

Planning Ahead:

**What Your Beneficiary Needs To Know
If You Die While An Active State Employee**



**Department of Personnel Administration
Benefits Division**

January 2010

Planning Ahead

Why should I read this booklet?	1
Who should my family call in the event of my death?	1
What information will my personnel office need?	2
What actions will my personnel office take?	2
Who should I contact when my family status changes and I want to change my beneficiary? ..	3
If I become terminally ill, can I access funds from my Group Life Insurance policy?	4
What should I do now to prepare my beneficiaries?	4
Summary of benefits and contacts for beneficiaries of State employees	6
Vital Information form	

Why should I read this booklet?

Although it's not a pleasant thought, we all must face the inevitability of death. This booklet will help you prepare the information your beneficiaries will need if you die while still employed by the State of California. It also explains the other steps your beneficiaries should take to ensure they receive the benefits to which they're entitled.

This booklet does **not** apply to situations involving the death of a retired/separated State employee. If you're retired/separated at the time of your death, your family should contact the California Public Employees Retirement System (CalPERS) at 1-888-225-7377 for assistance with survivors benefits.

The "Vital Information" form at the end of this booklet will help you record the information your family or friends will need. When you have completed the form, store it in a safe place where it can be easily accessed by the person who will handle your estate. Update this form anytime you make changes in your employment or other areas your beneficiaries should know about.

Who should my family call in the event of my death?

If you're a State of California employee at the time of your death, a family member or friend needs to call at least one of the following people as soon as possible:

- your supervisor;
- manager; or
- personnel office.

At this time, the personnel office will also need to know the name and phone number of a contact person for your family in case questions arise. Be sure that person knows where to locate this booklet. It will help them answer questions from the personnel office and deal with other issues that will come up in the course of settling your estate.

Your family or friends also should notify:

- Social Security Administration's local office (call 1-800-772-1213 or check online at <http://www.ssa.gov/> to locate the local office)
- California Public Employees' Retirement System (1-888-225-7377 or www.calpers.ca.gov to locate the local office); and
- Savings Plus Program, if you have a 401(k) and/or 457 account with SPP (1-866-566-4777).

It also may be necessary to contact your bank, credit union, and certain creditors.

What information will my personnel office need?

The most immediate information your personnel office will need in the event of your death is:

- your complete legal name, birth date, and Social Security number;
- time, date, and cause of death (if known);
- your last day worked (if known);
- name and phone number of a family member or friend to act as a contact person with your personnel office;
- a copy of your marriage certificate, if applicable; and
- a copy of the death certificate.*

*To settle your estate, your family or friends may need to obtain multiple original and/or certified copies of your death certificate. Typically, certified copies of death certificates can be obtained (for a fee) from the funeral home while funeral arrangements are being made. If additional certified copies are still required, they can be obtained (for a fee) from the County Clerk's office or Recorder's office.

What actions will my personnel office take?

Generally, your personnel office takes care of most of the paperwork for your beneficiary(ies) to obtain the appropriate benefits. Upon notification of your death, your personnel office will:

- notify your supervisor, manager, and department director;
- cancel your direct deposit, if you were enrolled;
- notify California Public Employees' Retirement System (CalPERS);
- prepare your final paycheck, including lump sum payment for any unused vacation, personal holiday, holiday credits, personal leave, compensating time off (CTO), excess hours, or annual leave;
- notify State Controller's Office (SCO);
- send Consolidated Omnibus Budget Reconciliation Act (COBRA) notification to your eligible survivors;
- notify State's Group Life Insurance plan, if you were covered;
- notify Department of Personnel Administration (DPA), if you were enrolled in a 401(k) and/or 457 account through the Savings Plus Program (SPP) or the retirement program for part-time, seasonal, and temporary employees (PST);
- notify appropriate employee organization/association (union), if applicable, as some of them provide life insurance coverage for their members; and
- notify State Compensation Insurance Fund, if your death was or may have been work related.

When your State employment ends, your enrollment in some of the benefit programs also ends. Check with your personnel office for more information on which benefits end immediately and which benefits may be continued by your beneficiaries.

Who should I contact when my family status changes and I want to change my beneficiary?

Only the beneficiary(ies) on file at the time of your death will receive your benefits and/or account balances. For this reason, make sure your most current beneficiary information is on file with your personnel office and the other offices listed at the end of this section.

Unfortunately, many families have experienced unpleasant surprises at a very stressful time in their lives because beneficiary information was not current. For example, if an ex-spouse is still listed as your beneficiary at the time of your death, that person may receive benefits that you intended someone else to get.

If you have a 401(k) and/or 457 account with the Savings Plus Program (SPP), you must contact SPP directly to change your beneficiary information. Your personnel office does **not** submit beneficiary information to SPP.

If there's no beneficiary designation on file at the time of your death, California Government Code § 21493 requires assets to be distributed based on the following priority order (in most cases):

1. your spouse or, if none;
2. your children (including adopted children) or, if none;
3. your parents or, if none;
4. your brothers and sisters or, if none;
5. your estate (if probated) or, if your estate is not probated;
6. trust or, if none;
7. stepchildren or, if none;
8. your grandchildren (including stepgrandchildren) or, if none;
9. your nieces and nephews or, if none;
10. your great-grandchildren or, if none;
11. your cousins or, if none;
12. your estate.

Effective July 1, 2003, if a registered domestic partner dies without a will, trust, or other estate plan, the surviving domestic partner inherits the deceased partner's separate property in the same manner as a surviving spouse (California Probate Code § 6401 and 6402).

Each of the offices and benefit programs listed below requires you to designate a beneficiary. Take some time to review this list and contact the appropriate offices to make sure your records are up to date. If you haven't already designated a beneficiary, or need to update your current designation, request a beneficiary designation form when you call.

The offices/programs requiring a beneficiary designation are:

- your department's personnel office;
- Savings Plus Program (1-866-566-4777);
- CalPERS (1-888-225-7377);
- Group Life Insurance Plan, if you're covered (contact Metropolitan Life at 1-800-252-8524);
- Travel Accident Insurance Plan, if you're covered (contact the Office of Risk and Insurance Management at 916-376-5279); and
- your employee organization/association (union), if applicable.

If I become terminally ill, can I access funds from my Group Life Insurance policy?

If you're covered by the State's Group Life Insurance plan and become terminally ill, you have the option to request accelerated payment equal to 70% of the face amount of your policy. (Managers, supervisors, confidential, and other "excluded" employees are covered by the State's Group Life Insurance.)

To qualify for this accelerated option, you must have been diagnosed with a sickness or injury that is expected to result in your death within six months. If you're married and your spouse is your beneficiary, your spouse's signature will be required on the application.

For additional information, call Metropolitan Life at 1-800-252-8524.

What should I do now to prepare my beneficiaries?

One of the most important steps you can take now to prepare your beneficiaries in the event of your death is to compile the following information. We've provided a form at the end of this booklet for writing it down. Be sure to let your family or friends know where you've stored this booklet and the completed form.

The information your family or friends will need includes:

- your full name, date of birth, and Social Security number;
- location of your birth certificate and Social Security card;
- your employer (department) and work location;
- location, phone number, and e-mail address of your personnel office staff;
- your supervisor's name, phone number, and e-mail address;
- your employee organization/association (union), if applicable;
- list of insurance plans you're enrolled in, e.g., life, long-term disability, health, long-term care, homeowner's/renter's, mortgage, etc.;
- list of your savings and checking accounts, with names and locations of institutions where they are held;

- list of stocks, bonds, and mutual funds you own, including names and locations of institutions where they are held;
- information about retirement plans you're enrolled in such as CalPERS, Savings Plus 401(k) and/or 457 accounts, IRAs, etc.;
- location of your safe deposit box, including key number;
- location of your Post Office box, including key number;
- your burial instructions;
- location of your durable power of attorney documents;
- location of your will and trust agreement;
- location of your titles and deeds, e.g.: car, house, cemetery plot, real estate, etc.; and
- location of your marriage certificate, divorce and/or legal separation papers, Armed Forces discharge papers, adoption papers, naturalization papers, state and federal income tax returns, and Medicare card.

These are just some of the things your family or friends will need to help them deal with your benefits. You may want to take other, more personal steps to ensure they have all the information necessary to carry out your instructions.

If you haven't yet planned what should happen to your assets when you die, now is a good time to begin. You can plan your estate with the help of a professional planner or your family attorney. You can even do your own estate planning using resources available at the library or via the Internet. It's never too early to plan.

Summary of Benefits and Contacts for Beneficiaries of State Employees

Consolidated Benefits (CoBen)

Contact: Deceased employee's personnel office.

Status of Benefits: Any CoBen allowance is discontinued upon employee's death.

Death Benefits (pre-retirement) for CalPERS

State retirement categories:

- Misc. Tier
- Industrial Tier 1
- Peace Office/Firefighter
- Patrol
- Safety

Contact: Deceased employee's personnel office; CalPERS Benefit Services (1-888-225-7377)

Status of Benefits: Beneficiary receives \$5,000 Group Life Insurance benefit and 1959 Survivor Benefit, if applicable. (Latter benefit, optional for State employees not covered by Social Security, provides benefit to spouse and eligible children similar to Social Security benefits.)

If employee was age-eligible to retire, beneficiary may choose one of the following additional benefits (consult with CalPERS for actual amounts):

- Six months worth of deceased employee's salary, plus basic death benefit (latter equals employee's CalPERS contributions, plus interest);
- Monthly allowance equal to what employee would have received if he/she had retired for service and chosen this option on the day of his/her death;
- 1957 Survivor Allowance (monthly allowance equal to 50% of what benefit would have been if employee had retired for service and chosen "unmodified allowance" on day of his/her death); or
- 1959 Survivor Allowance (monthly allowance for CalPERS members not under Social Security)
- Special death benefit, if applicable. (For employee in "safety" retirement category whose death is job related, or any employee whose death results from a violent act against him/her arising out of and in the course of duty, surviving spouse or children receive a monthly allowance equal to 50% of employee's final compensation, payable for life. Salary increases for active employees in deceased employee's former job class will be used to maintain the 50% level until the time when deceased employee would have reached age 50. If this benefit is payable due to a violent act at work against the employee, and there's a surviving spouse *and* children, allowance may be increased from 50% up to 75%).

If employee was ***not*** age-eligible to retire, but had ***20 years or more of service credit***, beneficiary may choose one of the following additional benefits (consult with CalPERS for actual amounts):

- Six months worth of deceased employee's salary, plus basic death benefit (latter equals employee's CalPERS contributions, plus interest);
- Alternate death benefit (monthly allowance equal to what employee would have received if he/she had retired for service at minimum retirement age for his/her retirement category, payable to eligible spouse and minor children up to age 18); or
- Special death benefit, if applicable (see description above).

If employee was ***not*** age-eligible to retire, and had ***less than 20 years of service credit***, beneficiary will receive one of the following additional benefits:

- Six months worth of deceased employee's salary, plus basic death benefit (latter equals employee's CalPERS contributions, plus interest); or
- Special death benefit, if applicable (see description above).

Death Benefits (pre-retirement) for CalPERS

State retirement categories:

- Misc. Tier 2
- Industrial Tier 2

Contact: Deceased employee's personnel office; CalPERS Benefit Services (1-888-225-7377).

Status of Benefits: Beneficiary receives \$5,000 Group Life Insurance benefit and 1959 Survivor Benefit, if applicable. (Latter benefit, optional for State employees not covered by Social Security, provides benefit to spouse and eligible children similar to Social Security benefits.)

If employee was ***age-eligible to retire***, beneficiary may choose one of the following additional benefits (consult with CalPERS for actual amounts):

- Six months worth of deceased employee's salary;
- Basic death benefit (equals deceased employee's CalPERS contributions, plus interest);
- 1957 Survivor Allowance (monthly allowance equal to 50% of what benefit would have been if employee had retired for service and chosen "unmodified allowance" on day of his/her death); or
- 1959 Survivor Allowance (monthly allowance for CalPERS members not under Social Security)
- Special death benefit, if applicable. (For employee in "safety" retirement category whose death is job related, or any employee whose death results from a violent act against him/her arising out of and in the course of duty, surviving spouse or children receive a monthly allowance equal to 50% of employee's final compensation, payable for life. Salary increases for active employees in deceased employee's

former job class will be used to maintain the 50% level until the time when the deceased employee would have reached age 50. If this benefit is payable due to a violent act at work against the employee, and there's a surviving spouse *and* children, allowance may be increased from 50% up to 75%).

If employee was **not** age-eligible to retire, but had **20 years or more of service credit**, beneficiary may choose one of the following additional benefits:

- Six months worth of deceased employee's salary;
- Alternate death benefit (monthly allowance equal to what employee would have received if he/she had retired for service at minimum retirement age for his/her retirement category, payable to eligible spouse and minor children up to age 18); or
- Special death benefit, if applicable (see description above).

If employee was **not** age-eligible to retire, and had **less than 20 years of service credit**, beneficiary will receive one of the following additional benefits:

- Six months worth of deceased employee's salary; or
- Special death benefit, if applicable (see description above).

Dental Plan

Contact: Deceased employee's personnel office.

Status of Benefits: If employee was enrolled in a dental plan, department pays premium for up to 120 days following employee's death. Beneficiaries may be eligible to continue coverage under COBRA after 120 days.

Employee Assistance Program (EAP)

Contact: Deceased employee's personnel office and EAP coordinator.

Status of Benefits: Family members may use services for six months after employee's death, depending on employee's organization or association (union).

FlexElect Program

Contact: Deceased employee's personnel office (or call FlexElect at 916-322-0300 for information on outstanding claims).

Status of Benefits: Reimbursement claims being processed at the time of employee's death are paid if they otherwise meet eligibility criteria.

Health Insurance

Contact: Deceased employee's personnel office; CalPERS Benefit Services (1-888-225-7377).

Status of Benefits: If employee was enrolled in a health plan, his/her department continues to pay premiums for up to 120 days following death. Surviving beneficiaries may be eligible to continue coverage after 120 days under COBRA.

Leave Donation

Contact: Deceased employee's personnel office.

Status of Benefits: Excluded Employees: If excluded employee on pay status dies from a non-work-related illness or injury, request may be made to his/her department to allow employees to donate leave credits (annual, vacation, holiday, personnel leave, or excess) to a leave bank. This donated leave, not to exceed \$50,000, is cashed out to the person designated to receive deceased employee's leave balance. Donations are accepted for 30 days following approval of the request.

California Association of Highway Patrolmen: If a member of CAHP on pay status dies from a non-work-related illness or injury, request may be made to the CHP Commissioner to allow employees to donate leave credits (CTO, annual, vacation, holiday, personal leave, but not sick leave) to a leave bank. This donated leave is cashed out to the person designated to receive value of deceased employee's leave balance. Leave donations will be valued at deceased employee's salary rate at time of death. CHP Commissioner will set limits on such financial assistance, based on available funds.

California Correctional Peace Officers Association: If a member of CCPOA on pay status dies from a non-work-related illness or injury, request may be made to deceased employee's department to allow employees to donate leave credits (annual, vacation, holiday, personal leave, or excess) to a leave bank. This donated leave, not to exceed \$50,000, will be cashed out to the person designated to receive the value of deceased employee's leave balance. Donations are accepted for 30 days following approval of the request.

Legal Services Plan

Contact: Deceased employee's personnel office.

Status of Benefits: Group plan is discontinued upon employee's death. Any open claims at the time of death are completed.

Life Insurance – State plan

Contact: Deceased employee's personnel office; Metropolitan Life (1-800-252-8524).

Status of Benefits: For covered employees, benefits are paid in the following order:

- to surviving spouse or, if none;
- to surviving natural, adopted, and step children or, if none;
- to surviving parents or, if none;
- to deceased employee's estate.

Benefits are paid equally among surviving children or parents. Family status changes such as divorce and remarriage are automatically adjusted unless employee designated a beneficiary other than the order above.

Deceased employee may have designated a beneficiary other than listed above. Such a designation doesn't change when family status changes, unless employee submitted a new form to make the change.

Life Insurance – Union or Association plan

Contact: Union office.

Status of Benefits: Some unions provide life insurance benefits to their members.

Long-Term Care Insurance

Contact: CalPERS (1-800-982-1775).

Status of Benefits: If employee was enrolled in CalPERS Long-Term Care Program, surviving spouse may be entitled to a partial refund of premiums paid. If there's no surviving spouse, death benefit is paid to employee's estate or living trust.

Surviving family members may enroll in Long-Term Care Program even after eligible employee's death.

Long-Term Disability Insurance Program (LTD)

Contact: Deceased employee's personnel office; Dept. of Personnel Administration (916-322-0300).

Status of Benefits: If deceased employee was receiving monthly LTD payments, eligible survivors may receive a one-time payment equal to three times the monthly payment. If employee was not receiving payments or claim had not been approved, there are no survivor benefits.

Merit Award Program

Contact: Deceased employee's personnel office and/or Merit Award administrator.

Status of Benefits: If an employee suggestion submitted prior to death is approved and implemented, any resulting cash award is paid to deceased employee's estate.

Parking

Contact: Deceased employee's personnel office

Status of Benefits: If employee was enrolled in pre-tax parking, any reimbursement claims being processed at the time of employee's death will be paid to the beneficiary.

Rural Health Care Equity Program

Contact: Deceased employee's personnel office

Status of Benefits: **Effective 7/1/2009, only members of Bargaining Unit 5 are eligible for the Rural Health Care Equity Program.** This benefit stops unless surviving spouse is eligible for Survivor Benefit or is an active State employee receiving Cash Option payments in lieu of health and/or dental benefits. Any reimbursement claims being processed at the time of employee's death will be paid to the beneficiary.

Savings Plus Program (SPP)

Contact: Deceased employee's personnel office; Savings Plus Program (1-866-566-4777).

Status of Benefits: Funds from deceased employee's 401(k) and/or 457 plans are paid to designated beneficiary on file with SPP.

Survivor Death Benefits for Immediate Family

Contact: Deceased employee's personnel office; CalPERS Benefit Services (1-888-225-7377).

Status of Benefits: CalPERS determines if surviving spouse or minor children (under 18 years of age) are eligible for Survivor Benefits. If there's no surviving spouse or minor children, dependent parents may qualify.

Travel Accident Insurance

Contact: Deceased employee's personnel office; Office of Risk and Insurance Management (916-376-5279) for claim.

Status of Benefits: Benefit pays beneficiary (ies) of eligible employees hurt or killed while traveling on State business under certain circumstances. Benefits are paid in the same standard beneficiary order as the State's Group Life Insurance if a specific beneficiary is not designated with the Office of Risk and Insurance Management (see Life Insurance - State plan).

Vision Plan

Contact: Deceased employee's personnel office.

Status of Benefits: Department pays premium for up to 120 days following employee's death, if employee was covered by State vision plan. Beneficiary (ies) may be eligible to continue coverage after 120 days under COBRA.

Workers' Compensation

Contact: Deceased employee's personnel office.

Status of Benefits: If death was work related, surviving family members may be eligible for death benefits.

Vital Information

(Fill out and store in a safe location. This information should be updated periodically.)

PERSONAL INFORMATION

Full Legal Name:

Date of Birth:

Social Security Number:

EMPLOYMENT INFORMATION

Employer (Agency or Department):

Employer Address:

Phone Number:

Employee E-mail Address:

Date of Hire:

Supervisor's Name:

Supervisor's Phone Number:

Supervisor's E-mail Address:

Personnel Office Address:

Personnel Office Phone Number:

Personnel Office E-mail Address:

Employee Organization/Association Name:

Employee Organization/Association Unit Number:

Check One:

Non-Represented Exempt Excluded Confidential

PERS Member:

Yes No

Type:

Tier 1 Tier 2

STRS Member:

Yes No

EMPLOYER BENEFITS

Check Benefits Programs you are enrolled in:

- | | |
|--|--|
| <input type="checkbox"/> Consolidated Benefits (CoBen) | <input type="checkbox"/> Pre-Tax Parking |
| <input type="checkbox"/> Flex Program | <input type="checkbox"/> Savings Plus Program |
| <input type="checkbox"/> Legal Services Plan | <input type="checkbox"/> State Sponsored Insurance Plan |
| <input type="checkbox"/> Long-Term Care | <input type="checkbox"/> Travel and Accidental Death Insurance |
| <input type="checkbox"/> Long-Term Disability Program | <input type="checkbox"/> Union Sponsored Life Insurance Plan |
| <input type="checkbox"/> PST Retirement Program | <input type="checkbox"/> Vision Plan |

HEALTH INSURANCE

Carrier Name:

Address:

Phone Number:

Membership Number:

Location of Policy or Evidence of Coverage:

DENTAL INSURANCE

Carrier Name:

Address:

Phone Number:

Membership Number:

Location of Policy or Evidence of Coverage:

VISION INSURANCE

Carrier Name:

Address:

Phone Number:

Membership Number:

Location of Policy or Evidence of Coverage:

EMPLOYER GROUP LIFE INSURANCE

Carrier Name:

Address:

Phone Number:

Policy Number:

Location of Policy or Evidence of Coverage:

EMPLOYER SUPPLEMENTAL LIFE INSURANCE

Company Name:

Address:

Phone Number:

Policy Number:

Location of Policy or Evidence of Coverage:

OTHER INSURANCE POLICIES

Company Name:

Type of Policy

Address:

Phone Number:

Policy Number

Location of Policy/Evidence of Coverage:

Company Name:

Type of Policy

Address:

Phone Number:

Policy Number:

Location of Policy/Evidence of Coverage:

RETIREMENT BENEFITS

Employer or Union's Name:

Type of Plan:

Phone Number:

Account Number:

OTHER RETIREMENT BENEFITS

Firm Name:

Type of Plan:

Phone Number:

Account Number:

Firm Name:

Type of Plan:

Phone Number:

Account Number:

VETERANS BENEFITS

Are you entitled to Veterans benefits?

 Yes No**SOCIAL SECURITY BENEFITS**

Are you entitled to Social Security benefits?

 Yes No**BANK INFORMATION**

Company Name:

Checking Acct. Number:

Savings Acct. Number:

Other Acct. Number:

CREDIT UNION INFORMATION

Company Name:

Checking Acct. Number:

Savings Acct. Number:

Other Acct. Number:

OTHER FINANCIAL ASSETS

Company Name:

Account Number:

Phone Number:

Company Name:

Account Number:

Phone Number:

Company Name:

Account Number:

Phone Number:

Company Name:

Account Number:

Phone Number:

Company Name:

Account Number:

Phone Number:

REAL ESTATE/MORTGAGE INFORMATION

Property Location:

Lender:

Phone Number:

Account Number:

Location of Deed/Title:

Property Location:

Lender:

Phone Number:

Account Number:

Location of Deed/Title:

FAMILY ADVISORS

Personal Attorney:

Address:

Phone:

Stock Broker/ Financial Planner/CPA:

Address:

Phone:

Other:

Address:

Phone:

LOCATION OF IMPORTANT RECORDS

Type of Information	Location
Wills/Trust:	
Power of Attorney:	
Health Care Proxy:	
Burial/Cremation/Funeral Instructions:	
Motor Vehicles Titles(s):	
Birth Certificates:	
Marriage Certificates:	
Divorce Certificates:	
Social Security Card:	
Employment Records:	
Armed Forces Records:	
Tax Records:	
Stocks/Bonds/Certificates:	
Homeowners Insurance Policy(ies):	

Automobile Insurance Policy (ies):	
Other:	
Other:	
Other:	

SAFETY DEPOSIT BOX

Location of Box

Box Number:	Location of Key:
-------------	------------------

POST OFFICE BOX

Location of Box:

Box Number:	Location of Key:
-------------	------------------

AUTHORIZATION

Signature:	Date:
------------	-------

Disclaimer: This document is for your personal recordkeeping and is not intended to take the place of a will or a trust.