Teacher's Retirement System

RETIREMENT CHECKLIST

___ **Submit on-line application at www.trsga.com**

- Paper forms are no longer accepted.
- For assistance with your retirement account or the TRS site, call 404-352-6500
- Application can be submitted as early as 6 months.
- To guarantee the timeliness of your first retirement check, submit your application at least 30 days prior to your retirement date; otherwise, your first check will be retroactive.
- Print all required forms (2) within the on-line application.

___ The following information must be **mailed directly to TRS** once you have completed the online application:

- Printed Form - Notarized Affidavit of residency/US Citizenship
- Printed Form - Retirement Application Summary
- Copies of driver's licenses for you and your beneficiaries
- VOIDED check

___ Submit the following **forms to HR via TRS online system**:

- Retirement Certification
- Sick Leave Verification

Once you have submitted your on-line application and supporting documents to TRS, then TRS will begin communicating with you directly. If you have not heard from TRS within 10 working days after submission, please contact them to verify the status of your retirement application. 404-352-6500

Points of Importance:

1. If you worked for another school system in Georgia, you will need to contact them and request that they complete and submit a "Sick Leave Verification Form" to TRS and to send you a copy for your records.
2. Contact Leigh Wood regarding your summer pay and effective date of Retirement and how that affects your last day to work.

Benefits at Retirement

State Health Benefit Plan - If you are currently enrolled in State Health Benefits at the time you **retire**, your coverage will remain intact and the premium will be deducted from your retirement check. There will be no gap in coverage and you will continue to use your current insurance card.

If you **resign and decide to retire at a later date**, you can elect COBRA/SHBP for those months in between. You must have continuous coverage in order to continue State Health Benefits through Retirement. If you elect to waive Cobra Continuation of Coverage, you waive your rights to State Health Insurance.

If you have concerns regarding State Health Benefits or you have questions about Medicare, you will need to contact State Health directly and let them advise you. If you are **65 or older**, you must contact Social Security to enroll in Medicare Part B.

Life Insurance/Critical Care/Cancer Policies - If you are currently enrolled in these coverages, you may choose to continue coverage after leaving active employment. You must contact the appropriate company directly to establish self-billing.

Dental/Vision - If you are currently enrolled in dental and/or vision insurance you may elect to continue coverage through COBRA for up to 18 months after retiring. You will receive a COBRA letter from HR shortly after you retire.

Flex Benefits – If you are currently enrolled in Flex Spending, your account will become inactive effective upon your date of termination with UCS. You will have a 30 day grace period from your termination date to request reimbursements for Medical expenses that have been incurred during the period of coverage prior to your termination date.

In general, all other benefits will terminate on the last day of the month following your final paycheck from UCS.

CONTACT NUMBERS

Colonial 1-800-325-4368	(Critical Illness/Cancer)
Unum 1-800-421-0344	(Life/Accident/Critical Illness)
MutualofOmaha 1-800-877-5176	(Term Life Insurance)
AFLAC 1-800-992-3522	(Permanent/Whole Life Insurance)
Liberty National 1-205-325-4979	(Cancer and Life Insurance)
CAS 1-877-941-5956	(Flex Spending)

Social Security Office: 1-866-964-1005
State Health Benefit Plan: 1-800-610-1863