

## (1) PERAC Required Documents



### In This Section

#### Required Documents:

- ✓ 1.1 Ordinary Disability
- ✓ 1.2 Accidental Disability
- ✓ 1.3 Accidental Disability (Presumption)
- ✓ 1.4 Involuntary Disability
- ✓ 1.5 Accidental Death (Section 9)
- ✓ 1.6 Termination Retirement

The PERAC required documents to complete a member's **Disability Transmittal Application** are listed based on each Disability Benefit Type.

### 1.1 Ordinary Disability

#### PERAC Required Documents:

- ☐ Medical Panel Certificate & Narrative
- ☐ Treating Physician's Statement
- ☐ Description of Duties
- ☐ Employer's Statement
- ☐ Disability Retirement Application
- ☐ Proof of Veteran Status *(if selected)*
- ☐ Documentation of a Crime *(if selected)*
- ☐ Administrative Court Decisions *(if applicable)*
- ☐ Medical Records

## 1.2 Accidental Disability

### **PERAC Required Documents:**

- ☐ Medical Panel Certificate & Narrative
- ☐ Treating Physician's Statement
- ☐ Injury/Incident Report
- ☐ Description of Duties
- ☐ Employer's Statement
- ☐ Retirement Application
- ☐ Proof of Veteran Status *(if selected)*
- ☐ Documentation of a Crime *(if selected)*
- ☐ Administrative Court Decisions *(if applicable)*
- ☐ Medical Records

## 1.3 Accidental Disability (Presumptive)

### **PERAC Required Documents:**

- ☐ Medical Panel Certificate & Narrative
- ☐ Treating Physician's Statement
- ☐ Description of Duties
- ☐ Employer's Statement
- ☐ Retirement Application
- ☐ Pre-employment Physical
- ☐ Proof of Veteran Status *(if selected)*
- ☐ Documentation of a Crime *(if selected)*
- ☐ Administrative Court Decisions *(if applicable)*
- ☐ Medical Records

## 1.4 Involuntary Disability

### **PERAC Required Documents:**

- ☐ Statement of Facts
- ☐ Medical Panel Certificate & Narrative
- ☐ Injury/Incident Reports *(if applicable)*
- ☐ Description of Duties
- ☐ Employer's Statement
- ☐ Retirement Application
- ☐ Fair Statement of the Facts (Employer)
- ☐ Proof of Veteran Status *(if selected)*
- ☐ Documentation of a Crime *(if selected)*
- ☐ Medical Records

## 1.5 Accidental Death (Section 9)

### **PERAC Required Documents:**

- ☐ Statement of Facts
- ☐ Medical Panel Certificate & Narrative *(if retired)*
- ☐ Injury Report *(if applicable)*
- ☐ Description of Duties *(if applicable)*
- ☐ Pre-employment Physical *(if applicable)*
- ☐ Death Certificate
- ☐ Proof of Veteran Status *(if selected)*
- ☐ Documentation of a Crime *(if selected)*

## 1.6 Termination Retirement

### ***PERAC Required Documents:***

- ☐ Employer's Statement
- ☐ Letter From Employer Terminating Position
- ☐ Separation Agreement *(if applicable)*
- ☐ Documentation of a Crime *(if selected)*
- ☐ Proof of Veteran Status *(if selected)*
- ☐ Administrative Court Decisions *(if applicable)*

## (2) How to Start & Submit a Disability Transmittal

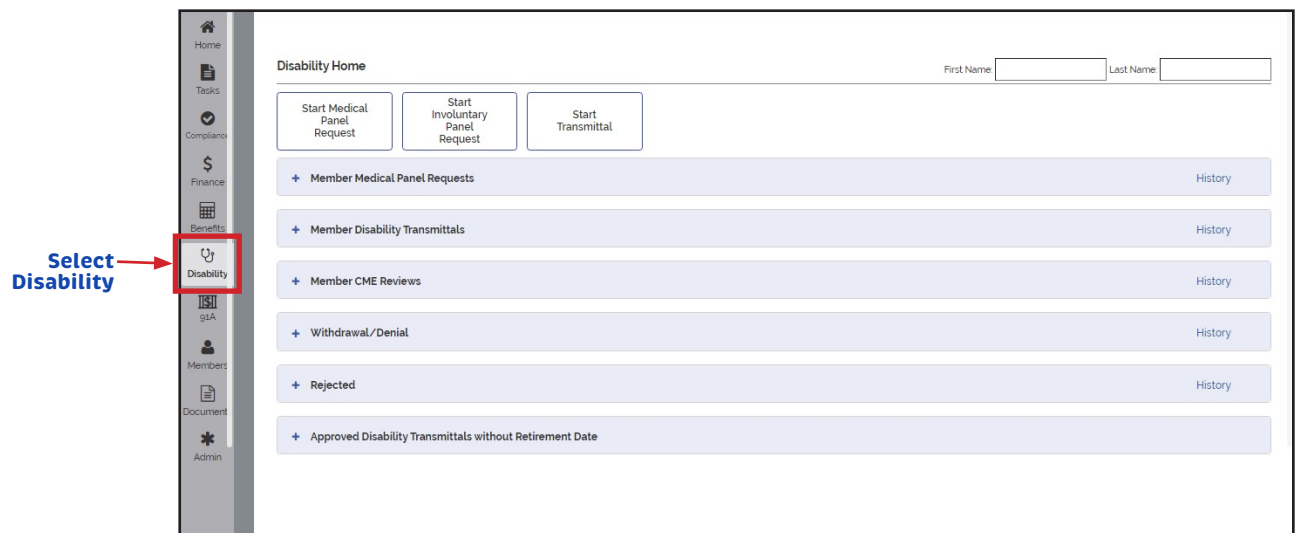


### In This Section

- ✓ 2.1 Submitting a Disability Transmittal
- ✓ 2.2 Member Information Page
- ✓ 2.3 Required Documents
- ✓ 2.4 Board Signatures

### 2.1 Submitting a Disability Transmittal

*Figure 2.1.1: Accessing the Disability Home Page*



- Select **Disability** from left side bar to access the **Disability Home** page.

Figure 2.1.2: Start Transmittal Screen

- Select **Start Transmittal**.
- After Selecting **Start Transmittal**, you will be at the **Member Information Page**.

## 2.2 Member Information Page

Figure 2.2.1: Member & Disability Information Screen

- You must enter all required fields before you are able to go to the next step.

**Figure 2.2.2: Benefit According to Chapter 32 Drop-Down Menu**

Disability Transmittal Request

Retirement Board Decision

Benefit according to Chapter 32, section\*

Benefit applies to\*

Is this request to an Appeal or Court Decision\*

Contact Info\*

Sex\*  Street Address\*

Street Address 2

City\*  State\*

Phone Type\*  Phone #\*

Email

6 Ordinary  
6 (16) Involuntary Ordinary  
7 Accidental  
7 (16) Accidental Involuntary  
7 (94) Accidental with Heart Presumption  
7 (94A) Accidental with Lung Presumption  
7 (94B) Accidental with Cancer Presumption  
7 (16)(94) Involuntary with Heart Presumption  
7 (16)(94A) Involuntary with Lung Presumption  
7 (16)(94B) Involuntary with Cancer Presumption  
9 Accidental Death  
9 (94) Accidental Death with Heart Presumption  
9 (94A) Accidental Death with Lung Presumption  
9 (94B) Accidental Death with Cancer Presumption  
10 Termination  
100 Death in Line of Duty  
26A State Trooper Accidental  
26A (94) State Trooper Accidental with Heart Presumption  
26A (94A) State Trooper Accidental with Lung Presumption  
26A (94B) State Trooper Accidental with Cancer Presumption

Select appropriate section of the law from this drop down menu

- You must select the appropriate section of the law that applies from the drop-down menu under **Benefit according to Chapter 32 section** before you can proceed.
- The selection you make will determine the forms you will be required to upload.

**Figure 2.2.3: Remaining Member Information Pages (Part 1)**

Disability Transmittal Request

Retirement Board Decision

Benefit according to Chapter 32, section\* 7 (Accidental)

Benefit applies to\* Example User ☐ Use member info

Is this request to an Appeal or Court Decision\* No

Appropriate Provisions\*

In case of an accidental disability/accidental death, check appropriate provision:

☐ Notice to board within 90 days?

☐ Accident occurred within 2 years preceding date of application?

☐ Group 4 member: Is the record of the injury on file in the official records of his/her department?

☒ Not Applicable

- Complete all remaining fields on member information screen (Shown above: **Retirement Board Decision** and **Appropriate Provisions**).

Figure 2.2.4: Remaining Member Information Pages (Part 2)

- Complete all remaining fields on member information page (shown above: **Contact Info.** and **Worker Compensation/111F**).

Figure 2.2.4: Remaining Member Information Pages (Part 3)

- Complete all remaining fields on member information page (shown above: **Worker Compensation/111F**, **Crimes** and **Signature Method**)
- Select **Next** once you have completed all required fields.
- Any missing information will be highlighted and must be completed before you are able to proceed to the next step.



**Figure 2.2.5: Completed Member Information Page**

➤ Member's data will pre-populate as shown above.

## 2.3 Required Documents

The **Benefit Type** selected for the application will determine the required documents that need to be uploaded before submission to PERAC.

Make sure the proper documents are uploaded to avoid delays in the application process.

For a listing of required documents, please refer to the section entitled **(1) PERAC Required Documents**.

**Figure 2.3.1: Incomplete Documents Fail Submission of Transmittal**

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	K-Lone Steele (ghost user)	-	
Medical Panel Certificate & Narrative	K-Lone Steele (ghost user)	-	
Injury/Incident Reports	K-Lone Steele (ghost user)	-	
Description of Essential Duties	K-Lone Steele (ghost user)	-	
Employer Statement	K-Lone Steele (ghost user)	-	
Retirement Application	K-Lone Steele (ghost user)	-	
Treating Physician Narrative	K-Lone Steele (ghost user)	-	
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures	Chuck Ztettst	-	
	Chuck Ztettst	-	
	Chuck Ztettst	-	
	Chuck Ztettst	-	

➤ Documents not **Complete** will fail **Submission of Transmittal**.

Figure 2.3.2: Properly Uploaded Documents Show Up as Complete

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	K-Lone Steele (ghost user)	✓	1
Medical Panel Certificate & Narrative	K-Lone Steele (ghost user)	✓	1
Injury/Incident Reports	K-Lone Steele (ghost user)	✓	1
Description of Essential Duties	K-Lone Steele (ghost user)	✓	1
Employer Statement	K-Lone Steele (ghost user)	✓	1
Retirement Application	K-Lone Steele (ghost user)	✓	1
Treating Physician Narrative	K-Lone Steele (ghost user)	✓	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			
	Chuck Ztest3	✗	
	Chuck Ztest4	✗	
	Chuck Ztest5	✗	
	Chuck Ztest1	✗	



➤ Documents properly uploaded into PROSPER will turn **Green** as shown above.

**NOTE:** Board members' signatures must also be completed before submitting to PERAC.

Figure 2.3.3: Disability Transmittal Cancellation

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	K-Lone Steele (ghost user)	✓	1
Medical Panel Certificate & Narrative	K-Lone Steele (ghost user)	✓	1
Injury/Incident Reports	K-Lone Steele (ghost user)	✓	1
Description of Essential Duties	K-Lone Steele (ghost user)	✓	1
Employer Statement	K-Lone Steele (ghost user)	✓	1
Retirement Application	K-Lone Steele (ghost user)	✓	1
Treating Physician Narrative	K-Lone Steele (ghost user)	✓	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			
	Chuck Ztest3	✗	
	Chuck Ztest4	✗	
	Chuck Ztest5	✗	
	Chuck Ztest1	✗	

➤ If an error occurs during the application process in PROSPER, you may at this point rescind this application by selecting the **Cancel** button.

➤ The **Cancellation** pop-up menu will appear. Select the **Reason** for cancelling the transmittal from the drop-down list.



**CAUTION:** If you select **Submit**, you will not have the ability to **Cancel**. If **Submit** was selected in error, you are required to contact PERAC personnel to assist.

## 2.4 Board Signatures

Board Members must sign in order to submit to PERAC. Board Members have the option to select:

- YES
- NO
- DNP (Did Not Participate) OR
- Abstain

Board members should check the signing options **BEFORE** submitting. Once submitted, they cannot rescind. Board Members unable to complete/sign this section, please contact PERAC.

**Figure 2.4.1: Disability Transmittal Request Ready to Submit**

The screenshot shows the 'Disability Transmittal Request' form. It has a sidebar with navigation links: Home, Tasks, Compliance, Finance, Benefits, Disability, gSA, Members, Documents, and Admin. The main content area is titled 'Disability Transmittal Request' and contains a table with the following columns: Forms, Assigned, Complete, and Attachments.

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	K-Lone Steele (ghost user)	✓	1
Medical Panel Certificate & Narrative	K-Lone Steele (ghost user)	✓	1
Injury/Incident Reports	K-Lone Steele (ghost user)	✓	1
Description of Essential Duties	K-Lone Steele (ghost user)	✓	1
Employer Statement	K-Lone Steele (ghost user)	✓	1
Retirement Application	K-Lone Steele (ghost user)	✓	1
Treating Physician Narrative	K-Lone Steele (ghost user)	✓	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			
	Chuck Ztestg	✗	
	Chuck Ztestg	✗	
	Chuck Ztestg	✗	
	Chuck Ztestg	✗	

At the bottom of the form, there is a 'Cancel' button on the left and a 'Submit' button on the right. A red box highlights the 'Submit' button, and a red arrow points to it from the text: 'Hit Submit once Board Member certification is complete to send to PERAC'.

- After board members' certification is completed, select **Submit**.
- The application has now been sent to PERAC Personnel.



**NOTE:** You cannot successfully submit an application to PERAC without board members' signatures.

Figure 2.4.2: Submitting a Disability Transmittal to PERAC

## Board Member Signatures

Other Attachments

Board Member Signatures		
FName56 LName56		DNP
FName57 LName57		DNP
FName58 LName58		DNP
FName59 LName59		DNP
FName60 LName60		DNP

Original

**ZZTEST PERAC** Massachusetts Public Employee Retirement Administration Commission Hello: FName56 LName56 Sign Out

**Tasks**

- Your Term Pledge Signature due by 5/16/2017.
- Your Eligibility Signature due by 5/16/2017.
- Board Member Certification has been assigned to you.
- Certification for Member: Disability Transmittal has been assigned to you.

**Notifications**

- Board Member Certification has been assigned to FName56 LName56.
- Board Member Certification has been assigned to FName56 LName56.

**Back**

Board: Zztest PERAC  
Member: James Smith  
Social Security #: 123-456789  
Application Type: Application for Disability Transmittal

**Board Member Certification**

Please indicate whether you approve the Application for Disability Transmittal.\*  
☐ Yes ☐ No ☒ Did Not Participate

By entering my name, checking the Electronic Signature box, and clicking on the buttons, I certify under the penalty true and complete to the best of my knowledge.

First Name\* MI Last Name\* Suffix

The electronic signature must match the name FName56 LName56

☐ I acknowledge that I am electronically signing this form\*

**Sign Document**

E signature must match what is on file with Prosper.

◎ **CONGRATULATIONS: You have successfully submitted a Disability Transmittal via PROSPER!**

## (3) How to Start & Submit a Termination Allowance

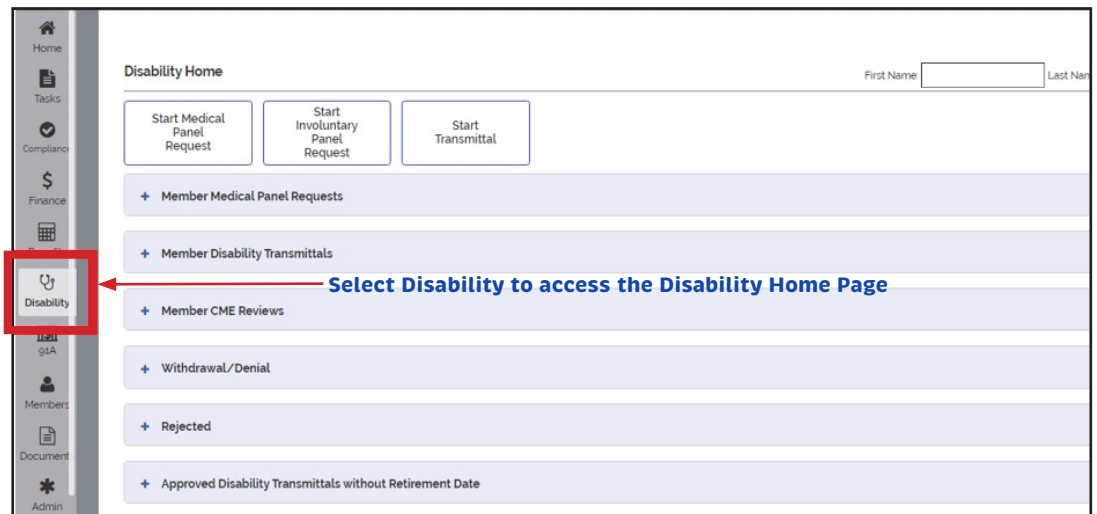


### In This Section

- ✓ 3.1 Submitting a Termination Allowance (Ch. 32 Sec. 10)
- ✓ 3.2 Member Information Page
- ✓ 3.3 Required Termination Retirement Documents

### 3.1 Submitting a Termination Allowance (Ch. 32 Sec. 10)

*Figure 3.1.1: Accessing the Disability Home Page*



- Select **Disability** from left side bar to access the **Disability Home** page.

Figure 3.1.2: Start Transmittal

The screenshot shows the 'Disability Home' interface. On the left is a vertical navigation menu with icons for Home, Tasks, Compliance, Finance, Benefits, Disability, gSA, Members, Documents, and Admin. The main content area has a header with 'Disability Home' and input fields for 'First Name' and 'Last Name'. Below the header are three buttons: 'Start Medical Panel Request', 'Start Involuntary Panel Request', and 'Start Transmittal'. The 'Start Transmittal' button is highlighted with a red rectangular box. A red arrow points from the text 'Hit Start Transmittal to begin' to this button. Below the buttons is a list of links, each with a plus icon and a 'History' link on the right: 'Member Medical Panel Requests', 'Member Disability Transmittals', 'Member CME Reviews', 'Withdrawal/Denial', 'Rejected', and 'Approved Disability Transmittals without Retirement Date'.

- Select **Start Transmittal** as shown above.
- After Selecting **Start Transmittal**, you will be at the **Member Information Page**.

## 3.2 Member Information Page

Figure 3.2.1: Member & Disability Information

The screenshot shows the 'Disability Transmittal Request' page. The main form is titled 'Member & Disability Information'. It contains several input fields: 'Social Security #' (with a masked input), 'Member Last Name\*' (with 'User' entered), 'Member First Name\*' (with 'Example' entered), 'M.I.' (empty), 'Verify Social Security #' (with a masked input), 'Name of Unit\*' (with 'Police' entered), 'Job Title/Group\*' (with 'Captain' entered), 'Date of Birth\*' (with '01/01/1947' entered), 'Retirement:' (with radio buttons for 'Member In Service' (selected) and 'Retired Retirement Date' (empty)), 'Date of Membership\*' (with '01/01/1987' entered), 'Total Creditable Service\*' (with 'Years' set to '5' and 'Months' empty), and 'Veteran Status\*' (with a dropdown menu showing 'No').

- You must enter all required fields before proceeding to the next step.

Figure 3.2.2: Benefit According to Chapter 32 Drop-Down Menu

Disability Transmittal Request

Retirement Board Decision

Benefit according to Chapter 32, section\*

Benefit applies to\*

Is this request to an Appeal or Court Decision

Contact Info\*

Sex\*  Street Address\*

Street Address 2

City\*  State\*

Phone Type\*  Phone #\*

Email

Use member info

6 Ordinary

6 (16) Involuntary Ordinary

7 Accidental

7 (16) Accidental Involuntary

7 (94) Accidental with Heart Presumption

7 (94A) Accidental with Lung Presumption

7 (94B) Accidental with Cancer Presumption

7 (16)(94) Involuntary with Heart Presumption

7 (16)(94A) Involuntary with Lung Presumption

7 (16)(94B) Involuntary with Cancer Presumption

9 Accidental Death

9 (94) Accidental Death with Heart Presumption

9 (94A) Accidental Death with Lung Presumption

9 (94B) Accidental Death with Cancer Presumption

10 Termination

100 Death in Line of Duty

26A State Trooper Accidental

26A (94) State Trooper Accidental with Heart Presumption

26A (94A) State Trooper Accidental with Lung Presumption

26A (94) State Trooper Accidental with Cancer Presumption

Select 10 Termination from the drop-down menu

- As you continue entering member's application, you will select **#10 Termination** from the drop-down menu.

Figure 3.2.3: Remaining Member Information Screens (Part 1)

Disability Transmittal Request

Contact Info\*

Sex\*  Street Address\*

Street Address 2

City\*  State\*  Zip\*

Phone Type\*  Phone #\*

Email

Worker Compensation/111F

Information required in connection with G.L.c. 152 (Workers' Compensation) and G.L.c. 41 § 111F (Injured on Duty):

Has/Is the member receiving workers compensation or 111F benefits?

- Complete all remaining fields on member information screen (Shown above: **Contact Info** and **Workers Compensation/111F**).

Figure 3.2.4: Remaining Member Information Screens (Part 2)

The screenshot displays the 'Disability Transmittal Request' form. The sidebar on the left contains links for Home, Tasks, Compliance, Finance, Benefits, Disability, gSA, Members, Documents, and Admin. The main content area is divided into three sections, each with a red box around its title:

- Worker Compensation/111F**: Information required in connection with G.L.c. 152 (Workers' Compensation) and G.L.c. 41 § 111F (Injured on Duty). A dropdown menu shows 'No'.
- Crimes**: Has the Retirement Board been made aware that this employee has been officially investigated for or charged with misappropriation of funds from his/her employer or convicted of any crime related to his/her office or position? A dropdown menu shows 'No'. Below this, it says 'If yes, provide documentation in the document list.'
- Signature Method**: Choose the Signature Method for this Disability Transmittal. A dropdown menu shows 'Electronic Signature'.

A 'Next' button is located at the bottom right of the form.

- Complete all remaining fields on member information page (shown above: **Worker Compensation/111F**, **Crimes** and **Signature Method**).
- Select **Next** once you have completed all required fields.
- Any missing information will be highlighted and must be completed before you are able to proceed to the next step.

## 3.3 Required Termination Retirement Documents

Make sure the proper documents are uploaded to avoid delays in the application process. For a listing of required documents, please refer to the section entitled **(1) PERAC Required Documents**.



**Figure 3.3.1: Required Documents Based on Benefit Type #10 Termination**

Forms	Attachments
Description of Essential Duties (optional)	
Employer Statement	1
Letter from Employer Terminating Position	1
Other Attachments	2
PERAC Approval	1

- A list of **Required Documents** will pre-populate in PROSPER once you select the **Benefit Type #10 Termination**.

**Figure 3.3.2: Properly Uploaded Documents Show Up as Complete**

Forms	Assigned	Complete	Attachment
Statement of Facts (optional)	K-Lone Steele (ghost user)	✓	1
Medical Panel Certificate & Narrative	K-Lone Steele (ghost user)	✓	1
Injury/Incident Reports	K-Lone Steele (ghost user)	✓	1
Description of Essential Duties	K-Lone Steele (ghost user)	✓	1
Employer Statement	K-Lone Steele (ghost user)	✓	1
Retirement Application	K-Lone Steele (ghost user)	✓	1
Treating Physician Narrative	K-Lone Steele (ghost user)	✓	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			
	Chuck Ztest3	✗	
	Chuck Ztest4	✗	
	Chuck Ztest5	✗	
	Chuck Ztest6	✗	



- Documents properly uploaded into PROSPER will turn **Green** as shown above.

**NOTE:** Board members' signatures are NOT required for a **10 Termination Allowance**.

Figure 3.3.3: Disability Transmittal Cancellation

The screenshot displays the 'Disability Transmittal Request' form in the Prosper system. A 'Disability Transmittal Cancellation' pop-up menu is open, showing the following details:

- Board: Ztest PERAC
- Member: Test2 Test
- Social Security #: 1234-1234
- Application Type: Application for Disability Transmittal
- Reason\*: A drop-down menu with options: Withdrawn, Denied, Data Entry Error.

The 'Yes' button is highlighted. In the background, the 'Disability Transmittal Request' form is visible, showing a list of forms to be completed. The 'Cancel' button at the bottom left of the form is also highlighted.

Form	Complete	Attachments
Statement of Facts (optional)	✓	1
Medical Panel Certificate & Narrative	✓	1
Injury/Incident Reports	✓	1
Description of Essential Duties	✓	1
Employer Statement	✓	1
Retirement Application	✓	1
Treating Physician Narrative	✓	1
Additional Medical Records (optional)		
Other Attachments		
Board Member Signatures		
Chuck Ztest3	✗	
Chuck Ztest4	✗	
Chuck Ztest5	✗	
Chuck Ztest1	✗	

- If an error occurs during the application process in PROSPER, you may at this point rescind this application by selecting the **Cancel** button.
- The **Cancellation** pop-up menu will appear. Select the **Reason** for cancelling the transmittal from the drop-down list.



**CAUTION:** If you select **Submit**, you will not have the ability to **Cancel**. If **Submit** was selected in error, you are required to contact PERAC personnel to assist.

© **CONGRATULATIONS: You have successfully submitted a #10 Termination Allowance via PROSPER!**

## (4) How to Delete Uploaded Documents



### In This Section

#### ✓ 4.1 Delete Uploaded Documents

Figure 4.1.1: Using the History Button to See Documents

Disability Transmittal Request

Worker Compensation/ISSF

Disability Transmittal Documents

Select History to provide a list of all attachments → History

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	Example Admin	✓	1
Medical Panel Certificate & Narrative	Example Admin	✓	1
Injury/Incident Reports	Example Admin	✓	1
Description of Essential Duties	Example Admin	✓	1
Employer Statement	Example Admin	✓	1
Retirement Application	Example Admin	✓	1
Treating Physician Narrative	Example Admin	✓	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			

Chuck Zibest ✓ YES

- All forms that have been uploaded prior to submission will be indicated on this page. To remove a document, select **History** on the top right as shown above. This will provide a list of all attachments uploaded for this particular application.

Figure 4.1.2: Hover Mouse Over Document to Get Delete Button

Attachment History

Form	Name	Description	Date	Delete
Description of Essential Duties	test.pdf		4/9/2021	Delete
Employer Statement	test.pdf		4/9/2021	
Injury/Incident Reports	test.pdf		4/9/2021	
Medical Panel Certificate & Narrative	test.pdf	123	4/9/2021	
Retirement Application	test.pdf		4/9/2021	
Statement of Facts	test.pdf		4/9/2021	
Treating Physician Narrative	test.pdf		4/9/2021	

Hover mouse over document and Delete button will appear

- Hover the mouse over document. The **Delete** button will appear. Select **Delete**.

## (5) Need More Information and Tasks Notifications



### In This Section

#### ✓ 5.1 More Information Requested

Once a **Disability Transmittal** is in the PERAC review process, PERAC personnel may require further information from the retirement board to properly make a determination. An email is generated to the retirement board with an explanation of the requested information.

**Figure 5.1.1: Member Disability Transmittal Page Current Status**

Disability Home

First Name  Last Name

Start Medical Panel Request Start Involuntary Panel Request Start Transmittal

+ Member Medical Panel Requests **Current Status** History

- Member Disability Transmittals History

Member Name	Application Date	Current Status
Example Name	4/9/2021	Needs More Information
Example User	4/6/2021	Request Not submitted

+ Member CME Reviews History

+ Withdrawal/Denial History

+ Rejected History

+ Approved Disability Transmittals without Retirement Date

- You may also find this request from the **Member Disability Transmittal Page** under **Current Status**.

Figure 5.1.2: Alert – More Information Needed

The screenshot shows the 'Disability Transmittal Request' page in the PERAC system. A yellow alert box at the top states: 'ALERT: Chuck Ztestadm on 4/10/2017 at 1:59 PM Dear Chuck Ztestadm. A Disability Transmittal for needs more information. Perac has the following comments: Need more detail on the statement of fact document'. Below the alert, the 'Request Information' section shows 'Accidental Death Transmittal Request for:' with 'Social Security #: \*\*\*-\*\*-1345' and 'Member: asdfasdf sdfsasdf'. The 'Disability Transmittal Documents' table shows one row: 'Statement of Facts' assigned to 'Board Disability Admin' with a red minus icon in the 'Complete' column and one attachment.

- An alert will be displayed when opening the member's page. The member file will detail the required information needed.

Figure 5.1.3: PROSPER Resets Forms Page to Incomplete

The screenshot shows the 'Disability Transmittal Request' page with a table of forms. The 'Injury/Incident Reports' row is highlighted in red, indicating it is incomplete. The table has columns: Forms, Assigned, Complete, and Attachments. The 'Complete' column shows a red minus icon for the highlighted row. The 'Attachments' column shows 1 attachment for each row.

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	Example Admin	–	1
Medical Panel Certificate & Narrative	Example Admin	–	1
<b>Injury/Incident Reports</b>	Example Admin	–	1
Description of Essential Duties	Example Admin	–	1
Employer Statement	Example Admin	–	1
Retirement Application	Example Admin	–	1
Treating Physician Narrative	Example Admin	–	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			
	Chuck Ztest3	✓ YES	
	Chuck Ztest4	✓ YES	
	Chuck Ztest5	✓ DNP	
	Chuck Ztest1	✓ YES	

- PROSPER resets the **Forms** page to **Red** (incomplete) so that board personnel can upload the additional information PERAC is requesting.



**NOTE:** Any previously submitted attachments are accessible under the column **Attachments** and do not require reloading.

**Figure 5.1.4: Status Changes to Complete Once Documents Uploaded**

**Disability Transmittal Request**

Forms	Assigned	Complete	Attachments
Statement of Facts (optional)	Example Admin	❌	1
Medical Panel Certificate & Narrative	Example Admin	❌	1
<b>Injury/Incident Reports</b>	Example Admin	<b>✅</b>	2
Description of Essential Duties	Example Admin	❌	1
Employer Statement	Example Admin	❌	1
Retirement Application	Example Admin	❌	1
Treating Physician Narrative	Example Admin	❌	1
Additional Medical Records (optional)			
Other Attachments			
Board Member Signatures			
	Chuck Ztest3	✅ YES	
	Chuck Ztest4	✅ YES	
	Chuck Ztest5	✅ DNP	
	Chuck Ztest1	✅ YES	

Save Submit

- Once required documents have been uploaded due to this request, the button will change to **Green** status. Once you have completed the request, select **Submit**.

**Figure 5.1.5: Successful Transmittal to PERAC**

**Disability Transmittal Request**

✅ **COMPLETE:** This form was resubmitted on 4/9/2021 at 11:53 AM by Example Admin

Member Information	Status Information
Member Name: Example Name	Request Submitted: 4/9/2021 4/9/2021
Member Age: 74	Under Review
Social Security #: ****-**-1235	Approved
Name of Unit: Police	Remand
Job Title/Group: Captain	Withdrawn
Transmittal Type: 7 (Accidental)	
Benefit Applies to: Example Name	
Veteran Status: No	
Crimes: No	
Member Status: Member In Service	
Length of Service: 34 Years, 0 Months	

+ Appropriate Provisions

+ Worker Compensation/111F

🎉 **CONGRATULATIONS: You have successfully submitted the transmittal back to PERAC for review.**

## (6) How to Access Approved Transmittals



### In This Section

- ✓ 6.1 Accessing Approved Transmittals
- ✓ 6.2 Sample PERAC Disability Approval Letter

### 6.1 Accessing Approved Transmittals

Open the **Disability** dialog box and select **Member Disability Transmittals**.

*Figure 6.1.1: Member Disability Transmittals*

- Once selected, a list of members with an **Active** status will be available for action.

**Figure 6.1.2: PERAC Approval Letter Under Forms**

The screenshot shows the 'Disability Transmittal' section of the Prosper PERAC system. On the left is a navigation sidebar with icons for Home, Tasks, Compliance, Finance, Benefits, Disability, gLA, Members, Documents, and Admin. The main content area has a 'Back' button and two expandable sections: 'Appropriate Provisions' and 'Worker Compensation/111F'. Below these is the 'Disability Transmittal Documents' section, which contains a table with two columns: 'Forms' and 'Attachments'. The 'Forms' column lists various documents, and the 'Attachments' column shows the number of attachments for each. The 'PERAC Approval' document is highlighted with a red box at the bottom of the list.

Forms	Attachments
Statement of Facts (optional)	1
Medical Panel Certificate & Narrative	1
Injury/Incident Reports	1
Description of Essential Duties	1
Employer Statement	1
Retirement Application	1
Treating Physician Narrative	1
Other Attachments	1
PERAC Approval	1

- Members with a **Current Status** indicating **Approved** will remain listed for 30 days. After selecting a particular member, you may find PERAC's approval letter under **Forms**.
- Searching for **Approval letters** after 30 days, you must select **History** from the **Member Disability Transmittals** section.



## 6.2 Sample PERAC Disability Approval Letter

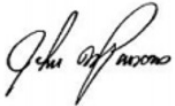
*Figure 6.2.1: Example of a PERAC Disability Approval Letter*

**Commission Approval of the Disability Transmittal**

**Member's Name:** Example Name

**Social Security Number:** \*\*\*-\*\*-1235

Pursuant to the authority granted to the Commission by G.L. c.32, § 21(1)(d), the Commission has reviewed your decision to grant the 7 (Accidental) benefit to Example Name. The retirement board's decision is hereby approved.  
4/9/2021



Executive Director  
Public Employee Retirement Administration Commission

Upon receipt of this approval, the retirement board shall complete and submit this approval and the following attachments to PERAC for approval: the appropriate PERAC calculation sheet, annuity card, dependent children's birth certificate(s), and proof of physical incapacity of any children.

---

Send To:

Public Employee Retirement Administration Commission  
Actuarial Unit  
5 Middlesex Avenue, Third Floor  
Somerville, MA 02145

## (7) How to Start Retirement Board Actions or Cancel Transmittals



### In This Section

- ✓ 7.1 Retirement Board Actions
- ✓ 7.2 Withdrawal or Denial as Cancellation Reason
- ✓ 7.3 Required Termination Documents

### 7.1 Retirement Board Actions

This section will show you how to do the following:

- Withdraw a Member's Application
- Deny a Member's Application
- Cancel a **Data Entry Issue** from a Member's Application

All member transmittals who are still **Pending Board Actions** can be found on the screen below.

**Figure 7.1.1: How to Access Member Disability Transmittals**

- Select **Member Disability Transmittals**.

**Figure 7.1.2: Opening Member Disability Transmittals**

Disability Home

First Name  Last Name

Start Medical Panel Request Start Involuntary Panel Request Start Transmittal

+ Member Medical Panel Requests History

- Member Disability Transmittals History

Member Name	Application Date	Current Status	
Example Name	4/9/2021	Remand	Re-Open
Example User	4/6/2021	Request Not submitted	

+ Member CME Reviews History

+ Withdrawal/Denial History

+ Rejected History

+ Approved Disability Transmittals without Retirement Date

- Select **Member's Name**. **Member Disability Transmittals** will open.

**Figure 7.1.3: Accessing Disability Transmittal Cancellation Window**

Disability Transmittal Request

Forms

Statement of Facts (optional)

Medical Panel Certificate & Narrative

Injury/Incident Reports

Description of Essential Duties

Employer Statement

Retirement Application

Treating Physician Narrative

Additional Medical Records (optional)

Other Attachments

Board Member Signatures

Cancel

Disability Transmittal Cancellation

Board: Ztest PERAC

Member: Example Name

Social Security #: 123-456789

Application Type: Application for Disability Transmittal

Reason: Withdrawn Denied Data Entry Error Yes

Complete Attachments

Example Admin	✓	1
Example Admin	✓	1
Example Admin	✓	1
Example Admin	✓	1
Example Admin	✓	1
Chuck Ztest3	✓ YES	
Chuck Ztest4	✓ YES	
Chuck Ztest5	✓ DNP	
Chuck Ztest6	✓ YES	

Submit

**Status Cancel to Open the Disability Transmittal Cancellation window and select appropriate Reason.**

- Select the **Cancel** button which will open a new window.
- Select the appropriate **Reason** from the drop-down menu.

**Figure 7.1.4: Reason for Disability Transmittal Cancellation**

Disability Transmittal Cancellation

Board: Ztest PERAC  
 Member: Example Name  
 Social Security #: 1234-1235  
 Application Type: Application for Disability Transmittal  
 Reason\*: Data Entry Error

Comment\*:  
 test comment

Cancel Yes

Complete	Attachments
✓	1
✓	1
✓	1
✓	1
✓	1
✓	1

Example Admin

Cancel Submit

- Explain reason, then select **YES**

**Figure 7.1.5: Attach PDF Letter to Disability Transmittal Cancellation**

Attachment

No file selected Browse

Withdrawal Letter (please attach)

Please upload the full document.

Add Attachment

Cancel Yes

- Then attach the PDF document if needed, then select **YES**

## 7.2 Withdrawal or Denial as Cancellation Reason

If the reason for cancelling transmittal is for **Withdrawal** and/or **Denied**, documentation is required as follows:

- **Withdrawal:** Must provide documentation that the member has withdrawn his/her application.
- **Denied:** Must provide documentation from the board that member's application has been denied.
  - ⦿ To access PERAC's denial form on our website, go to [mass.gov/lists/perac-disability-forms](https://mass.gov/lists/perac-disability-forms) and select **Notice of Retirement Board Action on Disability Application** to download the form.
  - ⦿ Complete the form and save as a PDF on your device.
  - ⦿ You will be prompted to upload this completed form when choosing **Denial**.
  - ⦿ Once the form is uploaded, select **Submit**.
  - ⦿ This will remove member from the active member screen.

Required Forms are listed on PERAC's Required Forms Job Aid.

## 7.3 Required Termination Retirement Documents

Make sure the proper documents are uploaded to avoid delays in the application process. For a listing of required documents, please refer to the section entitled **(1) PERAC Required Documents**.

## (8) Board Member Signatures



### In This Section

#### ✓ 8.1 Board Member Signatures

- All Board Members must sign in order to submit to PERAC
  - Signing options are Yes, No, DNP (Did Not Participate), or Abstain (as of 10/18/2018)
- There is no way to correct a signing option once submitted
  - All members should check the signing options to make sure they have selected the correct one **BEFORE** submitting
- If there is a situation where a board member is not physically able to sign, please contact PERAC.

*Figure 8.1.1: Board Member Signatures*

**Board Member Signatures**

Other Attachments

Board Member Signatures	
FName56 LName56	DNP
FName57 LName57	DNP
FName58 LName58	DNP
FName59 LName59	DNP
FName50 LName50	DNP

Submit

**ZZTEST PERAC** Massachusetts Public Employees Retirement Administration Commission Help: FName56 LName56 Sign Out

Back

Board: Zzttest PERAC  
Member: James Smith  
Social Security #: \*\*\*-\*\*-3452  
Application Type: Application for Disability Transmittal

**Board Member Certification**

Please indicate whether you approve the Application for Disability Transmittal.\*  
☐ Yes ☐ No ☒ Did Not Participate

By entering my name, checking the Electronic Signature box, and clicking on the buttons, I certify under the penalty true and complete to the best of my knowledge.

First Name\* MI Last Name\* Suffix

The electronic signature must match the name FName56 LName56.

☐ I acknowledge that I am electronically signing this form\*

Sign Document

**E signature must match what is on file with Prosper.**

## (9) How to Re-Open and Submit a Remand



### In This Section

#### ✓ 9.1 Open a Remand in PROSPER

When a member is remanded by PERAC, the Board will access such **Remand** as follows:

*Figure 9.1.1: Open the Disability Dialog Box*

*Figure 9.1.2: Select Member Disability Transmittals*

➤ This will provide a list of active processes for your members.

**Figure 9.1.3: Select Member Indicating Remand and Select Re-Open**

Disability Home

First Name:  Last Name:

Start Medical Panel Request Start Involuntary Panel Request Start Transmittal

Member Medical Panel Requests History

Member Disability Transmittals History

Member Name	Application Date	Current Status	
Example Name	4/9/2021	Remand	Re-Open
Example User	4/8/2021	Request Not submitted	

Member CME Reviews History

Withdrawal/Denial History

Rejected History

Approved Disability Transmittals without Retirement Date

The following window will open in the member file, as shown below. You must provide further additional information requested in PERAC's **Remand Letter** to the Retirement Board and attach necessary documentation for re-submission.

**Figure 9.1.4: Add Additional Information**

Add Additional Information

Comment\*

you are only allowed one upload and it needs to be under 200 pages

ReopenAttachments\*

test.pdf Browse...

Submit



**CAUTIONS:**

You may only upload **ONE** PDF document with less than 200 pages or submission will fail. If multiple documents are requested, **all documents must be scanned as ONE PDF Document**. Select **SUBMIT** to upload.

© **CONGRATULATIONS: You have submitted a follow-up to a member's Remand Request!**