



# Employee Benefits Summary

Fiscal Year 2014 - 2015  
State of Michigan

As a State of Michigan classified employee\*, you are entitled to a comprehensive benefits package, including health, dental, vision, life insurance, long term disability, flexible spending accounts, and more. Coverage will be effective on the first day of the bi-weekly payroll period following either your first day of employment OR the date when the enrollment process is completed, whichever is later.



**If you would like to participate in the State of Michigan's health, vision, dental, employee/dependent life, long term disability (LTD) and flexible spending account benefits, you must enroll within 31 days of your hire date.**

If you elect not to enroll for benefits within the first 31 days of hire, your next opportunity to enroll will be during the annual open enrollment period, which usually takes place in the month of August.

Throughout this benefits summary you will be instructed to contact the MI HR Service Center to enroll in your benefits selections. Please note that Legislative, and Judicial employees should contact their agency HR Office to complete enrollment.

\*Non-career employees are not eligible for these benefits but may be eligible for retirement benefits.



## Your Benefits Checklist

The checklist below will assist you with the benefit enrollment process.

- Review this booklet for basic information.
- Go to [www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits) to review benefit options. Click the "New Employee" link from the left menu.
- Contact the MI HR Service Center\* toll free at (877) 766-6447 or (517) 335-0529 to enroll in your insurances. Hours are 8:00 a.m. to 5:00 p.m. Monday through Friday, except state holidays.
- Mail or fax dependent eligibility documentation to the MI HR Service Center, if applicable (See [Eligibility Documentation](#))

\* Legislative, and Judicial employees should contact their agency HR Office for assistance.





# Where would you like to go?

This document is interactive; be sure to use the buttons to navigate so you can quickly find the information that applies specifically to you.

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# Important Notice

This booklet is a summary of benefits provided to State of Michigan employees<sup>1</sup> and is not an agreement between any employee and the State of Michigan. More complete details on benefits are found in the official documents, such as the Civil Service Rules and Regulations, collective bargaining agreements, departmental work rules, and contracts with various benefit providers. If this booklet and an official document differ, the official document governs.

The State Health Plan (SHP) PPO and Health Maintenance Organizations (HMO) Plan Design, applies to employees in the following units<sup>2</sup>: MCO (C12), SEIU-517M (E42, H21, L32), AFSCME (U11), UAW (W22, W41), MSEA (A02, A31), and Non-Exclusively Represented Employees (Y00, Y23, Y50, Y51, Y98, and Y99).

SHP PPO Premium: The State will pay 80% of the total premium with enrolled employees paying 20%.

HMO Premium: The State will pay up to 85% of the HMO total Premium, capped at the dollar amount which the State pays for the same coverage under the SHP PPO, with enrolled employees paying the remainder.

<sup>1</sup> Non-career employees are not eligible for these benefits but may be eligible for retirement benefits.

<sup>2</sup> Does not apply to MSP T01 Troopers and Sergeants.



## COBRA

(Consolidated Omnibus Budget Reconciliation Act)

Several different events may trigger the loss of insurance coverage for employees (e.g., separation, leave, layoff, reduction of hours), spouses (e.g., divorce, death of employee), or dependent children (e.g., age 19 or older and not regularly attending school, reaching age 25, or marriage).

Under COBRA, if you, a spouse, or dependent should lose eligibility for state-sponsored group health, dental, or vision insurances, you may be eligible to continue these coverages for a period of time by paying the full premium directly to the State of Michigan. This full premium will include the amount previously paid as the Employee's Share plus the State's Share and, in some cases, an additional 2% service fee.

You may also be eligible to continue your life insurance coverage at no cost for you or your dependents if you are on a leave of absence or layoff from State service.



## HIPAA

(Health Insurance Portability & Accountability Act)

The Employee Benefits Division of the Civil Service Commission currently administers the following self-insured group health plans for State employees and retirees on behalf of the State of Michigan:

- State Health Plan PPO (BCBSM/Magellan)
- State Catastrophic Health Plan (BCBSM)
- State Vision Plan (BCBSM)
- State Dental Plan (Delta Dental)
- Preventive Dental Plan (Delta Dental)
- Flexible Spending Accounts (WageWorks®)

The Health Insurance Portability & Accountability Act (HIPAA) and related rules require group health plans to protect the privacy of health information. Your rights under HIPAA are outlined in the Privacy Notice available on the Civil Service Commission [Employee Benefits Division website](http://www.michigan.gov/employeebenefits).



## Who Can Enroll?

You may choose to enroll your spouse and/or eligible dependents in your health, dental, vision, and life insurance plans as a new employee, during any annual open enrollment period, or as the result of a life event. Any time a spouse or dependent is added to your insurance, you must submit [dependent eligibility documentation](#) within 31 days of the event. For more information, visit the Employee Benefits Division website at [www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits).



## Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

Special enrollment is also available to **(1)** those who become eligible for premium assistance under Medicaid or CHIP (Children's Health Insurance Program) and **(2)** those who lose coverage under Medicaid or CHIP because they are no longer eligible (not because of nonpayment). The deadline for these two enrollments is 60 days after eligibility or termination.

To request special enrollment or obtain more information, contact the MI HR Service Center\* at (877) 766-6447 or (517) 335-0529. They are open from 8 a.m. until 5 p.m., Monday through Friday, except state holidays.



## Dual Eligibility

If you and your spouse or dependent are currently working for the State of Michigan and are both covered by State Health Plans (retiree or active, including State-sponsored HMO options), you may:

- ◆ Maintain separate coverage through your individual plans, **OR**
- ◆ Enroll in one plan with one of you as a dependent.

If you choose to maintain separate coverage, your child or children can only be listed on one plan, not both. This applies even if you are divorced.



## Insurance Cards

Identification cards will be issued directly from individual insurance carriers, when applicable. In the event that additional or duplicate cards are needed please contact the insurance carrier directly.



## Life Event Changes

A marriage, birth, adoption, divorce, etc., can be reported by calling the MI HR Service Center\* for assistance.

When children become ineligible, you must contact the MI HR Service Center to stop insurance coverage. Changes must be processed within 31 days of the life event and must be substantiated with appropriate documentation (see [Eligibility Documentation](#))

\* *Legislative, and Judicial employees should contact their agency HR Office for assistance.*



## State Long Term Disability (LTD)

The State Long Term Disability (LTD) Plan is an income continuation plan that is available to qualified enrollees during a period of total disability as defined by the Plan.

New employees can enroll within 31 days of hire. Otherwise, you can enroll during the annual Open Enrollment period.

Gross monthly payments before deductions and offsets is 66 2/3% (0.6667) of your basic monthly rate of basic earnings. The State pays a portion of the total premium. The length of your benefit period and your portion of the premiums are based on your sick leave balance and regular wages.

There are two benefit plans; Plan I and II. Employees with less than 183 hours of sick leave are in Plan I. Employees accumulating 184 hours of sick leave are in Plan II, even if their sick leave balance drops below 184 hours.

Plan I pays a benefit until you are no longer totally disabled or 24 months, whichever occurs first. Plan II pays totally disabled employees until age 65 (age 70 for UAW members) or 12 months, whichever is greater. The Plan II benefit period for "mental/nervous" claims is limited to 24 months from the beginning of the time you are eligible to receive benefits. This limitation does not apply to mental health claims where you are under in-patient care or to UAW members.



## Flexible Spending Accounts (FSA)

You may choose to enroll in the Dependent Care and/or the Health Care FSAs.

The FSA program lets you pay for eligible dependent care and eligible out-of-pocket medical expenses with pre-tax dollars, making these expenses more affordable. FSAs are convenient and easy to use. With a little upfront planning, you can enjoy significant tax savings while paying for a wide array of out-of-pocket medical and dependent care expenses.



## Other Benefit Programs

### ◆ Qualified Transportation Fringe Benefits (QTFB)

The QTFB program is regulated by the Internal Revenue Service (IRS) and is offered to State of Michigan employees. The program allows you to pay for eligible parking expenses and vanpool ridership fees ([MichiVan](#) only) with pre-tax dollars via payroll deduction. Generally, this program is not for use if you park in a State owned or leased lot/ramp.

### ◆ Benefits for Life

Benefits for Life, is an employee-paid optional coverage program offered through the State of Michigan. The Benefits for Life offerings do not replace your State group benefit plans. Instead, the program offers additional insurance with premiums payable through payroll deduction. Optional coverage plans available for purchase are:

- Accident Insurance
- Accidental Death & Dismemberment (AD&D)
- Auto & Home Insurance
- Critical Illness Insurance
- Discount Plan
- Legal Plan
- Supplemental Term Life
- Universal Life Insurance

[www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits)





# Health Care Options

The following is a brief description of the various insurance benefits offered to State of Michigan employees. Complete details for each plan are available on the Civil Service Commission website at [www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits). You may elect one of the following health insurance plans:



## State Health Plan Preferred Provider Organization (PPO)

The State Health Plan PPO is administered by Blue Cross Blue Shield of Michigan (BCBSM).

- The State pays 80% of the premium for full-time employees.
- This plan provides health benefits using providers and facilities that are in-network, meaning the providers and facilities have agreed to accept a discounted fee from BCBSM for services rendered.
- Provider network covers all 83 Michigan counties.
- There are deductible requirements.
- You must pay office and prescription drug co-pays.
- An emergency room co-pay will be required if the member is not admitted to the hospital.
- Retail pharmacy and mail order prescription medications are administered by MedImpact.
- Mental health and substance abuse treatment services are administered by Magellan Behavioral Health.



## HMO Plans Health Maintenance Organization

An HMO is a managed care plan that provides medical care through its network of physicians, pharmacies, contracted hospitals, and medical care suppliers in a particular service area.

- The State will pay 85% of the total premium up to the amount paid for the same coverage code under the State Health Plan PPO.
- There are deductible requirements.
- You must pay office and prescription drug co-pays.
- You can choose your own primary care physician who will provide direct care and make referrals from within the network.
- Your eligibility for enrollment is based on your postal code.
- HMO eligibility is based on your residential zip code. To find what HMOs are available to you visit the Employee Benefits Division website at [www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits). Select the "HMO Eligibility" link from the left menu.



## Catastrophic Health Plan

Administered by Blue Cross Blue Shield of Michigan (BCBSM), this is a hospitalization-only plan intended as an option for those employees who have coverage elsewhere. **This plan does not cover prescription drug charges, office visit charges, medical equipment, psychiatric services, or other major medical services.**

- Benefits under this plan are payable only after you have covered expenses equal to one month's basic salary (deductible requirement). The family deductible (two or more members) is equal to 1 1/2 month's basic salary.
- **This plan will become your primary coverage**, all deductibles will need to be met before any other coverage can be utilized.
- The State will cover 100% of the premium cost for full-time employees and you will receive a \$50 cash payment bi-weekly for being enrolled in this plan.





# Dental & Vision Options



## State Dental Plan

The State Dental Plan is administered by Delta Dental.

- The State will pay 95% of the premium for full-time employees.
- This plan covers preventive services (exams and cleanings) at 100% of the "usual, customary, and reasonable charge."
- X-rays, oral surgery, extractions, restoratives, periodontics, and endodontic are covered at 90%.
- Dental implants are covered up to 70% (PPO Dentist) under prosthodontics.
- Orthodontics are covered at 60% up to \$1,500.
- Sealants for children and prosthodontics (including repairs) are covered at 50%.



## Preventive Dental Plan

The Preventive Dental Plan is administered by Delta Dental of Michigan. **This plan is intended as an option if you have dental coverage elsewhere.**

- The Preventive Dental Plan covers diagnostic exams, x-rays, and cleanings to the same extent as the State Dental Plan. No other services are covered.
- The State will pay 100% of the premium for full-time employees and you will receive a \$100 lump sum cash payment each year (pro-rated for mid-year enrollment).



## Dental Maintenance Organization (DMO Midwestern Dental Plan)

This is a managed care dental plan that provides all necessary dental care and services. **All dental care must be provided at Midwestern Dental care centers by Midwestern Dental Dentists.** Your postal code will determine if you are eligible to enroll in the DMO.

- The State will pay 100% of the premium for full-time employees.
- There are no member co-pays required for any covered dental care received at a dental center, except for an orthodontics co-pay for adults (age 19 and older).
- There are no benefit maximums.



## State Vision Plan

The State offers one vision plan administered by Blue Cross and Blue Shield of Michigan (BCBSM) partnering with Vision Service Plan® (VSP)

The State Vision Plan covers routine vision examinations and glaucoma testing once every 12 months, and corrective lenses and eyeglass frames once every 24 months, unless your prescription changes.

- The State pays 100% of the premium for full-time employees.
- There is a co-payment for exams, lenses, and frames.



# Life Insurance



## Employee Life Insurance

Employee Life Insurance is administered by Minnesota Life. You may select one of the following life insurance plans:

### ◆ State Life Insurance Plan

The State will cover 100% of the premium cost of the State Life Insurance Plan. This is the traditional group life insurance plan that pays your designated beneficiaries a non-taxable death benefit equal to two times your basic annual salary rounded up to the next \$1,000, up to a maximum of \$200,000.

### ◆ Reduced Benefit Life Insurance Plan

The Reduced Benefit Life Insurance Plan pays your designated beneficiaries a non-taxable death benefit equal to 100% of your basic annual salary or up to a maximum of \$50,000. You will receive a bi-weekly cash payment for selecting this reduced life insurance option.

**NOTE:** Both of the life insurance options above include a \$100,000 duty death benefit.



## Dependent Life Insurance

You have the option of enrolling your legal spouse and eligible children in one of the Dependent Life Insurance plans administered by Minnesota Life. These plans will cover your spouse and unmarried children between the ages of 14 days up to their 23rd birthday. Unmarried dependent children between the ages of 19 up to their 23rd birthday are not required to have student eligibility to be enrolled in dependent life. The State does not contribute towards the premium for this coverage. Premiums are fully paid by the employee.



## Beneficiary Changes

Beneficiary designation for final compensation and life insurance can be completed online in your MI HR Self-Service account at [www.michigan.gov/selfserv](http://www.michigan.gov/selfserv).

The 401(k) Defined Contribution and 457 Plans (Voya Financial), and Accidental Duty Death carriers require an original signature to add or change beneficiaries. These forms can be printed from your MI HR Self-Service account. The beneficiary forms for the 401(k) Defined Contribution and 457 Plans should be mailed to the address on the form. The Accidental Duty Death form should be sent to your HR Office.



## Enrolling in Benefits



### MI HR Service Center

The MI HR Service Center has a staff of State of Michigan HR employees who are there to answer your benefit questions and assist you with benefits enrollment. Please Note: Legislative, and Judicial employees should enroll for benefits by contacting their agency HR Office.

The MI HR Service Center is available from 8:00 a.m. to 5:00 p.m., Monday through Friday, except state holidays.

Documentation must be mailed/faxed to the MI HR Service Center within 31 days from the date you enroll dependents in your insurances. See [Eligibility Documentation](#) for a list of acceptable documents.



### MI HR Self-Service

MI HR Self-Service is an online web-based tool designed to provide you with access to update and view your personnel information. As a new State employee, you will be provided access to MI HR Self-Service. This online tool allows you to update your personal records such as address and home phone, emergency contacts, e-mail address, beneficiaries, and direct deposits. During special enrollment periods, you can complete your Group Insurance Open Enrollment, Flexible Spending Account Open Enrollment, and/or make contributions during the State Employees Charitable Campaign (SECC). You can also get updated information and forms for insurance coverage, tax withholding, leave balances, earning statements, and more.



### New Employees

Your MI HR Self-Service account will be created one day after your HR Office enters your hire information into the system. Human Resources Management Network (HRMN) Central Security will create your Self-Service account and send the following correspondence to you:

- ◆ A letter will be mailed to the home address on file notifying you that your MI HR Self-Service account has been created. It will contain; your MI HR Self-Service username, additional web addresses and contact information.
- ◆ If you have a valid State of Michigan email address, an email with a temporary PIN, instructions on how to activate your MI HR Self-Service account and how to receive your new password will be emailed to you. If you do not have a valid email address, this information will be mailed to your home address on file.
- ◆ Once you've activated your account and received your password, a thank you notification will be sent to your valid State of Michigan email address or to your home address on file if you don't have a valid email address. The notification will also contain the address to the self-service login page.

If you have difficulty obtaining your first password or would like someone to walk you through the process, please contact the MI HR Service Center (including Legislative, and Judicial employees) at (877) 766-6447. Be sure to have your username and temporary PIN when you call.



## Contact MI HR Service Center

#### Toll Free: (877) 766-6447

Lansing Area: (517) 335-0529

Relay Center: 711

Fax: (517) 241-5892

#### Mailing Address:

P.O. Box 30002

Lansing, MI 48909

#### Hours of Operation:

8:00 a.m. to 5:00 p.m.

Monday through Friday  
(except on state holidays)

*Legislative, and Judicial employees should enroll in benefits by contacting their agency HR Office.*

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[www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits)



Required Documents	HEALTH DENTAL and VISION										HEALTH ONLY		REMOVAL			
	Adopted child	Biological child	Foster child	Grandchild <sup>1</sup>	Incapacitated child	Legal guardianship	Loss of coverage	Spouse	Step-child <sup>3</sup>	Student age 19 to 25	Adult child age 19 to 26	OEAI	OEAI dependent <sup>2</sup>	Gain of coverage	Spouse & dependent due to death	Spouse & stepchild due to divorce
<b>Adoption papers</b> or sworn statement with the date of placement	●											●				
<b>Birth certificate</b> (hospital verifications not accepted)		●		●	●				●	●	●	●				
<b>Court document</b> placing the child in the employee's home for foster care.			●									●				
<b>Court ordered letters of guardianship</b>						●						●				
<b>Death certificate</b>															●	
<b>Divorce decree</b> (first and last page stamped by the court)																●
<b>Document detailing loss/gain of coverage</b> from employer or insurance provider.							●							●		
<b>Joint residency documentation</b> establishing shared residency for the past 12 months (e.g. bank statement, utility bill, lease agreement).												●				
<b>Legal document specifying physical custody</b> (e.g., divorce decree stamped by the court that identifies custody agreement)									●							
<b>Marriage certificate</b>							●	●								
<b>OEAI Enrollment Application &amp; Affidavit CS-1833</b>												●	●			
<b>Proof of age</b> (e.g., birth certificate, passport, driver's license, or other governmental document)												●				
<b>Student Verification of Eligibility (CS-1830) &amp; School records proving attendance.</b>										●						
<b>Verification Documentation</b> that the child's condition was provided to the insurance carrier prior to the child turning 19.					●											

<sup>1</sup>Parent of the Grandchild must be a covered dependent; if between the ages 19 up to their 25th birthday and must be a student.  
<sup>2</sup>Dependent children of an OEAI may enroll in health insurance only up to their 26th birthday, with a [CS-1833](#) and the same required documentation that applies to equivalent dependent children of employees.  
<sup>3</sup>A step-child in which an employee's spouse is required to provide at least 50% support, and resides with you 50% of the time is eligible for health, dental and vision coverage. A step-child is eligible for health coverage regardless of residence and support up to their 26th birthday. Once a step-child reaches the age of 19 up to their 25th birthday, refer to the appropriate student column above for instruction.

**Insurance Open Enrollment:** Copies of the documentation must be mailed or faxed to the [MI HR Service Center](#) by September 30, 2014.  
**Life Events:** To add or change eligible dependents due to a life event (such as marriage, birth, divorce), call the MI HR Service Center as soon as possible but no later than 31 days following the life event. Do not wait until you have the official documentation.

**If you have questions on documentation requirements, contact the [MI HR Service Center](#) at: Toll-free (877) 766-6447, Lansing area (517) 335-0529, or dial 711 for Michigan Relay Center Documents can be faxed: (517) 241-5892 or mailed: MI HR Service Center P.O. Box 30002, Lansing, MI 48909**  
 Note: Legislative, Judicial and Auditor General must submit the required documentation to their Human Resource Office.





# Provider Information

<b>State-Sponsored Group Insurance Plan</b>	<p><b>STATE HEALTH PLAN PPO</b>                  BCBSM State of Michigan Service Center                  (800) 843-4876  <a href="http://www.bcbsm.com/som">www.bcbsm.com/som</a>                  Open enrollment information  <a href="http://www.bcbs.com/som/emp/open-enrollment.shtml">www.bcbs.com/som/emp/open-enrollment.shtml</a></p>	<p><b>PRESCRIPTION DRUG PROGRAM</b>  <b>Active Employees and Non-Medicare Retirees</b>, MedImpact                  (877) 403-6034  <a href="http://www.mp.medimpact.com/som">www.mp.medimpact.com/som</a>  <b>Medicare Eligible Retirees</b>, Medicare Generation Rx                  (877) 633-7943  <a href="http://www.medicaregenerationrx.com/som">www.medicaregenerationrx.com/som</a></p>
	<p><b>STATE CATASTROPHIC HEALTH PLAN</b>                  BCBSM State of Michigan Service Center                  (800) 843-4876  <a href="http://www.bcbsm.com/som">www.bcbsm.com/som</a></p>	<p><b>STATE VISION PLAN</b>                  BCBSM State of Michigan Service Center                  (800) 843-4876  <a href="http://www.bcbsm.com/som">www.bcbsm.com/som</a></p>
	<p><b>MENTAL HEALTH/                  SUBSTANCE ABUSE SERVICES</b>                  Magellan Behavioral of Michigan                  (866) 503-3158  <a href="http://www.magellanassist.com">www.magellanassist.com</a></p>	<p><b>STATE DENTAL PLAN and                  PREVENTIVE DENTAL PLAN</b>                  Delta Dental Plan of Michigan                  (800) 524-0150  <a href="http://www.deltadentalmi.com">www.deltadentalmi.com</a></p>
	<p><b>STATE LONG TERM DISABILITY (LTD) PLAN</b>                  CMI, a York Risk Services Company                  (800) 324-9901</p>	<p><b>DENTAL MAINTENANCE ORGANIZATION (DMO)</b>                  Midwestern Dental Plans, Inc.                  (800) 544-6374  <a href="http://www.midwesterndental.com">www.midwesterndental.com</a></p>

## Provider Information

<b>Health Maintenance Organizations (HMOs)</b>	<p><b>Blue Care Network</b>                  (800) 662-6667  <a href="http://www.bcbsm.com/som">www.bcbsm.com/som</a>                  Open enrollment information  <a href="http://www.bcbs.com/som/emp/open-enrollment.shtml">www.bcbs.com/som/emp/open-enrollment.shtml</a></p>	<p><b>McLaren Health Plan</b>                  (888) 327-0671  <a href="http://www.mclarenhealthplan.org">www.mclarenhealthplan.org</a></p>
	<p><b>Health Alliance Plan (HAP)</b>                  (800) 422-4641  <a href="http://www.hap.org">www.hap.org</a></p>	<p><b>Physicians Health Plan (PHP)</b>                  (517) 364-8500 or (800) 832-9186  <a href="http://www.phpstateofmichigan.com">www.phpstateofmichigan.com</a></p>
	<p><b>HealthPlus of Michigan (Flint)</b> (800) 332-9161  <b>(Saginaw)</b> (800) 942-8816  <a href="http://www.healthplus.com">www.healthplus.com</a></p>	<p><b>Priority Health</b>                  (800) 446-5674  <a href="http://www.priority-health.com">www.priority-health.com</a></p>



# Employee Benefits Summary



Fiscal Year 2014 - 2015

Mailing Address:

P.O. Box 30002  
Lansing, MI 48909

Toll Free: (877) 766-6447  
Lansing Area: (517) 335-0529  
MI Relay Center: 711  
Fax: (517) 241-5892

Hours of operation  
8:00 a.m. to 5:00 p.m.  
Monday through Friday  
(except on state holidays)

Employee Benefits Division Website  
[www.michigan.gov/employeebenefits](http://www.michigan.gov/employeebenefits)

MI HR Self-Service & MI HR Information  
[www.michigan.gov/selfserv](http://www.michigan.gov/selfserv)

Updated: September 2014





## What retirement plan are you enrolled in?

There are a few different retirement plans available to State of Michigan employees. Certain plans were only made available to those employees who were hired prior to a certain point in time. And further, an employee may be enrolled in specific plans based on choices made during P.A. 487 of 1996 or P.A. 264 of 2011. Review the information below to find your plan then visit the [Office of Retirement Services](#) website for a more detailed look at your retirement plan.

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You're a member of the **Defined Benefit (DB)** plan if you were hired before March 31, 1997, and you:

- Elected the DB Classified plan under P.A. 264 of 2011.
  - Elected the DB 30 plan under P.A. 264 of 2011 and you have not yet reached 30 years of service.
- 

You're a participant in the **Defined Contribution (DC) with Subsidized Retiree Insurance** plan if you:

- Were newly hired by the State of Michigan on or after March 31, 1997.
  - Began your state employment under the DB plan and chose to transfer to the DC plan under P.A. 487 of 1996. (You retain the DB insurance Subsidy.)
    - Review your 401K/457 account with [ING](#)
- 

You're a member of the **DB plan AND a participant in the DC** plan if you:

- Elected the DB 30 plan under P.A. 264 of 2011 and you have reached 30 years of service.
  - Elected the DB/DC Blend plan under P.A. 264 of 2011, and thus became a DC plan participant April 1, 2012.
    - Review your 401K/457 account with [ING](#)
  - Began your state employment under the DB plan, left, and then returned to state employment on or after January 1, 2012, and before January 1, 2014.
- 

You're a participant in the **Defined Contribution (DC) with Personal Healthcare Fund** if you:

- Were newly hired by the State of Michigan on or after December 31, 2011.
    - Contact [ING](#) in regards to plan details.
  - Elected the Personal Healthcare Fund under P.A. 264 of 2011.
    - Contact [ING](#) in regards to plan details.
    - Contact the [Office of Retirement Services](#) in regards to your Lump Sum payout
- 

