

Wayne County Retiree Stipend Program

INSTRUCTIONS FOR RETIREE STIPEND PROGRAM PARTICIPANTS FOR CONSIDERATION OF MONTHLY STIPEND PAYMENT

The Retiree Stipend Program was established pursuant to the terms and conditions set forth in the Settlement Agreement approved and amended in the Macdonald, et al v. County of class action litigation (Case No. 09-031117-CL) and the subsequent Wayne County Retirement Ordinance (Ord. No. 2015-610, §1,11-19-2015). These documents, along with the *Wayne County Retiree Stipend Program Summary*, were created as an administrative guide for participants and program administrators. Participants are encouraged to review these documents for more detailed information about this program. You can find these documents at www.waynecounty.com (search for "Open Enrollment").

Please read the following information before completing the attached *Stipend Eligibility Verification Form*. Information included on this form will be used to determine eligibility for stipend payments under the Wayne County Retiree Stipend Program for new retirees entering the program for the first time and all other retirees eligible for participation in the program during the annual stipend eligibility verification process. Failure to adhere to instructions resulting in an incomplete and/or incorrect form, and/or failing to submit requested documentation in a timely manner may result in delay and/or suspension of future stipend payments. Further, submitting false or misleading information or omitting material information as part of this annual verification process may result in rejection of your submitted form or permanent disqualification from this program.

TO BE CONSIDERED FOR A MONTHLY STIPEND UNDER THIS PROGRAM:

- The retiree must be eligible for participation in the Wayne County Retiree Stipend Program. Eligibility requirements for participation in the program can be found in the *Wayne County Retiree Stipend Program Summary* on the Benefits webpage under www.waynecounty.com (search for "Benefit Forms & Information").
- If eligible, the retiree must FULLY COMPLETE each section of the attached ***Stipend Eligibility Verification Form*** and the form must be SIGNED and DATED.
 - **Section A – Eligible Individuals:**
 - Include any family member considered eligible for participation in the program (see *Family Member Eligibility Chart*), regardless of whether they may currently qualify for payment of the stipend. If there are more than four children to be included, include all requested information on a separate page and attach it to the form upon submission.
 - Respond to all three questions for each family member listed.
 - **Question (1)** - Answer "YES" for any person listed that is eligible for Medicare or Medicaid. "Eligibility" for Medicare or Medicaid is defined as meeting the criteria for benefits under these programs as defined by the applicable governing administrative authority, regardless of whether the family member is enrolled. For example, a person reaching the age of 65 who fails to enroll in Medicare will still be considered "eligible" for Medicare for purposes of the Retiree Stipend Program.
 - **Question (2)** – Answer "YES" for any person listed that is eligible for enrollment in another group health plan as an employee, retiree, veteran, spouse, or dependent child, for which the participant is (or would be) required to pay less than 100% of the monthly cost for coverage. **Accurate health plan eligibility disclosure is mandatory.**
 - **Question (3)** – Answer "YES" for any person listed to confirm they meet the criteria for participation in the Retiree Stipend Program as defined in the *Family Member Eligibility Chart*.
 - If any family member listed on the completed form is being listed for the first time, attach proof of relationship as indicated in the *Family Member Eligibility Chart*. When determining the appropriate

stipend amount for the upcoming stipend plan year, Wayne County will not consider any family member for whom proof of relationship has not been provided.

- The number of individuals listed in this section who are determined to meet the criteria for eligible family members and who are not eligible for enrollment in Medicare, Medicaid or another group health plan will determine the coverage tier (individual only, two individuals or family) used to determine the monthly stipend amount.

○ **Section B – Household Adjusted Gross Income (AGI):**

- If at least one family member listed in Section A is not Medicare eligible (either through age or disability), complete this section by entering the amount of the Retiree's household AGI.
 - All income reported to the IRS for the previous tax year by any member of the Retiree's household may be used to reach the highest stipend income level for the Retiree's coverage tier (determined in Section A), even if the income was attributable to a household family member not eligible for the stipend.
- Attach signed copies of all Federal income tax returns filed with the IRS used to calculate the Household AGI entered in this section.
- Duty disability retirees who are not eligible for Medicare or Medicaid must also attach current documentation to confirm ongoing disability status for the year being reviewed, as well as proof of denial from Social Security / Medicare.
- This section does not need to be completed and tax returns are not required to be submitted if all family members listed in Section A are Medicare eligible.
 - Medicare-eligible Retiree Stipend Program participants receive their Medicare stipend amount in the form of a tax-free, employer contribution to a health reimbursement account (HRA) or the like administered through the Municipal Employees' Retirement System (MERS).
 - Any Medicare-eligible family member listed in Section A that has not already been set up with a HRA will have the account established with a welcome kit sent to their home address directly from MERS.

○ **Section C – Eligibility Affidavit:**

- Thoroughly read, sign and date Section C of the form.
- Should the retiree be unable to sign and date Section C, the form may be signed and dated by any individual named as the retiree's designated Power of Attorney. A copy of that Power of Attorney document must be submitted with the form in this case.

OTHER INFORMATION:

- Retirees who had previously opted out of retiree health coverage or were not eligible for payment of the stipend due to being eligible for enrollment in other group health insurance, may still be eligible for payment of the stipend, but must complete the eligibility verification form for annual determination.
- Retirees may be asked for additional information by Wayne County to determine eligibility for payment of the stipend.
- Retirees are responsible for notifying the Wayne County Benefit Administrator of changes in their status or their family's status that affect eligibility, such as divorce, gaining other employer sponsored healthcare, Medicare entitlements or the death of someone covered under the stipend program.

We understand that unique situations may exist. If there are any questions throughout the process, please call us at 1-313-224-5157 from 8:00 a.m. to 4:30 p.m. EST or email us at benefits@waynecounty.com.