Kansas Police and Fire Retirement System



DROP

DEFERRED RETIREMENT OPTION PROGRAM

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Kansas Police and Fire Retirement System



DROP

DEFERRED RETIREMENT OPTION PROGRAM

What Is DROP?

- The 2015 Kansas Legislature created DROP as a pilot program for Kansas Highway Patrol to aid in retention of staff.
- The 2019 Legislature extended the pilot program to include Kansas Bureau of Investigation.
- The 2023 Legislature expanded the DROP program to all KP&F members eligible for full retirement.



What Is DROP?

- Instead of retiring, members can keep working for **3**, **4** or **5** years.
- Member keeps earning paychecks & paying into KP&F. Monthly retirement benefit is deposited into a DROP account, and may earn interest annually*
- When the DROP period and employment ends, member will receive balance of DROP account in a lump sum and begin receiving monthly benefit.

*Interest is dependent on KPERS 1-year investment return of 7% or higher.



What Is Full Retirement?

- Tier I = Age 55 with 20 years of service
 Any age with 32 years of service
- Tier I (Transfer) = Age 50 with 25 years of service
- Tier II (AII) = Age 50 with 25 years of service
 Age 55 with 20 years of service
 Age 60 with 15 years of service



Why Choose DROP?

- To maximize retirement benefits toward end of career when working less overtime, etc.
- To continue building retirement savings even after reaching 36 years of service.
- To replace the PLSO option, resulting in higher monthly benefit.



Are There Any Other Benefits With DROP?

- Maintain or apply for optional life insurance with premiums paid through payroll deduction.
- Retain employer-provided benefits such as health insurance.



Things to Know

- **Employer** must agree to member participation.
- Member election is **irrevocable**.
- Member and employer continue to make regular contributions.
- No longer earn service credit.





What Happens if a Member Quits DROP?

- If member hasn't completed **at least 3 years** in DROP, any accrued interest is forfeited.
- DROP deposits stop.
- Member must apply for DROP lump sum and monthly benefit payments.
- If payouts apply, benefits are recalculated.



DROP Application

- Member chooses DROP date. Must be first day of any month.
- **End date** will be last day of the last full payroll reporting period prior to the DROP date.
- Salary is annualized.
- Use the **highest 12** out of the last 20 quarters to determine Final Average Salary.



Sick and Vacation Payouts

If membership date is **before July 1, 1993**, KP&F members can use sick and vacation payouts to increase final average salary.

- KPERS will recalculate FAS.
- Increase will be retroactive to the original DROP date (no additional interest will be credited)

*If KP&F membership date is after July 1, 1993, sick and vacation can't be used to increase the Final Average Salary.



What Forms Are Needed?

- KPF-15DROP Application for DROP
- KPF-799DROP Designation of Beneficiary DROP
- KPF-15DROPEXT Application to Extend DROP Period
- KPF-15DROPDM Application for DROP and Retirement Benefits.



Employer Responsibilities

- Each KP&F agency will need to designate a person to be the Appointing Authority.
- Complete Retirement Certification when requested.
- Member and Employer will continue to contribute the statutory rate each pay period.

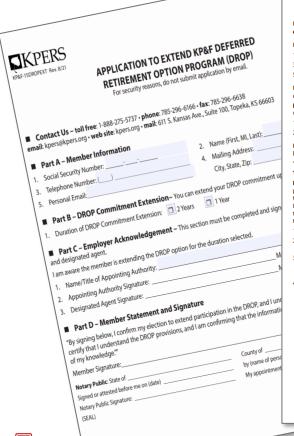


Handout

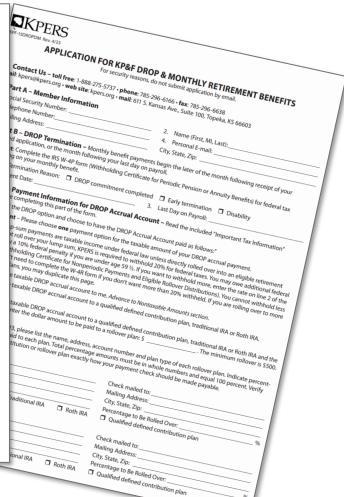




Applications



KPF-15DROPDM Rev. 4/23	
APPLICATION FOR KP&F DROP & MONTHLY RETIREMENT BENEFITS For security reasons, do not submit application by email.	
■ Contact Us – toll free: 1-888-275-5737 • phone: 785-2 email: kpers@kpers.org • web site: kpers.org • mail: 611 S. k	296-6166 - fax : 785-296-6638 (ansas Ave., Suite 100, Topeka, KS 66603
■ Part A – Member Information	
Social Security Number:	2. Name (First, MI, Last):
3. Telephone Number:	
5. Mailing Address:	
■ Part B – DROP Termination – Monthly benefit pay completed application, or the month following your last da	ments begin the later of the month following receipt of your y on payroll.
Important : Complete the IRS W-4P form (Withholding Cert withholding on your monthly benefit.	ificate for Periodic Pension or Annuity Benefits) for federal tax
1. DROP Termination Reason: DROP commitment co	mpleted Early termination Disability
2. Retirement Date:	3. Last Day on Payroll:
■ Part C – Payment Information for DROP Accrubooklet before completing this part of the form.	al Account – Read the included "Important Tax Information"
"I have elected the DROP option and choose to have the DF	OP Accrual Account paid as follows:"
Taxable Amount – Please choose one payment option for	the taxable amount of your DROP accrual payment.
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 Pay the entire taxable DROP accrual account to me. 	Advance to Nontaxable Amounts section.
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 □ Pay the entire taxable DROP accrual account to a qu Advance to #4. □ Pay part of the taxable DROP accrual account to a q remainder to me. Enter the dollar amount to be paid to Advance to #4. If you marked #2 or #3, please list the name, address, ac age amounts to be paid to each plan. Total percentage with your financial institution or rollover plan exactly h 	alified defined contribution plan, traditional IRA or Roth IRA. ualified defined contribution plan, traditional IRA or Roth IRA and th a rollover plan: \$ The minimum rollover is \$50 count number and plan type of each rollover plan. Indicate percent amounts must be in whole numbers and equal 100 percent. Verify
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Questions?