

North Dakota Public Employees Retirement System

# LIFE INSURANCE

Revised May 2024

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## Contents

|                                                                   |    |
|-------------------------------------------------------------------|----|
| Enrollments & Waivers.....                                        | 2  |
| Changes/Additions.....                                            | 2  |
| Separation of Employment.....                                     | 3  |
| LIFE INSURANCE ENROLLMENT/CHANGE-SFN 53803.....                   | 4  |
| ELIGIBLE EMPLOYEES (Including Seasonal Employees).....            | 4  |
| ELIGIBLE DEPENDENTS.....                                          | 4  |
| PART-TIME/TEMPORARY EMPLOYEES.....                                | 4  |
| MEMBERS OF BOARDS, COMMISSIONS, OR ASSOCIATIONS.....              | 4  |
| ENROLLMENT.....                                                   | 4  |
| LIFE INSURANCE COVERAGE OPTIONS.....                              | 5  |
| BASIC LIFE.....                                                   | 5  |
| SUPPLEMENTAL LIFE.....                                            | 5  |
| SUPPLEMENTAL DEPENDENT LIFE.....                                  | 5  |
| SUPPLEMENTAL SPOUSE LIFE.....                                     | 5  |
| ADDITION OF SUPPLEMENTAL DEPENDENT LIFE COVERAGE.....             | 5  |
| ADDITION OF SUPPLEMENTAL SPOUSE LIFE COVERAGE.....                | 6  |
| CANCEL OR DECREASE COVERAGE.....                                  | 6  |
| INCREASE IN COVERAGE.....                                         | 6  |
| CONDITIONS UNDER WHICH LIFE COVERAGE MAY BE CONTINUED.....        | 6  |
| <input type="checkbox"/> Family and Medical Leave Act (FMLA)..... | 6  |
| <input type="checkbox"/> Unpaid Leave of Absence.....             | 7  |
| <input type="checkbox"/> Seasonal Employees.....                  | 7  |
| <input type="checkbox"/> USERRA Leave of Absence.....             | 7  |
| EMPLOYMENT STATUS CHANGES.....                                    | 8  |
| CONVERSION OR PORTING OF LIFE INSURANCE.....                      | 9  |
| EVIDENCE OF INSURABILITY.....                                     | 10 |
| APPLICATION FOR ACCIDENTAL LOSS OF LIMB(S) OR EYE(S).....         | 10 |
| APPLICATION FOR ACCELERATED DEATH BENEFIT OPTION.....             | 10 |
| NOTICE OF CHANGE-MEMBER DATA RECORD.....                          | 11 |
| MEMBER TRANSFERS.....                                             | 12 |
| EMPLOYMENT UPDATES THROUGH EMPLOYER SELF SERVICE.....             | 13 |
| EMPLOYMENT STATUS CHANGES:.....                                   | 13 |
| RETURN TO EMPLOYMENT.....                                         | 13 |

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## Enrollments & Waivers

For each new permanent and temporary employee, the authorized agent must complete the online “Setup New Employee”. See your PERSLink Employer Self Service Guide.

Employees can complete their benefit plan enrollment(s) or changes using PERSLink Member Self Service (MSS).

PERSLink MSS provides online access to benefit information, the ability to complete benefit enrollments and changes, as well as updating personal profile information\* instead of completing paper forms and submitting to NDPERS.

\*If you are a state or higher ed employer on the PeopleSoft payroll system, any updates to personal profile information should be completed through PeopleSoft and will transfer over to the NDPERS business system automatically.

| <b><u>If You Are Trying To:</u></b>                                                                                               | <b><u>Use the</u></b>                                                                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Enroll a new employee                                                                                                             | New Hire Guide and Forms                                                                                                                                            |
| Enroll a new employee who is electing spouse supplemental over \$100,000                                                          | <ul style="list-style-type: none"><li>• New Hire Guide and Forms</li><li>• Life Insurance Evidence of Insurability (EOI)</li></ul>                                  |
| Switch an employee from mandatory participation to optional participation and employee is continuing participation                | Submit “Update Employment” through Employer Self Service                                                                                                            |
| Switch an employee from mandatory participation to optional participation and employee is electing NOT to continue to participate | <ul style="list-style-type: none"><li>• Waiver of Insurance Coverage-SFN 58819</li><li>• Submit “Update Employment” request through Employer Self Service</li></ul> |
| Switch an employee from optional participation to mandatory participation                                                         | New Hire Guide and Forms                                                                                                                                            |

## Changes/Additions

|                                                                        |                                                                                                                                                               |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Report a name, marital, or address change                              | <ul style="list-style-type: none"><li>• Notice of Change-Member Data Record-SFN 10766</li><li>• Life Insurance Designation of Beneficiary-SFN 53855</li></ul> |
| Report dependent loss of eligibility status                            | <ul style="list-style-type: none"><li>• Life Insurance Enrollment/Change-SFN 53803</li><li>• Life Insurance Designation of Beneficiary-SFN 53855</li></ul>    |
| Report an employee transferring to another NDPERS participating agency | Notice of Transfer Guide and Forms                                                                                                                            |

|                                                                                        |                                                                                                                                                                                                                 |
|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Report a leave of absence, leave of absence extension, or return from leave of absence | Submit "Leave of Absence" request through Employer Self Service                                                                                                                                                 |
| Report an employee's classification change within agency                               | Submit "Update Employment" request through Employer Self Service                                                                                                                                                |
| Member requests change in beneficiary designation                                      | Life Insurance Designation of Beneficiary Change-SFN 53855                                                                                                                                                      |
| Member wants to increase/decrease coverage levels                                      | <ul style="list-style-type: none"> <li>• Life Insurance Enrollment/Change-SFN 53803 or submit application through Member Self Service (MSS)</li> <li>• Life Insurance Evidence of Insurability (EOI)</li> </ul> |
| Report an employee transferring to another NDPERS participating agency                 | Notice of Transfer Guide and Forms                                                                                                                                                                              |

### **Separation of Employment**

|                                                                                                                              |                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| Notify NDPERS of an employee's separation of employment (for all circumstances, including retirement, disability, and death) | Submit "Terminate Employee" request through Employer Self Service                                                        |
| Conversion of life insurance to individual whole life policy or portability of existing term policy                          | Voya will provide information to terminating employees that includes options for converting or porting existing coverage |

## **LIFE INSURANCE ENROLLMENT/CHANGE-SFN 53803**

**The Life Insurance Enrollment/Change SFN 53803 is used to enroll employees in the group life insurance plan. This form is also used to request increases/decreases in coverage levels.**

### **ELIGIBLE EMPLOYEES (Including Seasonal Employees)**

To be eligible, an employee must be:

- ✓ at least 18 years of age
- ✓ work at least 20 hours per week for 20 or more weeks per calendar year, and
- ✓ filling a position that is regularly funded and not of limited duration (i.e. permanent)

Coverage will be effective the first day of the month following date of employment. If application is not made within the first 31 days of eligibility, evidence of insurability will be required and coverage will be effective the first day of the month following the date of approval by the Claim Administrator.

### **ELIGIBLE DEPENDENTS**

- ✓ The Subscriber's spouse under a legally existing marriage.
- ✓ Unmarried children from birth to age 26.

### **PART-TIME/TEMPORARY EMPLOYEES**

A part-time/temporary employee employed on or after August 1, 2007 is eligible to participate at their own expense if the employee is employed at least 20 hours a week and at least 20 weeks each year of employment.

NDPERS will bill the agency for the premium on the agency monthly billing. The agency is responsible for collecting and remitting the monthly premium with their agency group bill. The agency is responsible for notifying NDPERS through Employer Self Service (ESS) that the individual is a part-time or temporary employee, the effective date of employment, the employee's name, address and Social Security number. The agency must provide a notification through Employer Self Service (ESS) to NDPERS when the employee terminates and deleted the employee from the agency monthly billing.

### **MEMBERS OF BOARDS, COMMISSIONS, OR ASSOCIATIONS**

To be eligible to participate, members of State and political subdivision boards, commissions, or associations must be paid, which means receiving a per diem for each meeting. They will have 31 days from the date they assume office in which to enroll in the group life insurance plan. Coverage will be effective the first day of the month following date of employment. If application is not made within the first 31 days, evidence of insurability will be required and coverage will be contingent on approval by the Plan Administrator.

### **ENROLLMENT**

New employees have an initial 31-day enrollment period from date of employment in which to apply for coverage without evidence of insurability. If application is not made within the first 31 days of employment, the employee may enroll during a designated Annual Enrollment Season.

## **LIFE INSURANCE COVERAGE OPTIONS**

**Even if an employee elects not to have Supplemental Coverage, Parts A, B, C, and G of this form must be completed, signed, dated and submitted to NDPERS for the basic coverage provided by the employer.**

If both spouses are eligible employees for the NDPERS Life Insurance Program, they may be insured as follows:

1. Each may be insured as an employee and as a dependent spouse.
2. Only one parent, not both, can cover the children dependents. If the spouse carrying the dependent's insurance stops being insured as an employee, the other spouse may become insured for Dependent's Insurance by applying within 31 days.

### **BASIC LIFE**

Each eligible employee will receive Basic Life insurance coverage of \$12,000. The premium is \$0.28 per month and is paid by the employer.

### **SUPPLEMENTAL LIFE**

The new employee may elect to have Supplemental Life Coverage in addition to the Basic Life coverage. The supplemental Life increments are \$5,000 up to a maximum benefit of \$600,000. However, any amount of coverage requested above \$300,000 requires the **Evidence of Insurability to be completed and must accompany the Life Insurance Enrollment/Change SFN 53803**. The first increment is \$3,000 (\$3,000 + basic of \$12,000=\$15,000). The monthly premium is based on the employee's age.

### **SUPPLEMENTAL DEPENDENT LIFE**

If the employee elects Supplemental Life coverage, they are eligible to purchase Supplemental Dependent Life insurance. This coverage is available at a \$2,000, \$5,000, \$7,000 or \$10,000 level for each eligible dependent. The premium is based on a flat rate regardless of the number of dependents covered. The life insurance carrier does not require employees to list the names of eligible dependents. Once employees have dependent coverage, any new dependents will be insured automatically if born onto the policy.

### **SUPPLEMENTAL SPOUSE LIFE**

If the employee elects Supplemental Dependent Life insurance coverage, they are eligible to purchase Supplemental Spouse Life insurance. This coverage is available in \$5,000 increments and may not exceed 50% of the total employee Supplemental Life coverage or \$300,000, whichever is less. For all new employees applying for Supplemental Spouse in excess of \$100,000, the life insurance **Evidence of Insurability must be completed and must accompany the Life Insurance Enrollment/Change SFN 53803**. The monthly premium is based on the employee's age.

### **ADDITION OF SUPPLEMENTAL DEPENDENT LIFE COVERAGE**

If an employee is enrolled in the Supplemental Life and wishes to add a spouse as a result of marriage or a child because of birth or adoption, **a new Life Insurance Enrollment/Change SFN 53803 must be completed within 31 days of the event**. If the change is result of birth or adoption, effective date is first of the month in which the event occurred. If the change is result of marriage, effective date is first of month following month in which the event occurred. The premium is based on the employee's age. If the employee already has Supplemental Dependent Life insurance coverage when one of the previously mentioned events occurs, no new application or further notification is required.

## **ADDITION OF SUPPLEMENTAL SPOUSE LIFE COVERAGE**

If an employee is enrolled in the Supplemental Life and wishes to add a spouse as a result of marriage, **a new Life Insurance Enrollment/Change SFN 53803 must be completed within 31 days of the event.** The premium is based on the employee's age. The employee must enroll in Supplemental Dependent Life in order to add Supplemental Spouse Life insurance if he/she does not have it at time of application.

## **CANCEL OR DECREASE COVERAGE**

Employees may cancel/decrease their Supplemental Life, Supplemental Dependent, or Supplemental Spouse Life insurance coverage at any time; however, **this option may not be available to individuals who are having the Supplemental Employee Life premiums paid with pretax dollars under the FlexComp Plan unless it is due to divorce or death.** If you have questions regarding the ability to drop an employee's insurance in relation to the FlexComp Program, please contact the NDPERS office. **A new Life Insurance Enrollment/Change SFN 53803 must be completed and submitted to NDPERS.** The employee may also submit cancellation through Member Self Service (MSS). Cancellations will only be prospective, not retroactive. The cancellation notice must be received by the end of the month prior to the effective date of the cancellation.

## **INCREASE IN COVERAGE**

Existing employees may increase their Supplemental Life, Supplemental Dependent, or Supplemental Spouse Life insurance coverage during the annual enrollment season. An employee can increase their existing Supplemental Life coverage by \$25,000, up to maximum guarantee issue of \$300,000, without requiring Evidence of Insurability. All new requests of supplemental life, increases above \$25,000 in Supplemental Life coverage, total employee life insurance requests over \$300,000, or increase requests for Supplemental Spouse coverage, will require Evidence of Insurability. Requests to increase Supplemental Dependent Life insurance coverage during annual enrollment will not require Evidence of Insurability. An increase to the Supplemental Life insurance coverage that requires Evidence of Insurability will not be effective until the date the coverage is approved by the insurance carrier or January 1<sup>st</sup>, whichever is later.

An employee who marries or at the time of a birth or adoption of a child may apply for Supplemental Life, Supplemental Dependent Life, and Supplemental Spouse Life insurance coverage within 31 days from the date of marriage, birth, or adoption. Only benefit changes which are consistent with the change in family status are permitted. **A Life Insurance Enrollment/Change SFN 53803 and Evidence of Insurability must be completed and dated during this time and submitted to NDPERS.** If the Supplemental Employee Life is increased and being paid with pretax dollars, the premium amount deducted under the FlexComp Program will be increased automatically. The employee may only pre-tax coverage amounts up to \$50,000 of Supplemental Employee Life. Coverage is effective the 1<sup>st</sup> of the month following the date the coverage was approved by the carrier.

## **CONDITIONS UNDER WHICH LIFE COVERAGE MAY BE CONTINUED**

- **Family and Medical Leave Act (FMLA)**

The Family and Medical Leave Act allows up to 12 weeks of unpaid leave. Family and medical leave is available to employees who have been employed by the employer for at least 12 months and worked at least 1,250 hours for the employer during the previous 12 months. During an unpaid leave under the FMLA, an employee may continue life insurance coverage at his/her own expense. It is at the employer's discretion whether to continue to pay the monthly premium for basic life.

## **References:**

NDCC 54-52.4 (North Dakota Family Leave Act of 1989)  
Public Law 103-3 (Family and Medical Leave Act of 1993 (Federal))

If the employee does not return from medical leave, you have the right to recover any premium contributions paid while the employee was on the unpaid leave. If the employee does not return, they will have the right to a conversion policy directly with insurance carrier.

If an employee chooses not to continue the life insurance during an unpaid leave, upon their return to active, eligible employment, they will be required to complete a **Life Insurance Enrollment/Change SFN 53803 for Basic Life only**. If the employee wants Supplemental Life, Supplemental Dependent, and Supplemental Spouse coverage, the employee/dependents can only apply during the annual enrollment season and must provide Evidence of Insurability.

- **Unpaid Leave of Absence**

An employee may continue life insurance coverage at their own expense (including premium for Basic Life). If an employee chooses not to continue the life insurance during an unpaid leave, upon their return to active, eligible employment, they will be required to complete a **Life Insurance Enrollment/Change SFN 53803 for Basic Life only**. If the employee wants Supplemental Life, Supplemental Dependent, and Supplemental Spouse coverage, the employee/dependents can only apply during the annual enrollment season and must provide Evidence of Insurability .

If the employee does not return from medical leave, you have the right to recover any premium contributions paid while the employee was on the unpaid leave. If the employee does not return, they will have the right to a conversion policy directly with insurance carrier.

Any unpaid premiums are the responsibility of the employer to pay. If the employee **does not pay** the employer for any applicable portion of premium that the employee is responsible for, the employer can cancel the employee's coverage but only on a prospective basis. The authorized agent should send an email to the NDPERS info account at [ndpers-info@nd.gov](mailto:ndpers-info@nd.gov). If the reason for the cancellation is due to non-payment of premium, then the authorized agent needs to provide the name of the employee, ID number, effective date of cancellation (prospective only) and that the reason for the cancellation is non-payment of premium as NDPERS needs this information

- **Seasonal Employees**

Seasonal employees are subject to the same requirements as stated above under "Unpaid Leave of Absence".

**Payroll is required to submit a notice to NDPERS that indicates the beginning and ending dates of the leave. You must continue to collect the employee's monthly premium and submit it with the monthly billing for employees who elect to continue their coverage.**

- **USERRA Leave of Absence**

The employee, dependent, and spouse life insurance coverage can remain in force for up to 24 months. If they elect to retain the life insurance coverage, the contract will remain on your monthly billing in the employee's name. The employee must pay the \$.28 basic life as well as any employee, spouse or dependent supplemental premiums by personal check made payable to NDPERS and submit it to their payroll office. If the employee is pre-taxing the premium for the first \$50,000 of employee supplemental life through the NDPERS FlexComp Plan, the options for payment during the leave are outlined in the FlexComp section. If the employee drops the coverage, they may re-enroll



with the levels of coverage they had in place immediately preceding military leave of absence as long as they make application within 31 days of their return from leave. If they do not make application within this timeframe, they may apply during the annual enrollment period and evidence of insurability will be required. This policy also applies to participating political subdivisions.

In the event a member dies while on active duty, the basic and supplemental employee life benefit will be paid to the primary beneficiary on record. The Accidental Death & Dismemberment (AD&D) will not be paid as loss of life during active military duty is contract exclusion.

## **EMPLOYMENT STATUS CHANGES**

**Situation 1: Permanent employee covered on the life insurance changes employment status to temporary employee. The temporary employee is expected to meet the eligibility as a temporary employee. The employee wishes to continue participation as a temporary employee. Coverage can only be the same or less (see Cancel or Decrease Coverage section) when transferring from a permanent to a temporary position.**

**Outcome:** Permanent coverage will be suspended effective the first of the month following the month permanent employment ends. Upon completion of required application, temporary coverage will be effective first of month following permanent employment end date.

**Situation 2: Permanent employee covered on the life insurance changes employment status to temporary employee. The temporary employee is expected to meet the eligibility as a temporary employee. The employee does NOT wish to continue participation as a temporary employee.**

**Outcome:** Coverage will be suspended effective the first of the month following the month permanent employment end date.

**Situation 3: Permanent employee covered on the life insurance changes employment status to temporary employee. The temporary employee is NOT expected to meet the eligibility as a temporary employee.**

**Outcome:** Coverage will be suspended effective the first of the month following the month permanent employment ends. The employee will receive portability and conversion information from the carrier.

**Situation 4: Temporary employee currently enrolled in the life insurance changes employment status to permanent employee.**

**Outcome:** Employee will be changed to permanent coverage the first of the month following the final date of temporary employment. The coverage currently in place will remain until a special enrollment opportunity or annual enrollment occurs. Member cannot increase current coverage with status change to permanent employee. See Cancel or Decrease Coverage section for options on reducing coverage with status change.

**Situation 5: Temporary employee not currently enrolled in the life insurance changes employment status to permanent employee.**

Outcome: Employee will be enrolled in Basic Life automatically, but should complete Life Insurance Enrollment/Change-SFN 53803 or submit application on MSS within 31 days of status change. Evidence of Insurability (EOI) is required for any employee or spouse supplemental life insurance elections. If no application is received, the employee will only be enrolled in the Basic Life until a special enrollment opportunity or annual enrollment occurs.

**CONVERSION OR PORTING OF LIFE INSURANCE**

Application and first premium must be submitted to the life insurance carrier within the 31-day period specified in the life insurance booklet/certificate. Refer to the NDPERS website for additional details.

**FILING PROCEDURE:** Send original to NDPERS and retain a copy for your files.

## EVIDENCE OF INSURABILITY

This form is to be completed if an employee elects to have Supplemental Employee, Supplemental Dependent, or Supplemental Spouse Life Insurance coverage after the initial 31-day enrollment period, or if an employee wants to INCREASE his/her current level of coverage. These changes may only be made during the Annual Enrollment Season each year unless a special enrollment opportunity would occur. This form, in addition to a Life Insurance Enrollment/Change-SFN 53803, must be completed and submitted to NDPERS by the end of annual enrollment. Coverage will become effective the 1<sup>st</sup> day of the month following date of approval by the life insurance carrier.

**Note:** If the employee is applying for additional Supplemental Employee coverage in the amount of \$25,000 up to maximum guarantee issue of \$300,000 and/or is applying for Supplemental Dependent Life coverage during the Annual Enrollment season, the Evidence of Insurability is not required and coverage will be effective the following January 1.

**COMPLETE ALL INFORMATION REQUIRED - DO NOT USE WHITEOUT.** If a correction needs to be made on an EOI, the employee should cross out the information and then provide the correct information. The employee must initial AND date the change. NDPERS will return any EOI forms with whiteout to the employer to request a clean copy from the employee.

**MAKE AND KEEP A COPY OF THE COMPLETED EVIDENCE OF INSURABILITY FOR THE EMPLOYEE.**

### **IMPORTANT:**

When applying for additional supplemental life insurance during the annual enrollment season, both the Group Life Insurance Application and Evidence of Insurability must be signed and dated within the annual enrollment season.

**FILING PROCEDURE:** RETURN THE FORM TO **NDPERS**. NDPERS will forward the form to the life insurance carrier.

The NDPERS office will notify the payroll office when the insurance carrier's underwriting department has either approved or denied the application. Coverage will be effective the month following the date of the approval or January 1<sup>st</sup>, whichever is later.

### **APPLICATION FOR ACCIDENTAL LOSS OF LIMB(S) OR EYE(S)**

Contact the NDPERS office for information and an application for Accidental Limb Loss Benefits or an Application for Accidental Eye Loss Benefits.

### **APPLICATION FOR ACCELERATED DEATH BENEFIT OPTION**

Contact the NDPERS office for information and Accelerated Death Benefit Option claim form or you may find the application on the NDPERS website.

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**NOTICE OF CHANGE-MEMBER DATA RECORD  
SFN 10766**

This form is to be completed to notify NDPERS of:

- Name change
- Address change
- Marital Status change
- Telephone Number change
- E-mail Address change
- Contact change

**Whenever the Notice of Change-Member Data Record-SFN 10766 is completed and sent to NDPERS, the accuracy of the information must be certified by the authorized agent or the member and the form must be dated. If someone other than the authorized agent or member signs the form, it will be returned for the proper signature.**

For **FURTHER** instructions on completing the form, please refer to the back of the form.

1. Complete a marital status change whether there is a name change or not.
2. In cases of marital status change, it is necessary that the member complete a new **Life Insurance Designation of Beneficiary-SFN 53855**
3. Name changes should match the name the member has filed with Social Security.
4. The authorized agent or the member **must** sign Part F for this form to be valid.

**FILING PROCEDURE:** Original to NDPERS – Please retain a photocopy for your records.

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## MEMBER TRANSFERS

*All instructions, terms and conditions are in the NDPERS Notice of Transfer Guide and Forms.*

If the employee will begin employment with a new participating agency within 31 days from the date of employee's last regular paycheck with your agency, both the employee and the authorized agent must review a Notice of Transfer Guide and Forms.

**Administrative Code Chapter 71-02-01-01(24):** "Termination of employment" means a severance of employment by not being on the payroll of a covered employer for a minimum of one month. Approved leave of absence does not constitute termination of employment.

Often employees will terminate their position with an employer participating in NDPERS and take a job with another employer who is also participating in NDPERS.

- **When an employee transfers from one participating employer to another, the new employer is responsible for submitting the premium for the first of the month following the month of employment.**

If employee transfers employment from one participating employer to another participating employer without termination of employment, the former employer should provide termination notification to NDPERS just as any other employee who is leaving employment. New employer should provide notice of new hire just as any other new hire.

The Benefit Enrollment Specialists will transfer over any existing benefits from the former employer to the new employer if that same benefit is available under the new employer.

With the new employment, the employee may be newly eligible for insurance benefits that were not available with the previous employer. New employer must offer these newly eligible benefits to the employee. Employee must make application within 31 days of new hire/transfer date if enrolling.

Former and new employers must complete **Transfer of Unused Sick Leave Verification – SFN 53404** if it is known that the employee is transferring.

- **If the employee experiences an employment status change (temporary to permanent or vice versa) along with the transfer of employment, refer to [Employment Status Changes](#) section for details on premium effective dates.**

**FILING PROCEDURE:** Original to NDPERS – Please retain a photocopy for your records.

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## EMPLOYMENT UPDATES THROUGH EMPLOYER SELF SERVICE

### Use to notify NDPERS of:

- Employee leave of absence/leave without pay
- Extending leave of absence/leave without pay
- Employee's return from leave of absence
- Employee's classification change within agency
- Employment type change
- Employee's reduction in hours/change from permanent to part time/temporary
- Employee's termination of employment

### **EMPLOYMENT STATUS CHANGES:**

#### LEAVE OF ABSENCE

1. NDPERS must be notified whenever an employee is taking a leave without pay and the reason for the leave.
2. A leave of absence cannot exceed one year without being recertified. If an employee is taking an unpaid leave in excess of two years, the employee's membership in NDPERS should be terminated unless the leave is due to an interruption of covered employment due to military activation. However, since the employee has not separated employment with the employer, the employee is not entitled to a distribution of their retirement benefits.
3. NDPERS must be notified of a return from leave prior to the employer resuming retirement contributions for the employee.

#### EMPLOYMENT CHANGES

1. Job Class (This may affect their eligibility for benefits, as well as, how the employee is reported to NDPERS).
2. Employment Type (example: Temporary to Permanent)
3. Participation Status (example: Contributing to Non-Contributing)
4. Hourly or Seasonal Status

#### REDUCTION IN HOURS OR PERMANENT TO PART-TIME/TEMPORARY

If notifying NDPERS of an employee's change from permanent to temporary service, existing enrollment in the health plan would be suspended at the end of the month in which the permanent employment has ended. If employee meets eligibility as a temporary employee and elects to enroll, employee and employer should complete Health Insurance Application or Change-SFN 60036.

If employee meets eligibility as a part-time/temporary employee but does not want to enroll, employee should complete Agreement/Waiver of Participation for Optional Defined Benefit Retirement Plan-SFN 17627.

#### RETURN TO EMPLOYMENT

If an individual returns to employment after more than thirty (30) days but in the same plan year, he/she will not be eligible to participate in the Pre-tax premium benefit.

## SEPARATION OF EMPLOYMENT

A NDPERS separation of employment guide and forms include all necessary information for the employee to review and complete.

The employer or employee may obtain the following guides and forms from the NDPERS website:

- Refund/Rollover Guide– member wants to refund or rollover entire account balance
- Deferred Retirement Guide – member wants to defer (leave intact) account
- Disability Retirement Guide – member wants to apply for disability retirement
- Retirement Guide – member wants to apply for retirement
- Transfer Guide – member is transferring from one PERS employer to another PERS employer within 31 days

It is recommended that employers only print the guides and forms from our website as they are needed to ensure they are providing the most current version to employees.

**NDPERS would like to remind employer's that participate in the group health plan of the Administrative Rules pertaining to final payment of the health insurance premium for terminating employees. Administrative Code section 71-03-04-01 pertaining to state agencies and section 71-03-07-01 pertaining to political subdivisions clarify that an employee's coverage must end the month following the month after termination of employment. This means the employer must remit premium payment for insurance coverage for the month following the month of termination in order to comply with this requirement. In addition, when an employee transfers from one participating employer to another, the new employer is responsible for submitting the premium for the first of the month following the month of employment transfer.**