ANNUAL EMPLOYER TRAINING

State Agencies

March 16, 2023

- Employer Membership Information Site (EMIS) Reports/Authorized Contacts
- TRSL Eligibility and Enrollments
- Optional Retirement Plan
- Monthly Contribution/Salary Reporting
- Service Credit Certifications/Corrections
- Retirement Processes/Issues



Agenda



Index 0.0: Employer Membership Information Site (EMIS) **Index 1.0:** Authorized Contacts & Employer Directory Contacts

> Provides an overview of TRSL's employer access database and how to obtain employer access to EMIS



1

will have "view only" access to employee data on EMIS; they will not be able to update or certify the data. Form 1 should be completed without the designated personnel's signature if Inquiry only access is needed for additional employer staff. Employer personnel who are given Inquiry only access do not have to be designated as authorized signers.

TRSL vs. LASERS: Comparison for state agencies

- TRSL assigns agency numbers
- Employer Contribution rate is same as K-12 employer contribution rate
- Service credit awarded on fiscal year basis
- Does not interface with LAGov

- LASERS' agency number generally assigned based on Division of Administration numbers
- Different rates for employer contributions based on membership type
- Service credit awarded on calendar year basis
- Interfaces with LAGov

TRSL liaisons

Employer Services

Employer Training

Employer Surveys

Employer Reporting

FTP/File Layouts

Procedures Manual Contribution Rates

GASB

Contact

IRS Limits

Employer FAQs

Each agency is assigned an Accountant and Retirement Benefits Analyst liaisons

Other Employer Services Staff

DEPARTMENT DIRECTOR	<u>Ed Branagan</u>	(225) 925-4846
ACCOUNTANT MANAGER	Vacant	(225) 925-6462
RETIREMENT SUPERVISOR	J <u>eff George</u>	(225) 925-1887
ORP VENDOR LIAISON	Paula Rhodes	(225) 925-7863
RETURN-TO-WORK SPECIALIST	J <u>essica Trosclair</u>	(225) 925-3663
EMPLOYER TRAINING	<u>Sharon Lachney</u>	(225) 925-4097
EMPLOYER TRAINING	<u>Heather Landry</u>	(225) 925-7093

TRSL Liaisons

To view the name and/or contact information for your agency's liaisons, use the search box below. You can search by the employer name, employer ID, or liaison's first or last name. You will see an accountant liaison and a retirement analyst liaison for each agency; please refer to the following list of liaisons' specialities:

- Contact your Accountant Liaison: For help with Contributions Exception Reports, Salary Rejections lists, contribution rates,
 ORP reports, enrollment eligibility, etc.
- Contact your Retirement Analyst Liaison: For help with questionable years, service credit certifications, sick leave certifications, actuarial cost corrections, etc.

SEARCH

Employer Procedures Manual (EPM)

Employer Services TRSL Liaisons Employer Training Employer Surveys GASB Contact **Employer Reporting** EMIS Instructions **FTP/File Layouts** Procedures Manual **Contribution Rates IRS Limits Employer FAQs** THE KEY Newsletter Subscribe to eNews Ask TRSL

Employers' guide for TRSL reporting, including 18 topic-specific indices

	Procedures Manual (by index number)	
Index	Subject (Revised Date)	"Mastering the Manual" tips
Intro	Introduction (07/2017)	<u>Series preview</u>
0.0	Employer/Membership Information Site (EMIS) (12/2019)	New to EMIS?
1.0	Authorized Contacts & Employer Directory Contacts (01/2022)	Authorized contacts
2.0	TRSL Membership (3/2022)	New hires to enroll?
3.0	Beneficiary Designation (11/2022)	Please don't sign/witness blank beneficiary forms
4.0	Contribution Reporting & Corrections (01/2022)	Annual contribution limits
5.0	Online Member Access & Statements (12/2022)	Member Access through EMIS
6.0	Service Credit Certifications/Corrections (09/2022)	Reminders regarding service credit
7.0	Refunds of Employee Contributions (09/2021)	<u>Understanding the 90-day waiting period for</u> <u>refunds</u>

Employer/Member Information System (EMIS)

TRSL's employer database

Employers can

- Certify/correct employee data
- Upload required files/reports*
- View various reports

*OSUP reports monthly salary/contributions & sick leave usage for most state agencies (DOA agencies) with TRSL-covered employees

Updates 🔹	Submit Files	-	Log
Agency Certification	on (Form 11B)		
Annual Leave Upd	ate		
Contribution Corre	ection		
Enrollments			
Full-Time Only Co	rrections		
Furlough Certifica	tion and Update		
Home Address Update			
ORP Salary Entry (up to 100 employees only)			
Prior Year Salary Corrections			
Questionable Year	Certification		
Retiree Voluntary/Insurance Deduction			
Salary Contribution Entry (up to 100 employees only)			
Sick Leave Days Paid Update			
Sick Leave Add and/or Update			
Terminations			

Submit Files	Logou	
DOA ORP Contribution		
DOA Salary Contribution		
DOA Sick Leave		
LSU ORP Contribution		
LSU-MEDICAL ORP Contrib	ution	
LSU Salary Contribution		
LSU-MEDICAL Salary Contr	ibution	
LSU Sick Leave		
LSU-MEDICAL Sick Leave		
ORP Salary		
Salary Contribution		
Sick Leave		
Submit Miscellaneous File		

Member Summary

Member's personal information

- Historical record of TRSL-covered employment with dates
- Place to determine if member can elect to retain membership
 - Must have 5.00 years of service credit for eligibility





Account History

Location to view member's service credit by fiscal year

 Way to identify any questionable years left to certify when reviewing a member's account

Members V
Member Summary
Account History
Member Notations
Monthly Salary/Contributions
Annual Salary History

					Process	ID Legen
System: 4 SSN: Name:			Status: ACTI Status Date:		1100000	ib Leşen
Eff Date Seq Emp Ind Source	Contrib Amount	ution Cer Type In			Full Time Earnings	Service Cre for Eligibil
06/30/2016 001 Primary ONLINE SAL CORR-1st Year of Employ	1,458.31 ment	TSREG *	* 0.33 REGULA	R 18,228.88	54,477.02	0.
06/19/2017 By: QUESTIONABLE YEAR	1,307.44	TSREG	0.33 JE	16,343.11	16,762.17	0
<u>06/30/2017</u> 002 Primary	4,207.26	TSREG *	* 1.00 REGULA	R 52,591.32	52,591.32	1.
<u>06/30/2018</u> 003 Primary	4,415.14	TSREG *	* 1.00 REGULA	R 55,189.46	55,189.46	1
06/30/2019 004 Primary	4,501.76	TSREG *	* 1.00 REGULA	R 56,271.95	56,271.95	1
06/30/2020 005 Primary	4,626.66	TSREG *	* 1.00 REGULA	.R 57,831.98	57,831.98	1
Contributions		Service (<u>Credit</u>	Ē	ligibility	
Regular Sheltered 19,20		egular Service	4.33			
Total Contributions: 19.2		service credit computation:	4.33	Estimated ser	vice credit eligibility:	4.3

Monthly Salary/Contributions

Displays member's current fiscal year salary and contributions reported

• Can be used to determine when Agency Certification can be completed

Member

Member Su

Account His

Member Not

Monthly Sal

Annual Sala

- Active members (EXP):
 - "3": Earnings expected
 - "4": Earnings may be reported
 - "o": No earnings can be reported

	Total	34,212.83	34,212.83	2
	Jun			
ary History	Мау			
lary/Contributions	Apr			
otations	Mar			
istory	Feb			
	Jan			
immary	Dec	7,356.02	7,356.02	
	Nov	4,904.00	4,904.00	
	Oct	4,904.00	4,904.00	
iteu	Sep	4,904.01	4,904.01	
rted	Aug	4,904.00	4,904.00	
u	Jul	7,240.80	7,240.80	

Current Fiscal Year

Actual Earnings

System: 4 SSN:

Primary Employer

Month

Fiscal Year:

Monthly Salary/Contributions

Fulltime Earnings

Name

579.26

392.32 392.32

392.32

392.32

588.48

2,737.02

Exp

3

3

3

3

3

3

3

3

3

3

3

Rec

3

3

3

3

3

3

0

0

0

0

0

0

% Year Employed: 100.00%

Contributions

EMIS system codes

Status Information				
Sys	Seq	Status	Code	Date
4		ACTIVE	(A)	07/19/2021

System 4	TRSL Regular Plan – Defined Benefit Plan for "teachers" in TRSL eligible positions
System 6	ORP (Optional Retirement Plan) – Defined Contribution Plan; for employees who chose ORP during employment at a Louisiana public institution of higher education; opted out of TRSL's Regular Plan (System 4), must remain in ORP

Reports available in EMIS

Employer contacts with EMIS access can create various reports at any time.

Various report options include:

- Active/Active DROP Member Service
- Ending DROP Participation
- Members Eligible to Retire

Reports Updates -	Logo			
Active/Active DROP Member Service				
Annual Leave	· · ·			
Contribution Exception				
Employer Payments				
Employer Statements				
Ending DROP Participation				
Furloughed Employees Certification				
Insurance/Voluntary Deduction				
Members Eligible to Retire				
Questionable Years				
Reporting Not Enrolled				
Sick Leave				
Sick Leave Errors				

Active/Active DROP Member Service Report

Lists Active and Active DROP members employed by your agency based on age and service credit criteria entered.

- Helps identify current employees and those working after DROP
- Will not include employees currently in DROP

Reports	Updates 🔹	Logou
Active/Active D	ROP Member Service	F
Agencies Witho	ut Charges	
Annual Leave		
Checklist Status	i i i	
Contribution Ex	ception	

Suggested Query Parameters:

- Age Range: 18 to 99
- Service Credit Range: 0.00 to 50.00
- Sort Selection: Service, SSN (for service credit order)

Query Record

System

4

Age From 18 To 99

Service Credit

Employer IDs

And/Or

Sort Selection Service.SSN V

ervice.SSN

SSN

То

0.00

To 50.00

Ending DROP Participation Report

Report lists members from your agency who will end DROP for the time period selected

- Can query future and past dates (month/year)
- Employers should pull this report up to three months in advance to ensure deductions/contributions resume if employee continues working after DROP.

Employer: TRSL



Members Eligible to Retire Report

Provides a list of employees who will be eligible to retire based on fiscal year selected.

• Report will also list employees who are currently in DROP and working after DROP.

Reports	Updates 🔻				
Active/Active DROP	Active/Active DROP Member Service				
Annual Leave	Annual Leave				
Contribution Excep	tion				
Employer Payments					
Employer Statements					
Ending DROP Participation					
Furloughed Employees Certification					
Insurance/Voluntary Deduction					
Members Eligible to	Retire				



Members Eligible to Retire Report

The Members Eligible to Retire Report provides a detailed report or a summary report of members eligible to retire. The report will include employees who meet eligibility requirements by June 30 of the projected fiscal year selected. The projection assumes that a full year of service credit will be added to the employee's current service years.

Example: Members Eligible to Retire Report

		etirement.	Members	ement Syste Eligible to Retire As of 06/30/2023	e Report	ana			ge 1 of 13 : Sharonl	
The servi	ce credits listed on t	this report are estimates only and	l are subje	ct to adjustmen	ts at the time	of retirement	or refund.			
Employer		Public Schools								
System: 1 SSN	TRSL - Regular Name	Status	DOB	1st Elig Fiscal Year	Start Date	COP End Date	Eligibility Service	Total Regular	DROP Regular	Total
511	+	DROP MBR	000	2022	07/01/2022	06/30/2025	28.00	28.00	0.00	28.00
		ACTIVE		2015	0110112022	00/00/2020	13.99	13.99	0.00	13.99
	*	DEFER RET		2022	-		5.74	5.74	0.00	5.74
	*	ACTIVE		2022			20.97	20.97	0.00	20.97
	ż	ACTIVE		2020			22.85	22.85	0.00	22.8
		ACTIVE		2023			30.00	30.00	0.00	30.00
	*	ACTIVE		2018			25.51	25.51	0.00	25.5
	+	DROP MBR		2022	06/01/2022	05/31/2025	30.00	30.00	0.00	30.00
	*	ACTIVE		2019			24.51	24.51	0.00	24.5
	+	DROP MBR		2023	09/22/2022	09/21/2025	27.90	27.90	0.00	27.90
	*	ACTIVE		2017			25.97	25.97	0.00	25.9
	*	ACTIVE		2023			25.98	25.98	0.00	25.98
	+	DROP MBR		2021	05/27/2021	05/26/2024	25.00	25.00	0.00	25.00
	×	ACTIVE		2022			21.83	21.83	0.00	21.83
	*	ACTIVE		2021			16.90	16.90	0.00	16.9
	*	ACTIVE		2017			26.50	26.50	0.00	26.5

Employer Contacts

TRSL uses this screen to know who to contact regarding accounting and retirement issues

• The Update Permissions section shows who can access EMIS and perform update functions

Employers	Reports -
Employer Contribution	Accounts Receivable
Employer Contribution	1 Charges
Employer Payments	
Employer Contacts	>

	Address:						Sta oyer Ty ter Sch	one: Fax: itus: Act ype: Sta ool: No sed: 10/	te Ager	-			
Code			١	lame			Phone	Ð	dt 🛛		E-Ma	il	
_	SECRETARY					(_	1				
_	UNDERSECRETARY	1											
	ACCOUNTANT ADMINISTRATOR 5												
_	IT UNDER DIV OF ADMINISTRATION			-					1				
	HUMAN RESOURCES MANAGER B		_						ł				
	HUMAN RESOURCES DIRECTOR		-	-					1				
	HR SPECIALIST PAYROLL & BENEFITS MANAGER		_			-			i		_		
CR (OC (Contribution Reporting DF D DRP Contact PC PC	gency Hea irector of ersonnel (ad Desig Financo Contact	e	AS DP	(Codes Authoriz Data Pro Personn	ocessing	g l	FS Dire	iness Ma ector of roll Con	Food Se	ervice	
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CR (OC (PS F * Aut	Contribution Reporting DF D DRP Contact PC Pr President of School Board RC R thorized to sign retirement forms Inquiry ADR Ad Contribution Correction PYC PY Salary Entry ORP OR	ency Hears rector of ersonnel (etriement) Up dress Cha Salary Cc P Entry INQ X X X X	ad Desig Financi Contact Conta	e e e e e e e e e e e e e e n	AS . DP PH PH Updat ENR EI SLU SI AGC A TRM	Authoriz Data Pro Personn ISSIC e Codes rrollme ck Leav gency C CCR	ocessing el Head ons nt e Upda ertifica PYC	te tion SLU X	BM Bus FS Dire PR Pay TRJ INS FSM	A Termi Insura File S SAL	Food Se tact nation ince De- ubmissi	duction: on AGC	FS

Form 1: Authorized Contacts

Grants access rights to designated employer personnel

• Section 2 (Authorized signer):

✓ Check all access rights desired for each designated personnel

Che	ck desired access rights from the follo	owing	(See back of form for des	cripti	ons):
	Inquiry		Enrollments		Sick/annual leave
	Prior year certifications/corrections		Terminations		Agency Certificat
	Retiree insurance deduction		File submission		Salary report (onl
	Home address update		Contribution correction		ORP salary report

Form 1: Authorized Contacts (cont'd)

Section 2 (Authorized signer):

- Must include staff member's signature for access other than Inquiry
- Complete bottom of section **to delete previously designated personnel** no longer needing TRSL database access for your agency

Section 3 must be signed by employer's Agency Head or Agency Head Designee

To delete a previous designee, provide name(s) to be deleted below. Please complete a TRSL Employer Directory Contact (Form 1EDC) to designate a replaced directory contact.

Name to be deleted	Name to be deleted
Name to be deleted	Name to be deleted

EMIS access rights

Inquiry (INQ)	Offers view-only access
Sick/Annual Leave Update/Corrections (SLU)	 Sick Leave – Use to update employees' sick leave usage Annual Leave - (Higher ed and state agencies only) – Use to report annual leave balances
Prior Year Certifications/ Corrections (PYC)	Use to update Actual Earnings (gross earnable compensation), Full-Time Only Earnings, and Questionable Year Certifications for a closed out (or prior) fiscal year
Terminations (TRM)	Use to report employee's last day of work or last day of leave
Agency Certification – Form 11B (AGC)	Use to certify current year information for an employee who is retiring or entering DROP

EMIS access rights (cont'd)

File Submission (FSM)	Use to upload required files/reports securely without encryption
Salary Report (SAL)	(Only for employers with no more than 100 employees) - Use to report monthly salary and contributions during the current fiscal year
Home Address Update (ADR)	Use to update mailing address for active employee
Contributions Corrections (CCR)	Use to add, delete, or replace employee's monthly actual and/or full- time earnings during the current fiscal year
ORP Salary Report (ORP)	(Only for employers with no more than 100 employees in ORP) - Use to report monthly salary and contributions for ORP participants during the current fiscal year

Form 1EDC: Employer Directory Contacts

Updates or replaces agency contacts

- Ensure your agency has the following designated contacts:
 - Agency Head (AH) Must sign Section 3 of Form 1 to authorize access rights
 - Retirement Contact (RC) Employer request letters addressed to RC
- Include email addresses/phone numbers/ position title for each contact

NOTE: Not all categories require an employer contact.

HOW TO SUBMIT:	Employer Director Contacts (Form 1ED MAIL IN 8401 United Plaza Blvd, Ste 30 Baton Rouge LA 70809	OC) Subm ONLY. elect	it ORIGINAL f No copies, fa ronic signatur ans are accept	<u>xes,</u> res,	EO-1 rev. 07/21 OK to image Employer ID (####)
signers, for the Teac general questions. F	e all entries. Designate perso chers' Retirement System of Lo Please submit a completed Aut list contacts that change. (Y	uisiana (TRSL). TRSL uses thorized Contacts (Form 1	these contacts for r) to add/delete auth	mailed re horized s	quest letters and igner(s).
Section 1 — Employ	,		, ,		
Employer name				Date (mm/o	(d)////
Section 2 — Admin	istrative personnel (Include appro	priate professional and/or co	ourtesy title, e.g. Dr. /	Mr. / Mrs.	/ Ms.)
Category	Name (ONLY ONE per category)	Position	Phone number (include area code)	Ext. #	Email
Agency head					
Agency head designee					
Business manager					
Director of finance					
Director of personnel/ human resource mgr					
Director of food services					
President of school board					
Section 3 — Support	rt personnel (contact for) — ONL	Y ONE contact per catego	ny.		
Contribution Reports					
Data Processing					
Optional Retirement Plan (ORP)					
Payroll					
Personnel					
Retirement					

Keep employer contacts up to date

Use Employer Directory Contacts (Form 1EDC) to update Employer Contacts.

Use Authorized Contacts (Form 1) to give and remove online access rights.

Tip: Review Employer Contacts screen twice a year



			Employe	r Contacts			
Wet	LA 71		t SCHOOL	Sta Employer T Charter Sch		and the second	
Cod	P Title		Name	Phone	Ext		E-Mail
AH	EXECUTIVE DIRECTOR				1	1	
DP	ADMINISTRATIVE ASSISTANT			J	1		
FS	MANAGER				1		
<u>PS</u>	PRESIDENT						
<u>A5</u>	BUSINESS MANAGER				1		
CR OC PS	Agency Head Contribution Reporting ORP Contact President of School Board thorized to sign retirement	DF PC RC	Description of C Agency Head Designee Director of Finance Personnel Contact Retirement Contact	ontact Codes AS Authorized Sig DP Data Processin PH Personnel Hear	8 F	M Business M S Director of R Payroll Cont	Food Service

		Desci	iption o	f Updat	e Code	5						
INQ Inquiry CCR Contribution Correction SAL Salary Entry	ADR Address O PYC PY Salary ORP ORP Entry	Correcti	on	SLU S		nt ve Upda Certifica		INS		ination ance De ubmissi		5
Authorized User	INC	2 ADR	ENR	TRM	CCR	PYC	SLU	INS	SAL	ORP	AGC	FSA
1	x	x	x	x	х	×	х			×	x	х
¢	x	x	x	x	х	x	х				x	x
1	x	x	x	×	×	×	х			×	×	x



Eligibility for TRSL membership

Membership eligibility

Part-time, seasonal, or

No Social Security number

temporary employees

Ineligible employees Special conditions

CONTENTS

Plan types

Visas

INDEX 2.0: TRSL Membership

March 2022

The information in this section is provided to help you determine an employee's eligibility for membership and the steps needed to enroll the eligible employee in TRSL.

State laws govern the rules of TRSL membership eligibility and enrollment. Some of them are referenced below:

- Definition of Teacher (eligible for membership) LSA R.S. 11:701(35)
- Part-time Employee Membership Eligibility LSA R.S. 11:162
- Enrollment Timeline (60 days) LSA R.S. 11:722
- Retain Membership provision (at least 5 years eligibility service credit) <u>LSA R.S. 11:723</u>

 TRSL Secondary Employer Criteria – Leuisiana Administrative Code Title

Index 2.0: TRSL Membership

Employer's reference guide on TRSL membership eligibility Reporting Not Encoded report requestly asked questions and enrollments process



Forfeiture of Retirement Benefits - Attestation of Understanding (Form 2FRB) Beneficiary Designation for Non-Retired Members (Form 3) have made. By doing so, you can ensure that you are reporting correctly.

All employers are responsible for reporting eligible members and retirees returning to work from the first day of hire.

www.TRSL.org • 1-877-ASK-TRSL • web.master@trsl.org

2.0 - TRSL Membership

Enrollments process

Documents to include in hiring packet

- 1. Election to Retain Membership (Form 2R)
 - Submit original to TRSL
- 2. Forfeiture of Retirement Benefits/Attestation of Understanding (Form 2FRB)
 - Do not submit to TRSL. TRSL will request if needed.
- 3. Statement Concerning Your Employment in a Job Not Covered by Social Security (Form 2SS)
 - Submit a <u>copy</u> of the form to TRSL; employer retains the original
- 4. Beneficiary Designation for Non-Retired Members (Form 3)
 - Submit <u>original</u> to TRSL timely
 - Employee/member responsibility to submit form

Form 2R: Election to Retain Membership

LSA R.S. 11:723

When a Louisiana state agency hires an employee, the new hire is normally eligible for LASERS membership. If that employee has <u>at least 5 years of TRSL eligibility</u> <u>credit</u>, he may elect to retain TRSL membership, instead of joining LASERS.

Not applicable to employees covered by Parochial Employees' Retirement System of Louisiana (PERS) or Louisiana Clerks of Courts Retirement & Relief Fund.

- Election to Retain Membership (Form 2R) must be completed within 60 days of new employment.
- Must submit original Form 2R with original signatures to TRSL.



Form 2R errors

Contact your TRSL Retirement Benefits Analyst Liaison for assistance with any errors discovered after submitting Form 2R

ERROR EXAMPLES:

- Incorrect date of employment (hire date)
- Enrollment to be deleted if employee was not eligible to participate in TRSL (part-time, seasonal, or temporary positions), etc.

TRSL Liaisons

To view the name and/or contact information for your agency's liaisons, use the search box below. You can search by the employer name, employer ID, or liaison's first or last name. You will see an accountant liaison and a retirement analyst liaison for each agency; please refer to the following list of liaisons' specialities:

- Contact your Accountant Liaison: For help with Contributions Exception Reports, Salary Rejections lists, contribution rates, ORP reports, enrollment eligibility, etc.
- **Contact your Retirement Analyst Liaison:** For help with questionable years, service credit certifications, sick leave certifications, actuarial cost corrections, etc.

Other Employer Services Staff

SEARCH

DEPARTMENT DIRECTOR	<u>Ed Branagan</u>	(225) 925-4846
ACCOUNTANT MANAGER	Vacant	(225) 925-6462
RETIREMENT SUPERVISOR	J <u>eff George</u>	(225) 925-1887
ORP VENDOR LIAISON	Paula Rhodes	(225) 925-7863
RETURN-TO-WORK SPECIALIST	J <u>essica Trosclair</u>	(225) 925-3663
EMPLOYER TRAINING	Sharon Lachney	(225) 925-4097
EMPLOYER TRAINING	Heather Landry	(225) 925-7093

Membership Eligibility - SPECIAL CONDITIONS

Part-time, seasonal, or temporary employment

Retaining TRSL membership for part-time, seasonal, or temporary employees is not allowed unless the employee meets the below criteria:

Ten (10) year rule

Ten or more years of TRSL eligibility service credit

- W-2 employees only
- Can work 20 hours or less per week

Definitions:

- **Part-time:** Employees who work 20 hours or **less** are considered part-time and are not eligible to retain membership unless they have 10 or more years of TRSL eligibility service credit. Employees who work **more** than 20 hours per week can retain membership.
- Seasonal: An employee who normally works on a full-time basis less than five months in a year
- Temporary: Any employee performing services under a contractual arrangement with the employer of two years or less in duration

Form 2FRB: Forfeiture of Retirement Benefits – Attestation of Understanding

The Form 2R will require agency to verify if the employee has completed and signed the Form 2FRB

- YES: enrollment is processed
- NO: enrollment is not processed

All new hires are required to complete Form 2FRB

• Keep original signed form in employees' personnel records

Forfeiture of Ben (Form 2FRB)	nefits — Attestation of Understanding 00-2FRB rev 02/21	
All individuals employed on or after January 1, permanently maintained in the employee?	2013, are required to read and sign this attestation form. This form will be s personnel record with their employer.	
after January 1, 2013) convicted of a "public corrup	ent benefits by a public employee or elected official (hired or beginning service on or tion crime." This law defines "public corruption crime" as a state or federal felony e sentencing judge finds that the public servant acted willfully and in the course and owing apply:	00-2FRi rev. 02/21
1. The public servant realized or attempted to	realize a financial gain for himself or for a third party.	option entres
The public servant committed any criminal s between the public servant and the minor n	exual act with or upon the person of a minor, and there was a direct association elated to the public servant's employment.	that is final, and all appellate review of the original trial court
The complete statutory text of La. R.S. 11:293, setti of this form. You are required to read its contents.	ng forth the provisions of law governing forfeiture of benefits, is contained in Section 3	, in which the sentencing judge finds the public servant acted willfuing: self or for a third party.
Section 1 — Member information		there was a direct association between the public servant and the
Name: Last, first, MI, suffix (Jr., III, etc.)	Social Security number (###-##-####)	in, or fund.
		is a member, former member, deferred retirement option plan e following criteria:
Section 2 — Attestation (see full statute in Se	iction 3)	on or after January 1, 2013.
	, have read this form, Forfeiture of	em prior to January 1, 2013, but he terminated his service prior to
I,	, nave read this form, Forreture of nding, including the full statute contained in Section 3, and understand its	ious public service he is eligible for membership in a public
contents.	ining, including the full statute contained in section 5, and understand its	conviction warrants forfeiture as provided in this Subsection or court shall review the following factors:
Applicant's signature (DO NOT PRINT OR TYPE)	Date signed (mm/ddlyyyy)	······,
•		
*	* Full statute on reverse **	public servant's right to receive any benefit or payment of any kind tem without interest, subject to Subparagraph (b) of this Paragraph.
		in of the state for monetary loss incurred as a result of the public
		iount contributed by the public servant to the retirement system. ember's spouse, dependent, or former spouse, as an alternate
		his Paragraph, may otherwise be payable. Upon order of the court, purt considers relevant to the determination of the amount of an
		rvant's benefit for the sentencing court in accordance with existing usal share. In determining the award, the court shall consider the
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PO Box 94123 • Baton Rouge, LA 70804-9123 • 1-87	7-ASK-TRSL (1-877-275-8775) • FAX: 225-925-4779 • www.TRSL.org • web.master@trsl.org	pouse in connection with the crime. pterm to: It payment of the benefit awarded to the spouse, dependent, or form rest on those contributions that are not otherwise assigned employer contributions that are not otherwise assigned employer contributions and interest, together with any funds in summing ummarined goouse, the summing micro-olidi or the bries and increases shall never the systems trust. If a current or former spouse, in and shall provide such attestation teration form and such public in writing when a conviction for
PO Box 94123 • Baton Rouge, LA 70804-9123 • 1-87	public retirement system and who is subject to the provisions of this Section. The secretary she	posse in connection with the crime. preme to: n. payment of the benefit awarded to the spouse, dependent, or form rest on those contributions that are not otherwise assigned employee contributions that are not otherwise assigned employee contributions and interest, together with any funds in the unfunded accurite liability of the system's trust. the surviving summaries dyouse, therwing mixer of high or the ability of the system's trust. If a current or former spouse. In and other grouds acut attrustion testation form and such public thereof. In writing when a conscion for believe, is a member of a
PO Box 94123 • Baton Rouge, LA 70804-9123 • 1-87		pouse in connection with the crime. protein to: t. payment of the benefit awarded to the spouse, dependent, or form rest on those contributions that are not otherwise assigned employer contributions that are not otherwise assigned employer contributions that are not otherwise assigned employer contributions and interest, together with any lunds in the unstanded accused balling of the system's trut. are surviving amanutic propute, teaching in a mance determined by atoms and interest to the system's trut. are surviving amanutic propute, teaching interest of all the surviving amanutic propute, teaching the public senant. If a current or former spouse, m writing when a curvicing for the second information and all complex cubic information and

Form 2SS: Statement Concerning Employment in a Job Not Covered by Social Security

Most TRSL members do not pay into Social Security and are subject to the following:

- Government Pension Offset (GPO)
- Windfall Elimination Provision (WEP)

All new hires are required to complete and sign the Form 2SS

• Forward a copy of the completed form to TRSL; the employer retains the original

System of Louisiana	NOT Covered By Social Secur	r ity (Form 2SS)	rev. 02/21
ноw то	DROP OFF or MAIL IN	EMAIL	FAX
SUBMIT:	8401 United Plaza Blvd, Ste 300 Baton Rouge LA 70809	web.master@trsl.org	(225) 925-4779
nployee name: Last, first, MI, suffi	v(le III etc.)	Employee Cocial S	curity number (###-#####)
ipoyee name: cast, mat, ma, m, sam	h http://iki.	employee social si	conty manage (new-second)
nployer name		TRSL agency numb	er (####)
our earnings from this job benefit from Social Securi hay cause the amount of t inder the Social Security la	disabled, you may receive a TRSL retirement be are not covered under Social Security. That mea ty based on either your own work or the work or he Social Security benefit you receive to be redu w, there are two ways your Social Security benefit	ns if you do receive a TRSL pension of your spouse or former spouse, re- ced. Your Medicare benefits, however fit amount may be reduced.	and you are also entitled to ceipt of your TRSL pension rer, will not be affected.
benefit if you receive a	Provision (WEP) - The WEP is a modified bene TRSL pension. The WEP is used to calculate the er, your Social Security benefit cannot be comple ability.	reduction for a retirement or disabi	lity benefit you earned from
	ge 62 in 2020, the maximum monthly reduction s updated annually. For additional information, p		
if you are at least age reduction for a spouse	Offset (GPO) - Normally, when your spouse re 52. However, if you are eligible for a TRSL pensic 's or widow(er)'s benefit. The GPO formula reduc nefit. In some cases this offset could entirely elim	on, the GPO may apply. The GPO is ses your Social Security spouse's or	used to calculate the widow(er)'s benefit by two-
of that amount (\$1,00 benefit, under GPO yo is high enough to total	e a monthly TRSL pension of \$1,500 based on e 0) is used to offset your Social Security spouse o u will instead receive \$500 per month from Soci 1ly offset your spouse or widow(er) Social Securit please refer to the Social Security publication,"	r widow(er) benefit. If you are eligit al Security, \$1,500 – \$1,000 = \$500 y benefit, you are still eligible for N	ble for a \$1,500 widow(er) D. Even if your pension
More information: Social available at www.socialsecu	Security publications and additional information <i>irity.gov.</i> You can also call toll free 1-800-772-12 t your local Social Security office.	, including information about excep	
	ved TRSL Form 2SS (Form SSA-1945) that cor vision (WEP) and the Government Pension C		
ignature of employee (DO NOT PRI	NT OR TYPE)	Date signed (mm/c	(d/yyyy)
ABOUT THIS FORM: The Soci January 1, 2005, or later in a ju benefits to which they may be	al Security Protection Act of 2004 requires state and lo bb not covered under Social Security. The statement ex come entitled.	ocal government employers to provide a plains how a pension from that job cou	statement to employees hired Id affect future Social Security
TRSL Form 2SS (Form SSA-194 with TRSL-covered employees Security law for workers who a	5), Statement Concerning Your Employment in a . should use to meet the requirements of the law. The f also receive a pension based on their work in a job nor rker's Social Security retirement or disability benefit. TI	orm explains the potential effects of two covered by Social Security. The Windfal	provisions in the Social Elimination Provision (WEP)
on the form; and 3) Submit a o	llowing actions: 1) Give the statement to the employ copy of the signed form to TRSL. Copies of TRSL Form ity, are available online at www.TRSL.org .		
A similar form is also available	from the Social Security Administration (Form SSA-19		
website at www.socialsecurity	gov/form1945/SSA-1945.pdf and information about t	he form is available at www.socialsecuri	ty.gov/form1945.

Form 3: Beneficiary Designation for Non-Retired Members

Employee's responsibility to complete the form with original signatures and submit to TRSL

- TRSL only recognizes the Form 3 on file at time of a non-retiree's death
- Forms submitted after a member's death are not accepted

	DROP OFF or M						
	HOW TO SUBMIT: E401 United Pleas End,	Sile 200			it ORIGINAL f		
2	Reton Rouge LA 70	109			s, rakes, or so	ans acce	poor
	n ink or type all entries except signatures. Incom ious chokes. Designations of beneficiaries become eff						
with a	hell be null and void. This form is not to be used for r complete Form 3C (lieneficiary Designation for Retire	ethod members or	members a	ho heve pert	kipsted in DRDP. Retin	es ato hae	returned to work
Secti	ion 1 - Member information						
arre L	ast, first, ML suffix (ir. II. etc.)		Social Securi	y number (###	-88-8884)		Check here if multiple beneficiary
	0 bax		Cartme pho	ne Vinclude ars	a code)		torns submitted.
ite stat	la rin	_	Email addres				
			- Internet Co				
Secti	ion 2 - Beneficiary designation		-				
inere i	include ALL beneficiaries that you with to designate. Jaries. Primary and contingent beneficiaries must <u>very</u>	H percentages are	not provides	, any amoun	h psysble will be dvid	ied equally an	tong all
inited.	sares. Primary and contingent beneficiaries must <u>see</u> . (If necessary, attach an additional Form 3 and check	the box in Section	1 for multip	e of primary of to beneficiary	form submitted.) "C	niki that you ontingent" be	can name ti not neliciaries are
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2.	ion 3 - Member signature					°	
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TRSL

EMPLOYER MANUAL 16.0

INDEX 16.0: Optional Retirement Plan (ORP)

January 2023

CONTENTS Key features of the ORP ORP contributions ORP carriers Eligibility ORP-eligible employees Determining employee eligibility ORP eligibility for non-higher education employees The Optional Retirement Plan (ORP) is a defined contribution plan and an alternative to the defined benefit plan administered by TRSL. The ORP was established on July 1, 1990, to provide retirement benefits to eligible participants while affording maximum portability.

Eligible employees make an *irrevocable* election to participate in ORP. ORP participants are not considered TRSL members.

Key features of the ORP:

- An ORP account is owned by the participant, and there is no waiting period to join the plan.
- ORP accounts are portable.
- ORP participants control their own investments.

Index 16.0: Optional Retirement Plan (ORP)

Provides information on the Defined Contribution Plan available to academic and unclassified employees of Louisiana colleges, universities, and community colleges

> Correcting salary files Tips to ensure proper reporting Recovering overpayments Carrier changes (Form 16) Re-employing an ORP participant Terminations Rollover requests Frequently asked questions

of these contributions are transferred to the carrier.

ployee contributes 8.0% of their salary as specified by law.

www.TRSL.org • 1-877-ASK-TRSL • web.master@trsl.org 16.0

16.0 - Optional Retirement Plan

What is the Optional Retirement Plan (ORP)?

ORP is a Defined Contribution (DC) Plan

- Established July 1, 1990
- Provides retirement benefits to participants based on contributions and interest earned on their investments
- Portable

The decision to participate in ORP is irrevocable

• ORP participants do not participate in TRSL's Defined Benefit Plan and are not considered TRSL members

Participants control their own investments through private carriers

- Employee & employer contributions are invested by the ORP carrier in the investment option(s) chosen by the employee
- Participants are 100% vested from date of enrollment



Academic and unclassified employees of Louisiana colleges, universities, and community colleges can participate in the ORP. This retirement plan is also available to employees of any constitutionally established board that manages institutions of higher education.

How does it work?

- An ORP account is owned by the member, and there is no waiting period to join the plan. ORP members are 100% vested from the date of enrollment.
- Member and employer contributions are pooled and invested by the designated ORP carrier in the investment options chosen by the member.
- The performance of the member's investments determines the retirement benefit due. Projections of possible benefits are provided, but not guaranteed, by the ORP carriers.

ORP eligibility for NON-higher education employees

If the ORP participant is employed in a TRSL-covered position, he/she must remain in ORP, regardless of the number of years (This holds true even if the position is not in higher education or the TRSL eligible position the employee is filling is part-time, seasonal, or temporary)

If the ORP participant is employed in a position covered by another Louisiana public retirement system, see below:

- If member has fewer than five years: You will enroll him/her in the new retirement system
- If member has *five or more years*: He/she can opt to retain ORP membership under TRSL by completing a Form 2R within 60-days of new employment

ORP members are 100% vested from the date of enrollment and make an irrevocable election to participate in ORP.

• **IRREVOCABLE ELECTION:** Continued participation is mandatory even if future employment in a TRSL eligible position is part-time, seasonal, or temporary.

ORP enrollment

Application for Optional Retirement Plan or Change of Carrier (Form 16)

- Employee completes Sections 1-3
- Employer completes Section 4 and submits original Form 16 to TRSL for processing

Section 2 — Carrier desig	
New enrollment Change of ORP carrier Existing ORP participant	Name of ORP carrier VOYA Financial (formerly Teachers Insurance and Corebridge Financial (for

	s form to your Human ete the enrollment pro			mit ORIGINAL es, faxes, or s	form ONLY. cans accepted.
int in ink or type all entries dividuals joining the Optional Re portant information about the O ocess with TRSL.	tirement Plan (ORP) or by	y ORP participants ch	anging carriers. The	reverse side of thi	is form contains
Section 1 — Applicant in ame: Last, first, MI, suffix (Ir., III, etc.		Date of	birth (<i>mm/dd/yyyy</i>)	Social Security nur	nber (###-##-####)
reet address / PO box		City, sta	te, zip		
aytime telephone (include area coo	le)	Email ad	ddress		
Sex Male Female	U.S. citizen? YE		/pe of visa:		
Change of ORP carrier		formerly ING Life Insu nce and Annuity Asso	-		01 VOYA 02 TIAA
ection 3 — Applicant'S hereby make irrevocable applici- mployee contributions, less any e ORP carrier designated above nember of the TRSL Regular P f Louisiana or TRSL, but are s gits set forth in Louisiana Cr	signature ation for the Optional Rett administrative fee adopt . I have read the back Nan (defined benefit pla colely the liability and r onstitution Article X Se	ed in accordance wit of this form. I unde an); (2) the benefits responsibility of the c. 29 (A) and (B), wh	/ AIG) accordance with LS h law, and the emp erstand that (1) I c payable under the designated ORP o lich are printed on	A-R.S. 11:921–931. loyer transfer amo an never again b ORP are not the :arrier; (3) I hereb the back of this	I understand that future unt will be forwarded to recome a contributing obligation of the State y expressly waive my
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ection 3 — Applicant'S hereby make irrevocable applica mployee contributions, less any neo RPC carrier designated above nember of the TRSL Regular P f Louisiana or TRSL, but ares a ghts set forth in Louisiana Cu um payout of the entire acco pplicant's signature (DO NOT TYPE	Signature ation for the Optional Retu administrative fee adopt I have read the back han (defined benefit pla solely the liability and r onstitution Article X Se ount can be made from OR PRINT)	irement Plan (ORP) in ed in accordance wit of this form. I unde the benefits esponsibility of the c. 29 (A) and (B), wh the ORP carrier dir	/ AIG) accordance with LS h law, and the empi rstand that (1) I (opyable under the designated ORP of ich are printed on ectly to me during	A-R.S. 11:921–931. loyer transfer amo an never again b ORP are not the carrier; (3) I heret the back of this ry lifetime. Date signe Ibmission to Ti	I understand that future unt will be forwarded to become a contributing obligation of the State by expressly waive my form; and (4) no lump- d (mm/dd/yyyy)
ection 3 — Applicant's hereby make irrevocable applica- piloyee contributions, less any te ORP carrier designated above tember of the TRSL Regular P I coulsiana or TRSL. but are s ghts set forth in Louisiana C um payout of the entire accor pilicant's signature (DO NOT TYPE) ection 4 — Agency cert ency name	Signature ation for the Optional Retu administrative fee adopt I. I have read the back han (defined benefit pla solely the liability and r onstitution Article X Se point can be made from OR PRINT) tification (must be co	irement Plan (ORP) in ed in accordance wit of this form. I unde mi); (2) the benefits esponsibility of the c. 29 (A) and (B), wh the ORP carrier dir pompleted by emp Effective dat (or when this form	/ AIG) accordance with LS h law, and the emp erstand that (1) I c payable under the designated ORP c lich are printed on ectly to me during bloyer prior to Su the for change of car is received by TRSL, v	A-R.S. 11:921–931. loyer transfer amo an never again be arrier; (3) I heret the back of this r my lifetime. Date signe IbmiSSiOn to Th TRSL agend rier:	I understand that future unt will be forwarded to recorme a contributing obligation of the State by expressly waive my form; and (4) no lump- d (mm/dd/yyyy) d (mm/dd/yyyy) cy number (####)
ection 3 — Applicant's hereby make irrevocable applica- mployee contributions, less any te ORP carrier designated above nember of the TRSL Regular P Louisiana or TRSL, but are s ghts set forth in Louisiana C im payout of the entire accc plicant's signature (DO NOT TYPE) ection 4 — Agency cert ency name (date of ORP election: certify that this employee is eligi	signature ation for the Optional Retu administrative fee adopt .) have read the back than (defined benefit pla solely the liability and r onstitution Article X Se bount can be made from OR PRINT) tification (<i>must be co</i> (<i>mm/dd/yyy)</i>) new employees)	irement Plan (ORP) in ed in accordance wit of this form. I unde an); (2) the benefits esponsibility of the c. 29 (A) and (B), wh the ORP carrier dir ompleted by emp Effective dat (or when this form this period and there	/ AIG) accordance with LS h law, and the emp erstand that (1) I c payable under that designated ORP c ich are printed on ectly to me during bloyer prior to Su the for change of car is received by TRSL, v after will be transferm	A-R.S. 11:921–931. loyer transfer amo an never again b ORP are not the arrier; (3) I heret the back of this r my lifetime. Date signe IbmiSSion to Th TRSL agend TRSL agend rier:	I understand that future unt will be forwarded to recorme a contributing obligation of the State y expressly waive my form; and (4) no lump- d (mm/dd/yyyy) d (mm/dd/yyyy) RSL) cy number (####)
ection 3 — Applicant's hereby make irrevocable applic mployee contributions, less any le ORP carrier designated above nember of the TRSL Regular P f Louisiana or TRSL, but are s ights set forth in Louisiana Cu um payout of the entire acco upplicant's signature (DO NOT TYPE ection 4 — Agency cert rency name	Signature ation for the Optional Retu administrative fee adopt administrative fee adopt administrative fee adopt tan (defined benefit pla tan (defined benefit pla boley the liability and r onstitution Article X Se punt can be made from OR PRINT) (mm/dd/yyy) new employees) ble to participate in the OI	irement Plan (ORP) in ed in accordance wit of this form. J unde benefits j esponsibility of the c. 29 (A) and (B), wh the ORP carrier dir ompleted by emp Effective dat (or when this form this period and there RP according to LSA-R	/ AIG) accordance with LS h law, and the emp erstand that (1) I c payable under that designated ORP c ich are printed on ectly to me during bloyer prior to Su the for change of car is received by TRSL, v after will be transferm	A-R.S. 11:921–931. loyer transfer amo an never again b ORP are not the carrier; (3) I heret the back of this my lifetime. Date signe Ibmission to Th TRSL agend TRSL agend trier:	I understand that future unt will be forwarded to recorme a contributing obligation of the State by expressly waive my form; and (4) no lump- d (mm/dd/yyyy) d (mm/dd/yyyy) RSL) cy number (####)

Current ORP carriers



https://trsl.beready2retire.com





https://www.tiaa.org/public/tcm/louisianaorp

https://www.corebridgefinancial.com/rs/trsl
ORP contributions rates

The total **employer contribution** rate for all employers includes the following:

Transfer Amount: The percentage amount actually transferred to each ORP participant's account; set by law.

• The transfer amount is 6.2%**

Shared UAL: The percentage all employers pay toward the unfunded accrued liability (UAL) and retained by TRSL.

Total ORP Employer Contribution Rate (FY 2024)						
**Transfer Amount	6.2%					
^Shared UAL	20.16%					
Total Employer Contribution Rate	26.4%					

	Contributions transferred to the ORP participant's carrier								
*Employee	7.95%								
**Employer	6.2%								
Total transferred to ORP carrier account	14.15%								

***ORP participants contribute** 8% of salary, less a 0.05% TRSL administrative fee.

******LSA R.S. 11:927 sets the employer portion transfer amount, which cannot be less than 6.2%.

^TRSL retains the UAL portion of the employer's total contribution rate.

ORP salary & contributions limits

Contributions reported/transferred to the ORP carriers are limited to \$66,000 for calendar year 2023

• The limit includes both the employee and employer contribution amounts

Optional Retirement Plan (ORP) Maximum Contribution Limits



Calendar Year	Maximum Annual Contribution (Employer & Employee contributions)
2023	\$66,000
2022	\$61,000
2021	\$58,000
2020	\$57,000
2019	\$56,000
2018	\$55,000

Termination of ORP participants

Do not process an online termination in EMIS for an ORP participant

- Update your agency's software with the termination date for the participant to ensure salary information is no longer reported to TRSL
- When the former employee requests a rollover of his ORP funds, TRSL will contact your agency for a termination date
- TRSL will provide the confirmed termination date to the former employee's ORP carrier to initiate the rollover

INDEX 4.0: Contril	b
CONTENTS	
Contributions & reporting	
Earnable compensation	
Monthly salary &	
contribution reports	
Special cases	
Leave without pay	
Docked by substitute	
Extended sick leave	

Sabbatical leave

EMPLOYER MANUAL 4.0

DEX 4.0: Contribution Reporting & Corrections

January 2023

Contributions and reporting

As a participating TRSL reporting agency, accurate and timely contribution reporting and payments is an important part of your TRSL reporting duties.

This index provides information and instructions for TRSL reporting agencies to accomplish the following:

- withhold employee and employer contributions on all TRSL-eligible earnable compensation
- prepare and submit accurate and timely contribution reports
- remit contributions promptly and review employer account activity to ensure accurate credits, payments, and adjustments for your agency's

Index 4.0: Contribution Reporting & Corrections

Provides information on salary and contribution reporting, including instructions for correcting reported contributions for current and prior years



Office of State Uniform Payroll (OSUP)

The Office of State Uniform Payroll (OSUP) submits salary and contributions information (monthly files) for most state agencies

If your agency is not OSUP-based, you may have the option to enter salary information directly into EMIS or submit a monthly file

Salary Contribution File Submission

This process allows you to submit Salary contributions for immediate posting to TRSL. It is your responsibility to ensure that calculated transmittal totals match your agency totals. If totals do not match, corrections should be made prior to posting. Once totals are verified, Click "Post Contributions" button to post Salary contributions. A message will be displayed to let you know the posting status.

		Agency 0097	1	
		Transmittal Sum	mary	
System	Total Actual Earnings	Total Full Time Earnings	Total Sheltered Contributions	Total Unsheltered Contributions
4	0.00	0.00	0.00	0.00

		Mon	th 🛛 🗸 Year		
				- E-t	
		Mar	nual Salary Contribution		
	SSN	Actual Earnings	Contributions	Full Time Earnings	Cont Type
Add Row					

Monthly contribution payments by OSUP

For most state agencies, the Office of State Uniform Payroll (OSUP) submits monthly employee and employer contribution payments corresponding to the monthly salary/contributions report and the *Payment Distribution Voucher* (Form 4D) to TRSL.

 Payment Distribution Voucher (Form 4D) is required with all payments.

	-	ibution Vouche DR EMPLOYER US			
				10111420	stisi.org
Employer name:				Emple	oyer ID: (####)
fotal remitted: (Amount will	auto-calculate from tot	al contributions in blocks bek))		
\$ 0.00					
	N				
REGULAR PLA	N	1	OPTIONAL RE	IREMENT	PLAN (ORP)
Apply to Mo/Yr (MM/YY)	Туре	Contributions	Apply to Mo/Yr (MM/YY)	Туре	Contributions
Current Year			Current Year		
1.	S - Member	\$	1.	S - Member	\$
2.	U - Member	\$	2.	U - Member	\$
3.	Employer	\$	3.	Employer	\$
4.	I - Employer	\$	4.	I - Employer	\$
Prior Year		\$		TOTAL	\$ 0.0
	S - Member	\$			
	U - Member	\$			
	Employer	\$			
	I - Employer	\$	1		

Additional invoices/actuarial costs

Corrections made to current year and prior year actual earnings may result in additional contributions due

• May result in miscellaneous invoices or actuarial costs to the state agency

Any correction made by a state agency outside of the monthly salary/contributions remittance is the responsibility of the state agency

• Individual state agency will be responsible for submission of payment and the *Payment* Distribution Voucher (Form 4D) to TRSL for these additional costs.

Form 4D should accompany payment and can be submitted by several methods:

- Mail to TRSL's address
- Fax to 225-922-4258
- Email to Form4D@trsl.org

Earnable compensation

Compensation (wages, salary, and other payments) earned by the member during the full normal working time in a position that is TRSL-eligible

All earnable compensation is reported as "Actual Earnings"

- Member and employer contributions must be made on all earnable compensation
- Report contributions in the fiscal year earned (July 1 through June 30)
- Contribution reports and payments are due by the 15th of each month
- Payments made after close of fiscal year should be moved to the correct fiscal year

Types of contributions

This is not an exhaustive list. Contact your Retirement Benefits Analyst Liaison for assistance.

Tax sheltered	Tax unsheltered
 Active members only Employees on workers' compensation and using their sick leave 	 Employees on workers' compensation (contributions via third-party payments) USERRA payments Employer contributions

Contribution rates

Contributions are calculated based on member's gross earnable compensation

Member (employee) portion: 8.0%

Employer portion (subject to change each fiscal year):

- Normal cost: Amount needed to fund benefits accrued in the fiscal year
- Administrative expense rate: Non-investment administrative expenses of TRSL (funded directly beginning in FY 2019)
- **Shared UAL:** Unfunded accrued liability payment

LASERS vs. TRSL contribution rates

Once your contribution report has been posted with salaries reported, TRSL will calculate the employer contribution amount.

		Employee	Employer rate (ER)					
Fiscal year	LASERS/TRSL sub-plans	Employee contribution rate	Normal cost	Admin expense rate	Shared UAL	Total ER		
LASERS	Rank & file employees (prior to 7/1/2006)	7.5%	2 5 0 0 0 %	0.80%	× م ح			
2023-24 Ra	Rank & file employees (on or after 7/1/2006)	8.0%	2.5000%	0.89%	37.92%	41.3%		
	K-12 Regular Plan*	8.0%						
TRSL	Lunch Plan A	9.1%	3.5748%	0.37%	20.16%	24.1%		
2023-24	Lunch Plan B	5.0%						
	Higher Ed Regular Plan	8.0%	2.7880%	0.37%	20.16%	23.3%		

Full-time earnings

Definition (for monthly salary reporting):

• Compensation the employee would have been paid had she/he worked full-time in a TRSL-eligible position *for the entire month*

Must be equal to or greater than actual earnings

- Can never be less than actual earnings
- **Do Not** reduce because the employee is docked or on leave without pay (LWOP)

For part-time employees eligible to contribute to TRSL, the amount should reflect the compensation that the member would have earned if he worked full-time for the entire month

Example: For a two-pay period month – report Full-time Earnings amount equal to two 80-hour bi-weekly paychecks

Identifying Errors from Monthly Salary/Contribution Reports

Two reports available:

- Contribution Exceptions
- Salary Rejections

Both reports should be reviewed and corrected/reconciled each month to ensure accurate and timely membership and salary/contribution reporting.

Contact your assigned Retirement Benefits Analyst Liaison for assistance with these reports.

You may be contacted by an Employer Services Department staff member who is not your assigned liaison on www.TRSL.org

Contribution Exceptions Report

Identifies reporting and enrollment errors

Should be reviewed, cleared, or reconciled each month

Retrieve from the Employer Contribution Charges screen under the Employers menu in EMIS

- Available for **Defined Benefit** retirement plan (System 4)
- Two ways to retrieve report

•2•	ΓR			achers Systen	ı of Lo	uisian	a
H Welcome, Sha Employer: TR	ronl!	mbers	Er	mployers nployer Con nployer Con	tribution Ac		eivable
Query Record System Employer ID Fiscal Year	TRSL - REGULAR Fiscal Year: 2022	E		Contribut	SC BD	ges	
2022	Month		Earnings	Sheltered	Unsheltered	Full-Time	Employer
Select Clear	JUL <u>Error</u>	Transmittal Rejections <u>CCRs</u> Posted	369,165.33 0.00 0.00 369,165.33	25,370.81 0.00 0.00 25,370.81	4,162.34 0.00 0.00 4,162.34	370,346.30 0.00 0.00 370,346.30	93,029.0
Report Type Complete Report ✓ Sort Selection Social Security Number Generate Report	AUG <u>Error</u>	Transmittal Rejections <u>CCRs</u> Posted	444,886.23 0.00 0.00 444,886.23	31,380.45 0.00 0.00 31,380.45	4,210.34 0.00 0.00 4,210.34	444,886.23 0.00 0.00 444,886.23	112,111.
Searches Member Search Beneficiary Search	SEP <u>Error</u>	Transmittal Rejections <u>CCRs</u> Posted	3,143,631.35 0.00 415.22 3,144,046.57	241,623.05 0.00 33.22 241,656.27	9,867.86 0.00 0.00 9,867.86	3,146,647.20 0.00 23,943.20 3,170,590.40	792,299.
Members Member Summary Account History Member Notations	OCT <u>Error</u>	Transmittal Rejections CCRs Posted	3,612,994.15 0.00 0.00 3,612,994.15	277,209.56 0.00 0.00 277,209.56	11,830.26 0.00 0.00 11,830.26	3,620,775.91 0.00 0.00 3,620,775.91	910,474.
Monthly Salary /Contributions Annual Salary History Benefit Payroll Benefit Payee	TOTAL <u>Report</u>	Transmittal Rejections CCRs Posted	7,570,677.06 0.00 415.22 7,571,092.28	575,583.87 0.00 33.22 575,617.09	30,070.80 0.00 0.00 30,070.80	7,582,655.64 0.00 23,943.20 7,606,598.84	1,907,915.

Retrieving the Contribution Exception Report

Click on the last "Error" message on the screen

• Pulls cumulative report sorted by SSN

Employer Contribution Charges

TRSL - REGULAR Fiscal Year: 2023	Employer:						
Month		Earnings	Sheltered	Unsheltered	Full-Time	Employer	
JUL <u>Report</u>	Transmittal	27,573.51	2,205.87	0.00	27,573.51		
	Rejections	0.00	0.00	0.00	0.00		
	CCRs	0.00	0.00	0.00	0.00	6,838.23	
	Posted	27,573.51	2,205.87	0.00	27,573.51		
AUG <u>Report</u>	Transmittal	18,708.91	1,496.70	0.00	18,708.91		
	Rejections	0.00	0.00	0.00	0.00		
	CCRs	0.00	0.00	0.00	0.00	4,639.81	
	Posted	18,708.91	1,496.70	0.00	18,708.91		
SEP <u>Report</u>	Transmittal	18,711.91	1,496.94	0.00	18,711.91		
	Rejections	0.00	0.00	0.00	0.00		
	CCRs	0.00	0.00	0.00	0.00	4,640.55	
	Posted	18,711.91	1,496.94	0.00	18,711.91		
OCT <u>Report</u>	Transmittal	18,715.92	1,497.26	0.00	18,715.92		
	Rejections	0.00	0.00	0.00	0.00		
	CCRs	0.00	0.00	0.00	0.00	4,641.55	
	Posted	18,715.92	1,497.26	0.00	18,715.92		
NOV <u>Error</u>	Transmittal	18,698.90	1,495.90	0.00	18,698.90		
	Rejections	0.00	0.00	0.00	0.00		
	CCRs	0.00	0.00	0.00	0.00	4,637.33	
	Posted	18,698.90	1,495.90	0.00	18,698.90		
TOTAL Report	Transmittal	102,409.15	8,192.67	0.00	102,409.15		
	Rejections	0.00	0.00	0.00	0.00		
	CCRs	0.00	0.00	0.00	0.00	25,397.47	
	Posted	102,409.15	8,192.67	0.00	102,409.15		

Retrieving the Contribution Exception Report

Customized Report

From "Query Record" section of the Employer Contribution Charges screen, choose Report Type & Sort Selection, then click "Generate Report"

Home come, Sharonl!	Members	•	Employers	•	Reports	•	Updates	Log	out	
loyer: TRSL										
Query Recor	ď									
System					Emp	olove	er Coi	ıtribu	tion Char	ges
4						•				0
			- REGULAR				Employer:			
		Fiscal	Year: 2023							
Fiscal Year			Month			Earning	s S	heltered	Unsheltered	Full
2023		JUL	Report	Transmit	tal	890,12	3.05	68,642.00	787.70	9
Select Clea	ar			Rejection	ns	(0.00	0.00	0.00	
				CCRs		(0.00	689.56	0.00	:
				Posted		890,12	3.05	69,331.56	787.70	9
<u>W! Custom R.</u> Help	<u>eport</u>			_						
		AUG	<u>Report</u>	Transmit		1,434,54		111,706.88	1,632.78	1,4
Report Type				Rejection	ns	(0.00	0.00	0.00	
mplete Report	~ \ +			<u>CCRs</u>		-7,25	3.00	-520.24	0.00	-
Sort Selectio				Posted		1,427,28	9.32	111,186.64	1,632.78	1,40
ial Security Nun		SEP	Error	Transmit	tal	3,154,694	4.60	244,596.95	3,887.68	3,2
enerate Rep	ort			Rejection	ns	· · ·	0.00	0.00	0.00	-,_
				<u>CCRs</u>			0.00	0.00	0.00	

Recommend Report Type:

Complete Report

Report Type
Complete Report Active Status
Active Status
Retiree Status
Unknown Name
Enrolled Not Reported
Reported Not Enrolled

Sort Selection

Social Security Number Alphabetically Exception Message

Contribution Exception Report

Layout:

- Sort & filter info
- Number of exception records

red By: No I	M al Security Number	leachers H	Teachers' Retirement System of Louisiana - Regular Plan Contribution Exception Report For Fiscal Year 2022-2023							
IOYET: Start Date	Term Date Statu	s Status Date	Reporting Period	Contrib Type	Actual Earnings	Contribs		Exception Message		
09/13/2021	ACTIVE	09/13/2021	10/2022 11/2022 12/2022					Enrolled not r Enrolled not r Enrolled not r	eported.	

Tip: Exception records will delete from report upon each online correction/update

Retrieving salary rejections

Review Employer Contribution Charges screen in EMIS after posting your monthly salary/contributions report for the Regular Plan (System 4).

Click on "Show Rejections" button near top of screen.

• Screen will update and display rejected records at bottom of screen in calendar month order.



Employer Contribution Charges

FRSL - REGULAR Fiscal Year: 202	-		Employer Show Re			
Month		Earnings	Sheltered	Unsheltered	Full-Time	Employer
JUL <u>Report</u>	Transmittal	436,756.59	36,967.58	0.00	436,756.59	
	Rejections	-25,338.00	0.00	0.00	-25,338.00	
	CCRs	-13,946.60	-1,115.70	0.00	-13,946.60	111,140.70
	Posted	448,147.99	35,851.88	0.00	448,147.99	
AUG <u>Error</u>	Transmittal	296,215.61	23,697.21	0.00	296,215.61	
	Rejections	0.00	0.00	0.00	0.00	
	CCRs	0.00	0.00	0.00	0.00	73,461.4
	Posted	296,215.61	23,697.21	0.00	296,215.61	
SEP Error	Transmittal	286,849.72	22,896.91	0.00	287,142.20	
	Rejections	0.00	0.00	0.00	0.00	
	CCRs	0.00	0.00	0.00	0.00	71,138.73
	Posted	286,849.72	22,896.91	0.00	287,142.20	

	Salary Rejections										
Month/Year	Nonth/Year SSN Actual Sheltered Unsheltered FullTime Error Me Earnings Contributions Contributions Earnings										
07/2022		-25,338.00	0.00	0.00	-25,338.00	TRANSACTION ALREADY RECEIVED					
	TOTAL:	-25,338.00	0.00	0.00	-25,338.00						

Salary rejections

Rejections remain on the report and do not fall off, even after correction.

Salary Rejections										
Month/Year	SSN	Actual Earnings	Sheltered Contributions	Unsheltered Contributions	FullTime Earnings	Error Message				
07/2022		-25,338.00	0.00	0.00	-25,338.00	TRANSACTION ALREADY RECEIVED				
	TOTAL:	-25,338.00	0.00	0.00	-25,338.00					

Reconciling rejections

Common rejection types

Reminder: rejections remain on the report and do not fall off, even after correction



Clearing exceptions & rejections

Online updates in EMIS

- Enrollments Contact assigned Accountant Liaison
- Terminations
- Contribution Correction (current fiscal year only)
- Prior Year Salary Correction (previous fiscal year)

Must have specific access rights designated on Authorized Contacts (Form 1)



(Online) Contribution Corrections

Corrects salary reporting in the current fiscal year

• Add, edit/change, or delete monthly salary postings reported

	Contribution Correction										
 Click 'Edit' or 'A Enter the actual the month. If only changing and enter Enter the actual Adding zeroes can and full-time earn Click 'Delete' o Click 'Cancel' to 	or using Contribu- add' in the first colum al earnings and full-ti y actual earnings OR f er the new amount fo al earnings and full-ti n only be done for Jul nings. Full-time earning r 'Delete Zeros' to del o undo changes enter	n to open the line for me earnings and clic full-time earnings is r the field that is ch me earnings and clic y, August and June i ngs are required for ete the posting for t ed or to return to th	or editing. ck 'Replace' if replaci changing, enter the anging. ck 'Add' or 'Add Zeros' n which 0.00 should I the rest of the mont che month. a initial display.	ng data that has bee same amount for the if adding a posting f be entered for the a hs.	e field not for the month. ctual earnings						
7. Contribution Ty	6. Enter actual earnings and full-time earnings with the decimal. For example, to enter \$10 key in 10.00.7. Contribution Type "30" is for sheltered contributions and Contribution Type "10" is for unsheltered contributions.ActualFull-TimeContributionContribution										
Edit	Earnings 2736.00	Earnings 2736.00	Amount 218.88	Type 30	<u>Delete</u>						

(Online) Prior Year Salary Corrections

Use to correct prior year actual earnings, contributions, and full-time earnings

- Must enter annual actual earnings and full-time earnings for a prior (closed) fiscal year
- Must use Reason drop-down box and/or Comment field for both Salary Correction Comment and Salary Correction Full-Time Comment

SSN:					Employe	er ID:	
Name					Fiscal \	/ear: 2015	
System:	4						
ntribution Type			Contribution Amount	Full Time Earnings	Service Credit	Comm	ent
hettered	Primary	16,861.02	1,548.88	15,851.02	.48		
						ombined full-time earnings of	
ir you uu	not want to	change posted	Sheltered value	es when addin	g Unshelter	ed, leave the Sheltered actu	al earnings box empty.
n you uu	_	eltered:		es when addin ual Earnings		Full-Time Earnings	al earnings box empty. Delete Posting
	_	eltered:					
L	Sh JAdd Unsh	eltered:	Act				
structio	Sh Add Unsh	eltered: eltered: sing 100% Sw	Act	ual Earnings			Delete Posting
structic To execu	Sh JAdd Unsh ons for us te a 100% o	eltered: eltered: sing 100% Sw	Act	ual Earnings		Full-Time Earnings	Delete Posting
structic To execu	Sh JAdd Unsh ons for us te a 100% c witch	eltered: eltered: ing 100% Sw ontribution type	Act	ual Earnings		Full-Time Earnings	Delete Posting
L structic To execu] 100% S	Sh JAdd Unsh ons for us te a 100% o witch Salary	eltered: eltered: fing 100% Sw ontribution type y Correction Co	Act ritch: e switch from Sl mment	ual Earnings	nsheltered, o	Full-Time Earnings	Delete Posting
structic To execu 100% S structic	Sh JAdd Unsh ons for us te a 100% o witch Salary ons for us	eltered: eltered: ing 100% Sw ontribution type y Correction Co sing Salary C	Act ritch: e switch from Sl mment	ual Earnings	nsheltered, o	Full-Time Earnings	Delete Posting
structio To execu] 100% S structic Select a	Sh JAdd Unsh ons for us te a 100% o witch Salary ons for us reason for t	eltered: eltered: ing 100% Sw ontribution type y Correction Co sing Salary C the correction.	Act itch: e switch from Si mment comment:	ual Earnings heltered to Ur	insheltered, o	Full-Time Earnings	Delete Posting
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Terminations

Enter a termination date for employee who:

- Resigns **or**
- Is approved for TRSL disability retirement



Update within 30 days of the member's last day of work (or last day of official leave)

- Termination dates do not have to be the same for TRSL and insurance coverage
- Use MM/DD/YYYY format

Reminder: <u>**Do Not**</u> enroll and term with the same date



EMPLOYER MANUAL 6.0

INDEX 6.0: Service Credit Certifications/Corrections

September 2022

The information presented in this index describes the following:

- What is service credit?
- How to identify records requiring service credit certification
- How to certify service credit/certify questionable years

Related terms and definitions

Employers should be familiar with the following terms and definitions as it relates to TRSL service credit:

• Actual earnings: All earnings paid to a member meeting the definition of earnable compensation in accordance with LSA R.S. 11:701(10). (See "Earnable compensation" section of Index 4.0 for more information and instructions)

Index 6.0: Service Credit Certifications/ Corrections

CONTENTS

What is service credit

Related terms & definitions

Service credit formula

Impact of service credit

What is a questionable year

Identifying records that require service credit

certification

Provides instructions for identifying and correcting records requiring service credit certification

Adjunct Certification

Service credit certifications/

QY certification procedures

Common errors to avoid

Full-time only corrections

Actuarial cost for full-time

How to read account history

How to certify service credit

Letter

corrections

only corrections

Percent (%) effort:

- Percent effort for Adjunct Professors: The percentage of credit hours or classes taught per semester. For example, if the number of credit hours considered full-time per semester is 12 and someone teaches 6 credit hours, their percent effort is 50% (6 credit hours divided by 12 credit hours)
- Percent effort for all other positions: The percentage of a full day an employee is scheduled to work. For example, if someone is scheduled to work 5 hours per day and 7 hours is considered a full day, then their percent effort is 71% (5 hours divided by 7 hours = 0.71)
- Questionable year: A fiscal year whose service credit requires certification.

6.0 - Svc Credit Certifications www.TRSL.org • 1-877-ASK-TRSL • web.master@trsl.org

Terms/definitions

- **Questionable year:** A fiscal year record that meets one of TRSL's criteria to require service credit certification or correction
- Actual earnings: All earnings during a specified fiscal year earned by a member that meets the definition of earnable compensation
- Full-time earnings: Total compensation amount that would be payable if the employee worked full-time for the entire fiscal year in a TRSL-covered position plus any extra earnings
- Service credit: A measure of the number of years a member has worked and contributed to TRSL per the service credit formula

Terms/definitions (cont'd)

Service credit formula:

- Actual earnings / Full-time earnings = Service credit for benefit computation
- Service credit for benefit computation / % effort = Service credit for eligibility

Percent (%) effort formula:

• # hours worked / # hours in a full workday

Example: Employee works 5 hours per day; normal full-time is 8 hours per day; 5/8 hours = 63% effort

Retrieving Questionable Years Report

Updates Reports Logo Active/Active DROP Member Service Agencies Without Charges Annual Leave Checklist Status Contribution Exception Employer Payments Employer Delinguent Contributions Employer Statements Enrolled Not Reported Ending DROP Participation Furloughed Employees Certification Insurance/Voluntary Deduction Members Eligible to Retire ORP Statements **Ouestionable Years Ouestionable Year Statistics for All Fiscal Years** Reporting Not Enrolled Sick Leave Sick Leave Errors



Questionable Years Report

The Questionable Years Report generates a list of members who have questionable years requiring certification. There are five options for creating reports and four different ways to sort the report.

- Option 1: Retirement Actions Pending This report will list questionable years for which TRSL has requested certification via a Questionable Years Letter. This report will primarily consist of members presently going through the retirement process or approaching retirement eligibility.
- Option 2: All Outstanding Questionable Years This report will list all outstanding questionable years for your agency. A Retirement Actions Pending section will be listed at the front of the report.
- Option 3: Fiscal Years Less Than/Equal to 3 Years Old This report will list all outstanding questionable years less than or equal to three years old from the current fiscal year. A Retirement Actions Pending section will be listed at the front of the report only for fiscal years less than or equal to 3 years old.
- Option 4: Fiscal Years Greater than 3 Years Old This report will list all outstanding questionable years greater than three years old. A Retirement Actions Pending section will be listed at the front of the report only for fiscal years greater than 3 years old.
- Option 5: By Fiscal Year This report will list all outstanding questionable years for a range of fiscal years or a single fiscal year of your choosing.

Questionable Years Report

New records added after the close of each fiscal year (approx. August 1)

• Certify/correct each record within three years to avoid actuarial charges to your agency

Date: 8/5/2021 Time: 12:55:47PM	I			Teachers' Re	tirement Syste Questionable Yea	m of Louisiana ^{rs}				1 of 2 haronl
This report contains a	all outstanding question	nable years	sorted by re	ason code.						
Current Count 17 a Original Count 417					Employer: 96% Comple	te				
Description of Reason 1 Annual salary is more than 5% decrease from previous year 2 1st year of employment for an employer / 1st year of employment after DROP 3 Changed employer / Terminated during the fiscal year Please update/verify enrollment and/or termination date(s) 4 Partial year of service credit not previously certified 5 (P/T) Possible part-time employment (may receive additional eligibility credit)										
ame	Sys	SSN	Fiscal Year	Status	Date of Employment	Date of Termination	Actual Earnings	Full-Time Earnings	Service Credit	Reason for Questioning Year
	4		2021	ACTIV-DROP	07/01/2020		108,869.63	108,869.63	1.00	2
	4		2021	ACTIVE	04/27/2015		60,744.41	61,612.84	0.99	4
	4		2021	ACTIVE	10/09/2017		57,308.99	62,311.48	0.92	4
	4		2021	ACTIVE	10/05/2015		30,586.11	32,089.39	0.95	4
	4		2021	ACTIVE	07/11/2016		31,842.10	32,089.35	0.99	4
	4		2021	ACTIVE	01/14/2019		25,603.79	30,425.74	0.84	1,4
	4		2021	ACTIVE	03/12/2018		51,267.48	63,690.76	0.80	1,4
	4		2021	ACTIVE	05/20/2015		22,379.27	62,325.89	0.36	1,4
	4		2021	ACTIV-DROP	06/10/2021		288.48	288.48	0.01	2,4
	4		2021	ACTIVE	01/14/2019	10/18/2020	21,666.22	21,666.22	0.27	3,4
	4		2021	ACTIVE	07/01/2019	04/02/2021	23,974.24	24,432.81	0.80	3,4

How to certify questionable years

Three online processes:

- Full-Time Only Corrections: Use when incorrect fulltime earnings reported or service credit is incorrect
- Questionable Year Certification: Use when service credit, actual earnings, and full-time earnings reported are correct and reasonable
- **Prior Year Salary Corrections:** Use when incorrect actual earnings reported

Must have access rights designated on Authorized Contacts (Form 1)

Updates *	Submit Files 🔹
Annual Leave Upd	late
Contribution Corr	ection
Enrollments	
Full-Time Only Co	rrections
Home Address Up	date
Journal Entry Rev	riew
ORP Salary Entry ((up to 25 employees on
Prior Year Salary	Corrections
Questionable Yea	r Certification
Sick Leave Days P	aid Update
Sick Leave Add ar	nd/or Update

Full-Time Only Corrections

Updates service credit

- Must provide correct Full-time Earnings amount
- Use Reason drop-down box or enter Comment



Full-Time Only Corrections

Name:	SSN: Employer: BD Name: Fiscal Year: 2017 System: 4										
Contribution Type	Employer Indicator	Actual Earnings	Contribution Amount	Full Time Earnings	Service Credit						
Sheltered											

Instructions for using Full-Time Only Corrections:

The information as reported to TRSL for the fiscal year is displayed above.
 Full-time earnings is the compensation that would be payable if the employee worked full-time for the full normal

working period. Full-time earnings equal an employee's full-time base pay (regardless of whether or not this amount is actually paid) plus any additional payments made to the employee (i.e., PIP summer school, overtime, stipends, cash house allowances, coaching supplements, sales tax, bonuses and any other monies paid to a member over and above his or her base pay defined as earnable compensation by LSA-R.S. 11:701(10)). Full-time earnings for part-time employees is the same as full-time employees. Full-time earnings must be equal to or greater than actual earnings.
3. If the fiscal year you are correcting has service credit LESS THAN 1.00 and the service credit should be 1.00, because the member's actual and full-time amounts are correct and are the same, you MUST enter the SAME full-time earnings, which will divide actual by full-time and update that fiscal year to 1.00.
4. If the fiscal year has service credit of 1.00 and you enter the same full-time earnings that is already on the database, you will receive an error "New full-time is equal to reported. Enter a corrected full-time amount." This process will also mark the year with asteriks as CERTIFIED.
5. Select a reason for the correction.
6. A comment can be added for additional information needed to clarify the correction. The comment is optional unless a

reason is not chosen in which case the comment is required.

7. Click the 'Submit' button to submit the correction.

8. NOTE: The correction of an authorized signer's personal TRSL member account must be completed by another authorized signer at the agency.

Full-Time Earnings:	
Reason:	V
Comment:	
	Submit

EXAMPLE: Full-Time Only Correction

Record appears on the Questionable Years (QY) report EXAMPLE: New hire as of 10/23/2019

- Ensure Actual Earnings reported are correct
- Need correct Full-time earnings (FTE) to clear the questionable year record

Questionable year reason codes

- 1. Annual earnings decreased more than 5% from previous year
- 1st year of employment for an employer / 1st year of employment after DROP
- 3. Changed employers during the fiscal year and/or break in service
- 4. Partial year of service credit not previously certified

Name	Sys	SSN	Fiscal Year	Status	Date of Employment	Date of Termination	Actual Earnings	Full-Time Earnings	Service Credit	Reason for Questioning Year
DOE JOHN	4		2020	ACTIVE	10/23/2019		28,630.50	28,630.50	0.71	2,4

Tip: Never rely on Full-time earnings appearing on QY report or TRSL EMIS Screens. Always research correct FTE.

EXAMPLE: Full-Time Only Correction



COMMON ERRORS: Full-time earnings

- Not including extra earnings (overtime, lump sum payments, etc.) in full-time earnings
- Entering full-time earnings amount for a period of time less than a full fiscal year (Example: Only entering the full-time earnings amount for January – June if member was hired in January)
- Changing the full-time earnings by \$0.01 if the actual and full-time earnings are both correct but the service credit is incorrect
- Not prorating the full-time earnings when a member has multiple rates of pay or a change in pay during the fiscal year (contact your assigned retirement analyst liaison for assistance)

COMMON ERRORS: Part-time employment certification

- Selecting "Part-time Employee" for someone who worked full-time but only worked a portion of the year
- Selecting "Part-time Employee" but not including the percent effort in the comment field

	Salary Correction Full-Time	
Instruction	ns for using Full-Time Comment:	
 Select a re A comment to clarify the 	or Primary when the Full-Time is different ason for the full-time change. t can be added for additional information change. The comment is optional unless a in which case the comment is required.	needed
Reason:		
Comment:	Full-Time not previously reported 1st Year of Employment After DROP	
	1st Year of Employment	
	Last Year of Employment	
	Official Leave (Other than Sabbatical)	
	Sabbatical at Reduced Pay Extra Earnings	
	Workers' Compensation	
	Summer School Earnings	
	Full-Time Earnings Under/Over-stated	
	Part-time Employee	
12 1 2	Subsitute Earnings	

COMMON ERRORS: Miscellaneous

- Not providing correct start or termination date in comment field if correct dates have not previously been reported
- Reporting rollover earnings via a Full-time Only Correction (Rollover earnings should be moved to the year in which they were earned/accrued via a Prior Year Salary Correction)

Salary Correction Comment		
Instructions for using Salary Comment:		
1. Select a reason for the correction.		
2. A comment can be added for additional information needed		
to clarify the correction. The comment is optional unless a		
reason is not chosen in which case the comment is required.		
Reason: Earnings reported in July but earned in June V		
Comment:		
Questionable Year Certification

Does not update service credit; certifies reported data is correct as is

- Must select Reason from drop-down box or enter Comment
- If applicable, you must select "Part-time Employee" from the "Reason" dropdown list and enter the percent effort in the comment field for member to receive correct service credit for eligibility

Questionable Year Certification

SSN:	Employer: A BD
Name:	Fiscal Year: 2016
System: 4	

Contribution Type	Employer Indicator	Actual Earnings	Contribution Amount	Full Time Earnings	Service Credit	
Sheltered	Primary	55,468.24	4,437.44	55,468.24	1.00	QUESTIONABLE YEAR

Instructions for using Questionable Year Certification:

1. The information as reported to TRSL for the fiscal year is displayed above.

2. This certification will only update the record with asterisks to certify the data reported is correct. <u>IT WILL NOT CHANGE</u> <u>SERVICE CREDIT</u>. The FULL-TIME ONLY CORRECTIONS must be used if service credit should be updated.

3. Select a reason for the certification.

4. A comment can be added for additional information needed to clarify the certification. The comment is optional unless a reason is not chosen in which case the comment is required.

 $5. \ {\rm Click} \ {\rm the} \ {\rm Certify'} \ {\rm button} \ {\rm to} \ {\rm submit} \ {\rm the} \ {\rm certification}.$

6. NOTE: The certification of an authorized signer's personal TRSL member account must be completed by another authorized signer at the agency.

		Reason: [Comment: [✓	
Reason:					
Comment:	1st ye	ously reported information ear of employment after DF		Certify	
		ar of employment ear of employment			
	Officia	al leave (other than sabbat	tical)		
	1	atical at reduced pay earnings			
	Worke	ers' compensation			
	1	ner school earnings ime employee			
	1	itute earnings only			

EXAMPLE: Questionable Year Certification

Record appears on the Questionable Years report

- **Example:** New hire as of 07/01/2019; need certification for 1st year of employment (FY 2020)
- Per employer's research, employee has worked the entire year and had no dockages or leave without pay (LWOP) during FY 2020; both Actual Earnings and Full-time earnings previously reported are correct.

Questionable year reason codes

- 1. Annual earnings decreased more than 5% from previous year
- 1st year of employment for an employer / 1st year of employment after DROP
- 3. Changed employers during the fiscal year and/or break in service
- 4. Partial year of service credit not previously certified

Name	Sys	SSN	Fiscal Year	Status	Date of Employment	Date of Termination	Actual Earnings	Full-Time Earnings	Service Credit	Reason for Questioning Year
DOE JANE	4			ACTIVE	07/01/2019		58,406.14	58,406.14	1.00	2

EXAMPLE: Questionable Year Certification



Prior Year Salary Corrections

Updates service credit

- Must enter <u>both</u> correct actual earnings and full-time earnings amounts
- Must use reason drop-down box and/or comment field for both Salary Correction
 Comment and Salary Correction Full-Time
 Comment
- If correction increases earnings/contributions and service credit and/or final average comp for fiscal years more than three (3) years old,
 \$150 fee required, increasing to \$200 on 1/1/2024

SSN: Name: System:				Employer ID: 5C BD Fiscal Year: 2017							
Contribution Type	Employer Indicator	Actual Earnings	Contribution Amount	Full Time Earnings	Service Credit	Comm	ent Second				
Sheltered	Primary	11,878.92	950.32	12,098.12	0.32 QU	ESTIONABLE YEAR					
2. Click "Del 3. Click "Add	ete Posting Unsheltere	" to delete the S ed" to open the	heltered postin Unsheltered line	ig for the yea e for editing.	r. Enter the c	ing Sheltered data that has b combined full-time earnings o red, leave the Sheltered actu:	n the Sheltered line.				
	Sh	eltered:	Act	ual Earnings	•	Full-Time Earnings	Delete Posting				
	Add Unsh	eltered:									
	te a 100% c witch	sing 100% Sw contribution type correction Co	e switch from Sl	heltered to Ur	nsheltered,	click the "100% Switch" box o Salary Correction	·				
Instructi		sing Salary (11	Instru	ictions for using Full-T	and the second second second				
1. Select a 2. A comm	reason for ent can be a ne correctio	the correction. added for addition. The commen n which case the	onal informatio t is optional un	less a	1. Requ 2. Selec 3. A co to clari	uired for Primary when the FL ct a reason for the full-time or mment can be added for addi fy the change. The comment chosen in which case the com	III-Time is different. change. itional information need is optional unless a reas				

EXAMPLE: Prior Year Salary Correction

SSN: Name: System:		R				ployer ID: BD scal Year: 2017
Contribution Type	Employer Indicator	Actual Earnings	Contribution Amount	Full Time Earnings	Service Credit	
Sheltered	Primary	11,878.92	950.32	12,098.12	0.32	QUESTIONABLE YEAR
4. H you uo		eltered:		ual Earnings 14678.92	_	Full-Time Earnings Delete Posting 42750 □
	te a 100% c	sing 100% Sw contribution type		heltered to Ui	nshelter	red, click the "100% Switch" box only.
	Salar	y Correction Co	omment			Salary Correction Full-Time
Instructi		sing Salary (Inst	structions for using Full-Time Comment:
1. Select a 2. A comm to clarify th	reason for ent can be ne correctio	the correction. added for additi on. The commen n which case the	onal informatio t is optional un	less a	2. S 3. A to d	Required for Primary when the Full-Time is different. Select a reason for the full-time change. A comment can be added for additional information needed clarify the change. The comment is optional unless a reason not chosen in which case the comment is required. Reason:

EXAMPLE: Prior Year Salary Correction

- Must provide correct total Actual Earnings & Full-time Earnings earned for the specified fiscal year
- Move rollover earnings to correct fiscal year if employee worked less than entire year for 1st year or last year of employment.

		Р	rior Ye	ar Sala	ry (Correctio	ons	
SSN:					Emp	loyer ID:	SC BD	
Name:					Fise	al Year: 2017		
System:	: 4							
Contribution Type	Employer Indicator	Actual Earnings	Contribution Amount	Full Time Earnings	Service Credit		Comme	nt ec.l
Sheltered	Primary	11,878.92	950.32	12,098.12	0.32	QUESTIONABLE YE		vided correct Full-
1. Enter the 2. Cli Ag	actual earni ency ente	ered correct	Actual	d click "Submit ng for the year		lacing Shelterec	time (amount if entire fiscal	e Earnings employee worked year as a full-time + any extra pays)
4. If 1		(fiscal year t eltered: eltered:			g Unshe	ltered, leave the		l earnings box empty. Delete Posting

EXAMPLE: Prior Year Salary Correction

Agency must complete both the Salary Correction Comment and Salary Correction Full-Time sections.



ROLLOVER EARNINGS

June earnings reported in July

Due to biweekly pay, some June earnings will be reported on the first paycheck(s) in July.

- These earnings are rollover earnings
- Earnings should be reported when earned, not when paid.

Agency should process an online Contribution Correction to remove the rollover earnings from the current fiscal year and submit a Prior Year Correction to add the rollover earnings into the prior fiscal year

OSUP payroll calendars

	1	rear 2022	z Pay Per	lous	
Pay Period	From	То	Check Date	Insurance Month	FI Posting
1	12/27/2021	01/09/2022	01/14/2022	February	01/12/2022
2	01/10/2022	01/23/2022	01/28/2022	rebidary	01/26/2022
3	01/24/2022	02/06/2022	02/11/2022	March	02/09/2022
4	02/07/2022	02/20/2022	02/25/2022	March	02/23/2022
5	02/21/2022	03/06/2022	03/11/2022	April	03/09/2022
6	03/07/2022	03/20/2022	03/25/2022	Дрії	03/23/2022
7	03/21/2022	04/03/2022	04/08/2022	May	04/06/2022
8	04/04/2022	04/17/2022	04/22/2022	iviay	04/20/2022
9	04/18/2022	05/01/2022	05/06/2022	June	05/04/2022
10	05/02/2022	05/15/2022	05/20/2022	ouno	05/18/2022
11	05/16/2022	05/29/2022	06/03/2022	July	06/01/2022
12	05/30/2022	06/12/2022	06/17/2022	-	06/15/2022
13	06/13/2022	06/26/2022	07/01/2022	August	0 dys _{07/01/2022}
14	06/27/2022	07/10/2022	07/15/2022	6/2	27 - 6/30 = 4 dys
15	07/11/2022	07/24/2022	07/29/2022	Free	07/27/2022
16	07/25/2022	08/07/2022	08/12/2022	September	08/10/2022
17	08/08/2022	08/21/2022	08/26/2022	Coptonibol	08/24/2022
18	08/22/2022	09/04/2022	09/09/2022	October	09/07/2022
19	09/05/2022	09/18/2022	09/23/2022	000000	09/21/2022
20	09/19/2022	10/02/2022	10/07/2022	November	10/05/2022
21	10/03/2022	10/16/2022	10/21/2022	Hovember	10/19/2022
22	10/17/2022	10/30/2022	11/04/2022	December	11/02/2022
23	10/31/2022	11/13/2022	11/18/2022	December	11/16/2022
24	11/14/2022	11/27/2022	12/02/2022	January	*11/30/2022
25	11/28/2022	12/11/2022	12/16/2022	January	12/14/2022
26	12/12/2022	12/25/2022	12/30/2022	Free	12/28/2022

Year 2022 Pay Periods

* Indicates payroll posting completed in a different month from payday.

** Indicates payroll posting completed on Friday instead of the normal Wednesday.

Year 2023 Pay Periods

Pay Period	From	То	Check Date	Insurance Month	FI Posting
1	12/26/2022	01/08/2023	01/13/2023	February	01/11/2023
2	01/09/2023	01/22/2023	01/27/2023	rebluary	01/25/2023
3	01/23/2023	02/05/2023	02/10/2023	March	02/08/2023
4	02/06/2023	02/19/2023	02/24/2023	March	02/22/2023
5	02/20/2023	03/05/2023	03/10/2023	April	03/08/2023
6	03/06/2023	03/19/2023	03/24/2023	- Abril	03/22/2023
7	03/20/2023	04/02/2023	04/07/2023	May	04/05/2023
8	04/03/2023	04/16/2023	04/21/2023	Way	04/19/2023
9	04/17/2023	04/30/2023	05/05/2023	June	05/03/2023
10	05/01/2023	05/14/2023	05/19/2023	Julie	05/17/2023
11	05/15/2023	05/28/2023	06/02/2023	July	*05/31/2023
12	05/29/2023	06/11/2023	06/16/2023	outy	06/14/2023
13	06/12/2023	06/25/2023	06/30/2023	Free	06/28/2023
14	06/26/2023	07/09/2023	07/14/2023	August 6/26	6 - 6/30 = 5 dys
15	07/10/2023	07/23/2023	07/28/2023		07/26/2023
16	07/24/2023	08/06/2023	08/11/2023	September	08/09/2023
17	08/07/2023	08/20/2023	08/25/2023	ooptombol	08/23/2023
18	08/21/2023	09/03/2023	09/08/2023	October	09/06/2023
19	09/04/2023	09/17/2023	09/22/2023	00000	09/20/2023
20	09/18/2023	10/01/2023	10/06/2023	November	10/04/2023
21	10/02/2023	10/15/2023	10/20/2023	November	10/18/2023
22	10/16/2023	10/29/2023	11/03/2023	December	11/01/2023
23	10/30/2023	11/12/2023	11/17/2023	December	11/15/2023
24	11/13/2023	11/26/2023	12/01/2023	January	*11/29/2023
25	11/27/2023	12/10/2023	12/15/2023	January	12/13/2023
26	12/11/2023	12/24/2023	12/29/2023	Free	12/27/2023

Indicates payroll posting completed in a different month from payday.

June enrollments with no earnings posted

Step 1: Contribution Correction update (if current fiscal year) or Prior Year Salary Correction (if prior fiscal year) to remove \$ earned in June, but paid/posted in July from fiscal year following enrollment

Step 2: Prior Year Salary Correction to add rollover amount removed from Step 1 to fiscal year of enrollment

 Will need to provide full-time earnings member would have made had they worked July 1 – June 30

Teachers' Retirement	System of Louisiana	€ www.rsl.org
August 16,		Baton Rouge LA 70804-9 03 - 6 Empr #I
Re		
SSN:		
Dear Employer:		
	required in order to continue processing o TRSL with the information requested	
Enrollment date was 06/2 be applied until earnings	21/2021 but no earnings were posted fo are posted	or FY 2021, No service credit will
reported with the July 202	Correction of earnings and contribution 21 posting, please process a CCR to re 11 with a Prior Year Correction and plea 5 for FY 2021	emove those earnings and add
If Enrollment date is inco then sign & date form & r	rrect, please provide TRSL will a correc eturn to TRSL	ct date
Signature	Date	
If you have any question	s, please contact Anthony Zeringue at ((225) 925-6407.
Sincerely,		
Employer Services Depa Teachers' Retirement Sy		

• Member was enrolled in TRSL on 6/27/2022, no earnings reported in FY 2022.

Step 1: Earnings from 6/27 -6/30/2022 reported in July 2022 (current fiscal year).

- June amount \$1,003.30 to be moved from July 2022 (current Fiscal Year 2023).
- An online Contribution Correction is needed to subtract \$1,003.30 from current July 2022 amount reported.

		Acc	count History	
		No account his	tory found for this r	nember.
				Process ID Legend
System: Name:	SSN:			Status: Status Date:
		En	nployment History	
Empr ID	Emp Ind	Employer Name	RTW Type	Employment Dates
				06/27/2022 to 99/99/9999

		i y Salar y/CO	ntributions		
tem: 4 SSN: 4 cal Year: 2023 mary Employe		%	Name: 5 Year Employed:100.00%		
Month	Actual Earnings	Fulltime Earnings	Contributions	Ехр	Rec
			101.00		2
Jul	5,016.62	5,016.62	401.32	3	3

• Member was enrolled in TRSL on 6/27/2022, no earnings reported in FY 2022.

Step 1 (cont'd): Online Contribution Correction is processed to remove \$ reported in July of current fiscal year, but earned in previous fiscal year.

 Earnings from 6/27/2022 – 6/30/2022 in this example – reduce July by \$1,003.30

			Со	ntribution Co	orrections		
Month/Year	Type	Oper	Earnings	Contributions	Fulltime	Adjusted Earnings	Adjusted Contributions
07/2022	30 Posted o	R on 02/13/202	4,013.32 3 by EMPR	321.07	4,013.32	-1,003.30	-80.25

Contribution Correction					
System: 4 SSN: Name:		Repo	Employer: Fiscal Year: 20 orting Month/Year: 07		
	Actual Earnings	Full-Time Earnings	Contribution Amount	Contribution Type	
Edit	5016.62	5016.62	401.32	30	<u>Delete</u>

	Actual	Full-Time	Contribution
	Earnings	Earnings	Type
<u>Replace</u> <u>Cancel</u>	5016.62	5016.62	30

	Actual	Full-Time	Contribution
	Earnings	Earnings	Type
<u>Replace</u> Cancel	4013.30	4013.30	30

• Member was enrolled in TRSL on 6/27/2022, no earnings reported in FY 2022

Step 2: A Prior Year Salary Correction is processed to report earnings removed in *Step 1* to add June earnings to correct fiscal year.

 June earnings removed from FY 2023 was \$1,003.30. A Prior Year Salary Correction is processed to add \$1,003.30 to FY 2022 to reflect earnings for 6/27 – 6/30/2022 in this example.

Add

2022,		Prior Year Salary	Corrections
	SSN: Name: System: 4		nployer ID: iscal Year: 2022
	, ,	g Prior Year Salary Corrections:	
		tered and/or Unsheltered line to add a manua nings on contribution line(s) being added.	al posting for that contribution type.
I	Add	Actual Ea Sheltered:	arnings Full-Time Earnings
		Unsheltered:	
	Full-time Earnings-the con period. Full-time earnings any additional payments n supplements, sales tax, bo earnable compensation by	npensation that would be payable if the emp equal a member's full-time base pay (regard hade to the member (i.e., PIP, summer schoo onuses, and any other monies paid to a mem r LSA-R.S. 11:701(10). Full-time earnings for e equal to or greater than actual earnings. Fi	pensation" in accordance with LSA-R.S. 11:701(10). ployee worked full-time for the full normal working dless of whether or not this amount is actually paid) plus ol, overtime, stipends, cash house allowances, coaching ber over and above his or her base pay defined as part-time employees is the same as full-time employees ulltime earnings shall never be less than actual earnings
		Actual Earnings	Full-Time Earnings
Sheltere	d:	1003.30	65216
nsheltere	d:		

Salary Correction Comment

Instructions for using Salary Comment:

1. Select a reason for the correction.

 A comment can be added for additional information needed to clarify the correction. The comment is optional unless a reason is not chosen in which case the comment is required.

Reason: Earnings reported in July but earned in June V

Comment: Rollover from July 2022

Salary Correction Full-Time					
Instructions for using Full-Time Comment:					
1. Required for Primary when the Full-Time is different.					
2. Select a reason for the full-time change.					
3. A comment can be added for additional in	nformation needed				
to clarify the change. The comment is optional unless a					
reason is not chosen in which case the comment is required.					
Reason: 1st Year of Employment	~				

Comment: 12 mo

Earnings reported in July but earned in June Overstated Salaries/Contributions Understated Salaries/Contributions Audit Compliance Date of Retirement Changed Sheltered/Unsheltered switch Full-Time not previously reported 1st Year of Employment After DROP 1st Year of Employment Last Year of Employment Official Leave (Other than Sabbatical) Sabbatical at Reduced Pay Extra Earnings Workers' Compensation Summer School Earnings Full-Time Earnings Under/Over-stated Part-time Employee Subsitute Earnings

• Member was enrolled in TRSL on 6/27/2022, no earnings reported in FY 2022

Step 2 (cont'd): A Prior Year Salary Correction is processed to add \$ earned for FY 2022.

 Earnings from 6/27/2022 – 6/30/2022 in this example is \$1,003.30

SSN: Employer ID:					
Name:	Name: Fiscal Year: 2022				
System: 4					
Instructions for us	ing Prior Year Salary Corr	ections:			
			for that contribution to me		
	Sheltered and/or Unsheltered line earnings on contribution line(s) b		for that contribution type.		
Add		Actual Earnings	Full-Time Earnings		
	Sheltered:	1003.30	65216		
	Unsheltered:				
Full-time Earnings-the period. Full-time earni any additional paymen supplements, sales tax earnable compensatior	compensation that would be pay ngs equal a member's full-time t ts made to the member (i.e., PIF , bonuses, and any other monies n by LSA-R.S. 11:701(10). Full-tir	vable if the employee work base pay (regardless of wh c, summer school, overtime paid to a member over ar ne earnings for part-time	in accordance with LSA-R.S. 11:7 ked full-time for the full normal v ether or not this amount is actua e, stipends, cash house allowance nd above his or her base pay defi employees is the same as full-tim	vorking lly paid) plus es, coaching ned as ne employees	
Full-time Earnings-the period. Full-time earni any additional paymen supplements, sales tax earnable compensatior Full-time earnings mus	compensation that would be pay ngs equal a member's full-time t ts made to the member (i.e., PIF , bonuses, and any other monies n by LSA-R.S. 11:701(10). Full-tir	vable if the employee work base pay (regardless of wh c, summer school, overtime paid to a member over ar ne earnings for part-time	ked full-time for the full normal v ether or not this amount is actua e, stipends, cash house allowance nd above his or her base pay defi	working lly paid) plus es, coaching ned as ne employees	
Full-time Earnings-the period. Full-time earni any additional paymen supplements, sales tax earnable compensatior Full-time earnings mus or be reduced because	compensation that would be pay ngs equal a member's full-time b ts made to the member (i.e., PIF , bonuses, and any other monies h by LSA-R.S. 11:701(10). Full-tir t be equal to or greater than act a member was docked.	vable if the employee work base pay (regardless of wh c, summer school, overtime paid to a member over ar ne earnings for part-time	ked full-time for the full normal v ether or not this amount is actua e, stipends, cash house allowance nd above his or her base pay defii employees is the same as full-tim nings shall never be less than act	working lly paid) plus es, coaching ned as ne employees	
Full-time Earnings-the period. Full-time earni supplements, sales tax earnable compensatior Full-time earnings mus or be reduced because Salary	compensation that would be pay ngs equal a member's full-time t ts made to the member (i.e., PIF , bonuses, and any other monies h by LSA-R.S. 11:701(10). Full-tin t be equal to or greater than act a member was docked.	rable if the employee worl pase pay (regardless of wh , summer school, overtime paid to a member over ar me earnings for part-time ual earnings. Fulltime ear	ked full-time for the full normal we ether or not this amount is actua e, stipends, cash house allowance nd above his or her base pay defii employees is the same as full-tim nings shall never be less than act Salary Correction Full-Time	vorking Ily paid) plus es, coaching ned as ned as e employees ual earnings	
Full-time Earnings-the period. Full-time earnings supplements, sales tax earnable compensation Full-time earnings mus or be reduced because Salary Instructions for usion Select a reason for the	compensation that would be pay ngs equal a member's full-time to ts made to the member (i.e., PIF , bonuses, and any other monies h by LSA-R.S. 11:701(10). Full-tin t be equal to or greater than act a member was docked. Correction Comment ing Salary Comment: ne correction.	rable if the employee work pase pay (regardless of whe summer school, overtime paid to a member over ar me earnings for part-time ual earnings. Fulltime ear <i>Instructions</i> 1. Required fo	ked full-time for the full normal we ether or not this amount is actua e, stipends, cash house allowance and above his or her base pay defii employees is the same as full-tim nings shall never be less than act Salary Correction Full-Time as for using Full-Time Comm r Primary when the Full-Time is di	working Ily paid) plus es, coaching ned as ne employees ual earnings	
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Full-time Earnings-the period. Full-time earni any additional paymen supplements, sales tax earnable compensation Full-time earnings mus or be reduced because Salary nstructions for usi . Select a reason for th . A comment can be act o clarify the correction eason is not chosen in	compensation that would be pay ngs equal a member's full-time b ts made to the member (i.e., PIF , bonuses, and any other monies by LSA-R.S. 11:701(10). Full-tir t be equal to or greater than act a member was docked. Correction Comment ing Salary Comment: he correction. Ided for additional information mon. The comment is optional unless which case the comment is requi	eeded sa a sable if the employee worl paid to a member over ar ne earnings for part-time ual earnings. Fulltime ear <i>Instructions</i> 1. Required fo 2. Select a rea 3. A comment to clarify the o	ked full-time for the full normal v ether or not this amount is actua e, stipends, cash house allowance nd above his or her base pay defii employees is the same as full-tim nings shall never be less than act Salary Correction Full-Time s for using Full-Time Comm r Primary when the Full-Time is di son for the full-time change.	working Ily paid) plus es, coaching ned as ne employees ual earnings ment: ifferent. mation neede unless a	
Full-time Earnings-the period. Full-time earni any additional paymen supplements, sales tax earnable compensation Full-time earnings mus or be reduced because Salary Instructions for usi I. Select a reason for th 2. A comment can be ac to clarify the correction eason is not chosen in	compensation that would be pay ngs equal a member's full-time b ts made to the member (i.e., PIF , bonuses, and any other monies) by LSA-R.S. 11:701(10). Full-tir t be equal to or greater than act a member was docked. Correction Comment ing Salary Comment: the correction. Ided for additional information no . The comment is optional unless which case the comment is requi- ported in July but earned in June	eeded sa and to a member over an me earnings for part-time ual earnings. Fulltime ear <i>Instructions</i> 1. Required fo 2. Select a rea 3. A comment to clarify the o	ked full-time for the full normal v ether or not this amount is actua e, stipends, cash house allowanci employees is the same as full-tim nings shall never be less than act Salary Correction Full-Time of for using Full-Time Comm r Primary when the Full-Time is di ison for the full-time change. can be added for additional inforn change. The comment is optional	vorking Ily paid) plus es, coaching ned as ne employees ual earnings ment: ifferent. mation neede unless a	

Helpful tips for OSUP-covered state agencies:

Selecting Correct Online Update Program to Correct/Certify Questionable Year Records

Multiple reason codes:

Codes 2,3,4:

 Use Full-Time Only Corrections if employee was hired and terminated within the same fiscal year; Actual Earnings reported must be correct

Codes 2,4; 3,4; or 1,3,4:

• Use Prior Year Salary Corrections to move rollover earnings (earned in June, paid in July) to correct fiscal year for employee's first year or last year of employment.

		Actual Earnings	Full-Time Earnings	Service Credit	Reason for Questioning Year
1		65,384.80	65,384.80	0.68	2,4
-		84,041.72	84,041.72	1.00	1
sar		33,362.96	33,362.96	0.33	1,3,4
nu		73,800.88	73,800.88	1.00	1
	:	28,453.90	28,453.90	0.26	2,4
		95,384.75	95,384.75	0.62	2,4
		44,800.00	44,800.00	0.92	2,4
01	estionable year reason codes	692.45	27,692.45	0.64	2,4
1.	Annual earnings decreased more that	an 904.00	20,904.00	0.63	1,3,4
2.	5% from previous year 1 st year of employment for an	961.61	40,961.61	0.88	2,4
	employer / 1st year of employment after DROP	920.00	1,920.00	0.04	2,3,4
3.	Changed employers during the fiscal year and/or break in service				
4.	Partial year of service credit not previously certified				

Helpful tips for OSUP-covered state agencies:

Selecting Correct Online Update Program to Correct/Certify QY Records (Cont.)

Single reason code:

Reason Codes 1, 2, or 3 only:

 Use Questionable Year Certification if no dockages/no leave without pay (LWOP), and full year of employment; Actual Earnings reported must be correct

Reason Codes 4 only:

• Use Questionable Year Certification only if employee had dockages/LWOP and the \$ amount of total dockages equals the difference between Actual Earnings and Full-time Earnings amounts reported; Actual Earnings must be correct.

		Actual Earnings	Full-Time Earnings	Service Credit	Reason for Questioning Year
		65 204 00	65 204 00	0.69	
		65,384.80 84,041.72	65,384.80 84,041.72	0.68 1.00	2,4 1
		33,362.96	33,362.96	0.33	1 1,3,4
		73,800.88	73,800.88	1.00	1
		28,453.90	28,453.90	0.26	2,4
		95,384.75	95,384.75	0.62	2,4
		44,800.00	44,800.00	0.92	2,4
Qu	estionable year reaso	n codes	27,692.45	0.64	2,4
1.	Annual earnings decrease 5% from previous year		20,904.00	0.63	1,3,4
2.	1 st year of employment for employer / 1st year of em		40,961.61	0.88	2,4
	after DROP	ipioyment	1,920.00	0.04	2,3,4

- Changed employers during the fiscal year and/or break in service
- Partial year of service credit not 4. previously certified

Actuarial Cost for Full-Time Only Corrections

LSA-R.S. 11:888 and LSA-R.S. 11:158 allow for an actuarial cost to the employer on corrections for fiscal years greater than three (3) years old that result in an increase in service credit.

• Journal Entry invoice for total Full-Time Only Corrections charges calculated after end of each fiscal year. The three-year timeline for certifying/correcting questionable years is calculated as follows:

Current Fiscal Year:	FY 2023
Fiscal Year 1:	FY 2022
Fiscal Year 2:	FY 2021
Fiscal Year 3:	FY 2020
Older than three years:	FY 2019 & all fiscal years prior

Actuarial Cost/Charges for Full-Time Only Corrections

Example of actuarial cost invoice (notification)

Your agency will receive a Journal Entry invoice for all Full-Time Only Corrections records greater than three (3) years old that resulted in increased service credit.

Invoice attachments will include summary breakdown for each member record included in the total Full-Time Only Corrections actuarial cost.

Journal Entry				11-
				ite: 10/17/ Entry #:
A	ccount Description		Debit	Credi
ADVANCE ACCOUNT PY Employer	Y Employer		\$3,567.45	\$3,567.4
	Total		\$3,567.45	\$3,567.4
	Members			
			\$2,553.99 \$301.09 \$508.51 \$203.86	
udit Log #: 22389 LAST 4 SSN MBR NAME	SRV TO PURCHASE 0.11 0.02 0.02 0.01	EMPLOYER CODE	Cost \$2,553.99 \$301.09 \$508.51 \$203.86	



Actuarial Cost/Charges for Prior Year Salary Corrections

If prior year correction *increases* earnings/contributions **and** service credit and/or final average comp:

For fiscal years three years old or less:

 employer will be charged member & employer contributions + interest at TRSL's assumed actuarial valuation rate.

For fiscal years more than three (3) years old:

- will result in actuarial purchase of service credit by the employer
 - \$150 fee required, increasing to \$200 on 1/1/2024
 - Separate Journal Entry invoice for actuarial charge

The three-year timeline for Prior Year Corrections:

Current Fiscal Year:	FY 2023
Fiscal Year 1:	FY 2022
Fiscal Year 2:	FY 2021
Fiscal Year 3:	FY 2020
Older than three years:	FY 2019 & all fiscal years prior

Journal Entry screen

Online prior year corrections will create a record on your agency's Journal Entry screen in EMIS

 Actuarial JE – Prior Year Salary Corrections resulting in actuarial charges to your agency



Em	nployer:				Fiscal Year:2023
JE Num		JE Date	Fiscal Year Corrected	SSN	Name
<u>55118</u>		07/14/2022	2021		E
<u>55567</u>		08/22/2022	2022		
<u>55571</u>		08/22/2022	2022		
<u>55584</u>		08/23/2022	2022		
<u>56554</u>		09/19/2022	2021		
<u>56635</u>		09/21/2022	2022		
<u>57109</u>	Actuarial JE	10/20/2022	2023		
<u>57881</u>		12/09/2022	2022		f
<u>57882</u>		12/09/2022	2022		
<u>58412</u>		01/20/2023	2021		



EMPLOYER MANUAL 11.0

November 2021

September 2018

Whenever a TRSL-covered employee retires or enters DROP (Deferred Retirement Option Plan), TRSL will request the applicable employer(s) certify specific information in a timely manner so that we are able to accurately calculate the retirement benefits and promptly begin paying those benefits to the retiree.

This index provides employer information and instructions if a TRSL-covered employee submits an application for retirement or DROP.

Retirement Process / Issues Index 11.0: Retirement/DROP processing & **Index 17.0:** Leave Information

CONTENTS

Service/ILSB retirement

Entering DROP (DROP

Application for Service Retirement, ILSB, or DROP

(Form 11)

Fre

1

Termination of

Employment at End

Application for RTW

Supplement (Form 11RTW)

of DROP Participation/ Employment (Form 11H)

Deferred Retirement

Option Plan (DROP)

Provides information related to the retirement process

contributions are remitted to TRSL.

Details on DROP eligibility, how the program works, as well as member application & documentation requirements are discussed in our DROP Handbook: A guide to the Deferred Retirement Option Plan publication.

Entering DROP (DROP In)

Each member who is eligible and wishes to participate in DROP must submit a completed Application for Service Retirement, ILSB, or DROP (Form 11) or apply online through Member Access no earlier than six months before the DROP start date. Both the member and employer

When a TRSL member applies to retire/enter DROP

TRSL members have two ways to apply to retire:

- Application for Service Retirement, ILSB, or DROP (Form 11), or
- Through Member Access

-2 •TH	RSL Teach Sys	ners' Retirement stem of Louisiana							
Home	My Account 🔹	My Self Service 🔹	My Estimates 🔹	My Retirement	Help	Logout			
				Apply for Service Retirement	nt, ILSB, or D	ROP			
		Travel		Apply for Disability Retirem	ient				
	Designated Beneficiaries SPOUSE								

	DROP OFF or MAIL		EMAIL	FAX	TRSL USE
HOW TO SUBMIT:	8401 United Plaza Blvd, Si Baton Rouge LA 7080		web.master@trsl.or	g (225) 925-6	366 Employer num
ction 1 - Retir cone: Service (0	rement information (MUST BI		LETED) DROP (06-11F)	Date of retirement	IDROP begin date (mm/dd/yyyy)
tion 2 - Men: Last, first, MI, suffi	nber information (MUST BE C x (Jr., III, etc.)	OMPLET	ED)	Your Social Securit	y number (###-##-####)
address / PO box				An affidavit will be City, state, zip	sent after we receive a copy of you
/cell telephone (inc	(ude area code) Email ad	dress		Date of birth (mm/	dd/yyyy) - Attach proof of birth date
telephone (include	area code)			Job title	
of employer			Months of contract	Spouse's Social Se	curity number (###-##-####)
				An affidavit will be	sent after we receive a conv of you
one: (Please attach	h applicable documents, such as judgme ed Married Divorced		ce, death certificate, etc.) -married Legally sep		sent after we receive a copy of you ved*
Never marrie	ad Married Divorced Last, first, MI, suffix (Ir, II, etc.) al Lump-Sum Benefit (ILSB) - (* Re	e ONLY if you are con:	arated* Widow Spouse's date of b	ved* irth (mm/dd/yyyy) - Attach proof of
Never marrie	ed Married Divorced	* Re	-married Legally sep e ONLY if you are cons te maximum lump sum.	arated* Widow Spouse's date of b	ved* rth(mm/dd/yyy) - Attach proof of applicable for DROP.
Never marrie	ed Married Divorced Last, first, Mi, suffix (ir, III, etc.) al Lump-Sum Benefit (ILSB) - (eive a reduced retirement benefit b	* Re Complete ased on the	-married Legaly sep e ONLY if you are con- te maximum lump sum. te following amount.	arated* Widov Spouse's date of b sidering ILSB. Not .00	ved* rth(mm/dd/yyy) - Attach proof of applicable for DROP.
Never marrie tion 3 - Initia lelect to rec lelect to rec lelect to rec tion 4 - Annu	ed Married Divorced Last, first, M, suffix (Ir, III, etc.) al Lump-Sum Benefit (ILSB) - (eive a reduced retirement benefit b eive a reduced retirement benefit b	* Re Complete ased on th ased on th	e ONLY if you are cont e maximum lump sum. ae following amount.	arated* Widov Spouse's date of b sidering ILSB. Not .00 ring ACO.	red* rth emm/dd/yyyy - Attach proof of applicable for DROP
Never marrie Never marrie Neuer's name: I I elect to rec I elect to rec I elect to rec Neuer 4 - Annu Yes, I wish to Stion 5 - Bene	ed Married Divorced Last, first, M, suffix (ir, III, etc.) al Lump-Sum Benefit (ILSB) - (eive a reduced retirement benefit b eive a reduced retirement benefit b ual COLA Option (ACO) - Con	* Re Complete ased on th ased on th nplete O benefits b	-married Legally sep e ONLY if you are contine maximum lump sum. ae following amount. NLY if you are conside ased on the self-funded An iii receive an affidavit of estii	arated* Widow Spouse's date of b sidering ILSB. Not .00 ring ACO. nual COLA Option (AC	red* rth (mm/dd/yyy) - Attach proof of applicable for DROP]
Never marrie nt spouse's name: I i elect to rec i elect to rec i elect to rec ction 4 - Annu Yes, I wish to ttion 5 - Bene	ed Married Divorced Last, first, M, suffix (Ir, III, etc.) al Lump-Sum Benefit (ILSB) - (eive a reduced retirement benefit b eive a reduced retirement benefit b ual COLA Option (ACO) - Con o receive an estimate of REDUCED eficiary designation - At a later of	* Re Complete ased on th ased on th nplete O benefits b	-married Legally sep e ONLY if you are contine maximum lump sum. ae following amount. NLY if you are conside ased on the self-funded An iii receive an affidavit of estii	arated* Widow Spouse's date of b Spouse's date of b sidering ILSB. Not ing ACO. nual COLA Option (AC Beneficary's Social	red* rth (rmr/dd/yyy) - Attach proof of applicable for DROP.
Never marrie Never marrie Never marrie I elect to rec I elect to	ed Married Divorced Last, first, M, suffix (Ir, III, etc.) al Lump-Sum Benefit (ILSB) - (eive a reduced retirement benefit b eive a reduced retirement benefit b ual COLA Option (ACO) - Con o receive an estimate of REDUCED eficiary designation - At a later of	* Re Complete ased on th ased on th nplete O benefits b	-married Legally sep e ONLY if you are contine maximum lump sum. ae following amount. NLY if you are conside ased on the self-funded An iii receive an affidavit of estii	arated* Widov Spouse's date of b Spouse's date of b idering ILSB. Not ing ACO. nual COLA Option (AC Anated benefits on whick An attidate will be Oity state, zip	red* th (mm/dd/yyy) - Attach proof of applicable for DROP

TRSL encourages members to:

- Coordinate their retirement date with their employer
- Speak with their employer for questions regarding insurance benefits
- Work with their employer when requesting payment for annual leave payout

This differs from LASERS, as LASERS members are instructed to contact their agency's Human Resources Office to obtain a retirement application

Employer certifications: Retirement/DROP processing

The following data is needed for each TRSL-covered employee who applies for retirement or DROP:

- Certify all questionable years
- Certify sick leave days used for all fiscal years of employment and sick leave days paid at retirement
- Complete Agency Certification after termination date and after all earnings & contributions are reported to TRSL
- Complete Cap Exemption Letter (if applicable)

Updates 🔹	Submit Files	-	Log			
Agency Certificati	on (Form 11B)					
Annual Leave Upd	ate					
Contribution Correction						
Enrollments						
Full-Time Only Co	rrections					
Furlough Certifica	tion and Update					
Home Address Upo	late					
ORP Salary Entry (up to 25 employe	es only)				
Prior Year Salary (Corrections					
Questionable Year	Certification					
Retiree Voluntary	/Insurance Deduct	ion				
Salary Contributio	n Entry (up to 25	employees	only)			
Sick Leave Days Pa	aid Update					
Sick Leave Add an	d/or Update					
Terminations						

*Must have access rights designated on Form 1 to submit information

Request letters

Identify member, date of retirement (or DROP begin date), and information TRSL still needs from the employer.

- First Request (sent on or near the member's retirement date)
- Second Request (sent approximately 45 days after the 1st Request)
- Final Request (Sent approximately 30 days after 2nd Request; employer has 15 calendar days to complete)



Agency Certification (Form 11B)

Certifies member's termination date and service credit for the current fiscal year

• Requested when a TRSL member retires or enters DROP

Updates 💉
Agency Certification (Form 11B)
Annual Leave Update
Contribution Correction

Available under Updates menu

 Must have access rights designated on Authorized Contacts (Form 1)

Member Information Member name Social Security number Employer Current Year Information (July 1 - June 30) - Complete for all retirements, DROP and deaths Date of termination - See Instructions Full-time earnings the member would have earned working he full year at 100% effort plus any additional pay eceived. Refer to the Employer Procedures Manual, Index 4.1, for more information. Do not include rollover earnings in the full-time earnings. Rollover earnings earned in June (prior year), paid in July amount of salary that is earned in June that would sormally be paid in July. Rollover earnings Percent of effort (if part-time) - percent of time part-time nember works. For example, the member works 4 hours bout of an 8-hour day, 5 days a week, the percent effort would be 50%. Percent effort Comment		f Louisiana
Telephone: 225-925-6446 • Fax: 225-925-6366 www.trsl.org Agency Certification (Form 11B) nstructions: The employer must submit this information for a member of the Teachers' Retirement System of Louisiana TTSL) who (1) enters DROP, (2) retires or (3) dies. The most recent employer(5) may not certify this information until after the beginning date of the DROP participation. A second the last day for which the member will receive pay. Certification for members electing to participate in the Deferred to as DROP Out. Date of termination should be the last day of work or last day of leave. Salary information should reflect actual earnings ar ontributions for the current fiscal year through the date of termination or the day before DROP participation, if applicable contribution Reports submitted by the employer payroll department. The monthly Contributions Reports are the official eports of member earnings as provided by LSA-R.S. 11:888. Member Information	P.O. Box 94123 • Baton Rouge, L/	
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Timeframe to certify

- Employer must wait for all final earnings & contributions to post to TRSL **before** completing Agency *Certification*
- Review TRSL's Monthly Salary/Contributions Screen
- Active members (EXP):
 - "3": Earnings expected
 - "4": Earnings may be reported
 - "o": No earnings can be reported

Members
Member Summary
Account History
Member Notations
Monthly Salary/Contributions
Annual Salary History
Benefit Payroll

		Name:		
	% \	Year Employed: 50.00%		
r:				
Actual Earnings	Fulltime Earnings	Contributions	Exp	Red
0.00	0.00	0.00	3	3
0.00	0.00	0.00	3	3
5,701.84	5,701.84	456.14	3	3
5,701.84	5,701.84	456.15	3	3
5,701.84	5,701.84	456.15	3	3
5,701.84	5,701.84	456.15	3	3
11,590.63	11,590.63	927.25	4	3
			0	0
			0	0
			0	0
			0	0
			0	0
	Actual Earnings 0.00 0.00 0.00 5,701.84 5,701.84 5,701.84 5,701.84	Actual Earnings Fulltime Earnings 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.000 0.00 0.00 0.00 0.00 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000	Actual Earnings Fulltime Earnings Contributions 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.01 0.00 0.00 0.02 0.03 0.00 0.03 0.04 0.00 0.04 0.05 0.00 0.05 0.00 0.00 0.05 0.00 0.00 0.05 0.00 0.00 0.05 0.00 0.00 0.05 0.00 0.00 0.000 0.00 0.00 0.001 0.00 0.00 0.002 0.000 0.00 0.003 0.000 0.00 0.004 0.000 0.00 0.005 0.000 0.00 0.005 0.000 0.00 0.005 0.000 0.000 0.005 0.000 0.000 0.005 0.000 0.000 0.005	Actual Earnings Fulltime Earnings Contributions Exp 0.00 0.00 3 0.00 0.00 0.00 3 0.00 0.00 0.00 3 0.00 0.00 0.00 3 0.00 0.00 0.00 3 0.00 0.00 3 3 5,701.84 5,701.84 456.15 3 5,701.84 5,701.84 456.15 3 5,701.84 5,701.84 456.15 3 11,590.63 11,590.63 927.25 4 0 0 0 0 0 11,590.64 0 0 0 0

Termination date vs. retirement date

- Termination date cannot be the same as the retirement date.
- Termination dates do not have to be the same for TRSL and insurance.

TERMINATION DATE

Member's last day of work **or** last day of official leave

RETIREMENT DATE

Day after termination date **or** the date TRSL receives completed retirement application (whichever is later)

Employer sick leave certification

- Certification of sick leave days used for all fiscal years of employment, including fiscal years during DROP
- Certification of sick leave days paid at retirement

Must have access rights designated on Authorized Contacts (Form 1)



Sick leave days used

Employers must certify sick leave information for each fiscal year (July 1 – June 30)

- Months of contract (9, 10, 11, or 12) must be entered for each fiscal year
- Number of sick leave days used

OSUP submits annual sick leave file

 May need to certify current fiscal year (if not closed) or other fiscal years where sick leave data was not reported



Sick Leave Add and/or Update SSN: System: 4 Name: Employer: Procedures for using Sick Leave Add and/or Update: 1. Click 'Edit' or 'Add' in the first column to open the line for editing. 2. Enter the appropriate data and click 'Update'. 3. Click 'Cancel' to undo changes entered or to return to the initial display. 4. Click 'Delete' to remove data permanently.

NOTE: The certification of an authorized signer's personal TRSL member account must be completed by another authorized signer at the agency.

	Fiscal Year Ending	Months of Contract	Days Used	Summer School Days Worked	Summer School % Effort	Eligibility Indicator	Data Unavailable	Error Code	
Edit	1999	12	14.00	0.00	0	Y			<u>Delete</u>
<u>Edit</u>	2000	09	5.00	0.00	0	Y			<u>Delete</u>
Edit	2001	09	4.50	0.00	0	Y			<u>Delete</u>
<u>Edit</u>	2002	09	4.00	0.00	0	Y			<u>Delete</u>
Edit	2003	09	6.50	0.00	0	Y			<u>Delete</u>
<u>Edit</u>	2004	09	4.00	0.00	0	Y			<u>Delete</u>
Edit	2005	09	2.00	0.00	0	Y			<u>Delete</u>
<u>Edit</u>	2006	09	12.50	0.00	0	Y			<u>Delete</u>
Edit	2007	09	6.00	0.00	0	Y			<u>Delete</u>
<u>Edit</u>	2008	09	22.00	0.00	0	Y			<u>Delete</u>
Edit	2009	09	11.00	0.00	0	Y			Delete
<u>Edit</u>	2010	09	5.50	0.00	0	Y			<u>Delete</u>

Sick leave days paid at retirement

Employers must report number of sick leave days paid at time of retirement or DROP.

- Report number of days, not hours
- Report even if 0.00 days paid



Sick Leave Days Paid Update SSN: Employer: SC BD Name: Instructions for using Sick Leave Days Paid Update: 1. The number below represents the number of sick leave days paid at the time of retirement. This number reflects 'days' paid, not hours. 2. The number of sick leave days paid at the time of retirement, formerly certified on the Agency Certification (Form 11B), can be added or updated. Report the number of 'days' paid, not hours. 3. If the employer policy allows payment of sick leave days upon entering DROP, those days paid should be reported here. 4. Click the 'Add' button after adding the number of sick leave days paid. 5. Click the 'Update' button after correcting the number of sick leave days paid. 6. Click the 'Delete' button to delete the number of sick leave days paid. Enter # Sick Lv days paid Sick Leave Days Paid (ex. 25), then click Add day(s) Add

EMIS sick/annual leave summary screen

L	Exar	mple		Si	ck Leave			
	SSN: -			Name:				
Fiscal Year	Employer ID	Months of Contract	Days Used	Eligibility	Last Updated By	Transaction Date	Summer Days Worked	Summe Percent Effort
2014	00	12	1.00		EMPLOYER-FILE	07/10/2014		
2015	00	12	0.00			03/30/2017		
2016	00	12	0.00			07/13/2021		
2017	00	12	2.50		EMPLOYER-FILE	11/13/2017		
2018	00	12	1.75		EMPLOYER-FILE	07/10/2018		
2019	00	12	18.25		EMPLOYER-FILE	07/08/2019		
2020	00	12	5.50		EMPLOYER-FILE	07/21/2020		
2021	00	12	45.00		EMPLOYER-FILE	11/01/2021		
		Total:	166.50		days used 07/01/1990 and forward.			
			Si	ck Le	ave Days Paid			
Days	Paid	Employe	er ID		Last Updated By		Transacti	on Date
25	.00						07/13/	2021

Confirms leave data already updated by employer(s)

Members - Employers
Member Summary
Account History
Member Notations
Monthly Salary/Contributions
Annual Salary History
Benefit Payroll
Benefit Payee
COLA History
1099-R Information
Retirement Benefit Payment History
Sick Leave/Annual Leave
DROP/ILSB Summary/History

Special cases

Sick Leave Not Accrued

- WAE/temporary employment in which the member was eligible to retain TRSL membership but did not accrue sick leave
- Written notification required TRSL will update in EMIS to denote no sick leave accrued for specified fiscal year(s)

Sick Leave Records not available

- Only if sick leave records are lost or missing
- Update "Data Unavailable" field to "Y" (for Yes)

	Fiscal Year Ending	Months of Contract	Days Used	Summer School Days Worked	Summer School % Effort	Eligibility Indicator	Data Unavailable	Error Code
Update Cancel	1996	~	0	0	0	~		
Add	1997		0.00	0.00	0			

Customized training available!

available via online webinar or in-person/on-site based on job duties and Update Permissions in EMIS

Heather Landry Email: heather.landry@trsl.org Phone: 225-925-7093 (0) or 225-361-3482(c) Sharon Lachney Email: sharon.lachney@trsl.org Phone: 225-925-4097 (0) or 225-361-1482 (c)

Please complete online survey to help us improve future trainings!

- Survey link will be sent to all attendees via email this week
- Survey link closes in two weeks



THANK YOU!

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We're here for you.

Local phone: 225-925-6446 | Toll free : 1-877-275-8775

www.trsl.org/employers web.master@trsl.org

