

Health Care 2022

PRE-MEDICARE RETIREES



Funding pensions and health care

OPERS, at its core, is a pension fund and protecting pensions is our priority.

Money for the pension fund and Health Care Fund comes from member and employer contributions as well as investment returns.

Currently all employer contributions are needed to strengthen the pension fund, so no money is being added to the Health Care Fund. If this continues, the Health Care fund will run out of money by 2030.

These changes will extend the plan's solvency from 11 to nearly 19 years.



- Member contributions can only fund pensions and cannot be used to fund health care.
- Employer contributions can fund both pensions and health care, but only if pension funding is adequate.

Eligibility

Eligibility requirements will only change for those retiring on or after Jan. 1, 2022. If you are currently receiving healthcare, your eligibility will continue.

Eligibility requirements effective Jan. 1, 2022 will be dependent on your retirement group.

If you don't meet the requirements for coverage as a pre-Medicare participant, but if you have at least 20 years of qualified health care service credit, you'll become eligible for coverage once you are age 65.



Group A: 30 years at any age

Group B: 32 years at any age
-OR-

31 years at age 52

Group C: 32 years at age 55

Health Reimbursement Arrangement (HRA) Allowance

OPERS will no longer offer a pre-Medicare group plan effective Dec. 31, 2021, and will move to an open HRA model. An open HRA model means you won't be required to use the OPERS Connector.

The HRA provides tax-free money to reimburse for qualified medical expenses and premiums for the health care plan of your choice.

Learn more about your HRA allowances on the following page.



Plans can be offered through:

- An individual or family plan on [healthcare.gov](https://www.healthcare.gov),
- A non OPERS-covered employer, or
- Any private health care insurance carrier.

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Health Reimbursement Arrangement (HRA) Allowance

The base allowance for pre-Medicare retirees will be \$1,200. You'll receive a percentage of this amount, determined by:

- Age when first enrolled in the OPERS health care plan
- Qualifying years of service credit at retirement

To determine your monthly HRA deposit amount:

- First, use the health care allowance percentage table on opers.org to find your allowance percentage.
- Then use the monthly allowance table to find the amount that corresponds to your percentage.

Visit the Health Care 2022 page on opers.org for examples.

Since you'll be receiving a monthly HRA allowance, you'll no longer pay a medical premium through OPERS, and your monthly benefit amount will increase by the amount currently deducted for that premium.



The Affordable Care Act

The Affordable Care Act (ACA) is a health care reform law enacted in March 2010 which requires every state to have a marketplace where consumers can buy individual health insurance policies.

All plans offered through healthcare.gov for Ohioans are Health Maintenance Organizations (HMOs). HMO plans offer lower premiums and deductibles and typically require a referral from a primary care physician to see a specialist.

ACA qualified plans for 2020 are available for review at healthcare.gov/see-plans. Keep in mind rates, plan options and carriers are likely to change each year.

Insurance carrier availability is based on ZIP code and there is coverage in all Ohio's 88 counties. Each county has 15-72 plans available.



More Information

Visit the Health Care 2022 page on opers.org for more information about upcoming changes and to view allowance tables, examples and FAQs.