

Executive Benefits
2012





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The Mayor and Board of County Commissioners of Miami-Dade County continue to offer eligible executives the opportunity to participate in the Executive Benefits Program. This booklet provides information on the comprehensive benefits offered. Through the Benefits Allowance component of the program, executives may choose to pay for a variety of insurance, retirement and leave benefits on an annual basis. Executives, not under the Mayor's purview, may be eligible for a car allowance.

Executive Benefits 2012

Executive Benefits Enrollment

During the Open Enrollment period for 2012, you must complete both the online enrollment for your health insurance and Flexible Benefits, and your Executive Benefits Enrollment Form. While your health insurance may continue from one year to the next without your input, the Executive benefits will not. Until you complete and submit an enrollment form, your Executive Benefits will not appear in your paycheck. Be sure to review your 2012 online Benefits Handbook and Benefits Newsletter for coverage options, then go to enet.miamidade.gov to complete your benefits enrollment. Other than your Executive Benefits enrollment, all benefits enrollment for 2012 must be done online.

Frequently Asked Questions

I am currently enrolled in the Executive Long-Term Disability plan. May I also enroll in Short-Term Disability insurance?

No – not if you are enrolled in the Executive Long-Term Disability Insurance. The Executive plan has a waiting period of 90 days, or use of all of your sick leave, whichever is longer. This overlaps with the

6-month coverage of the STD; therefore, executives may not combine the Executive LTD with regular STD coverage.

May I change to the regular STD and LTD?

Yes – if you cancel your Executive Long-Term Disability coverage. To cancel your Executive LTD, write "Cancel" on your Executive Enrollment Form in the LTD box and notify the Benefits Administration Unit of Internal Services Department, Suite 2340, Stephen P. Clark Center, of your intent to cancel. Your enrollment in the regular STD and LTD will have to be done administratively. This change cannot be completed online.

How do I enroll for the Executive LTD Plan during Open Enrollment for 2012?

To apply for the Executive LTD plan during Open Enrollment for 2012, you need to complete and submit an Evidence of Insurability form for approval to MetLife. You can find the form online at <http://www.miamidade.gov/benefits/forms.asp>. Under Long/Short Term Disability Claim Forms, it is the MetLife Statement of Health Form – STD/LTD. When you receive notification of approval, forward a copy marked "Executive LTD" at the top to the Benefits Administration Unit

for auditing purposes. Coverage will be effective the later of January 1, 2012 or upon approval from MetLife (providing you are actively at work).

Have deferred compensation limits changed for 2012?

Not at this time. Currently, if you are under the age of 50, the maximum that you may defer is \$16,500 (\$634.61 biweekly). For those employees age 50 and over the maximum is \$22,000 (\$846.15 biweekly). These limits are valid as of the printing of this booklet; however, contributions are subject to IRS limits set for 2012. Check the Benefits website for any updates to the IRS limits.

How do I change my deferred compensation contribution biweekly deduction?

You must submit the change request online to increase or decrease your deduction amount. Links to the providers' websites may be accessed at www.miamidade.gov/benefits. Increases become effective no earlier than the first of the following month. Decreases may be processed for the next available pay period.

How can I participate in the Catch-Up provision of deferred compensation?

The County's deferred compensation program allows you to postpone receipt of a portion of your salary until you retire or separate service. In order to make up for years in which you did not contribute, or contributed less than the maximum allowed, you may apply to participate in the "catch-up" provision. If you are approved under this provision, for three years before the year in which you are

eligible to retire without reduction in FRS benefits, you may contribute up to twice the regular annual maximum. The maximum contribution for employees approved for participation in catch-up is \$33,000 as of the printing of this booklet. A full description is included on page 8 in the Deferred Compensation Section, as is a copy of the application form on page 19.

How do I schedule an Executive Physical?

You may schedule an Executive Physical by contacting your Department Personnel Representative.

How do I enroll in or change my level of Optional Life Insurance?

The enrollment period for Optional Life Insurance for all County employees is in the spring. If you are not enrolled for the maximum coverage allowed, you will receive enrollment materials along with Evidence of Insurability requirements at that time. You may decrease or cancel coverage anytime during the year by submitting the request, in writing, to the Benefits Administration Unit, Internal Services Department. To review the cost of your coverage go to <http://www.miamidade.gov/benefits> and click on Benefits Calculator under Resources.

I am not under the Mayor's purview and receive a biweekly car allowance as part of my Executive Benefits. What is the car allowance intended to cover?

The car allowance is intended to offset the cost of maintenance, insurance, gasoline, tolls and other operating expenses, including parking fees incurred when attending business meetings and

functions. Executives receiving a car allowance, regardless of the amount, **are not permitted the use of a County pool car.** It is expected that they use their personal vehicle for County business.

If I purchase days of annual leave, when will they be added to my leave balance?

Annual leave that you purchase with your Executive Benefits allowance during the annual enrollment period will be added to your leave balance in the first paycheck of 2012. If you are completing an enrollment form at any other time of the year, the hours will be added in the first check in which your Executive Benefits appear.

Executive Long-Term Disability (LTD) Insurance for 2012

As an Executive Benefits recipient, you are eligible to purchase MetLife Executive Long-Term Disability Insurance. The Executive LTD plan provides a higher level of monthly benefit and greater maximum

benefit than the disability plan available to employees who are not eligible executives. Coverage is guaranteed when first eligible. You must be actively at work for coverage to become effective.

Elimination Period

The elimination period is the period of consecutive days for which no benefit is payable and begins on the first day of disability. The elimination period for benefits under this plan is the greater of 90 days or expiration of all sick leave or sick leave pool donations.

Cost of Coverage

The 2012 biweekly premium for Executive Long-Term Disability coverage is \$0.43 per \$100 of an enrollee's covered monthly payroll. To calculate the biweekly cost to you, take .0043 X your covered monthly earnings. (Adjusted biweekly X 26 / 12 X .0043)

For example:

With an annual salary of \$75,000, your monthly salary is \$6,250.

When the biweekly cost is calculated,
 $\$0.0043 \times \$6,250 = \$26.88$.

If your salary is \$100,000 annually, your monthly value is \$8,333.

The biweekly cost of the plan will be
 $\$.0043 \times \$8,333 = \$35.83$.

Executives earning \$126,000 and above per year will pay the maximum \$45.15 per pay period.

Plan Benefits

When you are enrolled in the Executive Long-Term Disability Plan, you are eligible for the following benefits if you submit a claim and are approved for disability payments:

- a monthly benefit of 66 2/3% of your basic monthly earnings, to a **maximum of \$7,000 per month.**
- the waiver of monthly premiums while you are receiving a benefit from MetLife

Occupational Coverage

You will be covered for both occupational and non-occupational accidental injuries and illness.

Disability

"Disability" is defined as the condition wherein:

Due to sickness, or as a direct result of accidental injury, you are receiving appropriate care and treatment and complying with the requirements of such treatment and are unable to earn more than 80% of your predisability earnings at your own occupation from any employer in your local economy. You will continue to be disabled if MetLife determines that after 24 months you are unable to earn more than 80% of your predisability earnings at any employer in your local economy at any gainful occupations for which you are reasonably qualified taking into account training, proper education and experience.

Survivor Income Benefits

If you become disabled and die while entitled to receive disability benefits, your eligible survivors will receive two-thirds of your net monthly disability income benefit for two years.

Conversion Privilege/Portability

You may be eligible for converted disability coverage with MetLife when you leave County service. If you have been insured for at least 12 consecutive months prior to terminating, you will not be required to submit proof of insurability.

Benefit Period

Under the Executive Long-Term Disability Plan, benefits are payable to age 65 if you become disabled anytime before the age of 60. If age of disability is greater than age 60, however, the benefits duration is as follows:

Age When Total Disability Begins	Benefits Duration
Less than 60	to age 65
60	60 months
61	48 months
62	42 months
63	36 months
64	30 months
65	24 months
66	21 months
67	18 months
68	15 months
69 and over	12 months

What is Not Covered

Disability due to the following will not be covered:

- war, declared or undeclared, or act of war, insurrection, rebellion or terrorist act
- active participation in a riot
- intentionally self-inflicted injury
- attempted suicide
- commission of or attempt to commit a felony

Pre-Existing Condition Exclusion

A "pre-existing condition" means a sickness or accidental injury for which you received medical treatment, consultation, care or services; took prescription medication or had medications prescribed; or had symptoms or conditions that would cause a reasonably prudent person to seek diagnosis, care or treatment; in the three months before the employee's insurance or any increase in the amount of such insurance takes effect. The policy will not cover a disability caused by, contributed to by, or resulting from a pre-existing condition which begins in the first 12 months after your coverage is effective.

Coordination of Benefits

The Executive Long-Term Disability Plan coordinates with any disability income benefits payable under any compulsory benefits act or law, the amount of disability income benefits for which you are eligible under any other group plan, benefits payable under any governmental retirement system as a result of your job with your employer, the amount of benefits from your employer's retirement plan, and benefits payable under the Federal Social Security Act.

Application for Coverage

If you wish to enroll for Executive LTD Insurance, outside of your initial eligibility, you must submit a completed Metlife evidence of insurability form which is subject to medical approval. Payroll deductions for premiums will begin only after you are approved for coverage; therefore, you should not allocate any part of your Executive Benefits Allowance to Long-Term Disability insurance. Enrollment in the Executive LTD is guaranteed only when you are first eligible; at any other time an

Evidence of Insurability (EOI) form must be completed and submitted for approval by the provider.

To Cancel Coverage

To cancel Executive Long-Term Disability coverage, you must send a request via email or in writing to the Benefits Administration Unit, Internal Services Department, Suite 2340, Stephen P. Clark Center. You may also indicate your desire to cancel by writing "cancel" on your Executive Benefits Enrollment form in the LTD area. Coverage can be canceled only during the enrollment period in the fall for the coming year.

TO AVOID DUPLICATION OF COVERAGE

The Executive Long-Term Disability Insurance may not be combined with the Short or Long-Term Disability Income Protection available through the non-executive program.

DISCLAIMER: Contract terms and provisions determine benefits payable. This is intended for summary purposes only.

Purchase of Annual Leave

You may purchase up to 5 days of annual leave with your Executive Benefits Allowance. The actual cost of the leave is based on your hourly rate at the time that your Executive Benefits are processed. Your enrollment form contains the cost of the leave at the time that your form was prepared; therefore the actual cost may be somewhat higher than predicted. The total cost will be

subtracted from your Executive Benefits Allowance at the time of processing.

Annual leave that you purchase with your Executive Benefits allowance during the annual enrollment period will be added to your leave balance in the first paycheck of 2012. If you are completing an enrollment form at any other time of the year, the hours will be added in the first check in which your Executive Benefits appear.

Deferred Compensation*

Participating in the County’s deferred compensation program allows you to defer, or postpone receipt of, part of your salary to save for the time when you retire or leave County service. You pay only Social Security tax on the money that is invested, and you are not taxed on the earnings, until you take a distribution.

You may choose to invest your contributions with one or both of the current providers, International City Management Association-Retirement Corporation (ICMA-RC) or National Association of Counties (NACo), administered by Nationwide Retirement Solutions. Both providers offer a wide range of investment opportunities, from conservative to aggressive portfolios, and a full scope of mutual funds. Provider representatives are situated locally and available to speak and/or meet with you at your convenience.

To enroll in deferred compensation, you must submit a completed enrollment form for one, or both, of the providers to establish your account and begin a biweekly payroll deduction. The maximum contribution allowed currently is \$16,500 for regular enrollment. If you are 50 years of age or over you may contribute an additional \$5,500 for a total of \$22,000.

Catch-Up Provision

Under the catch-up provision you may make up for years in which you did not participate in deferred compensation, or you did not contribute the maximum allowed. You must first submit an application for approval to contribute more than the normal maximum allowed

in the calendar year. In order to determine the years in which you may participate in Catch-up, you must designate a Normal Retirement Age. This is defined as the age in which you are eligible to receive unreduced retirement benefits from your employer’s pension plan or a later date that you choose, however, you may not participate in the Catch-up provision beyond the age of 70 ½. When you are approved for participation in Catch-up, you may contribute up to a pre-determined amount for one, two or three years prior to the year you have declared as your Normal Retirement Age. Whether or not you contribute to deferred compensation and participate in Catch-up in the years that you establish, you will be deemed a participant. You do not have to retire on the date that you designate.

The maximum contribution for Catch-up participants is \$33,000, twice the normal maximum.

On-site Plan Representatives

Both ICMA-RC and NACo representatives are available for consultation specific days of the week in the Benefits Administration Unit of the Internal Services Department on the 23rd Floor of the Stephen P. Clark Center.

Monday and Wednesday

NACo. (305) 375-4853

Tuesday and Thursday

ICMA-RC.(305) 375-4710

** Note: All contribution limits are based on IRS allowances as of the printing of this book. Visit the Deferred Compensation page, for County Employees, at www.miamidade.gov for recent updates.*

Executive Early Retirement Incentive Program

The Early Retirement Incentive Program, first offered in 1989, allows eligible executives to leave County service but remain in the group medical and dental plans for 10 years or until age 65, whichever is earlier. The County will continue to pay its portion of the medical and dental coverage.

You become eligible for the benefits when your age plus years of continuous County service equal 70. A letter of notification is generated upon your becoming eligible and it is sent to your home via certified mail. Executives have seven months from their eligibility date to respond to the notification, and two additional months to separate from County payroll in order to activate the benefit. If you return the response form indicating that you wish to participate, you

will be sent the appropriate enrollment forms to continue your insurance.

In addition to continuation of the insurance, the program offers:

- an increase of 500 hours in the maximum number of hours of sick leave that may be paid out. This raises the limit from a maximum of 1,000 to 1,500 hours
- payout of 100% of your sick leave balance, up to the 1,500 hours. There is no reduction in the percentage of hours paid, regardless of the number of years of County service.

This is a one-time offer made only at the time that you become eligible.

If you choose not to participate in the Early Retirement Incentive Program, you will have no further opportunity to do so.

Purchase of FRS Time with Deferred Compensation

If you have already obtained an estimate from the Florida Retirement Service for the cost of purchasing eligible time, such as military or out of state service or an approved leave of absence, you may purchase the service with your deferred compensation funds. You will need to complete sections 1 and 2 of the FRS form PRO-1, available online at www.myfrs.com in the Resources/Forms section. The form should be mailed directly to your deferred compensation provider, i.e., ICMA-RC or NACo. It is their responsibility to send a check to the FRS as payment for the time you are purchasing.



Retiree Health Insurance

If you are terminating from service with Miami-Dade County, you may be eligible to participate in the Retiree Health Insurance program for executives in groups 1, 2 and 3.

The Retiree Health Insurance program provides for continuation of the County portion of group medical and dental insurance for eligible executives for 10 years, or until age 65, whichever is earlier. To be eligible you must:

- Be in Executive Group 1, 2 or 3, or a former executive designated as an Executive Group 1, 2, or 3 for a minimum of six years, and
- Have at least 10 years of continuous Miami-Dade County service and be age 60, or have at least 30 years of continuous Miami-Dade County service or have at least 25 years of continuous Special Risk service with Miami-Dade County, and
- Terminate from County Service.

When you are within 3 months of your date of termination with the County, contact the Benefits Administration Unit of the Internal Services Department, Suite 2340, in the Stephen P. Clark Center.

YOU MUST MAKE WRITTEN NOTIFICATION OF YOUR INTENT TO PARTICIPATE IN THIS BENEFIT.

(Form on page 17)



You will receive the appropriate retiree insurance enrollment forms when you meet with a Senior Employee Benefits Specialist in the Benefits Administration Unit, Internal Services Department to complete your retirement or DROP Termination paperwork

County Code Regarding Payment of Leave and Eligibility for Retiree Health Insurance

The Miami-Dade County Code contains sections which describe circumstances under which accumulated sick and annual leave will not be paid to a County officer or employee who separates from service while under investigation for, or having been found to have committed, an offense involving breach of the public trust. Please note that eligibility for the Retiree Health Insurance offered to executives is governed by the same sections of the code. See Sections 2-56.30 – 33 of the Code for complete description.

Beneficiary Updates

If you wish to update your beneficiary designations, you may access all of the online forms/links at www.miamidade.gov/benefits. Just click on Active Employees, from the menu on the top, and then on Forms under Resource. Please log on to eNet to update your group basic life insurance and optional life insurance benefits.

- Basic/Optional Life Insurance Online Beneficiary Designation
- County Death Benefit Beneficiary Designation
(administered by Human Resources Department)
- County Accidental Death Insurance
(administered by Human Resources Department)
- ICMA-RC Employee Information Change Form
- NACo Participation Agreement
- FRS Pension Plan Beneficiary Designation Form for Active Members
- FRS Investment Plan Beneficiary Designation Form for Active Members

Retirement Notes

Longevity

Only full-time County service counts toward longevity. Your years of County longevity may not match your years of service with FRS. Many employees worked for agencies covered by FRS and accrued time with the State before becoming County employees. You may be eligible to DROP and retire from FRS, but not be eligible for programs offered to executives by the County if your longevity is not sufficient.

Definition of AFC for FRS

Average Final Compensation (AFC) is the average of the 5 highest fiscal years of compensation you earned during your covered employment.

For employees first enrolled under FRS on or after July 1, 2011, the AFC is based on the average of the highest 8 FRS fiscal years of compensation earned.

Eligibility for Executive Retiree Health Insurance

In order to continue to participate in this plan following retirement, executives in Groups 1, 2 and 3 must meet specific service criteria. You must:

- have at least 10 years of continuous County service and be age 60, or
 - have at least 30 years of continuous County service, or
 - have at least 25 years of continuous Special Risk service with the County.
- Note that the service requirements above are all continuous service.

See page 10 for a full description of the Retiree Health Insurance program.

Application for the Executive Retiree Health Insurance

Within 3 months of your planned retirement, you should submit an Executive Retiree Health Insurance Application to the Benefits Administration Unit. The form is shown on page 17 of this booklet. You must also complete the appropriate insurance application from the Benefits Administration Unit to ensure continuation of your medical and dental coverage.

Leave Payouts

Annual Leave – The maximum number of hours that will be paid to executives at termination is 500. If you are a DROP participant and chose to be paid your annual leave balance at the start of your DROP, only the difference between the number of hours paid then and the maximum of 500 will be paid at the time that you terminate.

Sick Leave – If you are a Group 1, 2 or 3 Executive and leave County service with 25 or more years of continuous service with the County, all of your accumulated sick leave will be paid to you.

If you are not in the active executive groups at the time of retirement, you must have 30 years of County service (need not be continuous) to be eligible to receive payment for the full balance of your sick leave. For employees with less than 30 years of service or 25 years Special Risk, and executives with fewer than 25 years of continuous service, sick leave will be paid in accordance with the County's Leave Manual.

Reimbursement Accounts

Reimbursement Accounts offer you reimbursement for eligible expenses you pay for directly. If you choose the Reimbursement Accounts option, you must decide on the total amount you would like to have reimbursed from the list of eligible expenses. You may select either Reimbursement Accounts Taxable or Nontaxable or both. Review the list of eligible expenses and add up your 2012 estimated costs for those items. Determine the amount for which you would like to be reimbursed and enter it in the blank on your form under either Reimbursement Accounts Taxable or Reimbursement Accounts Nontaxable. The total for Reimbursement Accounts Taxable will be divided into bi-weekly amounts and spread evenly throughout the year. Nontaxable items will be reimbursed only after appropriate documentation is submitted.

You are not required to submit canceled checks, receipts, account statements, and the like, for the value of your Taxable Reimbursement Account. However, documentation must be available upon request.

Nontaxable Reimbursements

Professional membership dues and travel related to professional organization membership activities may be reimbursed as nontaxable items. Documentation must be submitted for them before you will be reimbursed. Receipts for dues, conferences, travel, seminars, etc., must be for the year in which you are requesting reimbursement. Any amount remaining in a

Reimbursement Account Nontaxable after the 25th pay period of the year will be included in the last check of the calendar year as taxable income.

Reimbursement Accounts Taxable

- Automobile Insurance
- Homeowners Insurance
- Excess Liability Insurance
- Dependent Care
- Disability Insurance
- Life Insurance
- Fitness Club Membership
- Financial Counseling
- Charitable Contributions
- Income Tax Preparation
- Repayment of Student Loans—your own or your children's
- Savings Fund for Dependent Education
- Florida Pre-Paid College Payments
- Section 529 College Savings Plan contributions
- Purchase of Eligible Service for Florida Retirement System Credit
- Purchase of an Annuity
- Physical Exam/Own Doctor
- Purchase of computer, fax, modem; unreimbursed business travel expenses

Reimbursement Accounts Nontaxable

- Professional Memberships
- Travel Related to Professional Memberships

Summary of Executive Benefits

All executives are eligible for group medical, dental, vision, life and Executive Long Term Disability insurance on their date of hire

Executive Benefits Group 1

Senior Staff, Department Directors

- \$10,000 Executive Benefits Allowance annually
- Participation in a 401(a) Supplemental Retirement Account (\$1,500 per year)
- Annual physical exam with County provider

Executive Benefits Group 2

Department Deputy Directors and those Assistant Directors who are designated as second-in-command within a department

- \$8,500 Executive Benefits Allowance annually
- Annual physical exam with County provider

Executive Benefits Group 3

Executives who report to Group 1 and 2 Executive Benefits recipients

- \$7,500 Executive Benefits Allowance annually
- Annual physical exam with County provider

Executive Benefits Group EA

This group consists of executives who meet the criteria for Group 3 benefits, but who are designated to receive a benefits allowance of **an amount less than \$7,500**.

Executive Benefits Group EH

This group consists of executives who meet the eligibility criteria for Group 3 benefits, but who receive a **car allowance only**. They do not receive a benefits allowance.

Car Allowances

The car allowances below are for executives not under the Mayor's purview. Car allowances for executives, in departments under the Mayor's purview, were eliminated effective October 1, 2011.

Group 1 Executives

\$250 biweekly car allowance (\$6,500 annually)

Group 2 Executives

\$200 biweekly (\$5,200 annually)

Group 3 Executives

\$75 biweekly (\$1,950 annually)

Completing the 2012 Executive Benefits Enrollment Form

1. **Review your name, employee ID number and location information for accuracy.**
2. **Medical, Dental and Vision Premiums–**
The first column of your form shows the amounts you chose to use for each of these items in the 2012 Executive Benefits Enrollment, if any. Costs for the upcoming year are projected for your current enrollments in the 2012 Costs column. These are the figures you should use in the spaces in the 2012 Benefits Selections column to indicate that you wish to use your Benefits Allowance to pay for them. You may use partial amounts if you choose.
3. **Long-Term Disability Insurance –** If you are currently enrolled in Executive Long-Term Disability Insurance, you will see “yes” printed in the space next to “Current Enrollment” in this section. The cost to continue the coverage next year is printed in the 2012 Costs column. If you wish to have this amount, or part of it, taken from your Benefits Allowance, write this figure in the 2012 Benefits Selection column on the line for LTD.
4. **Deferred Compensation –** In this section your current biweekly deductions for ICMA-RC and NACo are shown next to the name of the plan administrator. The total cost projected for the coming year in the 2012 Costs column is your current biweekly deduction multiplied by 26 pay periods. You may contribute all or any part of your Executive Benefits Allowance to deferred compensation, and should indicate the amount in the 2012 Benefits Selections Column. If you are enrolling for the first time in deferred compensation, or changing your

deduction, you will need to submit a change form for ICMA-RC or NACo in addition to your Executive Benefits Enrollment Form.

5. **Reimbursement Accounts**
Taxable, Reimbursement Accounts Nontaxable – Please review the list of approved categories and estimate your expenses for the coming year before entering your selections.
6. **Sign, date, and give your current work address** in the space provided on the last line of the form. Return the completed enrollment form to the Benefits Administration Unit, Internal Services Department, Suite 2340, in the Stephen P. Clark Center, 111 N.W. First Street, Miami, FL, 33128.

Late Enrollment Default

In order to avoid delays in Executive Benefits processing, executives with outstanding Executive Benefits Enrollment Forms will be sent reminders that the forms are overdue. If the enrollments are not returned in a timely manner, the executives will be notified that, in the absence of a completed and signed form, they will be enrolled in the Taxable Reimbursement Account option for the current year. This default will preclude the selection of any other enrollment options and changes in disability coverage. Executives enrolled by default may be required to submit proper documentation for the full amount of the Benefits Allowance according to the rules of the program. (See page 13)

Executive Retiree Health Insurance Application

As of _____ I will terminate service with Miami-Dade County. As of this date I will:

Be in Executive Group 1, 2 or 3, or a former member of Executive Group 1, 2 or 3 for a minimum of 6 years, and

____ have 30 years of continuous Miami-Dade County service or 25 years of continuous Special Risk Miami-Dade County service, or

____ be 60 years of age and have at least 10 years of continuous Miami-Dade County service

I understand that through the Executive Retiree Health Insurance program I may maintain coverage in a County medical and/or dental plan for 10 years or until I reach the age of 65, whichever is earlier. I will be billed for my portion of the cost, if any.

Signature

Date

Print Name

Employee ID Number

Miami-Dade County
457 (b) Deferred Compensation Plan
Declaration of Normal Retirement
Age for Catch-up



Benefits & You!

I _____ wish to exercise my option
(Name)

to utilize the Catch-up provision of the 457(b) Deferred Compensation Plan. As a condition of the Catch-up provision, I must designate a **normal retirement age (NRA)**.

I understand that the NRA I choose must meet the following requirements:

1. The **NRA cannot** be my current age. It must be an age that I will attain in a future calendar year.
2. The **minimum** NRA is the age that I am eligible to receive unreduced pension benefits under the Florida Retirement System. However, the date that I select as my NRA does **not** have to be the age at which I am first eligible to receive an unreduced benefit under the Florida Retirement System. I can choose a later NRA.
3. The **maximum** NRA is the year in which I attain age 70 ½.
4. I will only be able to participate in Catch-up during the three consecutive years immediately prior to the year that I have designated as my NRA.

In selecting my NRA, I understand that my election to participate in Catch-up is a one-time irrevocable election and that my eligibility to participate must be verified by the Benefits Administration Unit. I am not required to retire in the year in which my NRA occurs. I will be deemed a participant in the Catch-up provision whether or not I fully utilize the available deferral amount.

I hereby designate _____, which I will attain in _____, as my NRA.
(Age) (Year)

Signature

Date

Social Security Number

Daytime Phone

Election Form Reviewed by
Sr. Employee Benefit Spec. : _____

Internal Services Department
Benefits Administration Unit
111 NW 1 Street, Suite 2340
Miami, FL 33128