MISSISSIPPI STATE UNIVERSITY™

HUMAN RESOURCES MANAGEMENT

Retiring with PERS

A Step-by-Step Guide for MSU Employees

PERS Service Retirement · Retiree Insurance · Medicare

Revised September 2026

Welcome

Retirement is a major milestone, and the Department of Human Resources Management (HRM) is here to help you prepare for it. This guide explains the **service retirement** process for Mississippi State University employees who are members of the Public Employees' Retirement System of Mississippi (PERS), including what to expect from HRM and PERS, how long each stage typically takes, and the deadlines that protect your benefits.

Employees who participate in the Optional Retirement Plan (ORP) should contact HRM, as ORP distributions are handled through the ORP vendor.

> **SERVICE RETIREMENT ONLY**
>
> This guide applies to **PERS service retirement**, which is based on your age and years of service. **Disability retirement** and **survivor benefits** have separate eligibility rules, forms, and timelines. If either applies to you or your family, contact HRM Benefits or PERS directly.
>
> **BEFORE YOU BEGIN**
>
> Keep your home address and personal email address current with HRM. PERS, Blue Cross & Blue Shield of Mississippi, and HRM will send important notices to the address on file.
>
> Questions? Contact HRM Benefits at **662-325-3713** or **benefits@hrm.msstate.edu**.

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GETTING STARTED

Overview and Eligibility

Begin retirement planning at least **12 months** in advance, submit your retirement paperwork to HRM **three to six months** before your last day, and apply for retiree insurance at least **31 days** before your last day to avoid a gap in coverage.

Key Terms

- **Last day of employment:** your final day worked at MSU, as stated in your letter of resignation.
- **Effective date of retirement:** the date PERS benefits begin. It is the first day of the month after both your last day of employment and PERS's receipt of your completed Form 9A (for example, a last day of October 31 results in an effective date of November 1 if PERS has your Form 9A by then).
- **Vested:** having enough PERS service to qualify for a lifetime benefit (four years for Tiers 1 and 2; eight years for Tiers 3, 4, and 5).
- **Creditable service:** years of PERS membership service, plus purchased service and credit for unused leave.

Service Retirement Eligibility by Tier

Your tier is determined by the date you first became a member of PERS. It is shown on the annual member statement PERS mails to you each October, and HRM can also confirm it.

Tier	PERS Membership Date	Vesting	Service Retirement Eligibility	Benefit Multiplier
1	On or before June 30, 1992	4 years	25 years at any age, or age 60 and vested	2.0% per year for first 25 years; 2.5% thereafter
2	July 1, 1992 – June 30, 2007	4 years	25 years at any age, or age 60 and vested	2.0% per year for first 25 years; 2.5% thereafter
3	July 1, 2007 – June 30, 2011	8 years	25 years at any age, or age 60 and vested	2.0% per year for first 25 years; 2.5% thereafter
4	July 1, 2011 – Feb. 28, 2026	8 years	30 years at any age, or age 60 and vested	2.0% per year for first 30 years; 2.5% thereafter
5 (Hybrid)	On or after March 1, 2026	8 years (DB); immediate (DC)	30 years at any age, or age 62 and vested	1.0% per year, plus a defined contribution account

Tiers 4 and 5: If you retire before age 65 with fewer than 30 years of creditable service, your benefit is permanently reduced for each year of service below 30 or each year of age below 65, whichever is less.

> **HOW YOUR BENEFIT IS CALCULATED**
>
> **Average compensation** = (your four highest years of salary + your final leave payout) ÷ 4
>
> **Annual benefit** = average compensation × benefit multiplier × years of creditable service

AT A GLANCE

Retirement Timeline

Most deadlines fall in the months around your last day. Milestones labeled DEADLINE are firm deadlines; a missed retiree health insurance, life insurance, or PERS Phase 2 deadline cannot be corrected later.

When	Milestone
12+ months before	**Plan and check your numbers** Annual PERS statement, benefit estimate, PERS seminar, account audit, service credit purchases, Form 16
About 6 months before	**Decide and notify** Letter of resignation to your department; retirement meeting with HRM Benefits
3 to 6 months before	**File Form 9A through HRM** HRM certifies leave and submits to PERS; PERS mails your estimate and Phase 2 forms
31+ days before your last day	**Apply for retiree health and life insurance** Submit applications to HRM early to avoid a gap in coverage
Last day of employment	**Separate from all PERS-covered employment** Active insurance ends on the last day of the month; leave payout follows one to two pay cycles later
1st of the next month	**PERS effective date; retiree health begins** Your first payment is mailed as a paper check; later payments are direct deposited on the first banking day of each month
Within 31 days after coverage ends	**Retiree health and life insurance deadline** DEADLINE Applications must be received by HRM; the 30-day break before reemployment also ends
Within 90 days after	**Phase 2 forms due at PERS** DEADLINE Forms 9S, 9P, PLSO, proof of age, and beneficiary documents, or the application becomes void
About 6 months after	**Final recalculation** PERS audits final salary and leave after your first payment
At age 65	**Enroll in Medicare Parts A, B, and D** Medicare becomes primary; notify BCBSMS; stop HSA contributions beforehand

STEP 1 · 12 OR MORE MONTHS BEFORE RETIREMENT

Planning

The purpose of this stage is to confirm your retirement eligibility date, estimate your monthly benefit, and correct any gaps in your service record while there is still time.

1. **Review your annual member statement.** PERS mails each member an annual statement every October showing creditable service, contributions, and beneficiaries as of July 1 of that year. Service and contributions earned after July 1 will not appear until the following year's statement. Contact PERS if anything appears incorrect.
2. **Estimate your benefit.** Use the Benefit Estimate Calculator on the PERS website (pers.ms.gov) to compare possible retirement dates.
3. **Attend PERS retirement education.** PERS offers Pre-Retirement Full-Day Seminars and Focus Sessions covering benefit options, insurance, and the application process. Sessions are free, but registration is required on the PERS Retirement Education webpage. One-on-one sessions with a PERS benefit analyst may also be scheduled.
4. **Request an account audit.** Contact PERS to request a verification of your service credit and contributions.
5. **Consider purchasing service credit.** If you have refunded prior service, military service, or other eligible service, discuss purchase options with PERS. All purchases must be completed before retirement. Tier 5 (Hybrid) members may not purchase previously refunded service.
6. **File PERS Form 16, Advanced Application** (download Form 16). File this form once you become eligible to retire. It determines how benefits will be paid if you die after becoming eligible but before retiring. Update it when your circumstances change.
7. **Review Medicare and HSA timing.** If you will be age 64 or older at retirement, or you contribute to a Health Savings Account, review the Medicare section before selecting a retirement date.

> **SELECTING YOUR RETIREMENT DATE**
>
> Because the PERS effective date is always the first day of a month, most employees choose the last working day of a month as their last day of employment. Leaving mid-month does not cause benefits to begin sooner.

STEP 2 · ABOUT SIX MONTHS BEFORE RETIREMENT

Decisions and Notification

At this stage, confirm your last day of employment, review your PERS benefit options, and notify your department and HRM.

1. **Submit a letter of resignation.** Give your department a written letter stating that you are retiring and your last day of employment. HRM cannot begin processing without this letter.
2. **Schedule a retirement meeting with HRM Benefits.** HRM will review your insurance continuation options and provide a Retiree Benefits Information Sheet showing your retiree premiums.
3. **Plan leave usage carefully.** Unused medical and personal leave that is not paid out is converted to PERS service credit. Leave used before retirement reduces that credit (see Step 4).

4. **Review the PERS retirement options.** You will select an option on your PERS application (Step 3). The option generally cannot be changed after payments begin.

Option	Monthly Benefit	Benefit After Your Death
Maximum	Highest available	Any remaining contributions are refunded to your named beneficiaries
Option 1	Reduced	Any remaining contributions are refunded to your beneficiaries; PLSO not available
Option 2	Reduced	One beneficiary receives 100% of your benefit for life
Option 3	Reduced	Two beneficiaries each receive 50% of your benefit for life
Option 4	Reduced	One beneficiary receives 75% of your benefit for life
Option 4A	Reduced	One beneficiary receives 50% of your benefit for life
Option 4B	Reduced	Beneficiaries receive your benefit for the remainder of a 10-, 15-, or 20-year guaranteed period

Partial Lump Sum Option (PLSO)

If eligible, you may receive 12, 24, or 36 months of your Maximum benefit as a one-time payment. Electing a PLSO permanently reduces your monthly benefit and future cost-of-living adjustments.

Tier	PLSO Eligibility
1 and 2	28 years of creditable service, or age 63 and vested
3	28 years of creditable service
4	33 years of creditable service

If the PLSO is paid directly to you, 20% is generally withheld for federal income tax, and an additional 10% IRS tax may apply before age 55.

STEP 3 · THREE TO SIX MONTHS BEFORE RETIREMENT

PERS Application

PERS recommends beginning the application three to six months before your planned retirement date. The application is completed in two phases.

Phase 1: Pre-Application (You and HRM)

1. Complete sections 1–4 of **PERS Form 9A SRVC, Pre-Application for Service Retirement Benefits** (download Form 9A SRVC), including your current mailing address. All PERS correspondence will be sent to this address.
2. Submit the form through the HRM Retirement and Separation online drop box or deliver it to HRM, 150 McArthur Hall.

3. HRM completes section 5, which certifies your employment dates, salary, and unused leave (see Step 4), submits the form to PERS, and confirms the submission to you by email.
4. PERS assigns a benefit analyst, audits your account, and mails you an audited **Estimate of Benefits** showing your monthly amount under each option, along with the Phase 2 forms. Processing time varies with PERS volume; allow several weeks.

> **SUBMIT FORM 9A ON TIME**
>
> Your effective date of retirement can be no earlier than the first day of the month after **both** your last day of employment **and** PERS's receipt of your completed Form 9A. A late Form 9A can push back your retirement date and your first payment.

Phase 2: Application (You to PERS)

PERS mails these forms to you with your Estimate of Benefits; they are not available on the PERS website. Complete and return them directly to PERS:

Form	Purpose
Form 9S	Service Retirement Application: retirement option and beneficiary designation
Form 9P	Payroll Authorization: direct deposit (required), federal tax withholding, and cost-of-living adjustment (COLA) payment election
Form PLSO	Only if you are eligible for and electing a Partial Lump Sum Option
Supporting documents	Proof of age; copies of your beneficiaries' birth certificates and Social Security cards; and any other documents requested by your benefit analyst

> **DEADLINE: 90 DAYS**
>
> All Phase 2 forms must be received by PERS **no later than 90 days after your effective date of retirement**. If this deadline is missed, the application becomes void and you must reapply with a later effective date. Returning your forms before your last day helps avoid a delay in your first payment.

Insurance Applications

At least 31 days before your last day of employment, you should also:

- Submit the State and School Employees' Health Insurance Plan Application for Coverage to HRM to continue health coverage as a retiree without a lapse.
- Submit your state group life insurance application, and decide whether to continue Unum term life insurance and dental and vision coverage (see Other Insurance).

STEP 4 · LEAVE

Leave Payout and Leave Certification

At retirement, a portion of your unused leave is paid to you in a lump sum, and the remainder is converted to PERS service credit.

Employee Type	Leave Paid at Retirement	Leave Converted to Service Credit
12-month employees	Unused personal leave, up to 240 hours	Personal leave above 240 hours, plus all major medical leave
9-month faculty	Accrued major medical leave, up to 240 hours	Major medical leave above 240 hours (9-month faculty do not earn personal leave)

Leave is paid at your rate of pay on the date of separation. Under Mississippi law, MSU may not pay leave at any other rate. Your leave payout is added to your four highest years of salary before PERS divides by four to calculate your average compensation. PERS also converts the certified leave to additional creditable service, which may increase your monthly benefit.

How HRM Certifies Your Leave

1. When Form 9A is prepared, HRM projects your unused leave balance as of your last day of employment, including future accruals.
2. Because your balance may change before retirement, HRM initially certifies a conservative amount.
3. After your last day, HRM calculates your actual final balance and submits a revised certification to PERS when needed, so you receive credit for all eligible leave.

> **PROTECT YOUR SERVICE CREDIT**
>
> Any personal or medical leave recorded in Banner after your Form 9A is submitted may reduce your PERS benefit. Departments should enter all leave promptly and accurately through your last day of employment.

STEP 5 · YOUR LAST MONTH

Final Month of Employment

During your final month, your department completes separation processing, your active benefits end, and you must fully separate from all PERS-covered employment.

1. **Separation processing.** Your supervisor or business manager initiates separation paperwork and completes the MSU Separating Checklist (keys, equipment, system access, and final leave).
2. **Leave records.** Confirm that all leave has been entered in Banner through your last day.
3. **PERS application.** Confirm that PERS has received all Phase 2 forms, or note your 90-day deadline.
4. **Flexible spending accounts.** Submit receipts for eligible Mediflex and Careflex expenses incurred on or before your last day to SABC within 30 days after your last day of work.
5. **Contact information.** Provide a current mailing address to HRM and PERS so you receive insurance and tax documents.

Item	What to Expect
Active insurance	Active employee coverage ends on the last day of the month in which employment ends, unless continued as retiree coverage.

Item	What to Expect
Final paycheck	MSU uses a non-delayed payroll. Your final paycheck is issued on the first regularly scheduled payday after your last day.
Leave payout	Paid separately, typically one to two pay cycles after your last day, once your department confirms all leave has been entered. It is direct deposited to the same account as your paycheck.
W-2 and 1095-C	Mailed to the address on file with HRM.

> **BONA FIDE SEPARATION**
>
> You must completely separate from all PERS-covered employers. State law prohibits any agreement, formal or informal, to return to work after retirement. Such an arrangement may result in cancellation of your retirement benefits. See Working After Retirement.

STEP 6 · AFTER RETIREMENT

Benefit Payments

Your **first retirement payment is mailed to you as a paper check** at the address on file with PERS. After that, PERS pays your benefit by direct deposit on the **first banking day of each month**. Payments begin only after all application forms are on file.

Item	Timing
Effective date of retirement	First day of the month after both your last day of employment and PERS's receipt of your completed Form 9A
First monthly benefit	Mailed as a paper check after all Phase 2 forms are on file. If processing extends past your effective date, the first check includes retroactive payments.
Later monthly benefits	Direct deposited on the first banking day of each month
PLSO payment (if elected)	Paid at approximately the same time as your first monthly benefit
Final recalculation	PERS audits final salary and leave and recalculates your benefit, generally within six months of your first payment.
Retiree health premiums	Because your first PERS payment is a paper check, premiums cannot yet be deducted. You pay your first premium directly to DFA by check using the voucher provided by HRM. After that, premiums are deducted from your PERS benefit.
Cost-of-living adjustment (COLA)	Begins after benefits have been received for one full fiscal year (July 1–June 30); paid on or about December 15 unless monthly payments were elected.
Form 1099-R	Mailed by PERS each January

COLA example: If your retirement is effective July 1, you are first eligible for a COLA in the fiscal year beginning 12 months later. If it is effective August 1, you are first eligible in the fiscal year beginning 23 months later.

Taxes: PERS benefits are exempt from Mississippi state income tax but are subject to federal income tax, and may be taxed by another state if you relocate. Use Form 9P to set your federal tax withholding.

Changes after retirement: Submit address and personal information changes to PERS in writing on Form 1C (download Form 1C). PERS does not accept address changes by telephone.

CONTINUING YOUR HEALTH COVERAGE

Retiree Health Insurance

Eligible retirees may continue State and School Employees' Health Insurance Plan coverage for life. Retirees pay the full premium for all coverage.

> **DEADLINE: 31 DAYS**
>
> Your retiree health application must be received by HRM **no later than 31 days after your active coverage ends**. Late applications are not accepted, and the right to retiree coverage is permanently forfeited. Apply at least 31 days before your last day to avoid a lapse.

Eligibility for Retiree Health Coverage

To continue health coverage as a retiree, you must:

1. Be enrolled in the Plan on the day before your effective date of retirement;
2. Have been an active member with the Plan for at least four years preceding retirement (unless retiring due to a work-related disability; Miss. Code Ann. § 25-15-9); and
3. Qualify for PERS service retirement or be approved for PERS disability retirement.

Rule	What It Means for Retirees
Legacy or Horizon	Your premium depends on your original hire date. **Legacy:** first employed before January 1, 2006, or a full-time employee of a Mississippi public community college, library, school district, state agency, or university before that date. **Horizon:** first employed on or after January 1, 2006.
Base or Select coverage	Non-Medicare retirees may choose Base or Select coverage. Medicare-eligible retirees are covered under Select coverage only, and the Plan does not provide prescription drug benefits once you are Medicare-eligible.
Eligible dependents	Your spouse and your children to age 26 (coverage ends at the end of the month the child turns 26). A child who became permanently disabled before age 26 may remain covered at any age with approval from BCBSMS.
Adding dependents	Retirement is not a qualifying event, and retirees cannot add dependents during Open Enrollment. A new dependent may be added within 60 days of marriage, birth, adoption, legal guardianship or custody. A dependent who loses other coverage may be added within 60 days only if you declined coverage for that dependent when first eligible because the dependent had other coverage.

Rule	What It Means for Retirees
Changing coverage	Non-Medicare retirees may switch between Base and Select coverage during Open Enrollment each fall. After enrollment, submit all changes directly to BCBSMS.
Surviving spouse	If a covered retiree dies, a covered spouse may continue coverage for life, and covered children may continue to age 26. The spouse must apply to DFA within 60 days after the retiree's death.
Disability retirement	If you apply for PERS disability retirement and are not eligible for service retirement, you may continue coverage through COBRA until approval, then apply for retiree coverage within 31 days of approval.
Waiving or dropping coverage	If you waive or cancel retiree coverage for any reason, including to enroll in another plan, you may never re-enroll as a retiree. COBRA is available during the COBRA election period only.

Monthly Retiree Health Premiums

Rates below are effective **January 1, 2027**. Your first premium is paid by check to DFA with the voucher HRM provides, because your first PERS payment is mailed as a paper check. After that, premiums are deducted from your monthly PERS benefit when it is sufficient; otherwise BCBSMS bills you directly, with payment due on the first of each month. HRM will confirm your exact premium on your Retiree Benefits Information Sheet.

Retirees Not Yet Eligible for Medicare

Coverage Level	Legacy Base	Legacy Select	Horizon Base	Horizon Select
Retiree	$628	$653	$1,002	$1,038
Retiree + Spouse (non-Medicare)	$1,315	$1,437	$2,009	$2,140
Retiree + Spouse & Child(ren) (non-Medicare)	$1,673	$1,795	$2,246	$2,379
Retiree + Child	$807	$893	$1,181	$1,278
Retiree + Children	$1,083	$1,132	$1,456	$1,517
Retiree + Spouse (Medicare)	Not available	$920	Not available	$1,304
Retiree + Spouse & Child(ren) (one or more Medicare)	Not available	$1,160	Not available	$1,544

Medicare-Eligible Retirees (Select Coverage)

Coverage Level	Legacy	Horizon
Retiree	$266	$266
Retiree + Spouse (non-Medicare)	$1,049	$1,369

Coverage Level	Legacy	Horizon
Retiree + Spouse & Child(ren) (non-Medicare)	$1,407	$1,607
Retiree + Child	$504	$504
Retiree + Children	$744	$744
Retiree + Spouse (Medicare)	$532	$532
Retiree + Spouse & Child(ren) (one or more Medicare)	$772	$772

COBRA: An Alternative to Retiree Coverage

Instead of retiree coverage, you and your covered dependents may continue State Health Plan coverage through COBRA. COBRA provides the same benefits as the Plan, but it is temporary.

> **BEFORE CHOOSING COBRA**
>
> COBRA coverage ends after a set period. If you do not enroll in retiree coverage within 31 days after active coverage ends, you may still elect COBRA during the COBRA election period, but **once the COBRA election period expires, you will have no option for coverage under the Plan**, including retiree coverage, for the rest of your life.

Retiree Coverage	COBRA Coverage
Available for life	Available for a limited period (generally 18 months)
Application to HRM within 31 days after active coverage ends	Election with BCBSMS within 60 days after coverage ends or the date of the notice, whichever is later
Premiums deducted from your PERS benefit	First payment due within 45 days of election; then paid monthly to BCBSMS
Continues when you become eligible for Medicare, as secondary coverage	Ends if you enroll in Medicare after COBRA begins

Who Is Eligible and for How Long

Qualified Beneficiary	Qualifying Event	Maximum Length of COBRA
You (the retiring employee)	End of employment	Up to 18 months
Your covered spouse and children	End of your employment	Up to 18 months
Your covered spouse and children	A second qualifying event during the 18 months, such as divorce or legal separation, your entitlement to Medicare, or a child no longer being an eligible dependent	Up to 36 months from your last day of employment

Qualified Beneficiary	Qualifying Event	Maximum Length of COBRA
Any qualified beneficiary	Determined disabled by the Social Security Administration at the time of the qualifying event or within the first 60 days of COBRA	Up to 29 months (an 11-month disability extension)

- **Cost:** You pay the full premium. During the first 18 months, COBRA premiums are limited by law to 102% of the regular Plan premium; during a disability extension, they may be up to 150%.
- **Disability extension:** BCBSMS must receive a copy of the Social Security disability determination within 60 days of receiving it and before the initial 18 months end.
- **Medicare:** If you are already enrolled in Medicare when COBRA begins, you may keep COBRA. If you enroll in Medicare after COBRA begins, your COBRA coverage ends.
- **Missed payments:** If the first premium is not received within 45 days, coverage is terminated back to the date of the qualifying event.
- **New dependents:** A spouse or child who joins your family during COBRA may be added, subject to the Plan's enrollment rules.

2027 Monthly COBRA Health Premiums

Coverage Level	Legacy Base	Legacy Select	Horizon Base	Horizon Select
Participant	$555	$580	$555	$614
Participant + Spouse	$1,166	$1,274	$1,166	$1,308
Participant + Spouse & Child(ren)	$1,484	$1,593	$1,484	$1,628
Participant + Child	$715	$824	$715	$858
Participant + Children	$961	$1,068	$961	$1,103

2027 Monthly COBRA Disability Extension Premiums (Months 19–29)

Coverage Level	Legacy Base	Legacy Select	Horizon Base	Horizon Select
Participant	$818	$853	$818	$904
Participant + Spouse	$1,716	$1,874	$1,716	$1,925
Participant + Spouse & Child(ren)	$2,184	$2,344	$2,184	$2,395
Participant + Child	$1,052	$1,212	$1,052	$1,263
Participant + Children	$1,415	$1,572	$1,415	$1,623

For COBRA questions, contact BCBSMS at 800-709-7881.

BCBSMS automatically mails a COBRA notice to employees covered by the State Health Plan. COBRA is not needed if you elect retiree health coverage.

AGE 65 AND OLDER

Medicare

For retirees age 65 and older, **Medicare is the primary payer** and the State Health Plan is secondary. **Enroll in Medicare Parts A, B, and D when you retire, or at age 65 if you are already retired.** The Plan calculates benefits as though you are enrolled in Parts A and B whether or not you have enrolled, and it does not provide prescription drug coverage for Medicare-eligible retirees.

Coordination of Benefits

Coordination of benefits determines which coverage pays a claim first. The primary payer processes the claim first, and the secondary payer considers the remaining balance.

Your Status	Primary	Secondary
Active MSU employee age 65 or older	State Health Plan	Medicare
Spouse age 65 or older of an active employee	State Health Plan	Medicare
Retiree age 65 or older, or a covered spouse or dependent age 65 or older	Medicare	State Health Plan (Medicare-eligible retiree coverage)
Retiree, spouse, or dependent under age 65 with Social Security disability	Medicare	State Health Plan
Retiree, spouse, or dependent under age 65 with end-stage renal disease (ESRD)	State Health Plan for the first 30 months of Medicare eligibility	Medicare; after 30 months, Medicare becomes primary
COBRA participant age 65 or older or disabled	Medicare	COBRA
Covered dependent who is not eligible for Medicare	State Health Plan (regular benefits)	None

When to Enroll

Your Situation	What to Do
Retiring before age 65	The State Health Plan is primary until age 65. Enroll during your Initial Enrollment Period, which begins three months before your 65th birthday month and ends three months after it. Enroll at least three months early so Part B begins on the first day of your birthday month. The same applies to a covered spouse.
Retiring at or after age 65	While covered as an active employee, you may delay Part B without penalty. At retirement, enroll in Parts B and D through the Social Security Administration so coverage begins the same day as your retiree coverage. Although federal rules allow an eight-month Special Enrollment Period, the Plan will process claims as if Medicare were primary beginning on your retiree coverage date.

Your Situation	What to Do
Any time you or a dependent becomes eligible	Notify BCBSMS when you or a covered dependent becomes entitled to Medicare.

Medicare Enrollment Periods

If you already receive Social Security benefits when you turn 65, you are enrolled in Parts A and B automatically. Otherwise, you must sign up through the Social Security Administration.

Period	When It Applies	When Coverage Starts
Initial Enrollment Period	Seven months: the three months before your 65th birthday month, your birthday month, and the three months after	The month you turn 65 if you sign up in the first three months; otherwise, the first day of the month after you sign up
Special Enrollment Period	Any time you or your spouse are covered by a group health plan based on current employment, and for eight months after that employment or coverage ends, whichever is first	The first day of the month after you sign up. Retiree coverage and COBRA do not count as coverage based on current employment.
General Enrollment Period	January 1 through March 31 each year, if you missed your other enrollment periods	The first day of the month after you sign up. Late enrollment penalties may apply.

Late Enrollment Penalties

- **Part B:** Your monthly premium increases 10% for each full 12-month period you could have had Part B but did not sign up, and the penalty lasts as long as you have Part B. There is no penalty for delaying Part B while you are covered as an active employee.
- **Part D:** A penalty is added to your Part D premium if you go 63 or more days in a row without Part D or other creditable prescription drug coverage after your Initial Enrollment Period ends. The State Health Plan's prescription drug coverage is creditable coverage while you are an active employee, so you will not pay a penalty for enrolling in Part D when you retire.
- **Retiree claims:** Because the Plan pays as though you have Parts A and B, not enrolling on time can leave you responsible for the share Medicare would have paid.

How Retiree Coverage Works with Medicare

After Medicare processes a claim, the State Health Plan pays **100% of the remaining balance** based on the Medicare allowance for covered services. For services covered by the Plan but not by Medicare, the Plan pays 100% of its allowance. Emergency room and telehealth copayments do not apply, and pre-certification is required only when Medicare does not cover a service.

- **Medicare deductibles and coinsurance:** The Plan pays 100% of the Medicare deductible and coinsurance amounts for covered services, whether or not your provider participates in Medicare.
- **Wellness services:** If Medicare denies a wellness service, the Plan pays 100% of its allowance. Network and out-of-network differences do not apply.

- **Prescription drugs:** The Plan does not cover prescriptions for Medicare-eligible retirees, spouses, or dependents. You must enroll in a Medicare Part D plan for drug coverage.
- **Dependents not eligible for Medicare:** A covered spouse or child who is not Medicare-eligible keeps regular Plan benefits, including deductibles and coinsurance.
- **Your coverage continues:** Becoming eligible for Medicare does not end your retiree coverage. Your premium changes to the Medicare-eligible rate.
- **Medicare due to disability:** If you are approved for Medicare because of a Social Security disability, send BCBSMS a copy of your Medicare card right away. If approval is retroactive, the Plan updates your records, refunds any premium overpayment, and reprocesses claims for up to two years.
- **Spouses and dependents age 65 or older:** The Plan pays as though they are enrolled in Parts A and B, whether or not they are.

2026 Medicare Costs

Item	2026 Amount
Part A premium	$0 with 40 quarters of Medicare-covered employment
Part B standard premium	$202.90 per month (higher for higher incomes)
Part B annual deductible	$283
Part D premium	Varies by plan

PERS-Sponsored Medicare Supplement

PERS also sponsors a Medicare supplement plan, underwritten by Transamerica and administered by Amwins (844-304-6636), for retirees age 65 and older who are enrolled in Medicare Parts A and B. Premiums may be deducted from your PERS benefit. If you consider this plan, remember that cancelling State Health Plan retiree coverage is permanent.

> **HEALTH SAVINGS ACCOUNT HOLDERS**
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> You may not contribute to an HSA once you are enrolled in any part of Medicare, including premium-free Part A.
>
> If you apply for Medicare or Social Security after age 65, Part A is made retroactive for up to six months (but not before your 65th birthday month). **Stop HSA contributions six months before you apply** to avoid excess contributions and tax penalties.
>
> You may continue to use existing HSA funds tax-free for qualified medical expenses, including Medicare Part B and Part D premiums. Medicare supplement (Medigap) premiums are not qualified expenses.

Medicare Tips

1. **Create your my Social Security account** at ssa.gov/myaccount before you apply. You can apply for Medicare online at ssa.gov or by calling Social Security at 800-772-1213.
2. **Start early.** Apply about three months before you want Medicare to begin so there is no gap between your retiree coverage and Medicare.

3. **Send BCBSMS a copy of your Medicare card** as soon as you receive it, and notify BCBSMS when a covered spouse or dependent becomes eligible for Medicare. Claims may be denied or delayed until BCBSMS has your Medicare information.
4. **Choose a Part D plan that covers your prescriptions.** Compare plans at medicare.gov or by calling 800-633-4227 (1-800-MEDICARE). You may change Part D plans each year during Medicare Open Enrollment, October 15 through December 7.
5. **Keep your creditable coverage notice.** The Plan's annual notice shows that your prescription drug coverage as an active employee was creditable. You may need it to avoid a Part D late enrollment penalty.
6. **Think carefully before replacing retiree coverage.** If you cancel State Health Plan retiree coverage to enroll in a Medicare supplement or Medicare Advantage plan, you may never re-enroll as a retiree.
7. **Higher incomes pay more.** Part B and Part D premiums are higher if your income from two years earlier is above certain limits. If your income has dropped because you retired, you may ask Social Security to use your current income by filing Form SSA-44.
8. **Help is available.** If you have limited income and resources, Extra Help can lower Part D costs (ssa.gov/extrahelp), and Medicare Savings Programs can help pay Part B premiums. For free, unbiased Medicare counseling, contact your State Health Insurance Assistance Program at shiphelp.org.
9. **Your Medicare card uses a Medicare number,** not your Social Security number. Keep it in a safe place and use it with your BCBSMS card at every visit.

LIFE, DENTAL, VISION, AND FLEXIBLE SPENDING

Other Insurance

In addition to health coverage, you may be able to continue life insurance and dental and vision coverage after you retire. Each has its own deadline, and retirees pay the full premium.

> **DEADLINE: 31 DAYS**
>
> Your state group life insurance application must be received by HRM **no later than 31 days after your active coverage ends**. Late applications are not accepted. Apply before your last day to avoid a gap in coverage.

Retiree Life Insurance

- **Eligibility:** You must be enrolled in the state group term life insurance plan (Minnesota Life) as an active employee at the time you retire.
- **Coverage amount:** Retirees may continue $5,000, $10,000, or $20,000 of coverage. Dependents are not eligible, and retirees are not eligible for accidental death and dismemberment (AD&D) coverage.
- **Portability:** You may also port some or all of the coverage you are losing to an individual Minnesota Life policy (minimum $10,000), without evidence of insurability. Retiree and ported coverage combined may not exceed your active coverage. At age 65 and older, ported coverage is

limited to 65% of your active coverage, and it ends at age 70. Contact Minnesota Life (877-348-9217) for ported coverage rates.

- **Conversion:** You may instead convert coverage to an individual whole life policy by applying within 31 days.
- **Premiums:** Retirees pay the full, age-based premium, deducted from your PERS benefit when sufficient. The premium increases each year until age 70.

Monthly Retiree Life Insurance Premiums by Age

Rates effective January 1, 2014, as published by the Department of Finance and Administration. Rates for ages under 55 are available at dfa.ms.gov/insurance.

Age	$5,000 Coverage	$10,000 Coverage	$20,000 Coverage
55	$4.25	$8.50	$17.00
56	$4.70	$9.40	$18.80
57	$5.25	$10.50	$21.00
58	$6.00	$12.00	$24.00
59	$6.75	$13.50	$27.00
60	$7.50	$15.00	$30.00
61	$8.25	$16.50	$33.00
62	$9.00	$18.00	$36.00
63	$9.75	$19.50	$39.00
64	$10.50	$21.00	$42.00
65	$11.25	$22.50	$45.00
66	$12.00	$24.00	$48.00
67	$12.75	$25.50	$51.00
68	$13.50	$27.00	$54.00
69	$14.25	$28.50	$57.00
70 and older	$15.00	$30.00	$60.00

Other Coverage at a Glance

Coverage	Continuation Available	Deadline and Contact
State group life (Minnesota Life)	$5,000, $10,000, or $20,000 retiree coverage; portability or conversion of additional coverage	Application to HRM no later than 31 days after active coverage ends. Minnesota Life, 877-348-9217.

Coverage	Continuation Available	Deadline and Contact
Unum term life	May be continued for life; coverage reduces to 65% at age 70 and 50% at age 75	Application and first premium within 31 days after your last day of employment. Unum, 800-343-5406.
Dental (Delta Dental) and vision (Davis Vision)	Up to 18 months through COBRA	COBRA notice mailed by HRM; elect within 60 days of the notice. Full premium plus 2% administrative fee, due to MSU on the first of each month. No bills are mailed.
SABC retiree dental and vision	Not limited to 18 months	Apply directly with SABC.
Mediflex and Careflex	Claims only (Mediflex COBRA available if the account is underspent)	Submit receipts to SABC within 30 days after your last day of work.

REEMPLOYMENT

Working After Retirement

As a PERS service retiree, you may return to work for a PERS-covered employer and continue receiving benefits only after a **bona fide separation of at least 30 days** from your effective date of retirement, and only if there was no prearranged agreement to return.

Requirements

- The 30-day separation begins on your effective date of retirement. If you retire from a position with less than a 12-month contract, the 30 days begin at the start of the following school year.
- State law prohibits prearranged agreements to return to work. A violation may result in cancellation of retirement benefits and repayment of benefits received.
- Your employer must notify PERS on Form 4B within five days of reemployment and within five days of termination. You elect one reemployment option each fiscal year (July 1–June 30).
- Work as an independent contractor for a PERS-covered employer also requires the 30-day separation and prior approval from PERS.

Reemployment Options

Option	Annual Limit	Eligibility
A – Half-time	Up to one-half of the working days or hours for the position, at no more than one-half of its salary	All service retirees
B – 25 percent	Earnings up to 25% of the final average compensation used to calculate your benefit; no limit on days worked	All service retirees

Option	Annual Limit	Eligibility
C – 80 percent (Work and Save Program)	Earnings up to 80% of the position's current salary; no limit on days worked; requires a written agreement signed after the 30-day separation	Not available to Tier 4 or 5 members who retired before age 65 with fewer than 30 years of service, or to elected officials, K-12 superintendents, or university and community college administrators

MSU begins implementing Option C on October 1, 2026. Departments hiring a PERS retiree must complete the retiree section of the PARF in PageUp; guidance is available on the HRM Reemployment of Retirees webpage. Under Option C, PERS withholds both employee and employer contributions on the new wages.

Insurance for Reemployed Retirees

You may keep retiree health coverage if you return to work. A retiree reemployed under Option C who averages 30 or more hours per week may be offered the Contract Worker Base Plan at full cost, which covers the employee and children only. If you drop retiree coverage for any reason, including to enroll in that plan, you may not re-enroll in retiree coverage.

QUICK REFERENCE

Forms, Contacts, and Reminders

Forms

Form	Purpose	Submitted By	When
PERS Form 16 Download Form 16	Advanced Application (benefits if death occurs before retirement)	You to PERS	When first eligible; update as needed
Letter of resignation	States your intent to retire and last day	You to your department	About six months before
PERS Form 9A SRVC Download Form 9A SRVC	Pre-application; sets retirement date; certifies leave	You (sec. 1–4) to HRM; HRM to PERS	Three to six months before
PERS Forms 9S, 9P, PLSO; proof of age; beneficiary documents	Option, beneficiaries, direct deposit, taxes, lump sum	You to PERS	Within 90 days after effective date
Application for Coverage (State Health Plan)	Retiree health coverage	You to HRM	At least 31 days before your last day; no later than 31 days after coverage ends

Form	Purpose	Submitted By	When
State life and Unum applications	Retiree life insurance	You to HRM	Before your last day; no later than 31 days after coverage ends
PERS Form 1C Download Form 1C	Address or information change	You to PERS	As needed
PERS Form 4B Download Form 4B	Reemployment of a retiree	Employer to PERS	Within five days of rehire

Contacts

Office	Assistance With	Contact
MSU Human Resources Management	Retirement meetings, Form 9A, insurance continuation	150 McArthur Hall · 662-325-3713 benefits@hrm.msstate.edu HRM retirement drop box
PERS of Mississippi	Estimates, applications, benefit payments, retirement education sessions	800-444-7377 or 601-359-3589 customerservice@pers.ms.gov PERS forms PERS retirement education sessions
Department of Finance and Administration	State Health Plan retiree premiums	601-359-3411
Blue Cross & Blue Shield of Mississippi	Retiree coverage changes; COBRA	800-709-7881 (COBRA)
Minnesota Life	State group life portability	877-348-9217
Unum	Term life continuation	800-343-5406
Amwins (PERS-sponsored supplement)	Medicare supplement coverage	844-304-6636
Social Security Administration	Medicare and Social Security enrollment	ssa.gov

Important Reminders

1. Phase 2 forms must be received by PERS within 90 days after your effective date, or the application becomes void.
2. Your retiree health and life insurance applications must be received within 31 days after active coverage ends, or retiree coverage is permanently forfeited.
3. Leave recorded after Form 9A is submitted may reduce your creditable service.
4. Arrangements to return to work may not be made before retirement.
5. Enroll in Medicare Parts A, B, and D at age 65 to avoid unpaid claims and obtain prescription drug coverage.
6. Stop HSA contributions before Medicare coverage begins, including the six-month retroactive period for Part A.
7. Retiree health coverage cannot be reinstated once it is cancelled.

This guide summarizes PERS and State and School Employees' Health Insurance Plan provisions as of September 2026 and is provided for general information. In the event of a conflict, applicable law, PERS Board regulations, and plan documents govern. Please confirm your individual benefit information with PERS and MSU Human Resources Management.

Sources: PERS Service Retirement Guide; PERS Member Handbook; PERS Board Regulations 34 and 35; State and School Employees' Life and Health Insurance Plan Document (rev. July 1, 2026); Know Your Benefits (Sept. 2026); DFA 2027 Monthly Premium Rates; DFA Retiree Life Insurance Rates; CMS 2026 Medicare premiums; MSU HRM Retiree Benefits Information Sheet.

PRINT AND KEEP

Retirement Checklist

Use this checklist to track your progress. Deadlines shown in bold maroon cannot be extended; missing them may forfeit coverage or void your PERS application.

12 or More Months Before Retirement

Done	Task	Deadline or Timing	Date Done
☐	Review your annual PERS member statement (mailed each October; information as of July 1)	October	
☐	Estimate your benefit using the PERS Benefit Estimate Calculator	12+ months before	
☐	Register for and attend a PERS Pre-Retirement Seminar or Focus Session on the PERS Retirement Education webpage	12+ months before	
☐	Request a PERS account audit	12+ months before	
☐	Complete any service credit purchases	Before retirement	
☐	File PERS Form 16, Advanced Application	When first eligible	
☐	Review Medicare and HSA timing (age 64+ or HSA participants)	12+ months before	

About Six Months Before Retirement

Done	Task	Deadline or Timing	Date Done
☐	Choose your last day of employment (usually the last working day of a month)	About 6 months before	
☐	Submit a letter of resignation stating that you are retiring	About 6 months before	
☐	Schedule a retirement meeting with HRM Benefits (662-325-3713)	About 6 months before	
☐	Review PERS retirement options and PLSO eligibility	About 6 months before	

Three to Six Months Before Retirement

Done	Task	Deadline or Timing	Date Done
☐	Complete sections 1–4 of PERS Form 9A SRVC and upload it to the HRM retirement drop box	3 to 6 months before	
☐	Receive your audited Estimate of Benefits and Phase 2 forms from PERS	Allow several weeks	
☐	Return Forms 9S, 9P, PLSO (if applicable), proof of age, and beneficiary documents to PERS	**Within 90 days after effective date**	

Before Your Last Day

Done	Task	Deadline or Timing	Date Done
☐	Submit the State Health Plan Application for Coverage to HRM	**No later than 31 days after coverage ends**	
☐	Submit your state group life insurance application to HRM	**No later than 31 days after coverage ends**	
☐	If considering COBRA instead of retiree coverage, review the COBRA section carefully	Before electing	
☐	Decide whether to continue Unum term life, dental, and vision coverage	Before your last day	

Final Month of Employment

Done	Task	Deadline or Timing	Date Done
☐	Confirm all leave is entered in Banner through your last day	Last day	
☐	Complete the Separating Checklist with your supervisor	Last day	
☐	Update your mailing address with HRM and PERS	Before last day	
☐	Make no arrangements, formal or informal, to return to work	**Before retirement**	

After Retirement

Done	Task	Deadline or Timing	Date Done
☐	Submit Mediflex and Careflex receipts to SABC	**Within 30 days after last day**	
☐	Submit Unum application and first premium	**Within 31 days after last day**	
☐	Elect dental and vision COBRA, if desired	**Within 60 days of notice**	
☐	Mail your first retiree health premium check to DFA with the HRM voucher	Upon enrollment	
☐	Receive first PERS payment by paper check; confirm direct deposit and premium deductions start the next month	After Phase 2 forms are processed	
☐	Wait at least 30 days after your effective date before any reemployment	30 days after effective date	

At Age 65

Done	Task	Deadline or Timing	Date Done
☐	Enroll in Medicare Parts A, B, and D	Initial Enrollment Period	
☐	Stop HSA contributions six months before applying for Medicare	**6 months before applying**	
☐	Notify BCBSMS that you are entitled to Medicare	When enrolled	