



TO: All Employees Separating from Prince William County Schools

FROM: Department of Human Resources

SUBJECT: Exit Interview and Procedures for Separation and Conversion of Employee Benefits

You have received this package from the Prince William County Schools Department of Human Resources because we were notified of your separation. Please read this packet thoroughly and respond to those items which apply to you.

**Please read the following carefully:**

**Direct Deposit:**

Your current direct deposit will remain in effect through your last regular paycheck. Pay statements will be emailed through the end of your work schedule. If you are still receiving pay after your work schedule stops, pay statements will be mailed to your address of record. It will be necessary to notify the Office of Payroll of any change to your direct deposit account. Send an email to [PWCSPayrollOffice@pwcs.edu](mailto:PWCSPayrollOffice@pwcs.edu) for assistance and required form (found on the pwcs.edu web page).

**Exit Survey:**

The Department of Human Resources will be sending out an invitation to complete an Exit Survey. We would like for you to take a few moments to complete the survey. Your valuable feedback will help us in our efforts to make continuous improvements for our employees. If you would prefer an in-person exit survey meeting, please contact the Office of Employee Relations at the following number: 703.791.8767.

**Change of Name/Address:**

If you will be changing your address you will need to complete the Change of Name/Address Form to PWCS as soon as possible. Correspondence from PWCS is **NOT FORWARDED** by the US Postal Service. If you do not change your address with the PWCS Department of Human Resources you will not receive your W-2, COBRA continuation letter, 1095-C form, or any other important correspondence from PWCS following your employment separation.

**Contact Information:**

If you have any questions regarding any of the forms or information contained in this packet, please see the following page for contact information.



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• <i>Teachers &amp; Administrators</i>			703.791.8050
• <i>Classified</i>			703.791.8050
I.D. Badge Reminder	4	Risk Mgmt. & Security	703.791.8911
Information Technology	5	Help Desk	703.791.8826
Insurance		Office of Benefits & Retirement Services	
• Insurances & Other PWCS Benefits	6		703.791.8050
• COBRA	7		703.791.8050
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Leaves		Time and Leave Office	703.791.8050
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Retirement		Office of Benefits & Retirement Services	
• Supplemental Retirement	12		703.791.8050
• Virginia Retirement System	13		888.827.3847



**CHANGE OF NAME AND/OR ADDRESS FORM**  
*Please type or print the information*

CHECK ONE:  Classified  Teacher/Admin

NAME: \_\_\_\_\_

EMPLOYEE NO.: \_\_\_\_\_

WORK LOCATION: \_\_\_\_\_

**NAME CHANGE:** *Please note, to process a name change, additional documentation such as a copy of a Marriage Certificate or court document must be provided.*

FROM: \_\_\_\_\_  
*Last First Middle*

TO: \_\_\_\_\_  
*Last First Middle*

**CHANGE OF ADDRESS:**

FROM: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City State Zip Code*

TO: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City State Zip Code*

**CHANGE OF PHONE NUMBER:**

FROM: \_\_\_\_\_  
*Area Code Phone Number*

TO: \_\_\_\_\_  
*Area Code Phone Number*

EFFECTIVE DATE OF CHANGE(S) LISTED ABOVE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Submit change requests to the PWCS Department of Human Resources by:  
Fax: 703.791.8193, Courier, or Mail to: PWCS Attn: DHR, P.O. Box 389, Manassas, VA 20108



## **I.D. Badge Reminder**

If you have not turned in your badge to the Risk Management and Security Office, place employee badge in an envelope and return to:

Prince William County Public Schools  
Attention: Risk Management  
P.O. Box 389  
Manassas, VA 20108



## Information Technology--Exit Procedure

### **2 weeks prior to leave date**

#### **Outlook**

Create a Rule in Outlook with the contact information of the person that will be replacing the user in the current position. Add the leave date/effective date in the Rule as well. If this information isn't available add the name of the person that will be covering for the user. Do not remove the rule.

#### **Office 365**

OneDrive Files--if the user is listed as the owner and other users need access to files after the user leaves the file(s) will need to be saved locally and sent to them via email or given to them via flash drive so they can upload the file(s) into their own OneDrive or into an Office 365 group. Sharing it is not enough. Once the user account is disabled the file(s) are no longer accessible.

Shared Calendars--MS does not support shared calendars. Create an Office 365 group so all information from the shared calendar can be moved to the group calendar. On the Office 365 group assign an owner in addition to yourself and any additional user permissions.

#### **On leave day**

HR will change the status of the user account from Active to Inactive. ITS will disable the network and logon account within 24 hours of the change from HR. The network and all Office 365 data will be inaccessible.

Office 365-The account will be disabled when the network logon is disabled. All information in the Office 365 account will be inaccessible after 30 days but the logon will remain in the system for 365 days in case the user returns.

Mailbox- The mailbox will be disabled and not accessible once the account is disabled. Make sure the rule mentioned above has been created and is turned on.

SIS--SMS, Gradebook, Parent Portal—The SMS Admin at your building location will submit the ticket to inactivate the account. The SMS Admin will also verify that the staff member is no longer assigned to any classes in SMS before entering the ticket. Once the SMS account has been deactivated the user will not be able to log into SMS, Gradebook or Parent Portal.

DART-Access is controlled by HR status. When the user is set to Inactive in HR the DART access will be terminated.

EdPlan-Access is controlled by the network logon and will disable when the network logon is disabled.

ESS-Access is controlled by HR status. When the user is set to Inactive in HR the ESS access will be terminated.



## **Insurances and other PWCS Benefits**

If you separate employment with the Prince William County Schools during the plan year, your right to various benefits will be determined in the following manner:

### **Dependent Care Flex Benefit:**

After your separation, your participation will cease and no further salary contributions will be contributed to your account. You will still be able to request reimbursement for qualifying dependent care expenses for the remainder of the plan year from the balance remaining in your dependent care account at the time of your separation of employment.

### **Health Care Flex Benefit:**

Your participation will cease after your separation and no further salary contributions will be made to your account. You will be able to submit claims for reimbursement of health care expenses incurred prior to your date of separation.

### **Insurance(s):**

You will remain covered by insurance, but only for the period for which premiums have been paid. This includes:

- Anthem BC/BS
- Delta Dental Premier
- Delta Dental EPN
- Vision Service Plan (VSP)
- Standard Long Term Disability



## **COBRA – Guidelines for Continued Group Health Insurance Coverage**

Individuals separating from the Prince William County School System are no longer eligible for employer paid contributions toward group health care coverage. However, the option to continue coverage in the group health plan is available to employees leaving the system provided the employee is not covered by another health care plan or eligible for Medicare. If this option is selected, the employee must pay the total cost of participation in the group health care plan.

Eligible employees and dependents have a maximum of 60 calendar days from the date of a **qualifying event** (see below) to notify the employer that continuing coverage is desired. The cost for this continued health insurance coverage is 102% of the school division group rate. Payment will be retroactive to the date regular coverage ceased. If the decision to enroll is not made until the end of the 60-day period, the first payment will be for two months of coverage.

### **QUALIFYING EVENTS**

Employees and enrolled family members may continue coverage for 18 months if they:

- Are laid-off or discharged (except for gross misconduct).
- Leave work voluntarily for any reason.

The 18 months may be extended to 29 months if an individual is determined to be disabled (for Social Security disability purposes) and the Benefits Office is notified of that determination within 60 days.

Eligibility for continued coverage ends when any one of the following events occurs:

- The participant becomes eligible for Medicare.
- The participant enrolls in another health care program.
- The participant does not make monthly payments in the manner prescribed.
- Group health care coverage is no longer available to active employees
- The period of eligibility for continued group health care coverage expires (18 months or 36 months).
- The participant extended coverage for up to 29 months due to disability and there has been a final determination that the participant is no longer disabled.

It is the employee's responsibility to notify the Benefits Office 703.791.8050 **immediately** of any change in eligibility.

**If insured, a COBRA quote and application will be issued to your home address. You have 60 days from the date your insurance coverage ends to notify the Office of Benefits that continued coverage is desired. If you have any questions about COBRA, please call 703.791.8050.**



## **Important Life Insurance Information**

### *How to keep your life insurance going.....*

You may continue your life insurance protection that has been provided to you as a PWCS employee by taking out an individual life insurance policy. This is called a conversion and your right to do so is called a conversion privilege. In order to exercise your conversion privilege, you must - **within 31 days after your group insurance ends** - submit the completed conversion enrollment form and the first premium payment to Minnesota Life. The conversion packet is located at [varetire.org](http://varetire.org), click on **Forms**, click on **Minnesota Life/VRS Life Insurance Forms Page**, select **Conversion Brochure**, or to go directly to the forms by using this address <https://web1.lifebenefits.com/public/lbwcm/VRS-4638.pdf>.

For more information about your conversion privilege, contact Minnesota Life at 1-800.441.2258.





## Consider Your Options for Sick and Annual Leave at Separation

When you leave Prince William County Schools (PWCS), you have the option to take the value of your sick and/or annual leave as follows:

1. A transfer of sick leave to another school division,
2. A payment directly to you,
3. A deferred payment to your 403(b) and/or 457 accounts with Lincoln Financial Group,
4. A conversion to Health Insurance (for a qualify retirees only).
5. A combination of previous options.

Medicare and Social Security taxes (combined rate 7.65%) must be paid by you via PWCS payroll for any option you select except transfers. If you select to have the funds paid directly to you, state and federal income taxes will also be deducted. If the funds are deferred to your retirement account, income taxes will be deferred until such time as you withdraw the funds. Retirees will pay their own income taxes if they convert their sick leave to health insurance benefits.

If you select the retirement account option, be sure to check your annual maximum limit in your 403(b) plan. (For CY 2018, this limit is \$18,500 or \$24,500 if you are over 50.) If you have reached that limit or will reach it with this deferred payment, you will need to set up a 457(b) to receive the funds in excess of your 403(b) limit. Please note: The new 457(b) Account must be set up no later than the month prior to your last month of employment.

If you have any questions or need assistance, please contact your assigned Lincoln Representative. If you do not know who your Lincoln Representative is, you may find the school assignments listed online at [LincolnFinancial.com/PWCS](http://LincolnFinancial.com/PWCS). Click on the Contact Us tab.

- Haleh Nikmaram: [Haleh.Nikmaram@lfg.com](mailto:Haleh.Nikmaram@lfg.com) 703-581-9535
- Kathleen Fox: [Kathleen.Fox@lfg.com](mailto:Kathleen.Fox@lfg.com) 703-730-5151
- Michael Knapp: [Michael.Knapp@lfg.com](mailto:Michael.Knapp@lfg.com) 571-438-1705
- Ernest Massenberg: [Ernest.MassenbergIII@lfg.com](mailto:Ernest.MassenbergIII@lfg.com) 703-437-7793
- Steve Singer: [Steve.Singer@lfg.com](mailto:Steve.Singer@lfg.com) 703-680-4524
- Liliana Zarate [Liliana.Zarate@LFG.com](mailto:Liliana.Zarate@LFG.com) 202-329-5715



**Disposition of Accumulated Sick Leave**  
*(Return this form to the Time and Leave Office)*

(Please Print)

Employee Name: \_\_\_\_\_ Employee No: \_\_\_\_\_

Home Address: \_\_\_\_\_  
 Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Employee Type:  Classified  Teacher  Administrative

Type of Separation:  Resign  Retire Last date of work: \_\_\_\_\_

Eligible **employees separating** employment from the Prince William County School System, must select an option within sixty (60) days of separation or all rights to accrued, unused sick leave will be **relinquished**. Sick leave will be prorated for final pay purposes and any sick leave days (as represented in hours and minutes) used in excess for those hours earned shall be deducted from the employee's final pay check. Eligible employees may be compensated for accrued, unused, sick leave at **10%** of their daily rate of pay at the time of separation within the limitations of **School Board** and **federal regulations**.

1. Pay \_\_\_\_\_ % directly to me for sick leave accumulated in Prince William County Public Schools.
2. Deposit \_\_\_\_\_ % of my accumulated sick leave into Lincoln Financial 403b Account. \*
3. Deposit \_\_\_\_\_ % of my accumulated sick leave into Lincoln Financial 457 Account. \*
4. Hold \_\_\_\_\_ days of sick leave from my rollover for use in the last 45 days of employment.
5. Transfer \_\_\_\_\_ hours of accumulated sick leave to another school division.  
 Name of transfer school/district: \_\_\_\_\_  
 Address: \_\_\_\_\_

**\*Only when initiating a Lincoln transaction, receipt of this form is required 45 days prior to your last day of employment. Your sick leave will be removed at that time. Leave Without Pay will be applied to any future sick leave requested. Social Security taxes of 7.65% will be taken out of final payroll vouchers. You must meet with a Lincoln Representative prior to completing this form for their verification of this transaction.**

Lincoln Representative \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Employee

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Approval of School Board Representative

Office use only	
Daily Rate \$ _____	X Eligible Days _____ = Total Amt Due \$ _____
Date of Disbursement: _____	Date of Transfer: _____ # Days _____
Processed by: _____	Date: _____



**Disposition of Accumulated Annual Leave**  
*(Return this form to the Time and Leave Office)*

(Please Print)

Employee Name: \_\_\_\_\_ Employee No: \_\_\_\_\_

Home Address: \_\_\_\_\_  
 Street Address

City State Zip Code Phone Number

Employee Type:  Classified  Teacher  Administrative

Type of Separation:  Resign  Retire Last date of work: \_\_\_\_\_

Eligible **employees separating** employment from the Prince William County School System shall be paid for the unused portion of their annual leave at their per diem rate at the time of separation. Annual leave will be prorated for final pay purposes and any annual leave days (as represented in hours and minutes) used in excess of those hours earned shall be deducted from the employee's final pay check. Eligible employees may be compensated for accrued, unused, leave at their hourly rate of pay at the time of separation within the limitations of **School Board** and **federal regulations**.

1. Pay \_\_\_\_\_ % directly to me for annual leave accumulated in Prince William County Public Schools.
2. Deposit \_\_\_\_\_ % of my accumulated annual leave into Lincoln Financial 403b Account. \*
3. Deposit \_\_\_\_\_ % of my accumulated annual leave into Lincoln Financial 457 Account. \*
4. Hold \_\_\_\_\_ days of annual leave from my rollover for use in the last 45 days of employment.

**\*Only when initiating a Lincoln transaction, receipt of this form is required 45 days prior to your last day of employment. Your annual leave will be removed at that time. Leave Without Pay will be applied to any future annual leave requested. Social Security taxes of 7.65% will be taken out of your final payroll vouchers. You must meet with a Lincoln Representative prior to completing this form for their verification of this transaction.**

Lincoln Representative \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Employee

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Approval of School Board Representative

Office use only	
Daily Rate \$ _____	X Eligible Days _____ = Total Amt Due \$ _____
Date of Disbursement: _____	
Processed by: _____	Date: _____



## Supplemental Retirement Plan 403(b)/457

Employees who separated employment with Prince William County Schools (PWCS) and participated in a Supplemental Retirement Plan have the following options regarding the funds in their Supplemental Retirement Account(s).

- **Participants who have an account balance over \$5,000 may:**
  - Leave the funds in existing account(s). Employees may decide, at a later date, to take a distribution or rollover.
  - Rollover the funds to a similar plan.
  - Cash out the funds (taxes and fees may apply).
  
- **Participants with an account balance between \$1,000 and \$5,000 may:**
  - Request a cash distribution within 90 days (taxes and fees may apply).
  - Rollover funds to a similar plan within 90 days.
  - Those who do not request a distribution/rollover within 90 days will automatically have their funds rolled over into a Lincoln IRA. This IRA will earn 3.75% interest the first year, and 3.6% for all remaining years. A \$30 annual fee is assessed on a quarterly basis (\$7.50 per quarter).\*
  
- **Participants who have an account balance less than \$1,000 may:**
  - Request a cash distribution within 90 days (taxes and fees may apply).
  - Rollover the funds to a similar plan within 90 days.
  - Those who do not request a distribution/rollover within 90 days will automatically have their funds dispersed to them. The employee will be responsible for taxes and any applicable fees.\*

\* Lincoln reserves the right to process force-outs any time after the 90 day period has been satisfied.

Employees are always 100% vested. Employee and employer matching contributions may be withdrawn or rolled over following the date of separation. You may contact Lincoln Financial at the number below or via web at [www.LincolnFinancial.com](http://www.LincolnFinancial.com) to request balance information and appropriate up-to-date forms.

**Employees who would like to exercise an option are encouraged to contact the applicable company representative(s):**

Lincoln Alliance	800.234.3500
AIG/Valic	800.448.2542
Great-West	800.701.8255
ING (Aetna)	800.525.4225
Lincoln Life	800.454.6265

Any additional questions may be forwarded to the Office of Benefits at 703.791.8050, or via email [benefits@pwcs.edu](mailto:benefits@pwcs.edu).



## Virginia Retirement System (VRS) Refunds

VRS members are identified as enrolled in Plan 1, Plan 2, or the Hybrid Plan. Members hired prior to July 1, 2008 are in **Plan 1**. Members hired on or after July 1, 2008 and were not vested by January 1, 2014 are in **Plan 2**. All employees with no VRS service and hired on January 1, 2014 or after are in the **Hybrid Plan**.

Under Plan 1, Plan 2 and the Hybrid Plan, if you request a **refund** and you are not vested (you have fewer than five years of creditable service), you will receive your own contributions and interest in your member contribution account. If you have any member contributions paid by your employer in your account, you will forfeit these contributions and interest. If you are vested (you have at least five years of creditable service) or involuntarily separated from employment for causes other than job performance or misconduct, you will receive a full refund of your member contribution account balance, including any employer-paid member contributions and interest.

**Taking a refund cancels your membership and eligibility for any future VRS benefits. If you take a refund and then return to covered employment, you will be rehired under the current applicable plan and will be eligible to purchase your refunded service. You have the option of leaving your account balance with VRS. You will be considered a deferred member.**

### Refund Application

**The Defined Benefit Plan Request for Refund for all of the plans is done online through VRS.**

Visit [www.varetire.org](http://www.varetire.org) and log in to request a refund. If you have not created an online account, you will need to create one at this time in order to request a refund.

**HYBRID PLAN EMPLOYEES PLEASE NOTE:** employees in the Hybrid Plan have a Defined Benefit and a Defined Contribution. To request a distribution from your Defined Contribution, you must submit the appropriate distribution form to ICMA-RC by mail or by fax. The form(s) is located at [www.varetire.org](http://www.varetire.org) under the Defined Contribution Plans tab. A separate form is required for distributions from the Hybrid 457 Deferred Compensation Plan and Hybrid 401(a) Cash Match Plan. ICMA-RC can be contacted at 1.877.327.5261

### ***Look up Your Member Information in myVRS***

View your member contribution account balance, earliest unreduced and reduced retirement eligibility dates, estimated retirement benefit amounts and other information from your member record. If you are thinking of leaving employment, this information can help you decide the option that will best meet your needs. Login and create a secure online account at [www.varetire.org/myVRS/](http://www.varetire.org/myVRS/). If you need additional assistance, contact the Office of Benefits & Retirement Services at 703.791.8772 or call VRS toll free at 1-888-VARETIR (1-888-827-3847).