

STATE UNIVERSITIES RETIREMENT SYSTEM

NOTICE OF ADOPTED AMENDMENT

- 1) Heading of the Part: Universities Retirement
- 2) Code Citation: 80 Ill. Adm. Code 1600
- 3) Section Number: 1600.320 Adopted Action:
Amendment
- 4) Statutory Authority: 40 ILCS 5/15-177
- 5) Effective Date of Amendment: June 25, 2010
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) A copy of the adopted amendment, including any material incorporated by reference, is on file in the agency's principal office and is available for public inspection.
- 9) Notice of Proposal Published in the Illinois Register: February 16, 2010; 34 Ill. Reg. 2441
- 10) Has JCAR issued a Statement of Objection to this amendment? No
- 11) Differences between proposal and final version: None
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? No changes were made.
- 13) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Amendment: An amendment revising the disability claims review process by clarifying the necessary criteria for the award of disability benefits, establishing the role of the medical claims processor, and establishing procedures for the ongoing investigation of disability claims.
- 16) Information and questions regarding this adopted amendment shall be directed to:

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The full text of the Adopted Amendment begins on the next page:

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TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE D: RETIREMENT SYSTEMS
CHAPTER II: STATE UNIVERSITIES RETIREMENT SYSTEMPART 1600
UNIVERSITIES RETIREMENT

SUBPART A: GENERAL

Section

- 1600.100 Definitions
- 1600.110 Freedom of Information Act
- 1600.120 Open Meetings Act
- 1600.130 Procurement

SUBPART B: CONTRIBUTIONS AND SERVICE CREDIT

Section

- 1600.202 Return to Employment
- 1600.203 Independent Contractors
- 1600.205 Compensation Subject to Withholding
- 1600.210 Crediting Interest on Participant Contributions and Other Reserves
- 1600.220 Election to Make Contributions Covering Leave of Absence at Less Than 50% Pay
- 1600.230 Election to Pay Contributions Based upon Employment that Preceded Certification as a Participant
- 1600.240 Election to Make Contributions Covering Periods of Military Leave Protected under USERRA
- 1600.250 Sick Leave Accrual Schedule
- 1600.260 Part-time/Concurrent Service Adjustment
- 1600.270 Employer Contributions for Benefit Increases Resulting from Earnings Increases Exceeding 6%

SUBPART C: CLAIMS PROCEDURE AND EVIDENTIARY REQUIREMENTS

Section

- 1600.300 Effective Beneficiary Designations
- 1600.305 Full-Time Student Survivors Insurance Beneficiaries
- 1600.310 Dependency of Beneficiaries
- 1600.320 [Procedures to be Followed in Medical Evaluation of Disability Claims Procedure](#)

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SUBPART D: BENEFIT CALCULATION AND PAYMENT

Section

1600.400	Determination of Final Rate of Earnings Period
1600.410	Twenty Percent Limitation on Final Rate of Earnings Increases
1600.420	Making Preliminary Estimated Payments
1600.430	Excess Benefit Arrangement
1600.431	Indirect Payments to Minors and Legally Disabled Persons
1600.432	Indirect Payments to Child Survivors Through the Surviving Spouse
1600.440	Voluntary Deductions from Annuity Payments
1600.450	Overpayment Recovery

SUBPART E: ADMINISTRATIVE REVIEW

Section

1600.500	Rules of Practice – Nature and Requirements of Formal Hearings
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SUBPART F: QUALIFIED ILLINOIS DOMESTIC RELATIONS ORDERS

Section

1600.600	Definitions
1600.605	Requirements for a Valid Qualified Illinois Domestic Relations Order
1600.610	Invalid Orders
1600.615	Filing a QILDRO with the System
1600.620	Modified QILDROs
1600.625	Benefits Affected by a QILDRO
1600.630	Effect of a Valid QILDRO
1600.635	QILDROs Against Persons Who Became Members Prior to July 1, 1999
1600.640	Alternate Payee's Address
1600.645	Electing Form of Payment
1600.650	Automatic Annual Increases
1600.655	Expiration of a QILDRO
1600.660	Reciprocal Systems QILDRO Policy Statement
1600.665	Providing Benefit Information for Divorce Purposes

AUTHORITY: Implementing and authorized by Section 15-177 of the Illinois Pension Code [40 ILCS 5/15-177].

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SOURCE: Amended September 2, 1977; amended at 2 Ill. Reg. 31, p.53, effective July 30, 1978; amended at 7 Ill. Reg. 8139, effective June 29, 1983; codified at 8 Ill. Reg. 19683; amended at 11 Ill. Reg. 15656, effective September 9, 1987; amended at 13 Ill. Reg. 18939, effective November 21, 1989; amended at 14 Ill. Reg. 6789, effective April 20, 1990; emergency amendment at 21 Ill. Reg. 4864, effective March 26, 1997, for a maximum of 150 days; amended at 21 Ill. Reg. 6095, effective May 2, 1997; amended at 21 Ill. Reg. 11962, effective August 13, 1997; amended at 21 Ill. Reg. 12653, effective August 28, 1997; amended at 22 Ill. Reg. 4116, effective February 9, 1998; amended at 23 Ill. Reg. 13667, effective November 1, 1999; amended at 25 Ill. Reg. 10206, effective July 30, 2001; amended at 28 Ill. Reg. 2292, effective January 23, 2004; expedited correction at 28 Ill. Reg. 7575, effective January 23, 2004; amended at 29 Ill. Reg. 2729, effective March 1, 2005; amended at 29 Ill. Reg. 11819, effective July 12, 2005; amended at 29 Ill. Reg. 14060, effective September 1, 2005; amended at 29 Ill. Reg. 14351, effective September 6, 2005; amended at 30 Ill. Reg. 6170, effective March 21, 2006; amended at 30 Ill. Reg. 7778, effective April 5, 2006; amended at 30 Ill. Reg. 9911, effective May 9, 2006; amended at 30 Ill. Reg. 17509, effective October 19, 2006; amended at 31 Ill. Reg. 4267, effective February 22, 2007; amended at 31 Ill. Reg. 4927, effective March 12, 2007; recodified at 31 Ill. Reg. 10194; amended at 32 Ill. Reg. 16515, effective September 25, 2008; emergency amendment at 33 Ill. Reg. 6525, effective April 27, 2009, for a maximum of 150 days; emergency expired September 23, 2009; amended at 33 Ill. Reg. 10757, effective July 1, 2009; amended at 33 Ill. Reg. 16755, effective November 23, 2009; amended at 34 Ill. Reg. 9523, effective June 25, 2010.

SUBPART C: CLAIMS PROCEDURE AND EVIDENTIARY REQUIREMENTS

Section 1600.320 ~~Procedures to be Followed in Medical Evaluation of~~ Disability Claims Procedure

- a) ~~Pursuant to~~ Section 15-150 of the Code, ~~provides that a participant may be granted a disability benefit if, while a participating employee, he or she becomes physically or mentally incapacitated and unable to perform the duties of his or her assigned position for any period exceeding 60 consecutive calendar days and the employee had completed 2 years of service at the time of disability, unless the disability is a result of an accident. An employee shall be considered disabled only during the period for which the Board determines, based upon the evidence listed in this Section, that the employee is~~ has received a written certificate by at least 2 licensed and practicing physicians appointed by the Board stating that the participant is disabled and unable to reasonably perform the duties of his or her assigned position as a result of a physical or mental disability and a written certificate by the employer that the participant is unable to perform the duties of

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~~his or her assigned position. This determination shall be based upon:~~

- ~~1) a written certificate from one or more licensed and practicing physicians appointed by or acceptable to the Board, stating that the employee is disabled and unable to reasonably perform the duties of his or her assigned position;~~
- ~~2) a written certificate from the employer stating that the employee is unable to perform the duties of his or her assigned position; and~~
- ~~3) any other medical examinations, hospital records, laboratory results, or other information necessary for determining the employment capacity and condition of the employee.~~

~~b) Application Filing Requirements~~

- ~~1) An application for disability benefits must include the certifications described in subsections (a)(1) and (a)(2), and supporting documentation described in subsection (a)(3), all as explained in more detail in this Section, for each disabling condition and for the entire period of disability.~~
- ~~2) The application must be filed within one calendar year after the date on which the disability occurred.~~

~~b) The Code authorizes the Board to employ medical services as shall be required for the efficient administration of SURS.~~

~~e) Appointment of Medical Director. The Board has appointed a Medical Director whose responsibility is to review the medical reports received from the examining physicians, and to advise the Board as to whether the medical requirements of the Code have been met.~~

~~c) Certification By Physicians. For purposes of subsection (a)(1), the following shall apply:Appointment of Examining Physicians~~

- ~~1) Physicians acceptable to the Board are attending physicians, physicians designated by the participant and physicians to whom the participant was referred by the attending or designated physician. Physicians appointed by SURS staff to examine the participant are deemed to be physicians~~

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appointed by the Board. The physician must be licensed to practice and be currently practicing in the field of expertise related to the underlying physical or mental condition for which disability benefits are sought.

- 2) The certification must be signed by a physician described in subsection (c)(1) or an authorized representative of the physician and must state the following:
 - A) the medical diagnosis of the physical or mental condition;
 - B) the prognosis of the physical or mental condition;
 - C) the physical or mental limitations to which the participant should adhere; and
 - D) that the participant is disabled and is unable to reasonably perform the duties of his or her assigned position as a result of the physical or mental disability.

- 3) The certification must be accompanied by a report containing the following:
 - A) the date of examination;
 - B) the medical history of the participant;
 - C) the results of any diagnostic tests used;
 - D) the diagnosis of the physical or mental condition;
 - E) the plan of treatment for the physical or mental condition and prognosis in response to the treatment plan;
 - F) an evaluation of the physical or mental condition as it bears upon the participant's ability to reasonably perform the duties of his or her assigned position; and
 - G) any existing documentation of objective medically demonstrable anatomical, physiological or psychological abnormalities

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manifested as test results or laboratory findings apart from self-reported symptoms.

- d) Certification by Employers. For purposes of subsection (a)(2), the certification must be signed by an officer authorized by the employer and must state the following:
- 1) the physical or mental performance requirements for the reasonable performance of the participant's assigned position;
 - 2) whether the participant is able to satisfy each physical or mental performance requirement for the reasonable performance of his or her assigned position to the best of the employer's knowledge or belief and the reason for that knowledge or belief; and
 - 3) whether the participant is able to reasonably perform the duties of his or her assigned position based on the provisions of subsections (d)(1) and (d)(2).
- ~~1) Unless otherwise authorized by the Executive Committee or the Board on recommendation of the Medical Director, the following shall be the examining physicians:~~
- ~~A) The attending physician or physicians designated by the participant; and~~
 - ~~B) The health officer of the employer or some other physician who is designated by the employer.~~
- ~~2) If the participant has not been examined by the employer's health officer or by some other physician who is designated by the employer, the Medical Director shall appoint some other physician to conduct the examination and to submit a recommendation regarding the disability of the participant.~~
- ~~3) If, in the opinion of the Medical Director, the nature of the disability or other circumstances justify the appointment of someone other than the participant's attending physician or employer's health officer as the examining physicians, the Medical Director shall appoint a special~~

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~~examining physician or physicians.~~

- e) Determination of Disability. If ~~the examining physicians certify that~~ the participant ~~establishes, by a preponderance of the evidence, that he or she is physically or mentally disabled and unable to perform the duties of his or her assigned position as a result of the disability,~~ the participant shall be determined eligible for disability benefits under Section 15-150 of the Code.
- 1) SURS staff shall determine whether certifications made under subsections (a)(1) and (a)(2) and supporting documentation described in subsection (a)(3) establish eligibility for disability benefits.
 - 2) At the discretion of SURS staff, the participant may be required to submit to additional examinations by staff appointed physicians or specialists to aid in the determination process.
 - 3) Physical or mental conditions resulting from self-inflicted injuries, substance abuse, or any act for which the participant was convicted of a misdemeanor or felony are not the result of an accident for purposes of Section 15-150 of the Code.
- f) ~~Disagreement among Examining Physicians. If the examining physicians are not in agreement as to whether the participant is disabled, the Medical Director shall appoint some other licensed and practicing physician to conduct a special medical examination and submit a recommendation as to whether the participant is able to perform the duties of his or her assigned position. If the special examining physician agrees that the participant is disabled, the Medical Director shall recommend that the claim be approved.~~
- g) ~~Certification of Disability by the Employer. The Code provides that a participant may qualify for disability benefits only if the employer certifies that the participant is unable to perform the duties of his or her assigned position. This certification shall be completed by any officer authorized by the employer to make this certification. The certification of the employer may be based upon a medical examination given by the employer's health officer or upon medical reports submitted to the health officer by other examining physicians.~~
- fh) Subsequent Re-examination~~Reexamination~~ of Disabled Participants

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- 1) ~~SURS staff shall~~ It shall be the responsibility of the Medical Director to secure from one or more~~examining~~ physicians, periodically, re-evaluation reports concerning the continued disability of the participant. The date of re-evaluation~~reevaluation of the participant's ability to perform his or her~~ duties shall be determined by SURS staff~~the Medical Director~~ on the basis of the medical reports received previously, the nature of the disability, and~~or~~ other relevant information.
 - 2) In the re-evaluation~~reevaluation~~ of disability claims, the examining physician shall be the attending physician or the physician designated by the participant, but, if, ~~in the opinion of the Medical Director,~~ the nature of the disability or other circumstances justify the appointment of someone other than the participant's attending physician or designated physician as the examining physician, SURS staff~~the Medical Director~~ shall make the appointment. ~~The certification of disability by the employer may be based upon the medical reports received from the employer's health officer or other physicians.~~ All other procedures that may be applicable in processing the initial claim for disability benefits shall be followed in re-evaluation~~reevaluation~~ of the claim.
- g) Release of Medical Information. The participant may be required to authorize the release of all medical or other information related to the disability claim, including but not limited to medical reports, hospital records, Department of Employment Security earnings statements, income tax records, unemployment records, and any record deemed necessary to the administration of the disability claim. The failure of the participant to submit to a re-evaluation examination or a treatment plan, to produce records, or to approve release of information required may result in the suspension of disability benefit payments.
- i) ~~Amendment or Repeal of Medical Evaluation Regulations. This Section is issued by the Board in accordance with the provisions of the Code. The right is reserved to rescind or amend this Section in whole or in part at anytime. However, no rescission or amendment shall be effective until the rescission or amendment has been filed with the Secretary of State. Amendment or repeal will be made in accordance with the Illinois Administrative Procedure Act [5 ILCS 100].~~

(Source: Amended at 34 Ill. Reg. 9523, effective June 25, 2010)