YOUR BENEFITS IN RETIREMENT
Benefits Information
The U-M Shared Services Center (SSC) can answer many of your benefits questions. Have your UMID number available when you call. Benefits representatives are available Monday – Friday, 8 a.m. – 5 p.m. at (734) 615-2000 or (866) 647-7657 (toll-free).

Dial 711 for Telecommunications Relay Service
The Federal Communications Commission adopted use of the 711 dialing code for access to Telecommunications Relay Services (TRS). Dial 711 and ask the operator to connect you to the SSC Contact Center at 734-615-2000. Representatives will be happy to assist you.

Statement of Intent
This booklet describes the benefits available to University of Michigan faculty and staff members who have meet the age and service requirements to retire with benefits under Standard Practice Guide (SPG) Section 201.83. The benefits described within this booklet are based on meeting the SPG 201.83 requirements to retire.

Every effort has been made to ensure the accuracy of information in this booklet. However, if statements in this booklet differ from applicable contracts, certificates or riders, then the terms and conditions of those documents, as interpreted by the Benefits Office, prevail.

Possession of this booklet does not constitute eligibility for retirement.

Limitations
The University of Michigan in its sole discretion may modify, amend, or terminate the benefits described in this booklet with respect to any individual receiving benefits, including active employees, retirees, and their dependents. Although the university has elected to provide these benefits, no individual has a vested right to any of the benefits provided. Nothing in these materials gives any individual the right to continued benefits beyond the time the university modifies, amends, or terminates the benefit. Anyone seeking or accepting any of the benefits provided will be deemed to have accepted the terms of the benefits programs and the university’s right to modify, amend or terminate them.
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Retirement from the University of Michigan

Your eligibility to retire from the University of Michigan is determined by several factors, including your age, your service date, your appointment, and the number of years you have worked for the university.

“Retirement” is defined as a voluntary termination from the university based on meeting age and eligible service requirements. In addition to other eligibility, there is also a 10-year minimum service requirement to retire with benefits, including health, prescription drug, dental, vision, legal, and life insurance coverage, if eligible.

For details on your eligibility and accrual of service to retire, refer to the University of Michigan Standard Practice Guide, SPG 201.83 - Retirement, and the University HR website hr.umich.edu/retirement-eligibility.
Your U-M Benefits in Retirement

When you retire, your U-M employee benefits end on the first of the month following your retirement date. Retiree benefits for which you are eligible start on the 1st of the month following your retirement date. Exception: if you retire on the 1st of the month, your employee benefits end and your retiree benefit start on your retirement date.

If you are enrolled in the following U-M benefit plans and are eligible for benefits as a U-M retiree, coverage for you and your eligible dependents enrolled at the time of your retirement will automatically continue as long as you pay any applicable premiums:

- Health Plan (including prescription drug coverage)
- Dental Plan
- Vision Plan
- Legal Services Plan
- Group Term Life Insurance (Automatically transfers to the Retiree Life Insurance Plan, see page 3)

Open Enrollment

Each year during the Open Enrollment period, you may change your health plan to one of the other health plans offered by the university. You may also change to a different dental plan option, and/or change your vision plan and legal services plan enrollment. Coverage is effective the following January 1.

If you Move Out of a Managed Care Plan Service Area

Please note that if you are covered by a managed care health plan and move outside the service area for more than 60 days, you must change your health plan coverage by completing a “Moving out of a Managed Care Service Area” form. Send your completed form, along with a letter stating where and when you are moving, to SSC Benefits Transactions as indicated on the form. You need to do this within 30 days after the date you move.

Your new coverage will become effective the first day of the month after your move or the date the application is received, whichever is later. To download the form, see hr.umich.edu/forms, or call the U-M Shared Services Center (SSC) and ask to have a copy of the form sent to you.

Dependent Eligibility

Only the eligible person(s) covered under your benefits plans at the time of your retirement can remain on your coverage in retirement. Covered dependent children remain on your benefits until they no longer meet eligibility requirements, up to the end of the month in which they turn 26.

The ability to add persons to your coverage is severely restricted once you have retired. Call the SSC Contact Center if you have questions on benefits eligibility.
Retiree Life Insurance Plan

If you are enrolled in Group Term Life Insurance when you retire, you will be transferred to the Retiree Life Insurance Plan, and the amount of coverage will be reduced to the retirement level for your age. The amount will continue to reduce each year until you turn age 66, when the coverage becomes $2,000, and this amount will remain in effect for the rest of your life.

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<thead>
<tr>
<th>Amounts of Insurance</th>
<th>Your Age On and After Retirement</th>
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<tr>
<td>50 years or less</td>
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<td>51 years but less than 52 years</td>
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<td>$2,000</td>
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Your Life Insurance Will Be Paid to Your Named Beneficiaries

Regardless of how, when, or where death occurs, the full amount of your life insurance in effect at the time of death will be paid to your beneficiaries after written proof of your death is provided to the life insurance company and all necessary documents are processed.

Keep Your Beneficiary Designations Up to Date

Be sure to keep your beneficiary information up to date as your circumstances change. For details, visit the University Human Resources website at hr.umich.edu/your-beneficiary.
Benefits that End in Retirement

The following benefits end at retirement:

- **University Life Insurance**
  Retired faculty and staff who were participating in the University Group Term Life Insurance plan on the date of their retirement will transfer to the Retiree Life Insurance Plan, see page 3.

- **Optional Group Term Life Insurance and/or Dependent Life Insurance** for your spouse, other qualified adult, and children. You may convert these policies to an individual policy when you retire. Call the SSC Contact Center for the application form.

- **Long-Term Disability Plan**
  Your Long-Term Disability (LTD) benefits will end as of the last day of the month after your retirement date.

- **Flexible Spending Accounts (FSA)**
  - **Health Care FSA**
    If you participate in a Health Care FSA, expenses incurred prior to the date of your retirement are eligible for reimbursement.

    You may choose to continue your Health Care FSA for the remainder of the calendar year after the date of your retirement by electing COBRA.

    See the PayFlex website for eligible health care expenses.

  - **Dependent Care FSA**
    You may continue to submit claims for expenses incurred from January 1 (or your Dependent Care FSA start date) through March 15 of the following year.

    The amount of the reimbursements will be subject to the balance in your account. If there are sufficient funds, claims will be honored upon request.

    See the PayFlex website for eligible dependent care expenses.
Retiring Before Age 62

Individuals who retire before age 62 and have a service date on or after July 1, 1988 are not eligible for any university contribution to retiree benefits until they reach age 62. They will have to pay the full premium for group life insurance, medical and/or dental coverage until they reach age 62. If the premiums are not paid, coverage under these plans will end.

Waiving Coverage

If you retire before age 62 and have a service date on or after July 1, 1988, you may choose to waive coverage under U-M benefits until you reach age 62 rather than pay the full premium. You will need to complete a “Request to Waive Coverage” form, which is available by request by calling the SSC Contact Center.

You will be eligible for re-enrollment in U-M medical and/or dental coverage at age 62 as long as you maintain continuous comparable medical and/or dental coverage through another source, and you request re-enrollment by calling the SSC Contact Center within 30 days of turning 62. You will be required to provide certification that you have maintained comparable coverage. The university will then provide a contribution toward the cost of benefits effective the first of the month after you reach age 62.

Retirees who choose to waive life insurance cannot re-enroll when they reach age 62.

Maintaining Comparable Coverage

Medical Coverage

Comparable medical coverage is health coverage that is at least as comprehensive as the university-sponsored BCBSM Comprehensive Major Medical (CMM) plan. The health plan must offer the same scope of benefits as CMM, but benefits do not have to be exactly the same. The plan must include basic coverage for:

- Primary and preventive care
- Hospitalization
- Surgical services
- Emergency care services
- Mental health services
- Office visits
- Prescription Drugs
- Diagnostic tests (x-rays and lab work)

A plan that places a lifetime limit on the dollar value of these services does not qualify as comparable coverage.

Dental Coverage

Comparable dental coverage is coverage that is at least as good as the university-sponsored dental plan Option 1. Emergency dental treatment under a medical plan does not qualify. The plan must include basic coverage for routine exams and cleaning, x-rays, and emergency treatment to control pain.

Loss of Comparable Coverage

Individuals who choose to maintain comparable coverage through a non-UM source prior to age 62 in retirement may be eligible to request re-enrollment in U-M medical and/or dental coverage at their own cost before age 62 if the other corresponding comparable coverage is involuntarily lost. The following conditions must be met:

- The retiree and/or dependents were enrolled under U-M medical and/or dental coverage at the time of retirement, or if not enrolled were eligible for enrollment but were covered under another group health and/or dental plan;
- A completed and signed Request to Waive Retiree Coverage form is submitted to SSC Benefits Transactions within 30 days of the date you request waiver of your retiree benefits;
- Comparable coverage has been continuously maintained in another medical and/or dental plan; that is, there has been no lapse in coverage between the time university coverage was waived and later applied for; and,
- Enrollment must be requested within 30 days after the other medical and/or dental coverage is involuntarily lost and satisfactory evidence is provided as requested by the Benefits Office that all requirements for re-enrollment have been satisfied.
Important Facts to Consider Before Waiving Coverage

- You will not be considered to have had an involuntary loss of your other medical and/or dental coverage if you remain eligible for the coverage at your own cost (other than COBRA). For example, if an employer or insurance carrier increases your or your spouse’s required contribution for coverage, or requires you or your spouse to pay the full cost of coverage to remain eligible for coverage, you will not be allowed to enroll in the university’s benefit plan due to the other employer or insurance company’s decision to increase your costs for participation.

- You will not be allowed to enroll in a U-M benefit plan due to another employer’s decision to change insurance companies; increase deductibles or copays; or change, reduce or eliminate benefit provisions under their plan in any way.

- You will not be allowed to enroll in a U-M benefit plan due to another employer’s decision to replace a traditional group health defined benefit plan (example: Blue Cross coverage) with a group health defined contribution plan (example: Health Reimbursement Arrangement or Retiree Reimbursement Arrangement).

- When you waive your U-M medical coverage, your U-M prescription drug coverage will also be discontinued.
Your Cost for Retiree Benefits

The amount of university and retiree contributions toward retiree benefit plans will vary based on the service date, age, retirement date, eligibility for Medicare, coverage level, and health plan or benefit option selected. Your U-M monthly health plan premium is separate from any Medicare premiums you may have. See page 9 for Medicare information.

The monthly benefits premiums are subject to change annually and are announced every year during the annual Open Enrollment. See the current retiree health plan rate charts on the University HR website at hr.umich.edu/retiree-health-plan-rates. After retirement, your personal retiree health plan rates will be available on Wolverine Access self-service.

Faculty or Staff with a Service Date of July 1, 1988 or Later

If your service date is July 1, 1988 or later and you retire before reaching age 62, upon your retirement you will pay the full cost of benefits up to and including the month you turn age 62. If your date of birth is the first day of the month, university contribution will include the month of your 62nd birthday.

For example:
- If you turn 62 on October 1, the university contribution toward the cost of your benefits will begin with October coverage.
- If you turn 62 from October 2 through October 31, the university contribution will begin with November coverage.

See Waiving Coverage on page 5 for important information on waiving U-M benefits coverage before you reach age 62.

Paying for Your Benefits

There are two methods to pay your monthly benefits premiums: by electronic funds transfer or by personal check or money order.

Electronic Funds Transfer

Your monthly benefits premiums can be automatically deducted from your checking or savings account each month. The withdrawal will occur on the 20th of each month to pay for coverage for the following month. The withdrawal will be indicated on your bank statement and labeled as “UM Benefit Premium.” There is no charge for this service; however, your financial institution may impose a fee if there are insufficient funds in your account when the withdrawal is made.

Complete the “Agreement for Preauthorized Benefit Premium Payments” form to set up the Electronic Funds Transfer and return it to the Payroll Office. If the funds are to be taken from a checking account, attach a blank check with “void” written across it.

Requests to start or cancel the Electronic Funds Transfer, or to change the account or financial institution from which the withdrawal is taken, must be received by the Payroll Office no later than the first day of the month in order to take effect that same calendar month.

Personal Check or Money Order

You will receive a monthly billing statement if you have a co-premium to contribute and you do not arrange for Electronic Funds Transfer. You must pay the premium by personal check or money order; cash payments cannot be accepted.

The procedure is:

1. You will receive a billing statement and remittance envelope in the mail at the end of the month to pay for the following month’s coverage. For example, your January billing statement should arrive at the end of December.
2. The payment is due by the 1st of the month to pay for coverage for that month, and is accepted through the 30th of the month.
3. Make the check or money order payable to “University of Michigan.”
4. Clip the coupon from the bottom of your billing statement and mail it with your check or money order in the envelope provided to:

   University of Michigan – Payroll  
   Box 223081  
   Pittsburgh, PA 15251-2081

Please Note: The University of Michigan will attempt to notify you when a payment is overdue. If after multiple attempts a payment is not received, then the insurance will be canceled.

**Naming a Designee for Premium Payment**

Retirees can designate someone other than themselves to handle their premium payments and receive payment information. Other benefit correspondence, including Open Enrollment information, will continue to be sent to the retiree.

You may submit in writing the designee’s name, address, and phone number along with your name, UMID number, and a request to name them as a premium payment designee to:

   SSC Benefits Transactions  
   Wolverine Tower  
   3003 South State Street  
   Ann Arbor, MI, 48109-1278  
   Fax: 734-763-0363
Your U-M Health Plan and Medicare

About Medicare
Medicare is a federal health insurance program available to people at age 65 or older. It is also available for people who have been entitled to Social Security disability benefits for 24 months, or have end-stage renal disease (permanent kidney failure). Medicare is directed by the U.S. Centers for Medicare & Medicaid Services.

Medicare comes in three parts:
- Part A covers inpatient hospital services and does not have a monthly premium;
- Part B covers outpatient medical services and has a monthly premium;
- Part D covers outpatient prescription drugs and has a monthly premium for most people (certain individuals may qualify for zero or reduced monthly premium under the Medicare low-income prescription drug assistance program).

For information on your cost for Medicare coverage, visit medicare.gov/your-medicare-costs.

Local Social Security Administration offices take applications for Medicare Parts A and B. They also provide information and applications for Medicare low-income prescription drug assistance. People wishing to enroll in Medicare Part D must do so through a Medicare approved vendor.

How Medicare Parts A and B Affects Your Coverage
- Medicare becomes the primary coverage for you and any covered dependents age 65 years of age or older, or disabled once you have retired.
- Your U-M coverage becomes secondary or supplementary to Medicare.
- All services must be submitted to Medicare first for payment.
- Retirees and their dependents must enroll in Medicare benefits when first eligible. If you or a dependent who is eligible for Medicare fail to enroll when first eligible, your benefits will be drastically reduced until you are enrolled. U-M health plan coverage will not pay for services that would have been paid primary by Medicare if Medicare enrollment had occurred. There may be a penalty for late Medicare enrollment of 10% a year for each year you could have been enrolled.

Medicare Parts A and B Deadlines
- If you and your spouse are Medicare eligible at the time of retirement, you must apply for Medicare within 30 days of retirement or your enrollment will be delayed causing claim problems until you are enrolled. The SSC Contact Center will give you a confirmation notice of your retirement date to take to your local Social Security Office to verify your eligibility to enroll under the Medicare Special Enrollment Period.
- If you have an Other Qualified Adult (OQA), your OQA must enroll at age 65, regardless of your employment status.
- If you and/or your covered dependents are receiving Social Security income benefits by age 65, you will automatically be notified and enrolled in Medicare Parts A and B by Social Security. Coverage will begin the first day of the month in which the 65th birthday occurs. If your birth date is the first of the month, coverage will begin the first of the month prior to your birth month.
- If you are already retired, and are not receiving Social Security benefits, you must complete an application to enroll in Medicare. You should plan on completing an enrollment form approximately ninety days before you attain the age of 65. On the first day of the month that you turn age 65, your coverage with the university will be changed so that the university’s coverage will not pay for anything that Medicare Parts A and B would have paid for. You can phone 800-772-1213 (TTY 1-800-325-0778) to schedule an appointment with a Social Security counselor at an office near you or to request the enrollment forms by mail. You may also apply online through ssa.gov.
# Medicare Part B Enrollment Periods

<table>
<thead>
<tr>
<th>Enrollment Period</th>
<th>Timeline for Enrollment (for you and/or your spouse)</th>
<th>When to Enroll</th>
</tr>
</thead>
</table>
| **Initial Enrollment Period (IEP)** | • Begins 3 months before the month you turn 65  
 • Ends 3 months after the month you turn 65 | **You and/or your spouse or OQA (Other Qualified Adult) would enroll during this period if:**  
 • You are retiring within this enrollment period  
 • You are already retired and you and/or your spouse or OQA are now turning age 65  
 • Your OQA is turning 65 regardless of your employment status  
 Your OQA (Other Qualified Adult) must enroll during their initial enrollment period regardless of your employment status.  
 If you apply in this month of your (IEP) | Your Medicare Part B start day will be  
 1 | The first day of the month in which you turn 65  
 2 | The first day of the month in which you turn 65  
 3 | The first day of the month in which you turn 65  
 4 | The first day of the first month after you apply  
 5 | The first day of the second month after you apply  
 6 | The first day of the third month after you apply  
 7 | The first day of the third month after you apply  |
| **Special Enrollment Period (SEP)** | • Any time you are covered by an employer or union group health plan through your or your spouse’s current employment  
 • During the 8 months following the month that the employer or union group health plan coverage ends or when the employment ends | **You and your spouse would enroll during this period if:**  
 • You are retiring some time after your initial enrollment period and are age 65 at retirement  
 • Enroll within 30 days of retirement for Medicare Part B coverage to begin the first of the month following your retirement date  
 • If you wait beyond 30 days your Medicare Part B coverage will not begin until the first of the month following application  
 • If you wait beyond 8 months, you will have to enroll during the (GEP), see below  
 • Waiting beyond 30 days will leave you with limited health coverage. The university will not pay for services Medicare should have covered.  
 |
| **General Enrollment Period (GEP)** | • January 1 through March 31 of each year  
 • Medicare Part B coverage will start on July 1 of the year you enroll  
 • The cost of Medicare Part B will increase 10% for each 12 month period you could have been enrolled but did not | **You and your spouse or OQA would enroll during this period if:**  
 • You did not enroll during the Initial Enrollment Period or the Special Enrollment Period when first eligible  
 |
Medicare Part D (Prescription Drug Plan)

- The university advises that Medicare-eligible retirees and their Medicare-eligible dependents enrolled in the U-M health plan and prescription drug plan should not enroll in a Medicare Part D plan, unless they are first approved by the Social Security Administration to receive Medicare low-income prescription drug assistance. For information and applications for Medicare low-income prescription drug assistance, visit a local Social Security office, or contact the Social Security.

- In the event you are approved for Medicare Part D prescription drug low-income assistance, you should enroll in a standard Part D plan and continue your enrollment in a U-M health plan and prescription drug plan.

- Individuals that enroll in a standard Part D program should show both their Part D Prescription Drug Card and their U-M Prescription Drug Card when they fill a prescription at a pharmacy.

- Individuals who do not qualify for low-income assistance and sign up in a standard Part D plan and continue their enrollment in a U-M health plan will end up paying an additional monthly premium for Part D with no additional benefits.

More information on Medicare and when and how to enroll is available on the University Human Resources website at hr.umich.edu/medicare.

If You Live Outside of the U.S.

If you plan to live outside the United States after you retire, you should know the following:

- Medicare does not cover services received in foreign countries.

- If you decline Medicare Part B because you’re moving out of the United States and decide to return to the United States, there may be a penalty for late Medicare enrollment of 10% a year for each year you could have been enrolled. If you are not enrolled in Part B, your medical plan may reject charges for services received in the United States.

- Call the SSC Contact Center to speak with a counselor to determine your health plan options.

Enrollment in Medicare While You Are Working

You may enroll in Medicare while you are still working. However, since your U-M coverage is the primary policy while you are an active member of the faculty or staff (including while you are on phased retirement or a furlough) you may not be able to use Medicare. Some people will enroll in Part A of Medicare if they are still working at age 65 because it is free and wait until retirement to enroll in Part B (and Part D only if applicable as described above) through the Special Enrollment Period.
Additional Information for U-M Retirees

Keep Your Address Up to Date
Notify the university immediately if your address changes. You may update your address online through Wolverine Access at wolverineaccess.umich.edu, or call the SSC Contact Center. You must also notify TIAA and/or Fidelity Investments of your address change for your retirement savings plan accounts. See page 16 for contact information.

Retiree ID Card
Your U-M Retiree ID card will enable you to take advantage of many of the privileges you had as a staff member, such as athletic ticket discounts and library privileges. To receive your U-M Retiree ID card, call the SSC Contact Center and ask a representative to verify your retirement and send you the Retiree ID Authorization Form. Then, take the form and your U-M Staff ID (your Mcard) to any ID Office listed on the form.

Retiree ID cards are valid for five years. After five years, retirees can exchange an expired card for a new card. Expired ID cards must be turned in, otherwise a replacement fee will apply. To renew an expired card by mail, please send your request along with the expired card to:

Mcard Office
Wolverine Tower Suite G250
3003 S. State St.
Ann Arbor, MI 48109

Be sure to include the address where you would like the new card sent. To expedite the return, please include a self-addressed, stamped envelope.

Parking
All faculty and staff who retire from the University of Michigan Ann Arbor Campus and Michigan Medicine are eligible for the Retiree After Hours permit. This free option is honored after 3 p.m. weekdays and all day on weekends for events such as concerts and theatre performances, but is not valid for athletic events parking. This permit is available in a hang tag version only. See Parking and Transportation Services for more information.

Contact:
Parking Customer Service
523 S. Division Street
Ann Arbor, MI 48104-2414
Phone: (734) 764-8291
Fax: (734) 763-4041
ltp.umich.edu

U-M Retirees Association
The University of Michigan Retirees Association (UMRA) is open to all retirees, their spouses, and spouses of deceased retirees. There is an annual membership fee per household. To join, download and print the Membership Form from the UMRA website, complete the form and mail it to the U-M Retirees Association at the address below. Or you may request a membership application from the UMRA staff office by calling 734-763-7385.

University of Michigan Retirees Association
Room G-250 Wolverine Tower
3003 S. State St. Ann Arbor, MI 48109
umra.hr.umich.edu

Temporary Employment
Temporary Staffing Services offers assignments on the Ann Arbor and Medical campuses in a variety of positions ranging from secretarial, clerical, data entry, to skilled labor. If you are interested in temporary employment, contact:

Temporary Staffing Services
Wolverine Tower Suite G250
3003 S. State Street
Ann Arbor, MI 48109
Phone: (734) 763-5740

Employer Shared Responsibility
Under U.S. health care reform, as of January 1, 2016, the university offers medical benefits to all employees who average at least 30 hours per week over a 12-month period, regardless of regular or temporary employment status. This expansion of coverage is required by the Employer Shared
Responsibility (ESR) provision of the Affordable Care Act.

You may become eligible for benefits under ESR after retirement if any of the following apply to you:

- You return to work as a temporary or regular employee within 26 weeks of retirement.
- You return to work in a temporary position for at least 30 hours per week.
- You return to work and you average more than 30 hours per week over 12 months in one or more positions.

If you become eligible, the university will convert your retiree health plan to ESR coverage and send you a confirmation statement at your current address on file. View monthly health plan rates under ESR at hr.umich.edu/esr-rates.

The university will reinstate your retiree health coverage when your period of ESR eligibility or your appointment ends. Learn more about ESR at hr.umich.edu/esr.

If you have questions about ESR eligibility or the implications of coming back to work after retirement, call the SSC Contact Center.

Athletic Tickets
Retirees can purchase athletic tickets to events by contacting the U-M Athletics Ticket Office:

1000 South State Street
Ann Arbor, MI 48109
734-764-0247
mgoblue.com

Recreation Sports Facilities
Retirees may continue to use university recreational facilities by purchasing a membership. For more information on membership, contact the Recreational Sports Business Office:

Central Campus Recreation Building (CCRB)
401 Washtenaw Avenue
734-763-3084

North Campus Recreation Building (NCRB)
2375 Hubbard Street
734-763-4560

Intramural Sports Building (IMSB)
606 E. Hoover Avenue
734-763-3562

Email: recsports@umich.edu
Website: recsports.umich.edu

Library Privileges
Retirees may have borrowing privileges at the U-M libraries. To register, take your U-M Retiree ID card to:

Circulation Services
104 Harlan Hatcher Graduate Library
920 N. University
Ann Arbor, MI 48109
(734)764-0401

Computing Services

All Retirees
Faculty and staff who have a Google U-M email account when they retire will have continued use of their U-M email box by visiting mail.umich.edu, and use the same uniqname, password, and directory entries used as an employee at no charge. Those with an Outlook U-M email account, including Michigan Medicine faculty and staff, must contact the ITS Service Center before retiring from the university to have a U-M Google email account created. Contact the ITS Service Center by calling (734) 764-4357. A commercial Internet service is required to access email. Purchases through the Computer Showcase and access to virtual machines are not available except to Emeritus or Emerita Faculty.

Emeritus or Emerita Faculty
Emeritus or Emerita faculty have basic computing package services at no charge through U-M Information and Technology Services (ITS). They may purchase computer hardware and software at discounted rates through the Computer Showcase. And they may use the full-service Campus Computing Sites and virtual machines (virtualsites.umich.edu).
For additional information, visit the U-M Information and Technology Services website at its.umich.edu/computing/standard-computing-services/retirees.

Contact the ITS Service Center with any computing services questions. Call (734) 764-HELP (764-4357).

Publications
The University Record is mailed to U-M retirees and may also be viewed online at record.umich.edu. Visit Wolverine Access if you need to change your home mailing address.
If you have some final questions about your retirement benefits before you retire, speaking with a benefits counselor may help. Short Q&A consultations with the Benefits Office are now available to assist faculty and staff with complex retirement questions.

To view available dates and register for an individual session, visit: hr.umich.edu/retirement-benefits-q-a-calendar

To qualify for this service, you must meet the following criteria.

1. You have already attended the Planning for Retirement class offered by the Benefits Office.
2. You are a current University of Michigan faculty or staff member within 6 months of retirement.

Topics will be limited to issues regarding the retirement process from the University of Michigan, including any questions about your benefit options, eligibility, costs, dependents and basic Medicare enrollment information.

Please note that questions about completing your retirement checkout kit paperwork should be directed to the SSC Contact Center at 5-2000 from the Ann Arbor campus, (734) 615-2000 locally, or (866) 647-7657 toll free, Monday through Friday from 8 a.m. to 5 p.m.
Contact Information

U-M Retirement Savings Plan Investment Companies

<table>
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<tr>
<th>TIAA</th>
<th>Fidelity Investments</th>
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| 730 Third Avenue  
New York, NY 10017 | P.O. Box 770002  
Cincinnati, OH 45277-0090 |
| tiaa.org/umich | netbenefits.com/uofm |
| • 24-Hour Automated Phone Center  
800-842-2252 | • 24-Hour Automated Phone Center  
800-343-0860 |
| • Telephone Counseling Center  
800-842-2252  
Monday–Friday, 8:00 a.m. – 10:00 p.m., EST  
Saturday, 9:00 a.m. – 6:00 p.m., EST | • Fidelity Retirement Specialists  
800-343-0860  
Monday–Friday, 8:00 a.m. – midnight, EST |
| • Workshops or Individual Counseling  
800-732-8353 | • Workshops or Individual Counseling  
800-642-7131 |

U-M Benefit Plan Companies

Blue Cross Blue Shield of Michigan Community Blue PPO .... 877-790-2583 ........ bcbsm.com
Comprehensive Major Medical (provided by BCBSM) ............ 877-790-2583 ........ bcbsm.com
U-M Premier Care (provided by BCBSM) ......................... 800-658-8878 .. bcbsm.com
Davis Vision .................................................. 800-999-5431 ... davisvision.com
Delta Dental ................................................... 800-524-0149 ... deltadentalmi.com
Hyatt Legal Plan ............................................... 800-821-6400 ... legalplans.com
MetLife (Life insurance) ....................................... 800-821-6400 ... metlife.com
PayFlex (Flexible Spending Accounts) ......................... 877-343-1346 ... www.payflex.com

Additional Resources

Medicare .................................................... 800-633-4227 ... medicare.gov
Medicare TTY/TDD ........................................ 877-486-2048 ... medicare.gov
Social Security Administration .................................. 800-772-1213 ... ssa.gov
Telecommunications Relay Service ......................... 711
University Human Resources, U-M Flint .................. 810-762-3150 ... umflint.edu/hr
University of Michigan Shared Services Center ............ 734-615-2000 ... ssc.umich.edu
5-2000 (from Ann Arbor Campus)  
866-647-7657 (toll free)
SSC Contact Center
Benefits representatives are available by phone, Monday – Friday, 8 a.m. – 5 p.m. at (734) 615-2000 (5-2000 from the Ann Arbor campus) or (866) 647-7657 (toll-free for off-campus long-distance calling within the U.S.). Have your UMID number available when you call.

The Benefits Office is a unit of University Human Resources (UHR).

Laurita Thomas
Associate Vice President for Human Resources

Richard S. Holcomb, Jr.
Senior Director for Benefits

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