

## When You Leave FAQs

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### Health & Dental Coverage

Health & dental coverage ceases on the last day of the month in which your employment ends. Deductions for coverage are taken in the current month. Premiums must be paid for the entire month to be covered in your final month of employment. Through COBRA you may continue the same group coverage for yourself and your covered dependents for up to 18 months by paying the entire monthly cost plus a 2% administrative fee. Information about continuation coverage (COBRA) is sent to you from TASC upon termination.

### Flexible Spending Accounts (FSAs)

You may be reimbursed only for eligible expenses incurred on or before your termination date. You will have until March 31 of the following calendar year to submit claims for reimbursement.

Through COBRA you may continue your health care FSA participation through the end of the calendar year in which you separate. To do so, you must make your contributions on an after-tax basis each month, including an additional 2% administrative fee. Information about electing continuation of health care FSAs (COBRA) is sent to you upon termination.

### Short Term Income Protection (STIP)

Short Term Income Protection will cease effective the last day of employment.

### Virginia Retirement System (VRS)

When you leave Henrico County employment, you have the option of leaving your accumulated VRS contribution account with VRS, transferring your contributions into another retirement plan, or taking a refund of contributions if allowed by the plan.

If you leave retirement contributions in VRS, you retain the service credit that was earned as an employee. This credit can be added to any future service credit with a VRS-covered employer. If you are going to work for another VRS participating employer, your VRS membership will transfer to your new employer.

If you are currently disabled, you have 90 days from the date of your termination to apply for VRS disability retirement. Contact VRS directly at [www.varetire.org](http://www.varetire.org) or contact the Human Resources Benefits Division for more information.

### Life Insurance

Your basic group life insurance ends 31 days after the end of the month in which your employment ends. Basic life insurance coverage may be converted to an individual policy if application is made within the same 31-day period. Accidental Death and Dismemberment coverage ends on your last day of employment and may not be converted to an individual policy. For more information, contact VRS at [www.varetire.org](http://www.varetire.org) or call (888) 827-3847.

Optional group life insurance also ends 31 days after the end of the month in which your employment ends. You may convert your optional group coverage to an individual policy within the same 31-day period. If you go to work for another VRS participating employer within 30 days, you must elect optional life insurance coverage with your new employer within 31 days of hire for guaranteed optional life coverage. For more information, call (800) 441-2258.

### Deferred Compensation

If you participated in the deferred compensation program, you have the option of withdrawing your account, retaining your account, or rolling your account into an IRA, 403(b), 401 or other government 457 plan. Contact Empower for forms to withdraw or rollover your account.

### Voluntary Benefits

If you participated in voluntary benefits through Pierce Insurance, you have the option of continuing coverage and paying premiums directly to the carriers. To continue your coverage, please contact Pierce Insurance at 800-421-3142.

### **Annual/Holiday Leave**

Your accrued annual and holiday leave will be paid to you on the payroll following your final pay. If you do not receive it, please contact your former department. If you are in your probationary period you will not be paid for your accrued holiday leave.

### **Sick Leave**

You are eligible for a benefit payment based on accumulated sick leave if you retire under VRS, as described in Policies & Procedures.

### **Compensatory Leave**

Accumulated compensatory leave is not paid at termination of employment.

### **W-2 Forms**

Your W-2 form reporting wages for the preceding year will be mailed to you by January 31 from the Finance Department. Send any address changes along with your Social Security number to Payroll Supervisor, Finance Department, County of Henrico, P. O. Box 90775, Henrico, VA 23273-0775. For more information, contact (804) 501-4224.

### **Exit Resources**

For additional resources, call the Employee Relations Division at (804) 501-4273. If you have benefit-related questions, please call the Benefits Division at (804) 501-7371.

### **Employment Verification**

Requests for employment verification should be sent to: Department of Human Resources, County of Henrico, P. O. Box 90775, Henrico, VA 23273-0775.

Your signed authorization is required before any salary information is released. For more information, contact (804) 501-5078.

### **Paystubs**

Requests for copies of paystubs should be directed to the HR Financial & Administrative Services Division at 804-501-5078 or [wit018@henrico.gov](mailto:wit018@henrico.gov).

## **Important Contact Information**

Department of Human Resources	804-501-4628	<a href="http://henrico.gov/hr">henrico.gov/hr</a>
HR Benefits Division	804-501-7371	<a href="mailto:HR-Benefits@henrico.gov">HR-Benefits@henrico.gov</a>   <a href="http://employees.henrico.gov">employees.henrico.gov</a>
Anthem HealthKeepers	1-833-630-6742	<a href="http://anthem.com">anthem.com</a>
Delta Dental Plans of Virginia	800-237-6060	<a href="http://deltadentalva.com">deltadentalva.com</a>
MetLife Short Term Disability (STIP)	888-608-6665	<a href="http://mybenefits.metlife.com">mybenefits.metlife.com</a>
Flexible Spending Accounts (TASC)	800-422-4661	<a href="http://tasconline.com">tasconline.com</a>
COBRA (TASC)	800-422-4661	<a href="http://tasconline.com">tasconline.com</a>
Empower – Deferred Compensation	800-262-3862	<a href="http://empower.com">empower.com</a>
VRS Hybrid Plan – Voya	855-291-2285	<a href="http://dcp.varetire.org/hybrid">dcp.varetire.org/hybrid</a>
Securian Financial Insurance Company	800-441-2258	<a href="http://lifebenefits.com">lifebenefits.com</a>
Virginia Retirement System (VRS)	888-827-3847	<a href="http://varetire.org">varetire.org</a>
Employee Relations	804-501-4273	<a href="mailto:HREmployeeRelations@henrico.gov">HREmployeeRelations@henrico.gov</a>
Henrico Federal Credit Union	804-266-0290	<a href="http://henricofcu.org">henricofcu.org</a>
Henrico Finance Payroll Division	804-501-4224	<a href="mailto:finpayroll@henrico.gov">finpayroll@henrico.gov</a>
Pierce Insurance (Voluntary Benefits)	800-421-3142	<a href="http://pierceins.com/henrico">pierceins.com/henrico</a>



# **NOTICE TO WORKERS**

Unemployment Insurance (UI) benefits are available to workers who are unemployed and who meet the requirements of Virginia UI eligibility laws. You may file a UI claim in the first week that employment stops or work hours are reduced.

## **YOU MAY APPLY FOR UNEMPLOYMENT INSURANCE BENEFITS IF:**

- You are totally unemployed.
- You are working reduced wages or hours.

## **YOU WILL NEED TO PROVIDE:**

- Your full legal name
- Your Social Security Number
- Your authorization to work (if you are not a US Citizen or resident)

## **IF TOTALLY UNEMPLOYED, ON A TEMPORARY LAYOFF, OR IF WORKING REDUCED HOURS:**

The first week you are unemployed, register for work, and file a claim for benefits. You can file your claim online at [www.vec.virginia.gov](http://www.vec.virginia.gov) or by calling our Customer Contact Center at 1-866-832-2363. Register for work online at [www.vawc.virginia.gov](http://www.vawc.virginia.gov).

## **TO BE ELIGIBLE FOR BENEFITS, THE LAW REQUIRES THAT YOU:**

- File a claim with the Virginia Employment Commission.
- Have earned sufficient wages from employers who are subject to the Virginia Unemployment Compensation Act or any other State within your Base Period.
- Must be unemployed through no fault of your own.
- Must be able and available for work and actively searching for work.
- Continue to report as instructed by the Virginia Employment Commission.

You cannot be paid unemployment benefits until you have filed your claim and have met all eligibility requirements. You should file your claim as soon as you become unemployed, or your hours are reduced. If you have any questions about your rights and responsibilities under the Virginia Unemployment Compensation Act, visit website [www.vec.virginia.gov](http://www.vec.virginia.gov) or call our Customer Contact Center at 1-866-832-2363.

## **THE LAW REQUIRES EMPLOYERS TO POST THIS NOTICE IN A PLACE VISIBLE TO ALL WORKERS.**

**EFFECTIVE MARCH, 14, 2024, EMPLOYERS MUST ALSO PROVIDE A COPY OF THIS NOTICE TO EACH WORKER AT THE TIME OF SEPARATION FROM EMPLOYMENT ([42 USC, §1103 \(h\)\(2\)](#)).**

An Equal Opportunity Employer/Program  
Auxiliary aids and services are available upon request to individuals with disabilities. Please call 866-832-2363 or  
Email: [translation@vec.virginia.gov](mailto:translation@vec.virginia.gov) for Language Access/Assistance.

This notice is available in Spanish.  
Direct requests to: **Employer Accounts**  
**P.O. Box 26441**  
**Richmond, VA 23261-6441**



# **AVISO A LOS TRABAJADORES**

Los beneficios del seguro de desempleo (Unemployment Insurance, UI) están disponibles para los trabajadores que están desempleados y que cumplen con los requisitos de las leyes de elegibilidad del UI de Virginia. Puede presentar una reclamación de UI en la primera semana en que cesa el empleo o se reducen las horas de trabajo.

## **USTED PUEDE SOLICITAR LOS BENEFICIOS DEL SEGURO DE DESEMPLEO SI:**

- Está totalmente desempleado.
- Está trabajando con salarios u horas reducidas.

## **DEBERÁ PROPORCIONAR:**

- Su nombre legal completo
- Su número de seguro social
- Su autorización para trabajar (si no es ciudadano o residente de los EE. UU.)

## **SI ESTÁ TOTALMENTE DESEMPLEADO, EN UN DESPIDO TEMPORAL O SI TRABAJA HORAS REDUCIDAS:**

La primera semana que esté desempleado, regístrese para trabajar y presente una reclamación de beneficios. Puede presentar su reclamación en línea en [www.vec.virginia.gov](http://www.vec.virginia.gov) o llame a nuestro Centro de atención al cliente al 1-866-832-2363. Regístrese en línea para trabajar en [www.vawc.virginia.gov](http://www.vawc.virginia.gov).

## **PARA SER ELEGIBLE PARA LOS BENEFICIOS, LA LEY REQUIERE:**

- Presentar una reclamación ante la Comisión de empleo de Virginia.
- Haber ganado salarios suficientes de empleadores que están sujetos a la Ley de Compensación por Desempleo de Virginia o de cualquier otro estado dentro de su período base.
- Estar desempleado por causas ajenas a su voluntad.
- Poder y estar disponible para trabajar y buscar trabajo activamente.
- Continuar informando según las instrucciones de la Comisión de empleo de Virginia.

No se le pueden pagar beneficios por desempleo hasta que presente su solicitud y cumpla con todos los requisitos de elegibilidad. Debe presentar su reclamación tan pronto como quede desempleado o se reduzcan sus horas. Si tiene alguna pregunta sobre sus derechos y responsabilidades en virtud de la Ley de Compensación por Desempleo de Virginia, visite el sitio web [www.vec.virginia.gov](http://www.vec.virginia.gov) o llame a nuestro Centro de atención al cliente al 1-866-832-2363.

## **LA LEY REQUIERE QUE LOS EMPLEADORES PONGAN ESTE AVISO EN UN LUGAR VISIBLE PARA TODOS LOS TRABAJADORES.**

**LOS EMPLEADORES TAMBIÉN DEBEN PROPORCIONAR UNA COPIA DE ESTE AVISO A CADA TRABAJADOR EN EL MOMENTO DE LA SEPARACIÓN DEL EMPLEO ([Código de Estados Unidos \(USC\) 42, capítulo 1103 \(h\)\(2\)](#)).**

Un empleador/programa que ofrece igualdad de oportunidades  
Las ayudas y servicios auxiliares están disponibles a pedido para las personas con discapacidades. Llame al 866-832-2363 o envíe un correo electrónico a: [translation@vec.virginia.gov](mailto:translation@vec.virginia.gov) para obtener acceso/asistencia lingüística.

Este aviso está disponible en español.  
Solicitudes directas a: **Employer Accounts**  
**P.O. Box 26441**  
**Richmond, VA 23261-6441**