

General and Safety Members Pre-Retirement Workshop

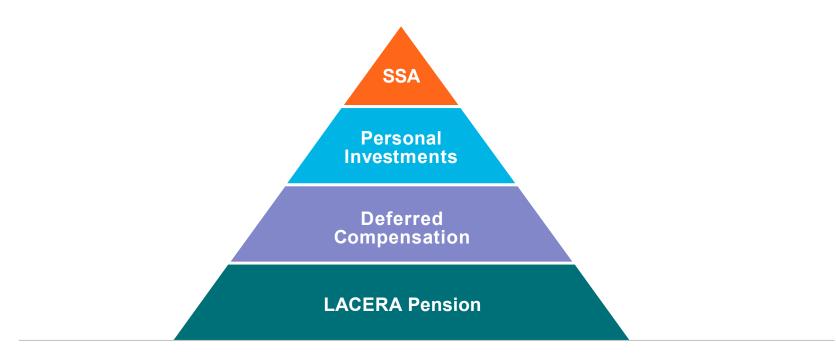
### Pre-Retirement Workshop: OVERVIEW

- Financial Components of Retirement
- Cost of Living Adjustment
- O Social Security Integration
- O Retirement Eligibility
- Computing Your Retirement Allowance
- Choosing a Retirement Date
- O Purchasing Service Credit and Plan Transfer
- Retirement Benefit and Election Form
- Retirement Process
- O Retiree Health Care Plans



#### **Income Source**

How Will Your Retirement Picture Look? How much income do I need? Is 70%-80% of working income enough?





**Retiree Health Insurance Subsidy** 

Tier I : Monthly premium subsidy – dependents included Tier II: Monthly premium subsidy – member only

Monthly premium subsidy:\*

First 10 Years of Service =	40%
Each Additional Year =	4% more
25 Years of Service Credit =	100%

\* Subsidy based on Benchmark Plan – Anthem Blue Cross Indemnity Plan (County subsidy is subject to change)





# **Retirement and Inflation**





### Cost-of-Living Adjustment (COLA)

Plan A (General & Safety)

Maximum 3% annual adjustment

Plan B (General & Safety), C (General & Safety), D, and G

Maximum 2% annual adjustment

#### Plan E COLA

- Maximum 2% based on service earned *after June 4, 2002* (COLA % prorated)
- Plan E members may purchase Elective COLA

#### **CPI & COLA Accumulation**



#### Social Security if you are eligible...

#### 40 Credits / 10 Years

- WEP (Windfall Elimination Provision)
- Implemented in 1986
- Possible reduction—verify with SSA
- Some exemptions apply
- www.ssa.gov/wep

#### GPO (Government Pension Offset)

- Affects member as spouse/widow/widower
- SS benefit reduced by 2/3 of LACERA benefit





#### **Social Security Impact**

#### General Plans A, B, C and D Reduction

- Affects those employed prior to 1983 and
- Paid into Social Security as a County employee
- Small permanent reduction built into plan formula and estimates

#### Plan E Offset

- Affects those employed by County
  - Prior to 1983 and
  - Paid into Social Security as County employee
- Reduction based on actuarial assumptions built into plan formula



#### **Social Security Impact**

#### Plans E (with County service prior to 1983)

- Retirement Before Age 62:
  - Pre-defined Social Security reduction
  - Adjustment already built into all estimates

#### Plan E Offset

- Retirement at Age 62 or older:
  - Submit actual WEP-reduced Social Security benefit or
  - Ineligibility (more \$\$\$ for you)

Submit SSA verification from within 6 months of retirement date for recalculation of LACERA benefit.



# **Social Security Impact**

If you joined the County after 1982, RELAX! No impact on LACERA pension.





#### **Retirement Eligibility**

#### General Plans A, B, C and D — Vesting 5 years

- Age 50 with 10 or more years of County\* service credit
- At any age with 30 years of County\* service credit
- Age 70 regardless of years of service credit

#### General Plan G

- Age 52 with 5 or more years of County\* service credit
- Age 70 regardless of years of service credit

#### General Plan E — Vesting 10 years

- Age 55 with 10 or more years of County\* service credit
- · Age 70 regardless of years of service credit



### **Retirement Eligibility**

#### Safety Plan A and B — Vesting 5 years

- Age 50 with 10 or more years of County\* service credit
- At any age with 20 years of service credit

#### Safety Plan C

• Age 50 with 5 or more years of County\* service credit

\* NOTE: Reciprocal retirement system service credit will help meet the minimum County service requirements.



#### **Reciprocal Retirement**

#### **Benefits**

- · Lower contributions, if applicable
- · Helps meet minimum vesting and eligibility
- Highest final compensation (Each agency determines pensionable items)
- LACERA health insurance based on LACERA service only (LA City exception)
- Possible redeposit into CalPERS





#### **Reciprocal Retirement**

#### Requirements

- Applies to California public retirement systems
- · 6 months with no overlap in service
- Must apply for retirement with each agency
- Must retire concurrently (same date)
- Separate retirement checks





#### **Retirement Allowance Calculation**

#### Age

#### Years and Months of Service Credit

- Age and Service Credit Determine Percentage
- Percentage x Final Compensation = Monthly Check

Plan A (General & Safety), B (General & Safety), C, and D

1 year of highest compensation – 24-consecutive pay periods

#### Plan E

 Any 3 years of highest compensation – three 24-consecutive pay periods

#### Plan C (Safety) and Plan G (General)

Highest 3 years – 72 consecutive pay periods



#### **Final Compensation – Pensionables**

#### Base Salary

- Cafeteria Plan Contribution (before 1996)
- Other Pensionable Pay Items (visit <u>www.lacera.com</u>)

Buybacks (if available in your department):

- 6 days (48 hrs) sick buyback (except MegaFlex)
- 20 days (160 hrs) excess vacation buyback (except MegaFlex)
- 10 days (80 hrs) excess non-elective leave (only MegaFlex)

#### NOTE:

- Overtime Pay NOT Pensionable!
- Termination Pay NOT Pensionable!



### **Final Compensation – Pensionables**

#### Sheriffs / DA (non-MegaFlex)

- Base Salary
- Cafeteria (before 1996)
- Uniform Allowance
- Shooting Bonus
- All Other Pensionable Items

#### **Buybacks**

- Sick Buy Back
- 5 days (40 hrs) 6/30
- · 3 days (24 hrs) 12/31
- Excess Vacation
- · Up to 20 days (160 hrs) each year





### **Final Compensation – Pensionables**

#### Firefighters (non-MegaFlex)

- Base Salary
- Cafeteria (before 1996)
- 10 Hrs "FLSA Overtime"
- Uniform Allowance
- All Other Pensionable Items

#### **Buybacks**

- Sick Buy Back of 1<sup>1</sup>/<sub>2</sub> shifts (36 hrs)
- Holiday Buy Back (limited to 144 hrspensionable)
- Excess Vacation up to 10 shifts (240 hrs)



### **Termination Pay**

#### Includes all unused:

- 100% pay for Vacation, Holiday, Overtime, Comp. Time, Non-elective leave, and Elective leave
- 50% pay for 100% sick time
  - -40-Hour Employee Max 1,440 hours x  $\frac{1}{2}$  = 720 hours
  - 56-Hour Employee Max 2,160 hours x  $\frac{1}{2}$  = 1,080 hours
- 0% pay for 65% or 50% sick time
- Pre-1986 sick—Check with Payroll

#### **Termination Pay is NOT pensionable!**

#### **Termination Pay is taxable!**

Contact Empower Retirement about tax deferral (800) 947-0845



#### **Computing Your Retirement Allowance**

#### GENERAL MEMBERS - PLAN C & D

# Pre-retirement Guide Page 26 (A), Page 27 (B), Page 28 (C & D) for Members with No OASDI

								ļ	\ges							
Years of Service	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65 and over
23	27.18	28.59	29.96	31.36	32.80	34.32	35.96	37.74	39.68	41.78	44 08	45.80	48.10	50.55	53.15	55.94
24	38.36	29.83	31.26	32.72	34.22	35.82	37.53	39.38	41.40	43.60	46 00	47.79	50.19	52.74	55.46	58.37
25	29.55	31.07	32.57	34.09	35.65	37.31	39.09	41.03	43.13	45.4	47.92	49.78	52.28	54.94	57.77	60.80
26	30.73	32.31	33.87	35.45	37.08	38.80	40.66	42.67	44.85	47.23	49.83	51.77	54.37	57.14	60.08	63.24
27	31.91	33.56	35.17	36.81	38.50	40.29	42.22	44.31	46.58	49.05	51.75	53.76	56.47	59.34	62.39	65.67
28	33.09	34.80	36.47	38.18	39.93	41.79	43.78	45.95	48.30	50.86	53.67	55.75	58.56	61.53	64.70	68.10
29	34.27	36.04	37.78	39.54	41.35	43.28	45.35	47.59	50.03	52.68	55.58	57.74	60.65	63.73	67.01	70.53
30	35.46	37.29	39.08	40.91	42.78	44.77	46.91	49.23	51.75	54.50	57.50	59.74	62.74	65.93	69.33	72.97
31	36.64	38.53	40.38	42.27	44.21	46.26	48.47	50.87	53.48	56.31	59.42	61.73	64.83	68.13	71.64	75.40
32	37.82	39.77	41.69	43.63	45.63	47.75	50.04	52.51	55.20	58.13	61.33	63.72	66.92	70.33	73.95	77.83
33	39.00	41.01	42.99	45.00	47.06	49.25	51.60	54.14	56.93	59.94	63.25	65.71	69.01	72.52	76.26	80.26
34	40.18	42.26	44.29	46.36	48.48	50.74	53.16	55.79	58.65	61.76	65.17	67.70	71.11	74.72	78.57	82.69
35	41.36	43.50	45.59	47.72	49.91	52.23	54.73	57.44	60.38	63.58	67.08	69.69	73.20	76.92	80.88	85.13
36	42.55	44.74	46.90	49.09	51.34	53.72	56.29	59.08	62.10	65.39	69.00	71.68	75.29	79.12	83.19	87.56
37	43.73	45.98	48.20	50.45	52.76	55.22	57.86	60.72	63.83	67.21	70.92	73.67	77.38	81.31	85.50	89.99



#### **Computing Your Retirement Allowance**

#### **GENERAL MEMBERS – PLAN E**

#### Pre-retirement Guide Page 29 (E) for Members with No OASDI

								A	\ges			
Years of Service	55	56	57	58	59	60	61	62	63	64	65 and over	
23	17.24	18.90	20.75	22.80	25.09	27 <mark>.</mark> 64	30.50	33.71	37.32	41.39	46.00	
24	17.99	19.72	21.65	23.79	26.18	28,34	31.83	35.17	38.94	43.19	48.00	
25	18.74	20.55	22.56	24.79	27.2	30.05	33.16	36.64	40.57	44.99	50.00	
26	19.49	21.37	23.46	25.78	28.36	31.25	34.48	38.11	42.19	46.79	52.00	
27	20.24	22.19	24.36	26.77	29.45	32.45	35.81	39.57	43.81	48.59	54.00	
28	20.99	23.01	25.26	27.76	30.54	33.65	37.13	41.04	45.43	50.39	56.00	
29	21.74	23.83	26.16	28.75	31.63	34.85	38.46	42.50	47.06	52.19	58.00	
30	22.49	24.65	27.07	29.74	32.72	36.05	39.79	43.97	48.68	53.99	60.00	
31	23.24	25.48	27.97	30.73	33.81	37.26	41.11	45.43	50.30	55.79	62.00	
32	23.99	26.30	28.87	31.72	34.91	38.46	42.44	46.90	51.92	57.59	64.00	
33	24.74	27.12	29.77	32.72	36.00	39.66	43.76	48.36	53.55	59.39	66.00	
34	25.49	27.94	30.67	33.71	37.09	40.86	45.09	49.83	55.17	61.19	68.00	
35	26.24	28.76	31.58	34.70	38.18	42.06	46.42	51.30	56.79	62.99	70.00	
36	26.61	29.17	32.03	35.19	38.72	42.66	47.08	52.03	57.60	63.89	71.00	
37	26.99	29.58	32.48	35.69	39.27	43.26	47.74	52.76	58.41	64.79	72.00	



# **Computing Your Retirement Allowance**

#### SAFETY MEMBERS - PLAN A & B

#### Pre-retirement Guide Page 30 (A & B)

								A	vges						
Years of Service	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55 and over
23	28.79	30.48	32.22	34.03	35.90	37.84	39.92	41.79	43.80	46 <mark>.</mark> 00	48.37	50.96	53.78	56.75	60.26
24	30.04	31.80	33.62	35.51	37.46	39.48	41.65	43.61	45.71	48,00	50.48	53.17	56.12	59.21	62.88
25	31.29	33.13	35.02	37.00	39.03	41.13	43.39	45.43	47.6	50.00	52.58	55.39	58.46	61.68	65.50
26	32.54	34.45	36.42	38.46	40.59	42.78	45.13	47.24	49.51	52.00	54.68	57.61	60.80	64.15	68.11
27	33.79	35.78	37.82	39.94	42.15	44.42	46.86	49.06	51.42	54.00	56.79	59.82	63.14	66.61	70.73
28		37.10	39.22	41.42	43.71	46.07	48.60	50.88	53.32	56.00	58.89	62.04	65.48	69.08	73.35
29			40.62	42.90	45.27	47.71	50.33	52.69	55.23	58.00	60.99	64.25	67.81	71.55	75.97
30				44.38	46.83	49.36	52.07	54.51	57.13	60.00	63.10	66.47	70.15	74.02	78.59
31					48.39	51.00	53.80	56.33	59.04	62.00	65.20	68.68	72.49	76.48	81.21
32						52.65	55.54	58.14	60.94	64.00	67.30	70.90	74.83	78.95	83.83
33							57.27	59.96	62.85	66.00	69.41	73.11	77.17	81.42	86.45
34								61.78	64.75	68.00	71.51	75.33	79.51	83.68	89.07
35									66.65	70.00	73.61	77.55	81.84	86.35	91.69



#### **Purchase Service Credit**

Only Contributory Plan (Plan E not eligible)

#### Purchasing service increases retirement

# **County Credit**

- · Counts toward insurance and retirement eligibility
- Temporary Time
- Sick Without Pay (SWOP)
- Redeposit of Withdrawn Contributions/Restoration

### Other Public Agency (OPA) Credit

- Counts toward insurance
- Military/Federal
- · Other Public Agency (California only)



#### **Enhancing Your Retirement Allowance**

#### General to Safety Conversion

#### Convert up to 5 years

After minimum 5 years of Safety Service

#### General time becomes Safety time





### **Plan Transfers**

#### Open Window Plan Transfer (OWPT)

- Available from E to D only
- · Converts all Plan E to Plan D

#### Prospective Plan Transfer (PPT)

- Available to Plans D and E only
- May transfer from Plan D to E or E to D prospectively
- Conversion of Plan E to Plan D service optional



### **Payment Methods**

#### Payment

- Lump sum
- Semi-Monthly payroll deductions
- Combination lump sum/semi-monthly payroll deductions
- Funds from any source (except ROTH IRA)

#### Taxes

- Before-tax payroll deductions (irrevocable but tax benefit)
- May transfer from Plan D to E or E to D prospectively
- After-tax payroll deductions (pay taxes now)
- -may stop payroll deduction or pay off early with lump sum

#### 120 days to complete contract after retirement

Additional applies every June 30 and December 31



#### **Purchase and your Retirement Allowance**

#### GENERAL MEMBERS - PLAN C & D

#### Pre-retirement Guide Page 26 (A), Page 27 (B), Page 28 (C & D) for Members with No OASDI

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Years of Service	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65 and over
23	27.18	28.59	29.96	31.36	32.80	34.32	35.96	37.74	39.68	41.78	44 <mark>.</mark> 08	45.80	48.10	50.55	53.15	55.94
24	38.36	29.83	31.26	32.72	34.22	35.82	37.53	39.38	41.40	43.60	46 00	47.79	50.19	52.74	55.46	58.37
25	29.55	31.07	32.57	34.09	35.65	37.31	39.09	41.03	43.13	45.4	47.92	49.78	52.28	54.94	57.77	60.80
26	30.73	32.31	33.87	35.45	37.08	38.80	40.66	42.67	44.85	47.23	49.83	51.77	54.37	57.14	60.08	63.24
27	31.91	33.56	35.17	36.81	38.50	40.29	42.22	44.31	46.58	49.05	51.75	53.76	56.47	59.34	62.39	65.67
28	33.09	34.80	36.47	38.18	39.93	41.79	43.78	45.95	48.30	50.86	53.67	55.75	58.56	61.53	64.70	68.10
29	34.27	36.04	37.78	39.54	41.35	43.28	45.35	47.59	50.03	52.68	55.58	57.74	60.65	63.73	67.01	70.53
30	35.46	37.29	39.08	40.91	42.78	44.77	46.91	49.23	51.75	54.50	57.50	59.74	62.74	65.93	69.33	72.97
31	36.64	38.53	40.38	42.27	44.21	46.26	48.47	50.87	53.48	56.31	59.42	61.73	64.83	68.13	71.64	75.40
32	37.82	39.77	41.69	43.63	45.63	47.75	50.04	52.51	55.20	58.13	61.33	63.72	66.92	70.33	73.95	77.83
33	39.00	41.01	42.99	45.00	47.06	49.25	51.60	54.14	56.93	59.94	63.25	65.71	69.01	72.52	76.26	80.26
34	40.18	42.26	44.29	46.36	48.48	50.74	53.16	55.79	58.65	61.76	65.17	67.70	71.11	74.72	78.57	82.69
35	41.36	43.50	45.59	47.72	49.91	52.23	54.73	57.44	60.38	63.58	67.08	69.69	73.20	76.92	80.88	85.13
36	42.55	44.74	46.90	49.09	51.34	53.72	56.29	59.08	62.10	65.39	69.00	71.68	75.29	79.12	83.19	87.56
37	43.73	45.98	48.20	50.45	52.76	55.22	57.86	60.72	63.83	67.21	70.92	73.67	77.38	81.31	85.50	89.99



#### **Choosing a Retirement Date**

#### Whole years of service credit

- Decreases health insurance premium – up to 25 years

#### Retire on 2<sup>nd</sup> half of the month

- Smooth health insurance transition
- Cash flow considerations
- March 31 (COLA)
- First day off (RDO)

Tax deferral considerations

#### Age / Birthday

- Increases each ¼ year of age
  - Plan A, B, C, and D up to age 65
  - Plan G up to age 67
  - Plan A, and B Safety up to age 55
  - Plan C Safety up to age 57
- Plan E, whole years of age up to 65





# 20XX

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19	20	21	22	23	24	25	16	17	18	19	20	21	22	20	21	22	23	24	25	26
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18	19	20	21	22	23	24	22	23	24	25	н	н	28	20	21	22	23	24	Η	26
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### **Applying for Retirement**

1 Fill out the Retirement Benefit Estimate and Election Form

2 Sign and return the form to LACERA
 • 45-60 days before retirement

You are not retired until your signed application is with LACERA!

Do not go to work on your retirement date!



# You Have Options

LACERA Service Ret	irement Options	PLAN A, B, C, D or G	PLAN E
	Eligible Beneficiary	Survivor Benefit	Survivor Benefit
Unmodified	Spouse, Domestic Partner	65% of member's allowance	55% of member's allowance
Unmodified + Plus	Spouse, Domestic Partner	66%–100% of reduced allowance	56%–100% of reduced allowance
Option 1	Any	Lump-sum (balance member's contributions)	Not available
Option 2	Anyone with an insurable interest	100% member's reduced allowance	100% member's reduced allowance
Option 3	Anyone with an insurable interest	50% member's reduced allowance	50% member's reduced allowance
Option 4	Anyone with an insurable interest	Any % or setdollar amount to one or more beneficiaries	Any % or setdollar amount to one or more beneficiaries



#### **Retirement Benefit** Estimate and Election Form

#### L///CERA

#### Los Angeles County Employees Retirement Association

300 N. Lake Ave., Pasadena, CA 91101 / PO Box 7060, Pasadena, CA 91109-7060 / www.lacera.com / 626/564-6132 • 800/786-6464

#### **Retirement Benefit Estimate** and Election Form

For FREDERICK FLINTSTONE For a retirement date of 03-31-2015

The following retirement benefit estimates have been calculated based on the information on the Background Data sheet. Please be certain this information is correct. If it does not agree with your records, call LACERA at 1-800-786-6464.

			Monthly Allowar	nce						
	Basic Allowance		Advance Option disability retirement)	Beneficiary's Allowance	Dession Advances Calles after					
Retirement Option	Without the Pension Advance Option	Until 62 <sup>nd</sup> Birthday	After 62 <sup>rd</sup> Birthday	Whether or not you select the Pension Advance Option, aft your death your eligible beneficiary will receive:						
Unmodified	\$ 4,131.90	\$ 4,505.48	\$ 3,991.48	\$ 2,685.74	per month*					
Unmod+Plus	\$ 4,007.94	N/A	N/A	\$ 4,007.94	per month*					
Option 1 Lump sum	\$ 4,115.71	\$ 4,489.29	\$ 3,975.29	Total of your contributions a \$ for each month you one-half of the total COLA p	a receive an allowance AND					
Option 2 100%	\$ 3,462.95	N/A	N/A	\$ 3,462.95	per month*					
Option 3 50%	\$ 3,767.88	N/A	N/A	\$ 1,883.94	per month*					
Option 4	\$ 0.00	N/A	N/A	s 0.00	per month*					
Customized	(See reverse side of this	form for information reg	1	per menter						

Retirement Benefit Estimate for a: P1RETNAME2

New total benefit amount you will be entitled to upon completion of	your outstanding contract(s): P1SRVCRD2 ;	years of additional service credit

	4		Monthly Allowa	ince						
Retirement	Basic Allowance Without the		n Advance Option disability retirement)		e Pension Advance Option, after					
Option	Pension Advance Option	Until 62 <sup>nd</sup> Birthday	After 62 <sup>rd</sup> Birthday	your death your eligible beneficiary will receive:						
Unmodified	\$ 4,131.90	\$	\$	\$ 2,685.74	per month*					
Option 1 Lump sum	s 4,115.71	5	s		and interest of \$ less: ou receive an allowance AND paid to you during retirement.					
Option 2 100%	\$ 3,462.95	N/A	N/A	\$ 3,462.95	per month*					
Option 3 50%	\$ 3,767.88	N/A	N/A	\$ 1,883.94	per month*					
Option 4	\$ 0.00	N/A	N/A	\$ 0.00	per month*					
Customized	(See reverse side of	his form for information re-	garding Option 4)							

Please read the reverse side of this form for important information regarding your beneficiary's eligibility for a continuing allowance and other information regarding retirement benefits. Unmodified+Plus amount is contingent on proof of marriage/domestic partnership status and spouse/domestic partner age.

#### MEMBER COMPLETES THIS SECTION:

Retirement Option Election: Having considered the Retirement Options and the benefit estimates above, I elect the [] Unmodified or [] Option No. \_ (fill in Option number) Retirement Option. If I elected one of the numbered Options, I hereby certify my beneficiary has an insurable interest in my life.

- Pension Advance Option: [ ] Yes [ ] No (Applies only to Unmodified and Option 1)
- I wish to pay for \_\_\_\_\_\_years of \_\_\_\_\_\_service credit: [ ] Yes [ ] No

#### Member's Signature X\_

NOTE: IF YOU CHANGE YOUR MIND AND DECIDE NOT TO RETIRE, YOU MUST RESCIND YOUR APPLICATION BY WRITING TO LACERA PRIOR TO YOUR EFFECTIVE RETIREMENT DATE.

This estimate of your retirement allowance is based on the current LACERA database and employer's salary data. If governing legislation, lawsuits, or employer records change, this estimate and/or your retirement allowance will be adjusted accordingly.

#### 

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Page 1

Date

#### Retirement Benefit Estimate and Election Form - PART 1



Los Angeles County Employees Retirement Association

300 N. Lake Ave., Pasadena, CA 91101 / PO Box 7060, Pasadena, CA 91109-7060 / www.lacera.com / 626/564-6132 • 800/786-6464

#### Retirement Benefit Estimate and Election Form

For FREDERICK FLINTSTONE For a retirement date of 03-31-2015

The following retirement benefit estimates have been calculated based on the information on the Background Data sheet. Please be certain this information is correct. If it does not agree with your records, call LACERA at 1-800-786-6464.

				Mo	onthly Allowan	ce	nce					
Retirement		sic Allowance Without the	With the Pension (Not applicable to				Beneficiary's Allowance Whether or not you select the Pension Advance Option, after					
Option	C124207 2005	n Advance Option	Until 62 <sup>nd</sup> Birthday	After 6	2 <sup>nd</sup> Birthday	your dea	ath your eligible benefician	y will receive:				
Unmodified	\$	4,167.00	\$ 4,634.00	\$	4,120.00	\$	2,708.00	per month*	_			
Unmod+Plus	\$	4,016.00	N/A		N/A	\$	4,016.00	per month*				
Option 1 Lump sum	\$	4,149.00	\$ 4,616.00	\$	4,102.00	\$	your contributions and in for each month you rece f of total COLA paid to yo	eive an allowance A	ess: AND			
Option 2 100%	\$	3,734.00	N/A		N/A	\$	3,734.00	per month*				
Option 3 50%	\$	3,939.00	N/A		N/A	\$	1,969.00	per month*				
Option 4	\$	0.00	N/A		N/A	\$	0.00	per month*				
Customized	(Se	ee reverse side of this	form for information reg	ption 4)			•					



#### Retirement Benefit Estimate and Election Form – PART 2

#### 2 Retirement Benefit Estimate for a: SERVICE RETIREMENT

New total benefit amount you will be entitled to upon completion of your outstanding contract(s): 1.3333 years of additional service credit

						Monthly Allowan	ice				
Retirement Option		sic Allowance Without the n Advance Option	(N	Vith the Pension lot applicable to c I 62 <sup>nd</sup> Birthday	lisabil		Beneficiary's Allowance Whether or not you select the Pension Advance Option, after your death your eligible beneficiary will receive:				
	Felisio						,				
Unmodified	\$	4,363.00	\$	4,830.00	\$	4,316.00	\$	2,836.00	per month*		
Option 1 Lump sum	\$	4,345.00	\$	4,812.00	\$	4,298.00	\$	of your contributions and int for each month you rece alf of total COLA paid to you	ive an allowance AND		
Option 2 100%	s	3,910.00		N/A		N/A	\$	3,910.00	per month*		
Option 3 50%	\$	4,124.00		N/A		N/A	\$	2,062.00	per month*		
Option 4	\$	0.00		N/A		N/A	\$	0.00	per month*		
Customized	(Se	ee reverse side of this	or information reg	arding	g Option 4)						



#### Retirement Benefit Estimate and Election Form – PARTS 3 & 4

#### MEMBER COMPLETES THIS SECTION:

**Retirement Option Election:** 

Having considered the Retirement Options and the benefit estimates above, I elect the Unmodified, or Unmodified+Plus with 100%, or Option No. (fill in Option number) Retirement Option. If I elected one of the numbered Options, I hereby certify my beneficiary

has an insurable interest in my life.

- Pension Advance Option: Yes No (Applies only to Unmodified and Option 1)
- I wish to pay for \_\_\_\_\_ years of \_\_\_\_\_\_service credit: Ves No
- A Member's Signature X

Date

NOTE: IF YOU CHANGE YOUR MIND AND DECIDE NOT TO RETIRE, YOUR WRITTEN RESCISSION MUST BE RECEIVED IN OUR OFFICE ONE BUSINESS DAY PRIOR TO YOUR EFFECTIVE RETIREMENT DATE.

This estimate of your retirement allowance is based on the current LACERA database and employer's salary data. If governing legislation, lawsuits, or employer records change, this estimate and/or your retirement allowance will be adjusted accordingly.



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# **Changing Your Mind**

#### What if I change my mind?

- Complete the Request to Rescind or Change Retirement Date" form page of lacera.com
- Go to Brochures & Forms page of <u>www.lacera.com</u>
- · Change payment option may require
  - Beneficiary change
  - Beneficiary birth certificate
  - Option 4 requires:
    - Birth certificate(s)
    - Percentage to beneficiary(s)

#### Must be in writing!

#### Inform your department!





### **Disability Retirement**

#### Contributory plans only

Permanent incapacity due to injury or illness

- Service-Connected Disability
- Non-Service Connected Disability

Apply with LACERA's Disability Division Process may take 12 months or more Board of Retirement approves PPT transfers to Plan D rules differ Reciprocity: Not to exceed an amount as if all service had been with only one system.





### Long Term Disability (LTD)

#### LTD administered by the County not LACERA

#### **Contributory Plans**

- · No retirement service credit earned
- After 2 years on LTD, must apply for LACERA Service or Disability retirement
- LTD is offset by LACERA retirement benefits





### Long Term Disability (LTD)

### Plan E

- LTD provided in lieu of LACERA disability
- Earn retirement service credit while on LTD (even after termination)
- LTD payments stop upon retirement from LACERA
- Earn service credit while on any disability plan sponsored by the employer
- Survivor benefits available for non-MegaFlex
- Survivor Income Benefits (SIB) purchasable for MegaFlex participants through Employee Benefits



- County payroll will stop
- Outgoing final check will be paid by your department
- No gap in Health Insurance coverage
- **Board Letter**
- Termination date must be posted before LACERA can pay you
- Keep LACERA updated on address changes
- Maintain at least 2 valid photo ID's



#### **Retirement Payroll Deductions**

Federal and State of California Income Tax
LACERA Insurance Premiums (your share if any)
721's Catastrophic Plan
Union and Association Dues
Credit Union Savings and Loan Payments





#### **Retiree Organizations**

Retiree organizations are non-profits, that LACERA members may voluntarily join, who promote and preserve the general welfare of retirees.

> American Federation of State, County and Municipal Employees (AFMSCE)Retiree Chapter 36 (800) 429-1274 AFSCME.org

Retired Employees of Los Angeles County (RELAC) (800) 537-3522 RELAC.org

SEIU 721 Retiree Committee (213) 368-8660 or (213) 738-8428 SEIU721.org



### 1099R Instead of a W-2

CORRECTED (if checked)				
PAYER'S name, street address, city, state, and ZIP code	1 Gross distribution	OMB No. 1545-0119	Distributions From	
LACERA	\$ 31,132.76	Form 1099-R	Pensions, Annuities, Retirement or	
GATEWAY PLAZA	2a Taxable amount	200 <b>05</b>	Profit-Sharing Plans,	
300 NORTH LAKE AVE, 5TH FLOOR	\$ 30,881.66		IRAs, Insurance Contracts, etc.	
PASADENA, CA. 91101-4199	2b Taxable amount	Total		
(800) 786-6464	not determined	distribution	Copy C For Recipient's	
PAYER'S Federal identification number RECIPIENT'S identification number	3 Capital gain (included in box 2a)	4 Federal income tax withheld	Records	
95-XXXXXXX	\$	\$ 5,799.04	Keep this copy	
RECIPIENT'S name (first, middle, last) street address, city, state, and ZIP code	5 Employee contributions or insurance premiums	6 Net unrealized appreciation in employer's securities	for your records.	
	\$ 251.10	\$		
JOE SAMPLE	7 Distribution code IRA/SEP	8 Other	This information	
1313 MOCKINGBIRD LANE	-7	%	is being furnished to the Internal	
OUR TOWN, CA 90102	9a Your percentage of total distribution %	9b Total employee contributions \$ 8,618.16	Revenue Service.	
	10 State tax withheld	11 State/Payer's state number	Retirement Date	
	\$ 1,512.38	CA 801 0824 4		
Account number (optional)	12 Local tax withheld	13 Name of locality	03/31/05	
	\$			
Form 1099-R Department of the Treasury-Internal Revenue Service				



## **Retiree Healthcare**





#### **Health Insurance Coverage**

#### Who may enroll?

- Spouse, Registered Domestic Partner
- Natural or adopted children up to 26
- Adult disabled unmarried dependent child\*
- Submit certified original birth certificates

#### 60 days from retirement date to enroll

#### Survivor coverage after member's death

- Marriage or DP at least 1 year prior for Service or NSCD
- Marriage or DP at least 1 day prior for SCD

\*Contact LACERA's Retiree Healthcare for limitations



**Retiree Health Insurance Subsidy** 

Tier I : Monthly premium subsidy – dependents included Tier II: Monthly premium subsidy – member only

Monthly premium subsidy:\*

First 10 Years of Service =	40%
Each Additional Year =	4% more
25 Years of Service Credit =	100%

\* Subsidy based on Benchmark Plan – Anthem Blue Cross Indemnity Plan (County subsidy is subject to change)



### **Overview of Medical Insurance Plans**

Anthem	Anthem Blue Cross I	Anthem Blue Cross II	Anthem Blue Cross Prudent Buyer
Deductible	\$100	\$500	\$100
Out-of-Pocket Maximum	N/A	\$2,500	N/A
Lifetime Limit	\$1,000,000	\$1,000,000	\$1,000,000
Doctor's Office Visit	80%	80%	80% Prudent Buyer, or 70%
Hospital Room and Board	\$75/day	90% PPO, or 80%	80% Prudent Buyer, or \$75/day
Prescription Reimbursement	80% in-network or 60%	80% in-network or 60%	80% in-network or varies
Prescription Mail-order	\$10 generic \$30 brand \$50 non-preferred brand \$150 specialty	\$10 generic \$30 brand \$50 non-preferred brand \$150 specialty	\$10 generic \$30 brand \$50 non-preferred brand \$150 specialty



#### **Overview of Medical Insurance Plans**

No deductible No lifetime maximums Low co-payments Service area by zip code

#### CIGNA

- California and Maricopa County, AZ

#### **United Healthcare**

California

#### Kaiser Permanente

 California, Colorado, Georgia, Hawaii, Oregon and Washington (Effective January 1, 2020)





HMO Plans





#### What is Medicare?

A Federal health insurance program under Social Security Medicare is an 80% plan Medicare becomes primary insurance LACERA insurance becomes secondary Eligibility at age 65 (other eligibility requirements apply) No need to apply for Part B while working



Once you retire and are over age 65:

Need Medicare Part A & B

Do not apply for Part D of Medicare!

Current premium reimbursement program

#### Medicare Supplement – Anthem Blue Cross III

- No deductibles or lifetime maximum
- Pays Medicare's deductibles
- Pays 20%





#### Medicare HMOs

- Kaiser Senior Advantage
- · United Healthcare Medicare Advantage

KAISER PERMANENTE.

#### Social HMO - SCAN

- Includes Extended Home Care
- Locations: Los Angeles, Orange, Riverside, San Bernardino, San Diego, Ventura, Sonoma, Napa Valley, Santa Clara, San Francisco, San Joaquin, and Marin Counties in Northern California.





#### Medical Insurance

- · 6-month wait
- Late enrollment
- Changing plans
- Exception moving out of service area and other qualifying events





Cigna Indemnity Dental/Vision

Cigna Dental HMO/Vision

- 12-month wait
- · Late enrollment
- Changing plans
- Exception moving out of service area and other qualifying events





### **IRS Tax Benefit for Eligible PSO**

#### Public Safety Officers (PSO)

- Law enforcement officer
- · Firefighter
- Chaplain
- Member of a rescue squad or ambulance crew

#### \$3,000 Taxable Income Excludable for:

- Health Insurance
- Accident Insurance
- Long-Term Care Insurance





#### **Retirement Planning Timeline**

#### Get Ready 1-3 Years Before Retirement

- 🤣 Target a possible retirement date
- Maximize savings to deferred compensation or savings plan
- Submit marriage or registered domestic partnership certificate
- Submit birth certificates if applicable
- Submit dissolution of marriage documents if applicable
- Purchase service credit
- 👩 Maximize pensionable earnings
- Register online for MyLACERA

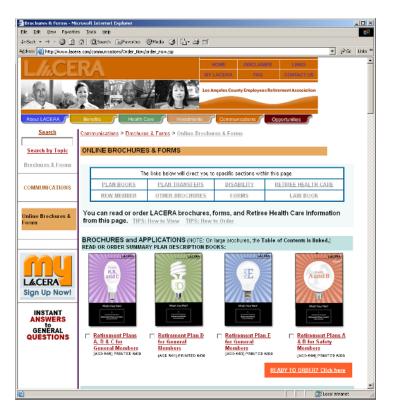


#### Brochures & Forms on www.lacera.com

To view, print, or order printed materials, visit the **Brochures & Forms** page.



Look for these web tips within our printed materials to direct you to web pages online.





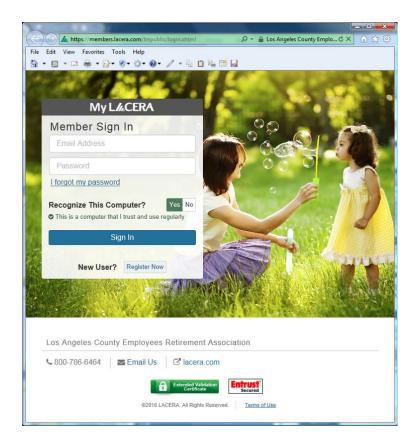
### **Stay Connected**

#### LACERA's website: www.lacera.com

View, print, or order printed materials, visit the Brochures & Forms page.

#### Register on My LACERA

- Access your personal retirement information
- Calculate your retirement
- · Update your email
- Send confidential emails through the Secure Message center
- Change your beneficiary(ies)
- Upload documents
- And more!





#### How Do I Contact LACERA?

By phone: 1-800-786-6464

In person: 300 N. Lake Avenue, Pasadena, CA

- · Appointments receive priority over walk-ins
- TEMPORARILY SUSPENDED DUE TO COVID-19

By email: welcome@lacera.com

Online: www.lacera.com

MY LACERA: Secure Message Center





# Good luck with your future retirement!

