

# RETIREMENT MEDICAL BENEFITS ACCOUNT

# PARTICIPANT HANDBOOK

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## 1.1 Administration of System and Funds

Indiana Public Retirement System (INPRS) administers 16 funds (eight defined benefit (DB), five defined contribution (DC), two other post-employment benefit, and one custodial). In accordance with [Indiana Code \(IC\) 5-10.5-2-3](#), INPRS is governed by a nine-member Board of Trustees, appointed by the Governor. INPRS combined membership totals over 500,000 members representing more than 1,250 participating employers including public universities, school corporations, municipalities, and state agencies.

INPRS administers and manages the following plans:

- Public Employees' Defined Benefit Account (PERF DB)
- Teachers' Pre-1996 Defined Benefit Account (TRF Pre-'96 DB)
- Teachers' 1996 Defined Benefit Account (TRF '96 DB)
- 1977 Police Officers' and Firefighters' Retirement Fund ('77 Fund)
- Judges' Retirement System (JRS)
- Excise, Gaming and Conservation Officers' Retirement Fund (EG&C)
- Prosecuting Attorney's Retirement Fund (PARF)
- Legislators' Defined Benefit Fund (LE DB)

### 5 Defined Contribution Funds (DC Funds)

- Public Employees' Defined Contribution Account (PERF DC)
- My Choice: Retirement Savings Plan for Public Employees (PERF MC DC)
- Teachers' Defined Contribution Account (TRF DC)
- My Choice: Retirement Savings Plan for Teachers (TRF MC DC)
- Legislators' Defined Contribution Fund (LE DC)

### Other Postemployment Benefit (OPEB Fund)

- Special Death Benefit Fund (SDBF) - Effective July 1, 2017, the State Employees' Death Benefit Fund, Public Safety Officers' Benefit Fund, and the line of duty death benefit from the Local Public Safety Pension Relief Fund were merged to form the Special Death Benefit Fund. The SDBF provides a lump sum line of duty death benefit to surviving spouses, children, or parents of \$100,000 for state employees and \$225,000 for state public safety officers and eligible first responders of employers enrolled in the Hero's Honor program.
- Retirement Medical Benefits Account (RMBA) – RMBA is a health reimbursement account available to State of Indiana employees who have separated from service and are age and service eligible for a normal, unreduced, or disability retirement and PERF My Choice members who are of normal retirement age and service eligible. RMBA benefits are for the reimbursement of health insurance premiums.

## Custodial (Custodial Fund)

- Local Public Safety Pension Relief Fund (LPSPR) – LPSPR is a fiduciary fund and is generally administered in accordance with [IC 5-10.3](#) and [IC 36-8](#). The purpose is to provide financial relief to pension funds maintained by units of local government for their police officers' and firefighters' retirement plan benefits.

For additional information about each fund visit the [Annual Reports](#) page of the [INPRS website](#). For additional RMBA information, plan FAQs and forms visit the [RMBA](#) page of the INPRS website.

## 1.2 Board of Trustees

The Governor appoints the following Board members for INPRS pursuant to the following criteria:

- One trustee with experience in economics, finance, or investments;
- One trustee with experience in executive management or benefits administration;
- One trustee who is an active or retired member of the '77 Fund;
- Two trustees who are TRF members with at least 10 years of creditable service;
- One trustee who is a PERF member with at least 10 years of creditable service;
- Director of the Office of Management and Budget, or designee;
- Auditor of State, or nominee;
- Treasurer of State, or nominee.

The executive director carries out the policies set by the Board and administers the Trust Fund on a daily basis ([Indiana Code \(IC\) 5-10.5](#)).

## 1.3 Purpose of RMBA

The purpose of the RMBA is to establish a retirement medical benefits account for the purpose of reimbursing eligible, retired employees of a State of Indiana organization for certain qualifying medical expenses you, your spouse and your dependent children incur. RMBA is a Health Reimbursement Arrangement (HRA) that solely reimburses certain health insurance premiums.

### 1.3.1 RMBA Plan Administration

RMBA is administered on the basis of a Plan Year, which is the twelve-month period commencing on each July 1 and ending on the following June 30. INPRS from time to time may adopt any rules or procedures it deems necessary or desirable for the proper and efficient administration of RMBA. INPRS handles the day-to-day administration of RMBA and appointed a third-party administrator, Key Benefit Administrator (KBA), to process benefit claims and to assist in the overall administration of RMBA. The RMBA plan will be construed, administered, and enforced according to the laws of the State of Indiana.

If you're a retired participant, please contact the claims administrator, Key Benefit Administrators (KBA)

By Phone: (800) 558-5553, or (317) 284-7150

By Email: [Flexpro@Keybenefit.com](mailto:Flexpro@Keybenefit.com)

Customer Care Representatives are available from 8 a.m. to 5 p.m. Monday through Friday.

If you're an eligible employee with questions about the plan or an account, please contact INPRS's Member Advocate Team.

By Phone: (844) GO-INPRS, or (844) 464-6777

By Email: [questions@inprs.in.gov](mailto:questions@inprs.in.gov)

Our Member Advocates are available from 8 a.m. to 8 p.m. Monday through Friday.

### 1.4 Vision

Engaged members able to realize their retirement dreams.

### 1.5 Mission

As fiduciaries, educate stakeholders, collect necessary contributions, and prudently manage member assets to deliver promised DB and DC benefits and services.

### 1.6 Principles

- **Integrity:** We hold ourselves accountable to the highest standards of ethical and professional behavior.
- **Stewardship:** We manage assets held in trust for current and future retirees. We are value oriented. We rigorously identify, measure, and manage risks.
- **Service:** We exist to serve our stakeholders with attentiveness to high quality, respectful customer service.
- **Trust:** We are our stakeholders' trusted source of reliable information.
- **Collaboration:** We seek out stakeholder input when establishing goals and setting priorities.

### 1.7 Important Terms

- **Claims administrator** – third party administrator appointed by INPRS to handle the administration of the plan. Key Benefit Administrators (KBA) is the claims administrator for RMBA plan participants.
- **Contributions** – annual allocation to participants' reimbursement accounts.
- **Covered dependent** – the retired participant's legally married spouse or surviving spouse legally married to the retired participant on the date of the retired participant's death, or an unmarried person who is a dependent child of the retired participant as defined under the State's health plans.
- **Eligible Employee** – a State of Indiana public employee who may be eligible for RMBA benefits upon their last day in pay.
- **Employer** – a participating State of Indiana organization that employs RMBA eligible participants.
- **Participant** – a State of Indiana public employee eligible for RMBA.
- **Plan** – the retirement medical benefits account plan established under [IC 5-10-8.5 et al.](#)
- **Plan year** – the twelve (12) month period commencing each July 1 and ending the following June 30.

- **Qualifying expenses** – The following are expenses that qualify under the RMBA plan:
  - Premiums paid under Medicare Part B (part B of the title XVIII of the Social Security Act, relating to supplementary medical insurance for the aged).
  - Contributions made under a fully insured policy or self-funded plan or program providing group or individual coverage to the retired participant or covered dependents covering medical care. See section 213(d)(1)(A) and (B) of the Social Security Act for information on requirements regarding the definition of medical care.
  - Premiums paid for tax-qualified long-term care insurance subject to limitations in section 213(d)(10) of the Internal Revenue Code.
  - Expenses for the purchase of a policy, plan or program providing coverage for expenses in addition to medical care (as defined in IRS Code Section 213(d)), will be Qualifying Expenses only to the extent that such expenses are directly related to the cost of the medical care component of the policy. The cost for the medical care component of the policy must be reasonable for the type and amount of coverage purchased, as determined by the Claims Administrator, and must be separately stated in the insurance contract, billing statement or other documentation acceptable to the Claims Administrator.
- **Retired participant** – Participants considered “retired” include:
  - A participant who is eligible for a normal, unreduced, or a disability benefit of the public employees’ retirement fund on your last day of service.
  - A participant who has completed at least 10 years of service as an elected or appointed officer on your last day as an elected or appointed officer.
  - A participant who is a member of the PERF My Choice plan established under [IC 5-10.3-12](#) who is of normal retirement age as defined [by IC 5-10.3-12-14](#) on your last day of service, and whose last day of service is after June 30, 2021.

## 1.8 Indiana Code Governing RMBA

The laws and regulations governing the RMBA plan may be found at [Chapter 5-10-8.5](#) of the Indiana Code (IC) and [Article 23 of Title 35](#) of the Indiana Administrative Code (IAC). The content and reference of this handbook does not constitute legal advice, and nothing herein should be considered a legal opinion. In the event of a discrepancy between the information in this handbook and the laws of the State of Indiana, the applicable law shall apply.



Certain State of Indiana employees are eligible for participation in RMBA based on specific criteria as outlined in this section.

### 2.1 RMBA Eligibility

In order to be eligible to participate in RMBA, you must be a full-time employee of the State of Indiana. This includes employees of the executive, legislative, or judicial branch of the Indiana State government; individuals elected to office or appointed into an elected position; members of the Indiana General Assembly; elected officers paid by the State; officers paid by the State under [IC 33-23-5-10](#), [IC 33-38-5-7](#), or [IC 33-39-6-2](#); employees of the Indiana State Police department who waived coverage under a common and unified plan of self-insurance before July 1, 2011 as stated in [IC 5-10-8-6](#); and Indiana State Police employees who make a timely election to participate in this RMBA Plan.

You are not eligible to participate in RMBA if you are a State Conservation Officer, a State Excise Police Officer, or an employee of the Indiana State Police if you did not waive coverage of insurance and make a timely election to participate in RMBA. For more information about this, see [IC 5-10-8.5](#), [35 IAC 23](#) and [Section 2.2](#).

### 2.2 Special Eligibility Provisions for State Police Employees

An employee of the State Police Department who waived coverage under a common and unified plan of self-insurance provided for under [IC 5-10-8-6](#) before July 1, 2011, evidence of such waiver satisfactory to INPRS must be provided before such employee may continue as an Eligible employee under RMBA on or after July 1, 2011. State Police Employees must meet these requirements in order to participate in RMBA.

- You must have made a one-time irrevocable election to participate in RMBA between July 1, 2011, and August 31, 2011, if:
  - You are a former employee of executive, legislative, or judicial branch;
  - You left that former employment after June 30, 2007, and before July 1, 2011, and was later employed by State Police in a position that was not eligible for State Police pension and benefit programs; and
  - You remain employed by State Police on July 1, 2011, in a job that is not eligible for State Police pension and benefit programs; and

**NOTE:** Any service with the state police department after June 30, 2011, will not be included for any purpose under RMBA.

- You must make an election to participate in RMBA no more than 60 days after the you become an employee of State Police in a job classification that is not eligible for State Police pension and benefit programs if:
  - You are a former employee of the executive, legislative or judicial branch (other than state police);
  - You left that employment after June 30, 2011;



- You later become employed by State Police department in job that is not eligible for State Police pension and benefit programs; and
- You were eligible to make an election under this subsection but did not make the election in the timelines described above, you will not be eligible for RMBA with respect to your service with the State Police department.

Any individual who makes these elections cannot also participate in a retirement medical benefits account maintained by the State Police department.

## 2.3 Participating Employers

Employers as defined under [35 IAC 23-1-2\(3\)](#) include:

- The State of Indiana. This includes any board, commission, department, division, authority, institution, establishment, facility, or governmental unit under the supervision of the state, having a payroll in a relation to persons it immediately employs.
- The President Pro Tempore of the Senate, for a member or an employee of the Indiana Senate;
- The Speaker of the House of Representatives, for a member or an employee of the State House of Representatives; or
- The personnel subcommittee of the legislative council for an employee of the State Legislative Services Agency.
- The Indiana Supreme Court, for a member or employee of the judicial branch of state government, including:
  - a justice
  - a judge
  - a prosecuting attorney
  - an officer paid by the state
  - an employee of the judicial branch of State government, including an employee of any board, commission, department, division, authority, institution, establishment, facility, or governmental unit under the supervision of the judicial branch, having a payroll in relation to persons it immediately employs.

## 2.4 Becoming a RMBA Participant

Public employees will be eligible to participate in RMBA and will become a participant on the later of August 1, 2007 (the effective date of RMBA), or the date the public employee becomes a participant.

Becoming a RMBA participant is automatic – participants do not have to complete any forms.

## 2.5 Separation from Service

Your participation in RMBA will terminate when you separate from RMBA-covered service prior to becoming a retired participant and do not reemploy in a RMBA-covered position within 30 days. In this case, your balance in RMBA will be forfeited on the date of your separation.

## 2.6 Retirement Effective Date

Your retirement effective date for purposes of receiving your defined benefit (pension) or from your defined contribution account is determined under the rules of the plan of which you are a member (for example, the public employees' retirement fund). Once you have separated service from a RMBA-covered employer and you meet the definition of "Retired Participant" in [Section 1.7](#), you are eligible to begin receiving reimbursements from your RMBA account for qualifying expenses.

### 2.6.1 Retired Participants

Only retired participants and their covered dependents are entitled to receive reimbursements from RMBA.

A retired participant is:

- A person who is eligible for a normal, unreduced, or a disability benefit on their last day of service in an eligible position;
- As of July 1, 2021, a retired participant will also include members of the PERF My Choice defined contribution plan, if the member is at least 62 years of age with 5 years of service in a RMBA-covered position. A member must separate from State service on or after July 1, 2021, in order to be eligible under this provision; and
- An elected or appointed officer with at least ten (10) years of service. For purposes of determining whether you have 10 years of service:
  - If you have years of service with more than one employer as an Eligible Employee, your years of service are the sum of all of your years of service as an Eligible Employee with all employers.
  - Effective July 1, 2013, any partial year of service in the year you were appointed to an elected position shall be considered to be one (1) complete year of service.

Years of service that are purchased by or on your behalf in order for you to be eligible for a benefit under the State public employees' retirement fund in which you are a member will not be included in determining your eligibility for benefits or the total amount of benefits under this RMBA plan.

### 2.6.2 Last Day in Pay for Retirement

Last day in pay (LDIP) status means the last day you worked in a RMBA eligible position.

## 2.7 Participants Entitled to Benefits

Only a retired participant (as defined in Section 1.7 Important Terms) and your covered dependents are entitled to receive benefits from RMBA.

If you are not a retired participant and separate from service, the amounts credited to your reimbursement account will be forfeited to the Trust Fund as of the date of your termination of employment.

## 2.8 Death of Retirement Eligible Employee

If you die while in service after the date on which you became eligible for a normal, unreduced retirement benefit (as determined by the statutes and codes governing a state public employee retirement fund of which you are a member) or were a PERF My Choice member who was normal retirement age and had not yet terminated employment, you will be treated as a retired participant as of your date of death.

## 2.9 Former and Retired Participants Return to State Employment

A former or a retired participant re-employed as a state employee after termination of your employment:

- A. **Former participant.** If you re-employ and were a former participant (not a retired participant) who was separated from state employment more thirty (30) days, you will be treated as a new employee upon such employment. When you again become an Eligible Employee, you regain a participant status. The balance of your account upon entering new employment will be \$0.

**NOTE:** You are treated as having been immediately employed or re-employed by a participating employer if your date of employment or re-employment is no more than 30 days after the date of your separation from service with your former employer.

- B. **Retired participant.** If you re-employ as a retired participant,
1. The balance of your reimbursement account will not be zeroed out upon such employment;
  2. You will not be able to receive reimbursements from your RMBA account during your re-employment;
  3. You will not receive additional contributions during the period of re-employment; and
  4. Upon termination of your subsequent employment, you will again be eligible to receive reimbursements from your RMBA account.

INPRS will have sole and complete discretion, including, without limitation, determining whether or not a former participant or a retired participant will be deemed to be a re-employed employee and the basis (including records, reports and/or other information) upon which such determination will be made.

## 2.10 Cessation of Participation

A retired participant's participation will cease when:

- A. Your reimbursement account is depleted;
- B. There have been no reimbursements made from your reimbursement account for at least six (6) months and the balance in your reimbursement account is less than five dollars (\$5.00); or
- C. The retired participant has died, and any covered dependents have died or are no longer classified as covered dependents (whichever occurs first), the reimbursement account will be forfeited.

## 2.11 Personal Information

Changing your address and information about your covered dependents with your employer will not update that information with INPRS. Retired RMBA participants can report any changes in demographic information or update beneficiaries by contacting INPRS' Claims Administrators, Key Benefit Administrators at (800) 558-5553 or (317) 284-7150, emailing [Flexpro@Keybenefit.com](mailto:Flexpro@Keybenefit.com), or by fax at (866) 241-1488.

RMBA participants still working in a covered position can contact INPRS's Member Advocate Team to change demographic or covered dependent information at (844) GO-INPRS [(844) 464-6777].

**NOTE:** It is critical you keep the Claims Administrator informed of any changes to your name, addresses, or covered dependents.





## 3.1 Employer Contributions

Your employer will allocate contributions annually to the reimbursement account under the Trust Fund on your behalf. Participants of RMBA do not make employee contributions.

### 3.1.1 Contribution Rate

The amount of the contribution each Plan Year must equal the following, based on your attained age on the last day of the calendar year falling within the RMBA Plan Year for which the contribution is made:

<u>Participant’s Attained Age in Years</u>	<u>Annual Contribution Amount</u>
Less than 30	\$500
At least 30, but less than 40	\$800
At least 40, but less than 50	\$1,100
At least 50	\$1,400

INPRS will determine the date on which the contributions are credited to your reimbursement account according to Indiana law.

#### ***Contributions to a reimbursement account***

In order to receive a contribution to your reimbursement account in any given year, you must be an eligible employee. When you retire, you become a retired participant and going forward you will no longer receive annual contributions.

#### ***Employees of the State not eligible for contributions after June 30, 2011***

A contribution will not be made after June 30, 2011, for Conservation Officers of the Department of Natural Resources, State Excise Police Employees, and State Police Employees who do not meet the requirements discussed in [Section 2.2](#) of this handbook.

#### ***Employees of the State not eligible for contributions after June 30, 2017***

A contribution will not be made after June 30, 2017, for any employee who, on June 30, 2017, was eligible for a normal, unreduced retirement benefit from the State public employee retirement fund of which the employee is a member and has completed either:

- 15 years of service with the employee’s employer; or
- 10 years of service as an elected or appointed officer.

Individuals who fall within these categories received additional contributions described in [IC 5-10-8.5-16](#).

Refer to [Section 2.9, Former and Retired Participants Return to State Employment](#), for re-employment details.

### 3.1.2 Funding

All costs of providing the benefits available under this RMBA plan from the Trust Fund will be funded by:

- A. Contributions made by employers;
- B. All earnings on investments or deposits of the aggregate contributions to all participants' and retired participants' individual reimbursement accounts; and
- C. All contributions or payments made to all participants' and retired participants' individual reimbursement accounts in a manner provided by the Indiana General Assembly.

All contributions to the Trust Fund will be irrevocable at any time prior to satisfaction of all liabilities under RMBA. The earnings of the aggregate contributions to the retired participants' reimbursement accounts will be reduced by any investment losses in the Trust Fund and the administrative costs of RMBA before any earnings are credited to the balance of participants' reimbursement accounts.

### 3.1.3 The Trust Fund

The Trust Fund established under [IC 5-10-8-8.5](#) is a trust fund providing funding for the benefits provided under RMBA. As provided under [IC 5-10-8-8.5](#), all expenses of administering RMBA will be paid from the Trust Fund. INPRS will invest the assets of the Trust Fund in the same manner that other public money may be invested. The Trust Fund will be held for the exclusive benefit of participants and your covered dependents. Because the Trust Fund is a trust fund for purposes of [IC 4-9.1-1-7](#), money in the Trust Fund may not be transferred, assigned or otherwise removed from the Trust Fund by the State Board of Finance, INPRS or any other state agency and does not revert to the State general fund at the end of any State fiscal year.

## 3.2 Reimbursements

As a retired participant, you and, upon your death, your covered dependents, will be reimbursed from your reimbursement account for the Qualifying Expenses incurred by you or your covered dependents during the RMBA Plan Year, but only to the extent of the retired participant's balance in your reimbursement account. A claim for reimbursement must be submitted, and reimbursements will be made in accordance with [Section 4](#) of this handbook.

## 3.3 Reimbursement Accounts

Under the direction of INPRS, the Claims Administrator will establish a reimbursement account for each participant, which will be maintained by the Claims Administrator. As of June 30 of each year, the participant's employer will allocate contributions to the participant's reimbursement account based on the employer contribution amount as described in [IC 5-10-8.5-15](#). In addition, each subsequent year, each participant's reimbursement account will be credited or debited with that reimbursement account's share of the earnings or losses on the investments or deposits of all of the accounts after administrative expenses are paid. The maintenance of reimbursement accounts is only for accounting purposes, and no assets are segregated to any participant's account.

### 3.3.1 Additional Contributions

Additional contributions were earned by eligible participants through June 30, 2017.

Except for those participants discussed in [Section 3.1.1, Employees of the State not eligible for contributions after June 30, 2017](#), additional contributions are no longer credited to the participant's reimbursement accounts.

An annual contribution is the only contribution paid to eligible RMBA participants. For additional information on the additional contributions and requirements, please contact the Claims Administrator.

### 3.3.2 Retired Participants

If and when you become a retired participant, you will be treated as a participant for all purposes of the RMBA plan. A retired participant's reimbursement account will not be credited with any more annual contributions after you become a retired participant. Additionally, a retired participant's reimbursement account may be credited or debited with each account's share of earnings or losses on the investments or deposits of all reimbursement accounts after reduction for the administrative cost of the plan.

## 3.4 Qualifying Expenses

The following are expenses that qualify under the RMBA plan:

- Premiums paid under Medicare Part B (part B of the title XVIII of the Social Security Act, relating to supplementary medical insurance for the aged).
- Contributions made under a fully insured policy or self-funded plan or program providing group or individual coverage to the retired participant or covered dependents covering medical care. See section 213(d)(1)(A) and (B) of the Social Security Act for information on requirements regarding the definition of medical care.
- Premiums paid for tax-qualified long-term care insurance subject to limitations in section 213(d)(10) of the Internal Revenue Code.
- Expenses for the purchase of a policy, plan or program providing coverage for expenses in addition to medical care (as defined in IRS Code Section 213(d)), will be Qualifying Expenses only to the extent that such expenses are directly related to the cost of the medical care component of the policy. The cost for the medical care component of the policy must be reasonable for the type and amount of coverage purchased, as determined by the Claims Administrator, and must be separately stated in the insurance contract, billing statement or other documentation acceptable to the Claims Administrator.

However, the following expenses are not Qualifying Expenses and are not eligible for reimbursement:

- Expenses paid, reimbursed or reimbursable by any insurance, accident, health, or workers' compensation plan; or
- Expenses paid, reimbursed or reimbursable under an IRS Code Section 125 plan; or
- Expenses incurred while the individual is neither a retired participant nor a covered dependent; or
- Expenses the individual is not legally obligated to pay; or
- Anything not specifically listed above.

## 3.5 Covered Dependent

The term "covered dependent" means the retired participant's legally married spouse or a surviving spouse legally married to the retired participant on the date of the retired participant's death. A covered dependent

may, also, include an unmarried person who is a dependent child of the retired participant as defined under the State's health plans.

**NOTE:** In the event of a remarried RMBA participant's death, the legal spouse at the time of the participant's death must provide proof (i.e. the marriage certificate and death certificate) to the Claims Administrator for the spouse to be eligible.

To the extent covered dependents incur Qualifying Expenses after the death of a retired participant, those expenses will continue to be eligible for reimbursement until:

- The balance in the retired participant's reimbursement account is depleted; or
- The individual ceases to qualify as a covered dependent by remarriage or no longer meets the definition of dependent child under the State's health plans; or
- The Plan is amended or terminated.

**NOTE:** A surviving spouse of a RMBA participant will retain eligibility in the plan so long as the surviving spouse does not remarry and there remains a positive account balance. If the surviving spouse remarries, they will become ineligible in the RMBA associated with the deceased spouse.





This section addresses the payment procedures for retired participants.

### 4.1 Payment Procedures

To receive reimbursement for a Qualifying Expense under [Section 3](#) of this handbook, Plan Benefits, the retired participant must file a written claim with the Claims Administrator, no later than 90 days after the end of RMBA Plan Year in which the expense was incurred and paid. The claim must contain appropriate supporting documentation (such as bills, receipts, canceled checks, written statements and the like). The plan year is between July 1 and June 30. Ninety (90) days after the plan year falls on September 28, of each year.

An expense is incurred when the premium is incurred and paid by the retired participant or covered dependent. The Claims Administrator, in consultation with INPRS, will determine, at their discretion, whether or not the expenses to be reimbursed under RMBA are Qualifying Expenses and whether or not sufficient documentation has been submitted to support the payment of the claim. Claims will normally be paid as soon as practicable following their approval. Any claim paid will reduce the retired participant's reimbursement account by the amount paid.

### 4.2 Claim Review

The Claims Administrator will determine the timing and the amount of any payment to be made under RMBA. However, a retired participant may seek a review of any benefit determination made by the Claims Administrator upon written request. The Claims Administrator will afford the retired participant a full and fair review of such a request in accordance with the claims and review procedures applicable to RMBA established by INPRS. If you disagree with the Claims Administrator's decision, you can request administrative review. For more information on that process, view the Administrative Review [Section 5.1](#) of this handbook, and any claims procedures applicable to RMBA under applicable law.

**NOTE:** See [Section 5.1, Administrative Review](#), on what steps to take if your claim is denied and you disagree with that determination.

### 4.3 Subrogation

If Qualifying Expenses are paid or payable under this RMBA plan, and if the retired participant or covered dependent (or the retired participant's or covered dependent's guardian or estate) has or may have a claim against any other party or parties (including insurance companies and carriers) for payment of all or part of those expenses, this RMBA plan will be subrogated. All claims and rights of recovery of the retired participant or covered dependent and will be entitled to reimbursement from any judgment, settlement or payment resulting from the individual's claim or right. The Plan will be reimbursed in full for any Qualifying Expenses paid or payable by RMBA before any amounts (including any legal fees incurred by the retired participant, covered dependent, guardian or estate) are deducted from the judgment, settlement or payment are paid to any other person (including the retired participant or covered dependent). If a suit is filed, RMBA may record a notice of payment of benefits which will constitute a lien against any judgment recovered.

The retired participant or covered dependent (including your guardian or estate) must take any action that is reasonably required by RMBA to secure RMBA's rights under this section and avoid any action that would prejudice RMBA's rights. If the covered dependent is a minor or under any other legal disability, the parent

or guardian of the dependent may act on behalf of, and consequently bind, the dependent for purposes of this Section.

If the retired participant or covered dependent (including your guardian or estate) fails to promptly bring suit against the third party, RMBA may take any legal action it deems necessary or desirable against the third party in its own name or in the name of the retired participant or covered dependent to secure recovery. The Plan may retain the Qualifying Expenses paid or to be paid and its court costs (including attorney fees) from any judgment, settlement, or payment, with the balance, if any, to be paid to the retired participant or covered dependent or as the court may otherwise direct.

#### **4.4 Reimbursement**

If RMBA pays any amount in excess of the amount it is required to pay, RMBA will be entitled to be reimbursed for the excess from the payee. If a retired participant or covered dependent has received a payment, RMBA may reduce its required payment by that amount.



### 5.1 Administrative Review

**NOTE:** This information is only a guide and neither a substitute for, nor intended as legal advice.

If INPRS staff have answered your questions regarding your account but you disagree with the action or determination, and no alternative resolution is available, you may request administrative review under the Administrative Orders and Procedures Act ([IC 4-21.5 et seq](#)). You must have standing as a party or a right to intervention to request administrative review.

#### 5.1.1 Initial Determination of Denied Claims

If INPRS staff have answered your questions regarding your account but you disagree with the action or determination, and no alternate resolution is available, you may request administrative review under the Administrative Orders and Procedures Act ([IC 4-21.5 et al](#)). You must have standing as a party or a right to intervention to request administrative review.

You may petition INPRS in the form of a letter requesting a review of the action or determination you are disputing. This letter should specifically state the basis of your disagreement and include sufficient facts so that INPRS can make an evaluation and determination. You may include copies of any supporting documents. For a sample format of this member petition, see [Step 1: Member Petition for Administrative Review of Staff Action/Determination](#) form available on the INPRS website. You may send the form to the Indiana Public Retirement System (INPRS), Attn: Administrative Review, One North Capitol, Suite #001, Indianapolis, IN 46204, or by emailing it to [AdministrativeReviews@INPRS.in.gov](mailto:AdministrativeReviews@INPRS.in.gov).

Once an evaluation is complete, you will be notified with an initial determination letter, sent via certified mail. INPRS will detail in the letter our initial determination and provide supporting justification. In addition, INPRS will provide explicit instructions should you want to appeal the initial determination. Indiana law sets forth specific timelines to appeal a decision. Should your appeal be received after the deadline, under Indiana law, the initial determination will become final, and you will forfeit any future claims specific to that particular outcome. As noted, many processes and procedures followed by INPRS are statutory, meaning INPRS does not have the discretion to act outside of the law in granting a benefit that federal and/or state law does not permit.

If you disagree with the initial determination and wish to further challenge, you may bring the matter before an Administrative Law Judge (ALJ). To initiate this process, you must file a petition for review with the INPRS Executive Director. The petition for review:

- must meet the statutory requirements set forth in Indiana Code, section [4-21.5-3-7\(a\)](#); AND
- must be filed within 15 days after you have received the written notice of the INPRS initial determination letter. ([IC 4-21.5-3-7\(a\)](#)).

Click [here](#) to see a sample format of a petition for review by ALJ.

If your petition for review meets the statutory requirements, INPRS will arrange for an administrative hearing of your case, which is similar to a trial in a lawsuit but is conducted in a less formal manner ([IC 4-](#)

[21.5-3-25\(b\)](#)). You may be represented by counsel, but there's no requirement that you obtain representation. INPRS is not responsible for costs associated with your representation. The ALJ who conducts the review will consider the evidence concerning the administrative action/decision and decide whether INPRS has misinterpreted or misapplied the law and/or acted beyond the scope of its authority in your case.

After an ALJ is selected, you will be notified of the time and place of a pre-hearing conference, ordinarily conducted by conference call between you, INPRS, and the ALJ. The purpose of this conference is for the ALJ to identify and narrow the issues of the case and to set a timeframe for pleadings and discovery. A pleading is a formal document that sets forth allegations, complaints, denials, or defenses. Discovery is the process of learning information and obtaining documents from the other party.

If there are no material facts in dispute and the ALJ believes that the issues involved in the case deal with whether INPRS has applied or interpreted the law correctly, the ALJ may request a party file a motion for summary judgment. This means the ALJ may determine the case based on information submitted to the ALJ in writing. This is a process that speeds up the disposition of the case without the need for an evidentiary hearing where witnesses testify and are cross-examined.

If there are material issues of fact, the ALJ will set a date for an evidentiary hearing where each party may call and cross-examine witnesses and present other evidence. For a detailed outline of the ALJ review process, click [here](#).

Within ninety (90) days after the conclusion of the administrative hearing, the ALJ will issue a Finding of Facts and Conclusions of Law and written order concerning the action or decision that you are challenging ([IC 4-21.5-3-27](#)). The ALJ's order is then subject to review by the INPRS Executive Director. On behalf of the Board of Trustees, the Executive Director will issue a final order that affirms, modifies, or dissolves the ALJ's order ([IC 4-21.5-3-29\(b\)](#)).

### 5.1.2 Judicial Review

If you are still in disagreement at the conclusion of the administrative review, you may seek judicial review within thirty (30) days of receipt of the final order ([IC 4-21.5-5](#)). A reviewing court will examine only those disputed issues of fact that appear in the agency record of the appeal. The trial court may not retry the appeal or substitute its judgment for that of agency ([IC 4-21.5-5-11](#)).

See the [Administrative Review Regulations](#) available on the INPRS website for a list of all relevant IAC references.

## 5.2 Power of Attorney

The fund honors requests and directions from a lawful holder of a Power of Attorney document for you. This individual is known as the attorney-in-fact. The Power of Attorney must grant the attorney-in-fact the authority to transact business of the type requested. For instance, if the Power of Attorney document grants the attorney-in-fact broad discretion to handle all banking and financial transactions, the fund will accept directions regarding check delivery. If, on the other hand, you grant what is known as a Health Care Power of Attorney, the attorney-in-fact does not have the authority to direct the fund on any matter, even something as simple as an address change.

If you want to name a Power of Attorney for fund business only, without incurring the expense of legal counsel, the fund can provide a [Limited Power of Attorney for Members and Recipients \(State Form 49614\)](#). However, this Power of Attorney applies only to fund business and is not valid for general public

use. To receive a copy of this form to be completed and returned to the address on the form, contact the Member Advocate Team at (844) GO-INPRS [(844) 464-6777]. Member Advocates are available weekdays (excluding weekends and state designated holidays) from 8 a.m. to 8 p.m. ET.

If an attorney-in-fact attempts to act on your behalf, the fund will require a copy of the Power of Attorney. If a copy of the Power of Attorney is not in your file, the requested transaction will be denied. The denial will then be returned to the attorney-in-fact, requesting proof of legal authority to act on your behalf.

**NOTE:** Indiana law has very specific requirements for a Power of Attorney to be valid. Your signature must be witnessed and attested to by a Notary Public. Further, the Notary Public must sign the document along with the attorney's printed name and notarial seal.

## 5.3 Guardian

The plan honors requests and directions from a legally appointed guardian of your estate.

Before the plan can recognize acts of a guardian, the plan must receive copies of the Letters of Guardianship and/or other official court documents appointing the guardian. Only the guardian of your estate, the person with the power to handle financial matters (as opposed to the guardian of the person who is responsible for your physical well-being), may direct the plan.

Guardians are appointed only when you are declared incompetent by a court of law. Thus, while you are under an active guardianship and unable to act on your own behalf. The plan will not recognize your acts until provided proof that your right to act on your own behalf has been restored.

## 5.4 Access to Records

A RMBA participant may request their personal RMBA records online from the Claims Administrator. If records are not available online, INPRS may request records from the Claims Administrator.

### 5.4.1 Participant Records

Your records are confidential by law. [IC 5-10-8.5-13\(c\)](#) provides that the account and sub-account records of individual participant and participant's information are confidential, except for the name and contributions made on your behalf.

INPRS can provide information from your records to you, or to one of the following:

- a guardian,
- a representative of your estate,
- an attorney-in-fact (aka Power of Attorney or POA),
- someone to whom you have given express permission, or
- someone named by a court order.

There are other exceptions to this rule. Contact INPRS if you have a situation other than those outlined herein.

### 5.4.2 Public Records

You do not need to fill out a request for access to public records to get your information. You can:

- Call (844) GO-INPRS [(844) 464-6777],
- Email us at [questions@inprs.in.gov](mailto:questions@inprs.in.gov), or
- Send a written request or stop by in person at:

Indiana Public Retirement System  
One North Capitol Avenue, Suite 001  
Indianapolis, IN 46204

There are other exceptions to this rule. Contact INPRS if you have a situation other than those outlined herein.