How Returning to Work Will Impact Your Insurance Benefits

After you retire, you may choose to return to work for a participating employer. If you are in an insurance-eligible job, and you, your spouse or your children are covered under PEBA’s retiree group insurance, you must elect active coverage or refuse all PEBA-sponsored coverage.

There is one exception to this rule. Retirees who are not eligible for Medicare and who retired from an employer that does not participate in the state's Retiree Health Insurance Trust Fund can remain on retiree coverage if they return to work in an insurance-eligible position. Contact your previous employer if you are unsure whether it participates in the Retiree Health Insurance Trust Fund.

If you leave work and return to retiree group coverage before age 65, be sure to contact the Social Security Administration (SSA) within 90 days of turning 65 to enroll in Medicare Part A and Part B when you become eligible.

If your new position does not make you eligible for PEBA-administered benefits, your retiree group coverage continues.

More information
You can learn more about how returning to covered employment will impact your insurance benefits in the Insurance Benefits Guide.

Other benefits you are eligible for as an active employee
All employees who are eligible for enrollment in the State Health Plan Standard Plan and Savings Plan are also eligible for these benefits:

- Dental Plus and Basic Dental;
- State Vision Plan;
- Basic, Optional and Dependent Life insurance;
- Basic and Supplemental Long Term Disability insurance;
- MoneyPlus, including the Pretax Group Insurance Premium feature, Medical Spending Account, Dependent Care Spending Account and Limited-use Medical Spending Account; and
- Health Savings Account if enrolled in the Savings Plan.

1Part-time teachers eligible for the State Health Plan are not eligible according to S.C. Code § 59-25-45.
Retirees who continued life insurance

If you are hired into an insurance-eligible job and you continued your Optional Life coverage as a retiree, you will have the option to keep your continued policy and pay premiums directly to MetLife, or to enroll in Optional Life as a newly hired active employee. If you enroll as a new hire, your coverage is limited to three times your annual salary without medical evidence, up to a maximum of $500,000. You cannot keep your continued policy and enroll as an active employee.

Contact MetLife within 31 days of returning to work to cancel your continued coverage if you decide to enroll in active coverage. If you refuse to enroll as an active employee, you also refuse the $3,000 Basic Life benefit, Optional Life and Dependent Life coverage. Your active group coverage will become effective only if you discontinue the retiree continuation coverage.

If you or a member of your family is covered by Medicare

According to federal law, Medicare cannot be the primary insurance for you or any of your covered family members while you are enrolled in coverage as an active employee. To comply with this regulation, you are required to suspend your retiree group coverage and enroll as an active employee with Medicare as the secondary payer, or refuse all PEBA-sponsored health coverage for yourself and your eligible family members and have Medicare coverage only.

If you enroll in active group coverage, you must notify the SSA, because Medicare will pay after or secondary to your active group coverage. You may remain enrolled in Medicare Part B and continue paying the premium, and Medicare will be the secondary payer. You may also delay or drop Medicare Part B without a penalty while you have active group coverage. Contact the SSA for additional information.

When you stop working and your active group coverage ends, you may re-enroll in retiree group coverage within 31 days of the date you leave active employment. You must also notify the SSA that you are no longer covered under an active group so that you can re-enroll in Medicare Part B if you dropped it earlier.