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This index provides employer-specific information and instructions whenever a TRSL member or retiree dies. Information on general survivor and death benefits, eligible survivors and beneficiaries, as well as application forms and survivor/beneficiary documentation requirements is available in our brochure, [Death & Survivor Benefits](#).

Reporting member/retiree deaths

When an employer learns of the death of a TRSL-covered employee or retiree, the employer should contact TRSL immediately via email (claims@trsl.org or web.master@trsl.org) or by phone (225-925-6446 or toll free 1-877-275-8775) and provide the following **information on the deceased member or retiree**:

- Full Name
- Social Security Number
- Date of death
- Full name, address, and telephone number (include area code) of survivor/beneficiary/family member or other person to be contacted, and
- Names and ages of any minor children or children with permanent disabilities (*if applicable or if known*)

It is not necessary for employers to process an online termination for active members who have died. Once notified of a member's death, TRSL will update the membership status to indicate the member is deceased, which will also automatically enter a termination date based on the date of death.

Employers will be notified about a retiree or benefit recipient death if health and/or life insurance deductions were withheld from the decedent's TRSL monthly retirement benefit payments. The employer or insurance vendor will be responsible for reconciling any insurance deduction changes due to the member's death.

Submitting documentation for survivor/beneficiary benefits

Both employers and family members of deceased TRSL members/retirees can email requested documentation (such as copies of death certificates, birth certificates, and social security cards) directly to our Claims section at claims@trsl.org. All documents remitted to TRSL should reference the deceased TRSL member's name and last 4 digits of the deceased's Social Security number.

NOTE: The Claims email address is only monitored for TRSL death notifications and claims-related forms and documents. Any questions should be submitted to web.master@trsl.org or [contact TRSL](#) by phone to speak to a retirement analyst.

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Active member deaths

For purposes related to death benefits, the term “active member deaths” in this index refers to non-retired (active or inactive) TRSL member deaths. When TRSL is notified of a non-retired member’s death, we will determine if any of the following benefits are due based on the deceased member’s years of service credit and other factors:

- Monthly survivor benefits
- Refund of deceased member’s contributions

Employer request letters

TRSL will request certain information and certifications from the current or former employer once a non-retired TRSL member’s death has been reported and we have determined that survivor or other death benefits are due. These information requests are referred to as Employer Request letters and will be mailed to the employer.

Each letter will identify the deceased member and the information TRSL is requesting from the employer. The letter will also have a stamp indicating Active Death and the type of benefits due (survivor monthly benefits or beneficiary refund).

Timeline

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

- 1. 1st Request** – sent within one week of receipt of the death notification.
- 2. 2nd Request** – sent approximately 60 days after the 1st request letter if outstanding information/certification(s) is still needed.
- 3. Final Request (Warning Letter)** – sent approximately 30 days after 2nd request letter if TRSL has not received previously requested information/certifications.

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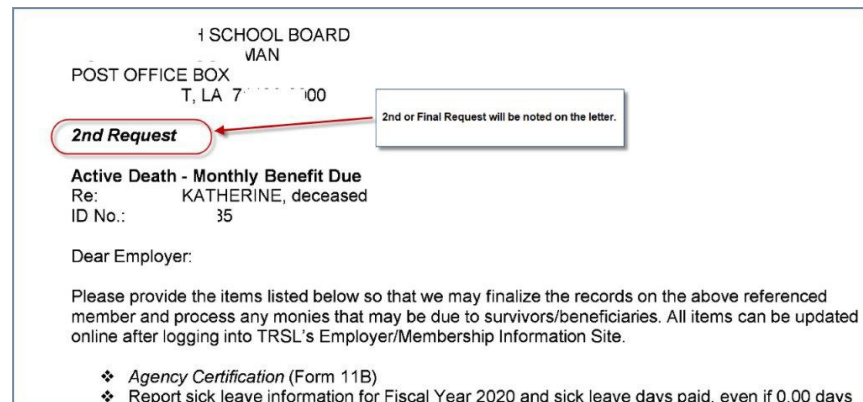
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NOTE: Once a Final request is sent, the **employer will have only 15 days to submit the requested certifications.**

Fifteen (15) days after the final request (warning letter) is sent, TRSL will finalize survivor benefits or beneficiary refunds based on the information on file. If TRSL receives additional information (employer certifications) after survivor and death benefits are finalized that results in an overpayment of benefits to the survivor, beneficiary, or estate, TRSL will adjust the applicable benefits and **charge the employer for the amount of the overpayment**, as per [LSA R.S. 11:888](#).

Employer request letters will indicate if the request letter is a 2nd Request or Final Request.



1 SCHOOL BOARD
MAN
POST OFFICE BOX
T, LA 70000-0000

2nd Request ← 2nd or Final Request will be noted on the letter.

Active Death - Monthly Benefit Due
Re: KATHERINE, deceased
ID No.: 35

Dear Employer:

Please provide the items listed below so that we may finalize the records on the above referenced member and process any monies that may be due to survivors/beneficiaries. All items can be updated online after logging into TRSL's Employer/Membership Information Site.

- ❖ Agency Certification (Form 11B)
- ❖ Report sick leave information for Fiscal Year 2020 and sick leave days paid, even if 0.00 days


Employers should respond to all request letters by providing **the requested information** in a timely manner so that TRSL can process prompt and accurate death or survivor benefits that may be due.

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EXAMPLE: Employer Request Letter for Active Death with Survivor Benefits Due



Teachers' Retirement System of Louisiana

www.trsl.org
225.925.6446
225.925.4779
web.master@trsl.org
Post Office Box
Baton Rouge LA

09 -

October 21, 2019

BOARD
MS. MAN
POST OFFICE BOX
PORT, LA 70000

2nd Request


Active Death - Monthly Benefit Due
Re: KATHERINE, deceased
ID No.: 35

Dear Employer:

Please provide the items listed below so that we may finalize the records on the above referenced member and process any monies that may be due to survivors/beneficiaries. All items can be updated online after logging into TRSL's Employer/Membership Information Site.

- ❖ Agency Certification (Form 11B)
- ❖ Report sick leave information for Fiscal Year 2020 and sick leave days paid, even if 0.00

EXAMPLE: Employer Request Letter for Active Death with Beneficiary(ies) Refund Due



Teachers' Retirement System of Louisiana

www.trsl.org
225.925.6446
225.925.4779
web.master@trsl.org
Post Office Box 94123
Baton Rouge LA 70804-9123

09 - 99

October 9, 2019

UNIVERSITY
MRS. DEBBIE
POST OFFICE BOX
LA 71000

1st Request

Active Death - Refund Due
Re: THEO, deceased
ID No.: 36

Dear Employer:

Please provide the items listed below so that we may finalize the records on the above referenced member and process any monies that may be due to survivors/beneficiaries. All items can be updated online after logging into TRSL's Employer/Membership Information Site.

- ❖ Agency Certification (Form 11B)

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Employer procedures

Monthly survivor benefits

If eligibility for monthly survivor benefits has been determined, TRSL will require the following information from the employer in order to process and calculate benefits for an eligible surviving spouse and/or minor children:

1. **Certify all of the deceased member's questionable years** online through EMIS, TRSL's secure employer database. (See [Index 6.0](#) for information on certifying questionable years).
2. **Certify sick leave days used** for the fiscal year(s) requested online through EMIS. (See [Index 17.0](#) for instructions pertaining to certification of sick leave).
3. **Certify sick leave days paid at termination** online through EMIS, even if the amount is 0. (See [Index 17.0](#) for more details and instructions).
4. **Complete an online Agency Certification** (Form 11B) after all final earnings and contributions have been reported to TRSL if the member was employed by your agency during the current fiscal year prior to the date of death. (See [Index 11.0](#) for details and instructions).

NOTE: *Final earnings and contributions should be reported **no later than** the month following the member's date of death.*
5. **Certify annual leave balances** (if applicable) online through EMIS. (See [Index 17.0](#) for instructions on how to certify annual leave).
6. Submit any other information that may be requested on the employer request letter.

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Refund of deceased member's contributions

If the member has less than five years of eligibility service credit or has no qualifying survivors eligible for monthly survivor benefits, a refund of the deceased member's total employee contributions will be issued to the last named beneficiary(ies) on file or to the member's estate.

TRSL will require the employer to submit:

- **A completed online *Agency Certification*** (Form 11B) after all final earnings and contributions have been reported to TRSL if the member was employed by your agency during the current fiscal year prior to the date of death. (See [Index 11.0](#) for details and instructions).

*NOTE: Final earnings and contributions should be reported **no later than** the month following the member's date of death.*

Retiree return-to-work deaths

For most retiree deaths, TRSL does not request or require any employer information or certifications, with the exception of return-to-work retirees who returned to work and paid unsheltered contributions during the current fiscal year prior to the retiree's death.

Employer procedures

If a deceased retiree has any ***return-to-work contributions*** reported to TRSL during the current fiscal year, TRSL will request and require the employer to submit:

- **A completed online *Agency Certification*** (Form 11B) after all final earnings and contributions have been reported to TRSL. (See [Index 11.0](#) for details and instructions).

*NOTE: Final earnings and contributions should be reported **no later than** the month following the member's date of death.*

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Employer checklists

ACTIVE MEMBER DEATH - Monthly survivor benefits due

- Certify all of the deceased member's questionable years.
- Certify sick leave days used for all fiscal years of employment.
- Certify all sick leave days paid at termination, even if amount is 0.
- Complete an Agency Certification after all earnings and contributions have been reported to TRSL.
- Certify annual leave balances (only if applicable).

ACTIVE MEMBER DEATH - Refund of deceased member's contributions due

- Complete an Agency Certification after all earnings and contributions have been reported to TRSL.

RETIREE RETURN-TO-WORK DEATH - Only if return-to-work contributions reported by employer during current fiscal year

- Complete an Agency Certification after all earnings and contributions have been reported to TRSL.

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Frequently asked questions

1. What is the best way to contact TRSL when one of our TRSL-covered employees or retirees has passed away?

- » *Employers should contact the Member Information Center at 225-925-6446 or toll-free (if calling from outside the Baton Rouge area) at 1-877-275-8775 (1-877-ASK-TRSL).*

2. How will our agency be able to tell if TRSL has already been notified of the employee/retiree death from family members or other sources?

- » *Employer personnel with authorized access to our employer access database can view the Member Summary Screen in EMIS for the member/retiree. The member or benefit recipient will have a Death Date underneath the member's name and Birth Date near the top of the screen if TRSL received the death notification.*

Also, employer personnel can check the Status Information section of the Member Summary screen. A non-retired member's status will appear as "A DECEASED"; a retiree's status will be "DEC XXXX" (DRPRET/IILSB/SRVRET/DISRET) to indicate the member is deceased if TRSL previously received the death notification.

NOTE: If a benefit recipient has a status of "DROP MBR", "BENEFICIAR," and "SURVIVOR," the status will not change, but there will be a Death Date near the top of the screen if the member/benefit recipient has been reported to TRSL as deceased.

3. If the member was on Leave Without Pay (LWOP) until the day of their passing, should I certify the termination date as the last day of pay or the last day on LWOP?

- » *Certify the last day on LWOP and include an explanation of LWOP in the comments section of the Agency Certification (Form 11B).*