

**Chapter 30 - Administrative Procedure to Determine Eligibility for
Benefits under the Public Safety Employee Benefits Act**

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3001 Purpose

The purpose of this Chapter is to provide a fair and efficient method of determining the eligibility of applicants for the benefits enumerated under the Public Safety Employee Benefits Act (820 ILCS 320/1 *et seq.*) (PSEBA). All benefits provided applicants pursuant to PSEBA will be consistent with PSEBA.

3002 Administrative Composition

3002.1 **Appointment of a PSEBA Claims Administrator.** The Village Clerk is hereby appointed as PSEBA Claims Administrator, who shall be responsible for scheduling and making all necessary arrangements for the holding of hearings under this Administrative Procedure. The duties of the PSEBA Claims Administrator include, but are not limited to:

- A. Receiving and filing applications for PSEBA benefits;
- B. Receiving and filing all documents required by this Ordinance to accompany such claims;
- C. Reviewing applications for completeness and returning incomplete applications to the applicant;
- D. Upon receipt of a complete application, scheduling hearings in accordance with the availability of the applicant, his or her counsel, counsel for the Village, and the Hearing Officer; and posting and publishing a Notice of Hearing in accordance with the Illinois Open Meetings Act, 5 ILCS 120/1;
- E. At the direction of the Hearing Officer, posting and publishing required amended notices of hearing in the event that any hearing date should be continued to a later date;
- F. Arranging for a court reporter to prepare a transcription of the hearing;
- G. Receiving and filing the determination of the Hearing Officer and any order, ruling, or intermediate or supplemental determination of the Hearing Officer;
- H. Responding to requests for information or subpoenas relating to an application for PSEBA benefits or a hearing thereon; and
- I. Preparation of the record of any application and hearing thereon for purposes of the Illinois Administrative Review Law, 735 ILCS 5/3-101, *et seq.*

3002.2 **Appointment of a Hearing Officer.** The Village President, with the consent of the Village Board of Trustees, is hereby authorized to appoint a person to hold the position of Hearing Officer for the purpose of holding hearings and making determinations concerning the eligibility for persons claiming benefits under

PSEBA. In making such selection, the Village President shall consider:

- A. The candidate's ability to perform the duties set forth herein;
- B. The background and experience of the candidate;
- C. The qualifications of the candidate, including but not limited to, the requirement that the candidate must be an attorney licensed to practice law in the State of Illinois for at least five (5) years, with a knowledge of and experience in labor and employment law, general civil procedure, rules of evidence, and administrative practice.

3002.3 **Power of the Hearing Officer.** The Hearing Officer shall have all of the powers granted to him or her under applicable state statutes and the common law relative to the conduct of administrative hearings, including the power to:

- A. Preside over all Village of Spring Grove hearings involving PSEBA;
- B. Administer oaths;
- C. Hear testimony, and accept evidence that is relevant to the issue of eligibility for benefits under PSEBA upon an applicant for such benefits;
- D. Issue subpoenas and orders to secure attendance of witnesses and the production of relevant papers and documents upon the request of one or more of the parties to a hearing or their representatives;
- E. Rule upon objections concerning the admissibility of evidence;
- F. Preserve and authenticate the record of any hearing and all exhibits that are introduced into evidence at the hearing;
- G. Issue a determination based on the evidence presented at the hearing;
- H. If the determination is that the applicant is eligible for PSEBA benefits, issue a finding as to the extent of the reduction, if any, of PSEBA benefits resulting from the existence of health insurance benefits payable from any other source.

3003 Procedure

3003.1 **Application for PSEBA Benefits.** A PSEBA benefit application form prepared by the Village shall be the standard form required for PSEBA benefit applicants to use in requesting benefits under PSEBA. The form shall be completed and executed by the requesting applicant and delivered to the PSEBA Claims Administrator. Information required by the form shall include:

- A. The full particulars of the employee's claim for benefits, including the date, time, place, and nature of the injury giving rise to the claim for benefits,

- B. The names of any witnesses to the injury and the circumstances under which it occurred, together with any other factual circumstances surrounding the incident(s) alleged to have occasioned the injury;
- C. The names, ages, and relationship to the applicant of legal dependents for whom PSEBA benefits may be claimed; and
- D. Information relating to the existence of health insurance benefits payable from any other source, which information must be current as of the date of application.

The application also must be accompanied by:

- A. The written decision of any public safety pension board determining or declaring the injury to have been incurred in the applicant's line of duty as a public safety employee of the Village of Spring Grove;
- B. A signed medical authorization release authorizing the collection and production by voluntary agreement or subpoena, of information, including protected medical information, relating to the injury and the incident giving rise to the injury; and
- C. If the applicant is seeking reimbursement for health insurance premium payments or out-of-pocket payments for PSEBA-related health insurance coverage or medical expenses, copies of all payment records or receipts for payments made by the applicant.

3003.2 **Application Review.** The PSEBA Claims Administrator shall review the application for completeness. If incomplete, the PSBA Claims Administrator shall return the application to the applicant for completion in accordance with the requirements of Section 3002. If complete, the PSBA Claims Administrator shall forward the completed application to the Hearing Officer and, after determining the availability of the parties, shall give notice concerning the holding of a hearing on the application. No hearing on the application shall be held until the application is complete.

3003.3 **Administrative Hearing.** The conduct of the administrative hearing shall be as follows:

- A. Upon receipt of a completed application, the PSEBA Claims Administrator shall arrange for the posting and publishing of a Notice of Hearing in accordance with the Illinois Open Meetings Act, 5 ILCS 120/1, *et seq.*, notifying the parties and the public of the date, time, and place of a hearing to be held on the application.

- B. The parties to the hearing, who may be represented by counsel, shall be the applicant and the Village of Spring Grove. Both the applicant and the Village of Spring Grove are necessary parties to the hearing.
- C. Upon motion by a party or determination upon consultation with the parties by the Hearing Officer, the initial hearing date or any subsequent date for the hearing may be reset by the Hearing Officer to mutually convenient dates and times.
- D. Hearings shall be held on the date and time and at the place specified in the Notice of Hearing, as originally set or reset and posted and published in accordance with law;
- E. All hearings shall be attended by a certified court reporter whose presence at the hearing has been arranged by the PSEBA Claims Administrator at the direction of the Hearing Officer, and a transcript of all proceedings shall be made and preserved.
- F. The applicant and the Village may examine and cross-examine witnesses, introduce exhibits, and request orders or subpoenas compelling the appearance of relevant witnesses or the production of relevant documents.
- G. It shall be the applicant's obligation at the hearing to present in evidence any and all documents, including medical records, that were presented to any public safety pension board that considered the applicant's claim for a duty-related pension. All other medical records, health insurance records (including records relating to health insurance or self-insurance coverage of the applicant as a dependent), employment records, military records, accident reports, witness statements, injury reports (including any or all injury reports prepared or submitted by the applicant, whether or not in conjunction with the injury giving rise to the claim for PSEBA benefits), police reports, workers' compensation claims, reports and records, and records establishing dependency status (including marriage and birth certificates) that are relevant to the applicant's claim for PSEBA benefits shall be admissible at the hearing and shall be obtainable by any party requesting such records in pre-hearing discovery, subject to the requirements of applicable law.
- H. Upon conclusion of the hearing, the parties may make closing arguments on the record or, if either party so requests, may submit post-hearing briefs in support of their positions, which briefs may contain appropriate citations to legal authority.
- I. The determination by the Hearing Officer as to whether the applicant is eligible for benefits under PSEBA shall be in writing, shall include findings of fact and conclusions of law, and shall be consistent with PSEBA. If the Hearing Officer determines that the applicant is eligible for benefits under PSEBA, the determination shall include a finding as to the extent of the

reduction, if any, of PSEBA benefits resulting from the existence of health insurance benefits payable from any other source.

- J. Such determination shall constitute a final determination for the purpose of administrative review under the Illinois Administrative Review Law, 735 ILCS 5/3-101, *et seq.*

3004 Health Insurance Benefits

3004.1 Insurance Requirements. Upon qualification for PSEBA benefits, the PSEBA recipient shall be entitled to the Village's basic group health insurance plan. "Basic group health insurance plan" shall mean the lowest cost plan available to employees from the Village. The basic group health insurance plan may change from time to time. A PSEBA recipient may choose to enroll in any other health insurance plan offered by the Village different than the basic group health insurance plan, but shall pay the difference in the insurance premium between the Village's basic group health insurance plan and the other plan. Failure of the PSEBA recipient to timely pay the difference in the premium from the non-basic level coverage shall result in coverage reverting to the basic plan. PSEBA benefits do not include benefits not provided under the Village's basic group health insurance plan such as, but not limited to, disability benefits, life insurance, dental insurance or vision benefits or insurance.

- A. **Open Enrollment.** Individuals receiving benefits under PSEBA will only be able to change from one plan to another during the Village's open enrollment period.
- B. **Other Benefits.** Health insurance benefits payable or received from any other source shall reduce the benefits payable or received from the Village by a PSEBA recipient. Each PSEBA recipient shall sign and submit an affidavit at least annually attesting as to whether the PSEBA recipient, his or her spouse or his or her dependents are eligible for insurance benefits from any other source. The affidavit must be completed and returned to the Village within sixty (60) calendar days of written notice from the Village to submit it. If the recipient does not complete and return the affidavit within the time required, the Village shall give the recipient an additional written notice providing an additional thirty (30) calendar days for the recipient to complete and return the affidavit. If the PSEBA recipient fails to return the affidavit within the time required he or she shall reimburse the Village for premiums paid during the period the affidavit is due and not filed. If another source of health insurance is available to the PSEBA recipient, his or her spouse or his or her dependents, the PSEBA recipient shall notify the Village of that source no later than fourteen (14) days after that source becomes available to the PSEBA recipient, his or her spouse or his or her dependents.

- C. **Disclosure of Health Insurance Coverage.** The PSEBA recipient has an ongoing obligation and shall update health insurance coverage information available to him or her, his or her spouse and his or her dependents and the failure to do so may result in the denial or discontinuance of benefits and may also result in the PSEBA recipient, his or her spouse or his or her dependents having to reimburse the Village for duplicate coverage or the cost of the coverage or the differential in the cost of coverage. If duplicate coverage has been received or other coverage is available to a PSEBA recipient, his or her spouse or his or her dependents, further PSEBA benefits will be denied or suspended until the Village has been fully reimbursed by the PSEBA recipient for what it would have been credited if it had known about the other insurance coverage.
- D. **Reimbursement.** If a PSEBA recipient, his or her spouse or his or her dependents receive health insurance benefits or have available to them health insurance from other sources without notice to the Village, the PSEBA recipient, his or her spouse or his or her dependents shall reimburse the Village for the value of the benefits paid by the Village.
- E. **Medicare Eligibility.** The PSEBA recipient, his or her spouse or his or her dependents shall notify the Village within ten (10) days after when the PSEBA recipient, his or her spouse or his or her dependents become Medicare eligible regardless of the status of the enrollment period so the Village may assist with the transition to Medicare coverage and/or adjust health insurance benefits or PSEBA benefits accordingly