Whenever a TRSL-covered employee applies for disability retirement, the employer(s) will be responsible for providing information and certifications TRSL needs to process the member's application and, if approved, to promptly and accurately compute the applicant's disability retirement benefits.

This index has been created to assist employers and provide instructions whenever an employee submits an application for TRSL disability retirement.

**Disability application process**

All TRSL disability retirement applications must be reviewed and approved by the State Medical Disability Board (SMDB). The application process requires information from the member, the employer, and the member's physician(s). Approval or denial by the SMDB must occur within 120 days of the date of receipt of the disability application.

Each member who meets minimum eligibility requirements and wishes to apply for a disability retirement must submit a completed Application for Disability Retirement (Form 12), to begin the disability application process.

Detailed information on disability retirement eligibility, additional member forms & documentation requirements for the disability application process, and how disability benefits are calculated are discussed in our member brochure, Disability Retirement.

If the disabling condition prevents the member from signing documents, TRSL will permit the agency head whose authorized signature is on file to sign the member's name on the disability application. For these situations, TRSL will also require the signature of the agency head on the application.

**Employer’s role**

While it is ultimately the member’s responsibility to submit all of the required disability retirement application forms and relevant medical documents, there are certain forms and documentation that the employer will have to provide.
Form 12A

Whenever a TRSL member applies for disability retirement, the member’s direct supervisor who monitors the applicant’s daily activities must complete and sign the *Disability Report by Supervisor* (Form 12A). Information requested on the form should be complete and made to the best of the supervisor’s knowledge about the employee’s disabling condition and how it affects the applicant’s performance of his/her job duties.

In cases where the employee’s supervisor is unavailable to complete the form, the employing agency’s authorized signer may complete the Form 12A to the best of their ability.
Job description

If the disability applicant is not a teacher, TRSL requires a copy of the member’s official job description to be included with the member’s disability application forms. Members will frequently request a copy of the job description from the employer.

**EXAMPLE:** Official Job Description for a Non-Teacher Disability Retirement Applicant

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**PARISH SCHOOL BOARD**

**Louisiana**

**JOB DESCRIPTION**

**TITLE:** Computer Technician Paraprofessional (FLSA: Non-Exempt)

**MINIMUM QUALIFICATIONS:**
1. U.S. citizen or authorized alien.
2. High school diploma or equivalent (College Training Preferred).
3. Appropriate technical training.
4. Eight months work experience in computer repair.
5. Demonstrated aptitude and competence for assigned responsibilities.

**REPORTS TO:** Principal

**JOB GOALS:** To support the student learning environment by providing efficient computer hardware and software support.

**JOB SUMMARY:** To maintain electronic equipment in the best possible operating condition for instructional and administrative support use.

**ESSENTIAL JOB FUNCTIONS:**
1. Diagnose and correct difficulties and/or malfunctions in computer/electronic equipment in multiple environments (PC, MAC, UNIX, etc.).
2. Maintain records as assigned by management.
3. Maintain inventory and property inventory per the Property Accounting Manual.
4. Carry out established preventative maintenance procedures.
5. Install and configure software and hardware approved by management.
6. Instruct and assist personnel in the proper use and operation of computer equipment and approved software.
7. Promote high standards of safety and orderliness in work and storage areas.
8. Assist the IT staff in all areas of hardware, software, and operations support.

**ADDITIONAL DUTIES AND RESPONSIBILITIES:**
1. Perform other duties as assigned.
2. Must maintain a valid Louisiana driver’s license.
3. Must have reliable personal transportation for travel.

**PHYSICAL DEMANDS:**
1. Must be able to lift computer related equipment.
2. Must be able to load, unload, and drive a personal vehicle to transport equipment to be installed, replaced, and/or equipment being returned for repair.
3. Must be able to climb ladders and perform the necessary physical demands to install, inspect, troubleshoot, and repair network wiring, fish lines, and wiring without assistance.
4. Must possess the physical stamina for long hours when required.
5. Must be physically capable of operating and demonstrating all equipment installed and supported by the department.
6. Must be able to load and unload deliveries to the department.
7. Must be capable of working for long periods sitting, standing, reaching, or bending as required.

**TERMS OF EMPLOYMENT:** Terms determined by Superintendent.

**ACCOUNTABILITY:** Performance of this job will be evaluated in accordance with the provisions of the Board’s policy on Evaluation of Support Services Personnel.
Worker’s Compensation certification form

If a disability applicant indicates he has received or is currently receiving Worker’s Compensation during his TRSL-covered employment in Section 2 of the disability application (Form 12), the employer will be sent a Worker’s Compensation certification form to complete.

NOTE: If the applicant is a 2011 or 2015 Retirement Plan member (not an Original Plan member), a Worker’s Compensation certification form will be required to determine disability eligibility.
The employer must answer all questions on the certification form and return the completed form with the employer representative’s signature or the Worker’s Compensation representative’s signature to TRSL by fax or mail.
If the member made contributions to TRSL while on worker’s compensation benefits, **the employer must ensure the correct type of member contributions (sheltered vs. unsheltered) has been reported to TRSL** during the applicable time period. Refer to Index 4.0 for complete details and instructions regarding contribution reporting during periods of workers’ compensation.

**EXAMPLE:** Worker’s Comp Certification Letter completed by the employer
Disability approval process

TRSL will notify both the member and employer if the SMDB approves the member’s disability retirement application. The member must terminate employment immediately unless he is exhausting leave or is on medical sabbatical leave. The member has the option to exhaust sick/annual leave (including “extended sick leave”) after approval by the SMDB, but he may not be physically working.

If the member does not terminate TRSL-covered employment and continues to actively work after SMDB approval, TRSL will cancel the disability application and the member must re-apply.

Certification of termination date

Upon approval by the SMDB, the employer will initially be notified to provide certification of the member’s termination date or (if applicable) the date the member will exhaust all leave.

The termination date (or last day of approved leave) should be updated in EMIS by authorized employer personnel with approved access. See the “online terminations” section of Index 4.0 for instructions on how to process online terminations.

PEND DISAB status update (EMIS)

If the member’s disability retirement application has been approved by the SMDB and the employer has certified the termination date, the TRSL processing analyst will update the member’s status in EMIS to reflect “PEND DISAB” to note the member’s pending disability retirement.
Acknowledgement letters

Both the employer and the member will receive an acknowledgement letter within one week of receipt of a member’s completed Form 12 application.

For the employer, this acknowledgement letter provides notice to the agency of the employee’s desire to retire under disability provisions. Employer certifications and member requests for additional information needed will be requested via separate request letters.

**EXAMPLE: Acknowledgement Letter**

```plaintext
Antonia R
ST
Shreveport, LA 711

July 18, 2017

Dear Member:

TRSL has received your Application for Disability Retirement (Form 12). This letter and its enclosures provide information about the disability retirement application process and only states that your application has been received.

It is your responsibility to obtain, pay for, and submit to TRSL all applicable medical records and forms no later than thirty (30) days after 07/17/2017. Documents required to be submitted include:

- Disability Report by Supervisor (Form 12A)
- Member’s Statement of Disability Condition (Form 12B)
- Physician’s Report of Disability Condition (Form 12C or 12C-P)

NOTE: This form should be completed for every physician listed on Form 12B (Item 4 of Section 2) and every referral doctor listed on every Form 12C or 12C-P.
- All medical records to support disabling condition.

If you cannot meet this due date, you can request an extension by completing the enclosed form. An extension request must be made prior to 08/15/2017, and will provide you with an additional sixty (60) days from the date your extension request is received. Failure to submit all medical records and forms by the applicable deadline may result in your disability application being considered abandoned, and therefore canceled. Upon receipt of all medical records and forms needed for your application, your file will be sent to a State Medical Disability Board (SMDB) physician. If obvious and overwhelming evidence of the disabling condition is not available during the SMDB physician’s review, TRSL will contact you to schedule an examination with the physician.

After the review, and if necessary, examination, TRSL will notify you of the SMDB’s determination. If approved, your retirement date will be the date your application was received or the day immediately after your last day of pay (including the exhaustion of sick and/or annual leave), whichever is later. If your application is denied, you have certain appeal rights. If you have any questions or need additional information, please call us at (225) 526-8444, or toll free at 1-877-275-8775. Or, email us at web.master@trsl.org

Sincerely,

Retirement Department
Teachers’ Retirement System of Louisiana

Enclosure

CC: Parish School Board
MR. J. Mitchell
Post Office Box: 711

Copy will be mailed to the employer
```
EXAMPLE: Acknowledgement Letter (for a member who is also eligible for Service Retirement)

Dear Member:

TRSL has received your Application for Disability Retirement (Form 12). This letter and its enclosures provide information about the disability retirement application process and only infer that your application has been received. Our records show that you are also eligible to apply for TRSL service retirement. If you have any questions about your service retirement eligibility, please contact us.

It is your responsibility to obtain, pay for, and submit to TRSL all applicable medical records and forms no later than thirty (30) days after 08/21/2017. Documents required to be submitted include:

- Disability Report by Supervisor (Form 12A)
- Member’s Statement of Disabling Condition (Form 12B)
- Physician’s Report of Disabling Condition (Form 12C or 12C-P)

NOTE: This form should be completed for every physician listed on Form 12B (Item 4 of Section 2) and every referral doctor listed on every Form 12C or 12C-P.

- All medical records to support disabling condition

If you cannot meet the due date, you can request an extension by completing the enclosed form. An extension request must be made prior to 09/20/2017, and will provide you with an additional sixty (60) days from the date your extension request is received. Failure to submit all medical records and forms by the applicable deadline may result in your disability application being considered abandoned, and therefore canceled. Upon receipt of all medical records and forms needed for your application, your file will be sent to a State Medical Disability Board (SMDB) physician. If obvious and overwhelming evidence of the disabling condition is not available during the SMDB physician’s review, TRSL will contact you to schedule an examination with the physician.

After the review, and if necessary, examination, TRSL will notify you of the SMDB’s determination. If approved, your retirement date will be the date your application was received or the day immediately after your last day of pay (excluding the exhaustion of sick and/or annual leave), whichever is later. If your application is denied, you have certain appeal rights. If you have any questions or need additional information, please call us at (225) 925-8448, or toll free at 1-877-275-8775. Or, email us at web.master@trsl.org.

Sincerely,

Retirement Department
Teachers Retirement System of Louisiana

Enclosure

Copy will be mailed to the employer

TRSL

Teachers’ Retirement System of Louisiana

August 22, 2017

TRCIA A

SHREVEPORT, LA

ID No.

Date of Receipt of Form 12:
08/21/2017

Due Date for All Records and Forms:
09/20/2017

cc: CC

SCHOOL BOARD

MITCHELL

POST OFFICE BOX

SHREVEPORT, LA
**Employer request letters**

TRSL will request the employer to certify certain types of information whenever a disability application is received. Upon SMDB approval, TRSL will also request additional information to be certified by the employer so that the member's disability retirement benefit can be finalized. These information requests are referred to as Employer request letters and will be mailed to the employer.

*NOTE: Agency authorized signers may not certify their own records.*

Each letter will identify the member (disability applicant), the date TRSL received the member’s disability application, and the information TRSL is requesting from the employer.

The letter will have a stamp in the upper right portion as DISABILITY and indicate 1st Request, 2nd Request or Final Request.

### Request letters marked DISABILITY should be given priority since disability applicants frequently exhaust all accumulated leave (sick/annual) while waiting on a determination by the State Medical Disability Board (SMDB) and/or employer certifications.

**Timeline**

Employer request letters for any outstanding certifications or employer information needed will be sent using the following timeline:

1. **1st request** – sent within one week of receipt of the member’s disability application.
2. **2nd request** – sent approximately 30 days after the 1st request letter if outstanding information/certification(s) is still needed.

3. **Final request (warning letter)** – sent approximately 30 days after 2nd request letter if TRSL has not received previously requested information/certifications.

NOTE: Once a Final request is sent, the employer will have only 30 days to submit the requested certifications. This 30-day deadline will be noted on the final request letter.
Thirty (30) days after the final request (warning letter) is sent, TRSL will process the member’s application with the information on file. If the applicant’s disability application is approved by the SMDB and TRSL receives additional information (employer certifications) after the member’s retirement benefit is finalized that results in an overpayment of benefits to the member, TRSL will adjust the member’s benefit and charge the employer for the amount of the overpayment, as per LSA R.S. 11:888.

**EXAMPLE:** Employer Request Letter for Disability Application

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**Disability application process**

**Employer’s role**

**Form 12A**

**Job description**

**Worker’s compensation certification form**

**Disability approval process**

**Certification of termination date**

**Acknowledgement letters**

**Employer request letters**

**Action to be taken**

**Other request letters**

**Employer checklists**

**Frequently asked questions**
EXAMPLE: Employer Request Letter for Disability Retirement Approved by the State Medical Disability Board (SMDB):

Teachers' Retirement System of Louisiana

October 23, 2017

SCHOOL BOARD
POST OFFICE BOX
SHREVEPORT, LA

2nd Request
Re: A A
ID No.: 00000000
Date Disability Retirement Application Received: 09/21/2017

Dear Employer:

The State Medical Disability Board has approved this member’s application for disability retirement.

Additional information is needed to continue processing this member’s application for disability retirement. Please forward the items checked below at the appropriate times along with a copy of this letter to Teachers’ Retirement System of Louisiana.

Please certify as soon as possible:

- To report sick leave days used, use the Employer Online Update section on TRSL’s website and select “Sick Leave – Add”. Sick leave information is needed for FY 2016 & sick leave days paid at termination even if 0.00.

Please submit the following after the last day of work or the last day of paid leave, whichever is applicable:

- Agency Certification (Form 11B). NOTE: Member cannot be setup for disability retirement payroll without certification of their termination date.
- Please complete the attached Workers’ Comp certification form.

If you have any questions, please contact Teachers’ Retirement System of Louisiana (TRSL) at (225) 925-6446 or toll-free (outside the Baton Rouge calling area) at 1-877-ASK-TRSL (1-877-275-8775).
Action to be taken

Employers should respond to all request letters by providing the requested information in a timely manner.

1. Certify sick leave days used for the fiscal year(s) requested online through EMIS, TRSL's secure employer database. (See Index 17.0 for instructions pertaining to certification of sick leave.)

2. Certify all of the member's questionable years online through EMIS. (See Index 6.0 for information on certifying questionable years).

3. Complete the worker's compensation certification form if requested.

If the member's disability retirement application is approved by the State Medical Disability Board (SMDB):

4. Certify sick leave days used in current fiscal year and sick leave days paid at retirement online through EMIS, even if the amount is 0. (See Index 17.0 for more details and instructions.)

5. Complete an online Agency Certification (Form 11B) covering the current fiscal year. This form is submitted after the member's termination date and after all earnings and contributions have been reported to TRSL. (See Index 11.0 for details and instructions.)

NOTE: TRSL may request the employer to provide certification of the termination date prior to completing the Agency Certification (Form 11B) in order to expedite the process of disability retirement payroll set-up for the approved applicant.

6. Certify annual leave balances (if requested) online through EMIS. (See Index 17.0 for instructions on how to certify annual leave.)

7. Submit any other information that may be requested on the request letter.

Other request letters

Employers may receive the following additional request letters if the member's disability application is approved by the SMDB:

- Questionable Years Letter
- 10% or 15% Cap Letter
- Agency Certification Discrepancy Letter

Employers should refer to Index 11.0 for examples, descriptions, and instructions for each of these letter types.
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### Employer checklists

**DISABILITY** - Member submits Form 12 (and all associated forms & documents required)

- [ ] Certify all of the member’s questionable years.
- [ ] Certify sick leave days used for all fiscal years of employment.
- [ ] Complete the worker’s compensation request form (if applicable). *TRSL will send to employer only if needed.*

If the member’s disability retirement application is approved by the State Medical Disability Board (SMDB):

- [ ] Certify the member’s termination date or date all leave (sick/annual) will be exhausted
- [ ] Certify sick leave days paid at retirement, even if the amount is 0.
- [ ] Certify annual leave balances (only if applicable).
- [ ] Complete an Agency Certification after the member’s termination date and after all earnings and contributions have been reported to TRSL.
- [ ] Complete 10% (or 15%) Cap Exemption letter (if applicable). *TRSL will send to the employer only if needed.*
1. Can a member remain on sick or annual leave after being approved for Disability retirement?

   Yes, provided the member is exhausting sick or annual leave and is not physically working. The member must terminate employment immediately after all leave is exhausted.

2. Who is responsible for completing the Form 12A, Disability Report by Supervisor?

   The form should be completed by the member’s direct supervisor or an authorized signer for the employing agency if the direct supervisor cannot complete for any reason.

3. Can a member substitute or tutor for our schools after being approved for disability?

   Some Disability retirees will convert to a normal Service retirement at some point. When that happens, only then can they return to work with a school in any capacity whether public or private. Before service retirement conversion, disability retirees may not return to work in the field of education in any capacity whether public or private.

   The easiest way to determine if a retiree can return to work or not is to review the membership status on the Member Summary Screen in EMIS. If the status is “DISAB RET,” the retiree may not return to work with a school in any capacity whether public or private without having the TRSL benefit cancelled. If the member’s status in EMIS is “RETIRED,” then the retiree will be subject to TRSL’s Return to Work laws, including any applicable waiting periods. Please refer to Index 15 for more information on the return-to-work provisions.

4. Does our agency need to submit an agency certification (Form 11B) if we terminated the member prior to their Disability application submission?

   Yes, an agency certification (Form 11B) must be submitted if the member was employed by your agency in the current fiscal year regardless if they were previously terminated or not.