

EMPLOYEE BENEFITS DURING AN UNPAID LEAVE OF ABSENCE

While you are on an unpaid leave of absence, premiums to continue your employee benefits cannot be payroll deducted. The following information is provided to assist you in understanding the effect of your leave without pay status on various employee benefits. Please read this information carefully and discuss any questions with your Department Personnel Representative (DPR) or the **Benefits Administration Unit**.

LEAVE OF ABSENCE REQUEST FORM

The Leave of Absence Application Form must be completed in its entirety. In the case of FMLA, disability or worker's compensation injury, the attending physician's statement must accompany the application. The employee may request to use annual leave or sick leave (if applicable) before beginning unpaid leave. The paid leave will be given within the dates of the overall leave. Therefore, if a three month leave is requested and the employee has one month of annual leave, the overall leave still remains at three months.

MEDICAL, DENTAL, VISION, LIFE INSURANCE, STD/LTD PLANS AND GROUP LEGAL

You are eligible to maintain your medical, dental, vision, life insurance, short-term disability, long-term disability and group legal benefits while on leave without pay. In order to continue coverage, you must make payments directly to the County for the period of time you will be without pay. This also applies to employees on "no-pay" status due to a worker's compensation injury. The amount you are responsible to pay depends upon the reason for your absence. If you are out on leave due to personal, educational, or suspension, you will be required to pay for both the employee and the County (employer) portion of the benefits. Your DPR will advise you specifically about your situation.

Employees on a non-medical related (example personal leave, educational leave) leave of absence or on suspension, are required to pay the higher of the mandatory contributions (5%/10% depending on ratified bargaining agreement) or the County's contribution to maintain health insurance while in a no pay status. This charge will be included on the LOA Remittance Form, and you are required to pay if you wish to continue health coverage. Otherwise, your insurance coverage will be cancelled for non-payment. **Employees on a medical related leave of absence are not required to pay the mandatory contributions**. Your mandatory contribution (5%/10%) will restart once you return to work.

Employees on leave without pay may cancel dependent coverage or add a newly acquired dependent (eg. Newborn, adopted child, spouse etc.). You must submit a **Change In Status Form** & a **Medical, Dental, & Vision Plans Status Change Form** along with the appropriate documentation (marriage/hospital birth certificates, etc.) to the Benefits Administration Unit within 45 days of the qualifying event (60 days to report newborns, adoptions, or placement for adoption). Note, starting an unpaid leave of absence is considered a qualifying event. Employees may drop dependent coverage, cancel coverage (if on a personal leave requiring payment of the County portion, not applicable to suspensions, and reinstate coverage upon returning to work. A Change in Status Form must be received by the Benefits Administration Unit within forty five (45) days of each qualifying event (start/return to work from leave). Employees cancelled for non-payment of premiums must wait until "Open Enrollment" to apply for reinstatement of dependents. Refer to the **Change in Status Form** for a list of additional qualifying events. The forms may be obtained through your DPR's office or on the County's website at www.miamidade.gov/benefits.

Employees who have enrolled Domestic Partners or Overage Dependents (ages 26-30) will be charged an Imputed Income amount based on the employee's elected coverage and family category. The employee is also responsible for paying the FICA and MICA tax on this imputed income. This tax rate of 5.65% for 2011 (7.65% for 2012) will be automatically added to the employee's bi-weekly premium amount.

SHORT-TERM & LONG-TERM DISABILITY INCOME PROTECTION

If you elect to drop your disability coverage and wish to reinstate it when you return from LOA, you will be required to fill out a Change In Status form and an Evidence of Insurability form, provided by the insurance carrier. Your application will be subject to medical review by the insurance carrier, MetLife, to determine if you are eligible for coverage. If you are cancelled for non-payment, you will not be able to purchase coverage again until the next Open Enrollment period after your return to work. Coverage at that time will not be guaranteed. You will have to submit an Evidence of Insurability statement which will be subject to medical review.

FLEXIBLE SPENDING ACCOUNTS (HEALTHCARE AND DEPENDENT CARE)

You can continue to submit Reimbursement Request Forms for expenses that you incurred while you were on a leave without pay. However, in order to be reimbursed for expenses incurred during the period or following your return to work, you must continue to make contributions to **FBMC** while you are on a leave without pay.

If contributions are not continued during an unpaid leave, any prior balance in the Flexible Spending Account (for which expenses have not been incurred) will be forfeited. This means that if you elect to drop the Flexible Spending Account(s) by submitting a **Change In Status Form**, you will not be able to access any contributions already made to the account if you have not already receive the medical treatment or the dependent care services.

If you have made contributions to a Flexible Spending Account and have not received all your contributions in reimbursements, you may continue to keep your account active during your unpaid leave. By continuing to make contributions to FBMC on a post-tax basis, you will still be eligible to incur and be reimbursed for expenses while in a leave without pay status. Upon your return to work, your contributions will once again be deducted from your check on a pre-tax basis.

If you decide to drop your Flexible Spending Account or you do not remit your contributions on a timely basis, then your Account(s) will be cancelled. You will not be able to participate in the Flexible Spending Accounts again until the Annual Open Enrollment period after your return to work. The bi-weekly spending account contributions indicated above must be sent to:

Fringe Benefits Management Company

Client Accounting Department (DM)

P.O. Box 1878

Tallahassee, Florida 32302

The check should be made payable to: **Vista Deposit Account/Miami-Dade. Write your Social Security Number on the check.**

RETIREMENT

While you are on a leave without pay, you will not earn creditable service time with the Florida Retirement System (FRS). You must return to work immediately following the leave for at least one (1) calendar month in order to qualify to purchase the period that you were on leave without pay. Employees are eligible to purchase up to a maximum of two (2) years. If the employee was out on Military Leave, the employee can purchase credits up to a maximum of five (5) years. The employee must have been honorably discharged and be entitled to return to work under provisions of the Uniformed Services Employment and Reemployment Act. Service credit for a military leave of absence will count toward the years of service you need to vest, and you don't need to be vested before you can receive such credit. However, any leave without pay time (non military leave) that you purchase will not be credited to your account until you have completed six (6) years of creditable service.

DEFERRED COMPENSATION

No contributions can be made to the Miami-Dade County Deferred Compensation Plan while you are in a leave without pay status. When you return to work, your deductions will automatically start again at the same rate that was taken from your last paycheck. If you are trying to contribute the maximum amount to the Plan, you may want to adjust your contribution rate when you return to work. If you wish to stop your deductions when your return to work, you must submit a **Deferred Compensation Change Form**, either NRS or ICMA.

You are not eligible to make a withdrawal from your account simply because you are on a leave without pay. Withdrawals may be made when you retire, separate from service, or if you can demonstrate an unforeseeable emergency. The Internal Revenue Service Code limits unforeseeable emergencies to events that are sudden, unexpected and beyond your control. Such withdrawals are subject to taxes.

You must continue to remit payments as advised for your coverage, otherwise, benefits will be cancelled. Premiums and contributions are due in advance of the pay period to be covered. The first payment is due within two weeks of your last payroll deduction.

If your status changes or if you return to work, resign, terminate, become disabled or retire, you must notify the **Benefits Administration Unit** at (305) 375-4288, and if enrolled in a spending account, **Fringe Benefits Management Company** at (800) 342-8017.

NOTE: The following Forms have been attached for your convenience and use:

- **Leave of Absence Request Form**
- **LOA Remittance Form (DPR letter to employee)**
- **LOA Remittance Form to be returned by employee with first payment**
- **Change In Status Form**
- **Medical, Dental & Vision Plans Status Change Form**
- **Deferred Compensation Change Form (NRS and ICMA)**