EMPLOYER CERTIFICATION OF VRS BASIC GROUP LIFE INSURANCE COVERAGE UNDER THE TRANSITIONAL BENEFITS PROGRAM

VIRGINIA RETIREMENT SYSTEM
Beneficiary Payment Services
P.O. Box 2500 ◆ Richmond, Virginia 23218-2500
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Fax 1-804-786-9718
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1. Employer Code
2. Employer Name

To be completed by employers who elected to provide severance benefits under the Transitional Benefits Program for employees who meet the following three conditions:

- Involuntarily separated under the Transitional Benefits Program,
- Covered under the Virginia Retirement System (VRS) Basic Group Life Insurance Program at time of separation, and
- Electing a severance benefit payment instead of converting the severance credit for purposes of VRS retirement.

Employees covered under the VRS Group Life Insurance Program who are involuntarily separated and will receive the severance benefit continue to have basic life insurance coverage for up to 12 months. The effective date is the first of the month following the date of separation.

Involuntarily separated employees who do not meet minimum age and service requirements for retirement at the time of separation are eligible to convert basic group life coverage to an individual policy. Employees must complete this conversion within 31 days following the earlier of 1) the end of the month in which the 12 months of continued coverage expires or 2) the date transitional severance benefits end.

Employers must report the employee to VRS on a leave without pay (LWOP) status for the duration of the leave without pay layoff period.

PART A. EMPLOYEE INFORMATION

3. Name (First, Middle Initial, Last)

4. Social Security Number

5. Effective Date of Involuntary Separation (mm/dd/yyyy)

6. Last Annual Salary (Used to calculate basic group life insurance amount.)

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PART B. EMPLOYER CERTIFICATION

Employer Mailing Address

Human Resources Authorization

Signature

Phone Number   Date

Payroll Authorization

Signature

Phone Number   Date

VRS-11C (Rev. 02/11)