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## 2008 Benefit Reference Guide Update

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As you have been made aware of over the years, via newsletter and general correspondence, the Board of Trustees of the SCME Benefit Fund have instituted several enhancements and/or revisions to your Benefit Fund coverage since the publication of the 2008 Benefit Reference Guide ("booklet") and 2008 Legal Reference Guide. The following is a summary of those revisions since the last publication in 2013. All other terms and conditions set forth in the 2008 Booklet remain effective and applicable. The page number referenced at the end of each summary is the page number of the 2008 booklet, for your reference.

### **RETIREE ELIGIBILITY**

Effective January 1, 2012: SCMEBF Retiree Eligibility,

**1. When you retire, you must meet the following eligibility requirements in order for your coverage to continue:**

- Be at least age fifty-five (55); and
- Have ten (10) *cumulative years of service as a full time Suffolk County employee or a contributing agency of the Fund*, of which no fewer than five (5) years\* of continuous service time must be contiguous to the date of retirement within the applicable retirement system; or have been granted an EMHP Waiver and have ten (10) years of credited service in the appropriate NYS public employees for contributing agency retirement system; and be eligible to retire under the Tier in which you are registered; or
- Or be covered under one of the special plans whereby you are eligible for retirement benefits **regardless of age** after completion of a specified number of years (i.e., twenty (20) or twenty-five (25) years)\*.

*\*You must also have a minimum of ten (10) cumulative years of service as a full time employee of Suffolk County or a contributing agency, of which no fewer than five (5) years of continuous service time must be contiguous to date of retirement within the applicable retirement system, is required. Except for School Crossing Guards, if the service was in a less than full-time position, the employee's service time will be prorated based on the numbers of hours worked per week to a comparable full time equivalent position. **These service requirements will be waived in the event of a disability retirement as defined below in paragraph 2.***

*\*If age 70 at retirement, service requirement is reduced to five (5) years, however service time with Suffolk County or a contributing agency remains as ten (10) cumulative years of service of which no fewer than five (5) years of continuous service time must be contiguous to date of retirement.*

### **2. Disability Retirement**

If the employee has been approved by the retirement system or social security for a disability retirement, the employee and eligible dependents are eligible for Fund coverage regardless of age or service time, as a Fund

retiree. To be certain of remaining eligible for Fund coverage, the employee must continue his/her Fund coverage with timely premium payments while he/she waits for the decision on the disability retirement.

If the employee does not continue coverage or if he/she fails to make the required payments while awaiting the disability retirement determination, coverage for the former employee and his/her dependents will end. Coverage may end permanently.

**If the disability retirement is not granted**, then Fund benefits are not available and/or will be terminated. The former employee will not be eligible to re-enroll in the Fund.

**If the disability retirement is granted**, then continued coverage under the Fund is dependent upon two things:

- Whether or not the former employee made the required payments to maintain Fund coverage upon termination of employment (e.g., continued paying COBRA self-pay premiums and/or post-COBRA period self-pay premiums); **and**
- If the effective date of the disability retirement is a date on which the former employee was not otherwise terminated from employment.

If the former employee continued paying interim self-pay premiums, once granted the disability retirement and deemed eligible for retiree benefits by the Fund, these premiums will be refunded to the former employee. However, if the former employee did not continue his/her Fund coverage by making the required interim, Post-COBRA self-pay premium payments, then to continue coverage as a retiree, all retroactive premiums must be paid in full. Coverage will be effective the first day of the month following receipt by the Fund of the disability retirement decision, all retroactive self-pay premiums and all completed documents required for enrollment, subject to the effective date of disability retirement being a date on which the former employee was not otherwise terminated from employment.

**Members must apply in writing within thirty (30) days of the date of the written decision from the retirement system**, requesting reinstatement of Fund coverage. In such a case, if reinstatement is granted, coverage will be effective on the first day of the month following the receipt by the Fund of the disability retirement determination, all retroactive self-pay premiums, if applicable, and all completed documents required for enrollment.

### **3. Continuing Coverage for Vested Participants**

Eligibility for Coverage as a Vested Participant Upon Separation From Employment. Then the following rules for Continuing Coverage for Vested Participants will apply:

Employees who meet all of the eligibility criteria set forth above for the continuation for benefits into retirement, other than age, but who are within 5 years of retirement age (55), will be notified that they may continue their Benefit Fund coverage as a vested participant by continuously paying premiums. The vested participant must directly pay the self-pay "premium" to the Fund for continued coverage. Third party checks/payment will not be accepted. If the vested participant continuously pays premiums until age fifty-five (55), the Fund would then cover him/her as a retiree; if premiums are not paid at any time during this interim period, coverage cannot be reinstated. A vested participant who has family coverage may change to individual coverage during this period, but may not reinstate family coverage at any time thereafter.

**(replaces entire section entitled "Who is eligible" on page 16)**

#### ***NOTE: BRG = Benefit Reference Guide, LRG = Legal Reference Guide***

To the extent that this 2008 Benefit Reference Guide Update describes any benefit provided by this Fund, which is already described in the Fund's comprehensive Benefit Reference Guide, or as amended in subsequent writings by the Fund, or a policy of insurance, the language of the 2008 Benefit Reference Guide, as amended, and/or the group insurance contract, which specify the exact benefits provided, will govern in the event of inconsistency between it and the language of this 2008 Benefit Reference Guide Update.