, 1993, or in Year of Service.
- Report sick leave payout, vacation leave payout, and comp time.
- Use comment box to report any additional information

	Step 1 EE Information	Step 2 Pay information	Step 3 Add On Pay	Step 4 Review And Submit	Step 5 Confirmation	
+ New	v Delete					
	Add On Amt \$185.00	Add On Type Sick Leave Payment	Year Comments			
	age ID Mes	sage Severity				
		Вас	ik Nex			



#### Review and Submit

	Step 1 Step EE Information Pay Inform						Step . Add on Pa		Ster Review And		Step 5 Confirmation
Membershi Last Date o										Retirer	Status Valid ation Type Retirement ment Date 04/01/2018 mber Type Fireman
	Ye	ear to Da	ate Amounts								
	Processed					Cert	ified	Totals			
	Employee Contr \$1,567.69					\$143.00 \$1,710.69					
		Er	mployer Contr \$	4,404.94		\$401	.80	\$4,806.74			
			Insurance \$	0.00		\$0.00 \$0.00					
		Ser	vice Purchase \$	0.00		\$0.00	)	\$0.00			
Dtl ID	Pay D	Date	Gross Salary	/ Adj Gro	ustment to ss	KPERS Wages	Member Reported Contributions	Employee Contributions	Employer Contributions	Insurance	
80426	03/30	/2018	\$1,000.00	\$1,000.00 \$0.00		\$1,000.00	\$71.50	\$71.50	\$200.90	\$0.00	
80427	04/13	/2018	\$1,000.00	\$0.0	0	\$1,000.00	\$71.50	\$71.50	\$200.90	\$0.00	
Add On	Amt	Add O	n Type	Year	Comments						
\$185.00		Sick Le	ave Payment	2018							
Comment											



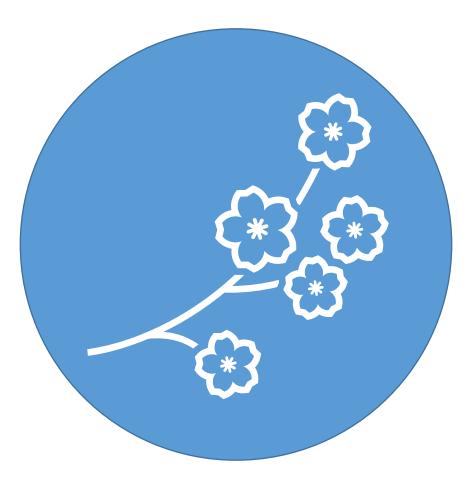
## Confirmation

- You can download PDF for confirmation of completion.
- Upon verification of the certification, the end date will be posted in the member's record.

Step 1 EE Information			Step 2 Pay Information		Step 3 Add On Pay		Step 4 Review And Submit		Step 5 Confirmation	
		Name								
		SSN								
		e on Payroll		03/3	1/2018					
	Year to Date Amounts Processed				Certified		Totals			
	Employee Contr \$1,567.69				\$143.00		\$1,710.69			
	Employer Contr \$4,404.94				\$401.80		\$4,806.74			
		Insurance	\$0.00		\$0.00		\$0.00			
	Servic	e Purchase	\$0.00		\$0.00		\$0.00			
ertificatior Dtl ID	n is Successfully su Pay Date	bmitted. Gross Sa		Adjustment to Gross	KPERS Wages	Member Reported Contributions	Employee Contributions	Employer Contributions	Insurance	
80426	03/30/2018	\$1,000.0	00	\$0.00	\$1,000.00	\$71.50	\$71.50	\$200.90	\$0.00	
80427	04/13/2018	\$1,000.0	0	\$0.00	\$1,000.00	\$71.50	\$71.50	\$200.90	\$0.00	



## Retiree Passing





- If a Retiree's family notifies you of a passing, refer the family to KPERS.
- KPERS Representative will provide further information.

Email: <u>kpers@kpers.org</u>

**Toll-free**: 1-888-275-5737

**Topeka**: 785-296-6166



# Questions



