



IAFF MERP MEDICAL EXPENSE REIMBURSEMENT PLAN

Administered by Benefit Programs Administration
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Welcome to Employer Portal Online

Welcome to the new IAFF MERP Employer Portal. The Employer Portal enables employers to report IAFF MERP contributions in accordance with their Collective Bargaining Agreement or Memorandum of Understanding. Through the portal, employers will report on both employer and employee contributions, as well as any applicable lump sum transfers, directly to the Trust Administration Office.

GETTING STARTED

INITIAL EMPLOYER SETUP

Employer Portal Registration

BPA will provide an **Employer Portal Registration Form** to collect information for individuals who need login access to the portal.

Upon receipt of the completed form, BPA will send an email to each designated user with:

- Login credentials
- A copy of the Contribution Template
- Instructions on how to complete and submit the template

INITIAL USER LOGIN

Accessing the IAFF MERP Employer Portal - Website URL: iaffmerpemployer.rmt.bpabenefits.com

1. Access the Login Page

You will be automatically redirected to the Keycloak login screen when accessing the portal.

2. Enter Your Credentials

- **Email:** Enter the email address associated with your portal account.
- **Password:** Enter the temporary password provided by BPA.

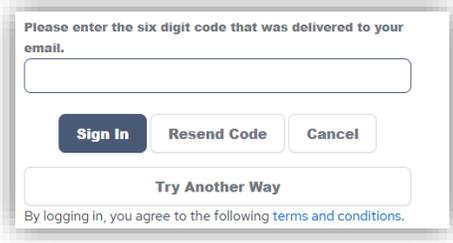
3. Complete Multi-Factor Authentication (MFA)

After submitting your login credentials:

- You will receive an email from **member@BPABenefits.com** with a one-time access code.
- **Note:** The access code will expire in **300 seconds (5 minutes)**.
- Enter the code when prompted to complete the login process.

4. Sign In

After entering your credentials and access code, click **Sign In** to enter the portal.



Please enter the six digit code that was delivered to your email.

Sign In Resend Code Cancel

Try Another Way

By logging in, you agree to the following [terms and conditions](#).

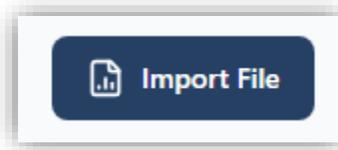
SELECT ACCOUNT SCREEN

Once you've successfully logged into the Employer Portal, you'll be directed to the **Employer Dashboard Account Screen**.

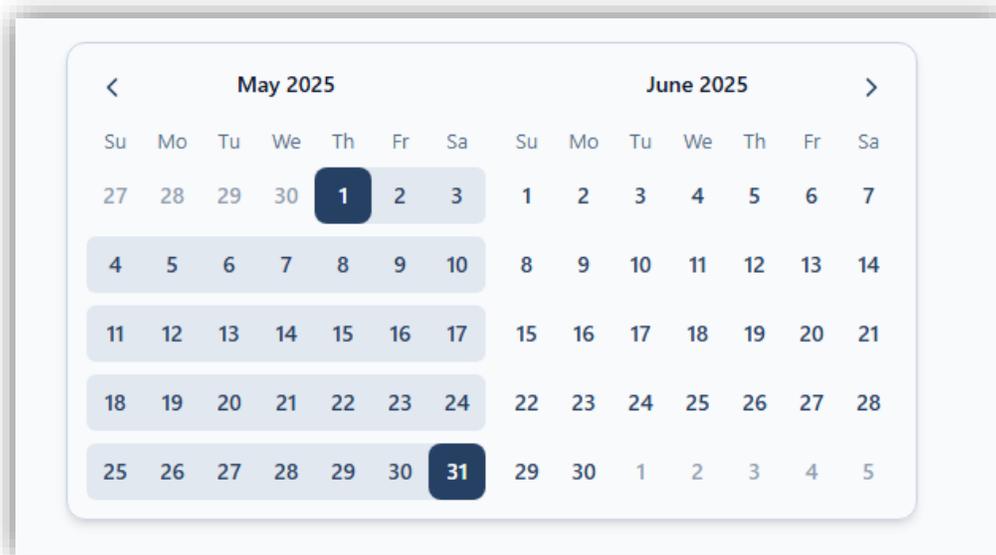
- The employer's name will appear in the top right corner of the screen.
- If you are registered for multiple employers, a drop-down menu will appear in that same area, allowing you to select the employer for whom you are reporting contributions.

HOW TO UPLOAD AND SUBMIT CONTRIBUTIONS FOR A SELECTED PAYROLL PERIOD

Step 1: Click "Import File"

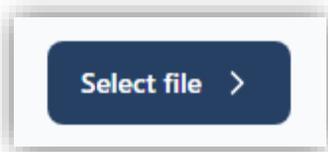


- Select the Payroll Period using the calendar (start date and end date must be selected)

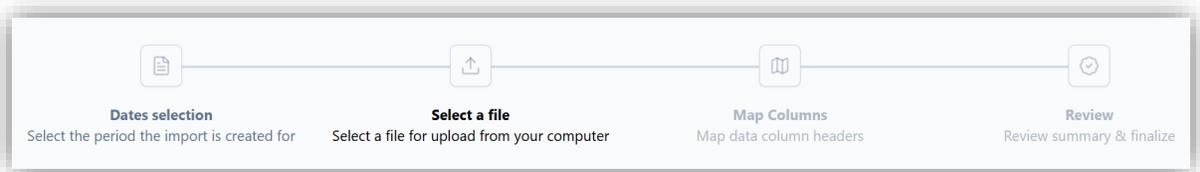


Payroll Period Validations:

- The selected payroll period cannot be more than one month into the future.
- Both start and end dates must be selected.
- After choosing the dates, click **Select File** to upload your Contribution Template.



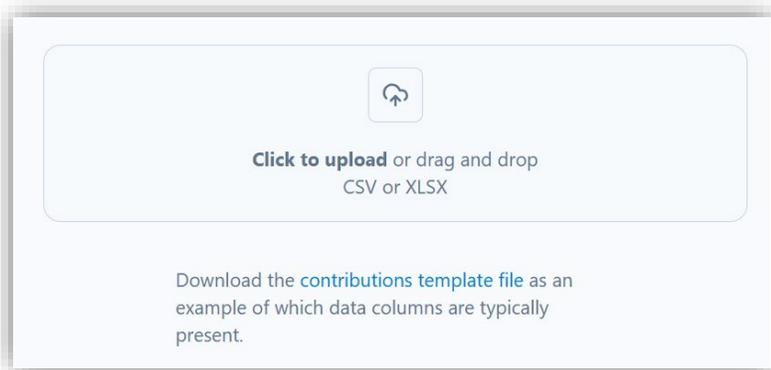
Step 2: Select a File



File Format Requirements

To ensure a successful upload to the Employer Portal, please follow these file guidelines:

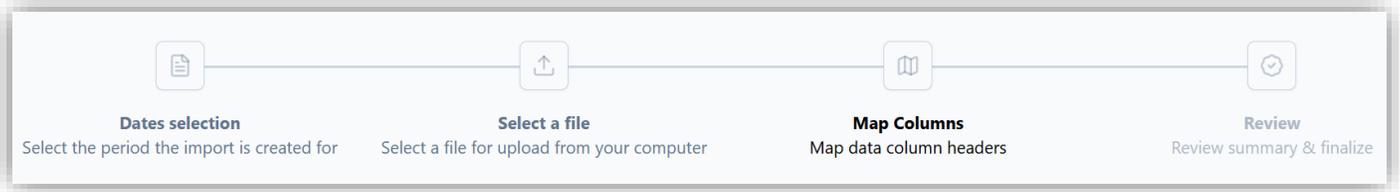
- The file must be in **.csv** or **.xlsx** format
- The first row must contain **column headers** – see Contribution Template Instructions below
- Data must begin on the **second row**
- The file must contain only **one worksheet** (*files with multiple sheets/tabs will not be accepted by the system*)
- Cannot have a total amount line item within the document



Option 1: Download the **Contribution Template** by clicking “contribution template file”. Please refer to the enclosed Contribution Template Instructions for guidance on how to properly complete the template.

Option 2: Upload your Contribution Template by clicking “upload” or dragging and dropping your **CSV** or **XLSX** into the designated upload area.

Step 3: MapColumns

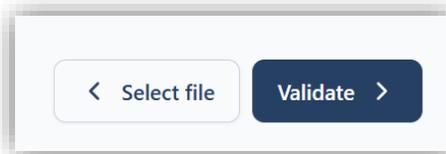


After uploading you're your file, you will be taken to the Mapping Screen.

- In this step, you'll need to map each required column from your file to the system fields.
- If a column name in your file matches exactly with our system field, it will be mapped automatically.

Step 4: Validate the Contribution File

Click **Validate**



- Once your file is uploaded and mapped, the system will validate each row and apply formatting rules to each column. Some fields must be filled in a specific way—please make sure your data follows the correct format.
- Required fields are marked with an asterisk (*)
- If any columns are not mapped correctly or contain missing or invalid data, you will receive an error message.
- All errors must be corrected before you can proceed with your submission.

Validation Error Example – Missing Contribution Amounts

This file import failed because the 'Employer Contribution Amount' and 'Employee Contribution Amount' fields cannot be left blank.

Employer Contribution Amount * → Select mapping

'Employer Contribution Amount' must not be empty.

Employee Contribution Amount * → Select mapping

'Employee Contribution Amount' must not be empty.

Each row must have either dollar amount or “0” in these fields.

If you need to modify your contribution file, click **Select File** and upload a revised contribution file.

Approved File

- Once your file passes validation, you'll see an Import Summary displaying the number of valid rows ready for upload.
- Review the row count to ensure it matches the number of records in your file.
- If everything looks correct, click “**Create Contribution**” to proceed with your submission.



Step 5: Review and Submit Your Contribution File

After validation, the system will save your file and create a contribution entry. You will see a screen showing your uploaded data. Click <> **Detailed** to review all uploaded columns and ensure data is mapped correctly.

- If you find any issues (e.g., incorrect employee data):
 - Click **Trash** to delete the contribution file
 - Correct the data in your template and re-upload it from the beginning
- If everything looks accurate, click **Submit** to finalize your submission.
 - This action **cannot** be undone by you (you must contact BPA).
- You may also click **Export Report** to download and review the exact data that will be submitted to BPA.

Step 6: Payment

Electronic Funds Transfer (EFT) and Wire Transfers

If you currently submit contributions electronically, no changes are required. You may continue to use your existing EFT or wire transfer process.

Paper Check Submissions – New Mailing Address

For employers who submit contributions by check, please use the new mailing address effective July 1, 2025:

IAFF MERP Trust Office
c/o Benefit Programs Administration (BPA)
1200 Wilshire Blvd, 5th Floor
Los Angeles, CA 90017

CONTACTING THE ADMINISTRATION OFFICE

Please contact the Trust Administration Office with any questions about the Employer Portal.

IAFF MERP Administered by Benefits Programs Administration

Telephone: (844) 353-7839

Email: IAFFMERPEmployers@bpabenefits.com

| Contribution Template Instructions | | |
|---|---|---|
| YELLOW FIELDS ARE REQUIRED | LIGHT BLUE ARE NOT REQUIRED | DARK BLUE ARE NOT REQUIRED BUT WILL NEED TO BE COMPLETE BASED ON EMPLOYEE CIRCUMSTANCES. |
| DATA ELEMENTS | | |
| COLUMN HEADER NAME | VALIDATION | DEFINITION |
| Pay Date | Must be a valid date xx/xx/xxxx | Ties the funds transfer (or check issue) date to the contribution file. For employers remitting ER-only contributions, the Pay Date can be the remittance date. Date the Paycheck issued to the Member. Ex: Payroll Start 6/1/2025, Payroll End 6/15/2025, and Check Issue to the Member, 6/20/2025. |
| Employee Number | Can be an alphanumeric code | Employee Number/Employee ID provided by Employer |
| Date of Hire | Must be a valid date xx/xx/xxxx | Original Date of Hire. If an employee is rehired, please use original date of hire. |
| New Hire | Must be a valid boolean (YES/NO or Y/N) or can be empty | First Contribution Date |
| Employee Status | | Active, Retired, Involuntary Termination, Voluntary Termination, Gross Misconduct, Deceased |
| Bargaining Unit | Must be filled per codes provided | Codes: |

| | | |
|-------------------------------------|---|---|
| | under the definition. | FFA - Fire Fighter Association, FMA - Fire Management Association NS - Non-Safety MS - Marine Safety - Ocean Lifeguards PNR - Promoted non- represented NA - Not Applicable |
| First Name | Must not be empty | |
| Middle Name | | |
| Last Name | Must not be empty | |
| Suffix | | |
| SSN | XXX-XX-XXXX (dashes optional) | |
| Date of Birth | | |
| Gender | | |
| Address Line 1 | | |
| Address Line 2 | | |
| City | | |
| State | | |
| Zip | | |
| Phone Number | | |
| Employee Contribution Amount | Must be a valid decimal | Use \$0.00 if no contribution |
| Employer Contribution Amount | Must be a valid decimal | Use \$0.00 if no contribution |
| Contributory Retiree Amount | Must be a valid decimal or can be empty | Only applicable for employers with a CBA/MOU with a required post-retirement contribution for retirees |
| Separation Date | Must be a valid date xx/xx/xxxx or can be empty | If a date is provided a Separation Reason needs to be identified |

| | | |
|--|--|--|
| Separation Reason | Must provide with Separation Code or can be empty | Code: RT: Retired PO: Promoted Out INT: Involuntary Terminations VOT: Voluntary Termination GM: Gross Misconduct NA: Not Applicable |
| Is Last Contribution | Must be a valid boolean (YES/NO or Y/N) or can be empty | |
| Sick Leave Lump Sum Transfer Amount | Must be a valid decimal or can be empty | |
| Vacation Leave Lump Sum Transfer Amount | Must be a valid decimal or can be empty | |
| Other Lump Sum Transfer Amount | Must be a valid decimal or can be empty | Only applicable for employers with a CBA/MOU with Option C Transfer, VEBA, etc. |