

# Ohio PERS NEWS

YOUR BENEFIT CONNECTION

News and information for retired members of the Ohio Public Employees Retirement System

## Special health care section enclosed

## FOR YOUR BENEFIT:

*Things change: How to keep OPERS informed of important changes to your personal information*



You've retired, settled in to a new routine, and your monthly benefit payments are being deposited into your bank account like clockwork. Everything is taken care of, right? Sure it is, until you decide to switch to a bank closer to home, downsize to a condo, or finally get that winter home away from ice and snow. When things change, OPERS needs to be informed so we can prevent any

delay of your benefit and be sure that you receive important mailings in a timely manner. Here we have compiled the most common types of personal information changes after retirement.

### Banking information

Thinking of switching banks? Because OPERS requires our benefit recipients to use direct deposit, it is very important to keep us

informed of any changes in your bank account information. This will prevent any delay in receiving your monthly benefit. Official notification of a change in your banking information needs to come to us by way of a specific OPERS form. You may notify us of banking changes by obtaining

an *Address/Bank/Name Change Request* form from our Web site at [www.opers.org](http://www.opers.org). Or, you may contact Ohio PERS at 1-800-222-7377 and request to have this form mailed to you. Please allow 30 days for this change to take effect.

### Address changes

Even though you are using direct deposit, you will still receive newsletters, tax information, Board election ballots, and other publications from us at your mailing address. It is important to notify us when your home and/or mailing address changes. If you split your year between different homes (e.g. south in the winter, north in the summer), you also should let us know where your correspondence should be mailed during the different parts of the year.

The quickest and most convenient way to update your address is by accessing your personal account through our Member Benefits System (MBS). In order to use MBS, you will need to register by visiting our Web site, [www.opers.org](http://www.opers.org), and clicking on the MBS "Log-In" button located along the right side of the home page. From the "Log-In" screen, follow the registration prompts and you can be using MBS in a matter of days.

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*Ohio PERS NEWS – Your Benefit Connection* is a quarterly newsletter designed to provide news and information to more than 150,000 age and service retirees, disability retirees, and surviving beneficiaries receiving a benefit from the Ohio Public Employees Retirement System. This publication allows us to communicate vital information concerning retirement benefits and health care coverage to our retirees and also educate them on the services we provide. *Ohio PERS NEWS* replaces our previous retiree newsletter, *Lifetime OPERTunities*.

**CONTACT INFORMATION:**

www.opers.org  
1-800-222-7377

*This newsletter is written in plain language for use by members of the Ohio Public Employees Retirement System. It is not intended as a substitute for the federal or state law, namely the Ohio Revised Code, the Ohio Administrative Code, or the Internal Revenue Code, nor will its interpretation prevail should a conflict arise between it and the Ohio Revised Code, Ohio Administrative Code, or Internal Revenue Code. Rules governing the retirement system are subject to change periodically either by statute of the Ohio General Assembly, regulation of the Ohio Public Employees Retirement Board, or regulation of the Internal Revenue Code. If you have questions about this material, please contact our office or seek legal advice from your attorney.*

**For your benefit** *(continued from page 1)*

You can also change your address by obtaining an *Address/Bank/Name Change Request* form from our Web site or by calling us at 1-800-222-7377. Once you have completed the form and returned it to us, please allow 30 days for this change to take effect.

**Name changes**

The *Address/Bank/Name Change Request* form needs to be completed in order for OPERS to process a change in the name we have on record for you. Additional documentation (i.e. copy of a marriage certificate, a divorce or dissolution decree that restores the individual to a prior name, an entry of change of name issued by a probate court in Ohio or another state, or a copy of a Social Security card) is required for a name change.

Please be as accurate as possible when corresponding with us, especially with post office box numbers, state route numbers, and zip codes. The postal service has become very automated, and your mail may be delayed or returned to us due to incomplete addresses and street names.

Other changes to your account that OPERS requires in writing include changing your death benefit beneficiary, adding guardianship of your account, adding an attorney in fact under a power of attorney, changing tax withholding, and changing your plan of payment and/or your plan of payment beneficiary as permitted by Ohio retirement law. We will provide details on the process of making these type of changes in future installments of *For Your Benefit*. Additional information can also be found in your *Benefit Recipient Handbook* and online at [www.opers.org](http://www.opers.org).

## 2006 Board election announcement

### *Retirees will elect one representative to Retirement Board in 2006*

Ohio PERS retirees will be electing one representative to the Retirement Board this year. The person who is elected will serve a four-year term beginning in January 2007.

Any Ohio PERS retiree receiving an age and service retirement or disability benefit is eligible for election. Prior to the election, a nomination process will take place. Under Ohio law, a retiree seeking nomination must obtain at least 250 signatures from retirees receiving a benefit from Ohio PERS. At least five different counties must be represented by a minimum of 10 signatures each. Beneficiaries, which may include surviving family members, are not eligible to run for election or nominate candidates by signing a petition. Beneficiaries are also ineligible to vote and will not receive a ballot.

Nominating petition packets will be available on Friday, June 9 for distribution to interested candidates. You can request that we mail you a packet by calling Ohio PERS at 1-800-222-7377. Packets will also be available for pick-up at the Ohio PERS office on June 9. These packets contain official nominating petitions and all other necessary forms to be completed by the candidate. Completed petitions and forms are due at the Ohio PERS office no later than 4:30 p.m., Monday, July 31; petitions postmarked on this date, but received later, are invalid.

Any retiree successfully meeting the nomination criteria will be placed on an official ballot. Every effort is made to ensure that each candidate is given equal space and placement on the ballot. Ballots will be mailed and voting will take place during September. Retirees will have a choice between returning a paper ballot or voting via telephone using an interactive voice response system. All votes must be received by Friday, Sept. 29. The election count is scheduled for Monday, Oct. 2. The final results will be certified by the Secretary of State's office.

Please notify Ohio PERS if you have a change of address. In order for you to receive important mailings, such as board election ballots, we must have your current address on file.

The 11-member Ohio PERS Retirement Board is responsible for the administration and management of Ohio PERS. Seven of the 11 members are elected by the groups they represent (i.e., college and university non-teaching employees, state, county, municipal, and miscellaneous employees, and retirees); the Director of the Department of Administrative Services for the state of Ohio is a statutory member, and three members are investment experts appointed by the Governor, the Treasurer of State, and jointly by the Speaker of the Ohio House of Representatives and the President of the Ohio Senate.

Ohio PERS Board members receive no compensation for their service, but reimbursement is made for necessary expenses. **Ohio PERS Board members also serve on the Board for the Ohio Public Employees Deferred Compensation Program.**



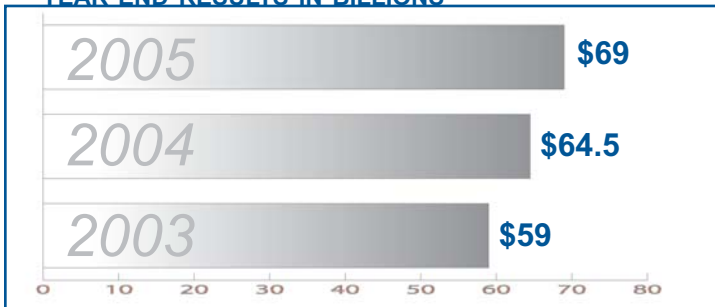
# investments

## YEAR END RESULTS

Ohio PERS is pleased to announce that we ended 2005 with total assets of approximately \$69 billion, an increase of approximately \$4.5 billion over 2004 results of \$64.5 billion. Overall, we achieved a 9.03 percent return on investments during 2005, surpassing our target actuarial rate of 8 percent.

Jennifer C. Hom, director of investments, said that all asset classes beat their benchmarks, thereby improving the financial status of Ohio PERS' pension and health care programs. "Our disciplined, long-term investment orientation continues to work well for the Ohio PERS fund and our members," Hom said.

### YEAR END RESULTS IN BILLIONS



"Though the Dow finished relatively flat and other indexes showed modest improvement, we were able to produce a respectable return that beat benchmarks and contributed \$4.5 billion to the overall fund. All asset classes showed robust gains, especially our internally managed fixed income and private equity portfolios."

2005 marks the third consecutive year that the fund has had positive returns. The Ohio PERS fund earned a return of 25.3 percent in 2003 and 12.5 percent in 2004.

Approximately 63 percent of our investments are managed internally through a staff of 51 investment professionals with the balance managed by external money managers in Ohio and throughout the world. The fund has one of the best solvency rates in the country with 88 cents of every \$1 owed in benefits covered. Ohio PERS distributes \$3.7 billion annually in pension benefits and health care coverage to almost 152,000 retirees.

Industry reports list Ohio PERS as the largest state pension fund in Ohio and the 10th largest state pension system in the U.S.

## Retiree satisfaction survey results

*Survey shows a high level of satisfaction with OPERS services and increased Internet usage by retirees*

The results of the 2006 retiree satisfaction study were recently finalized. Early this year, we conducted interviews with 400 OPERS retirees to assess their overall satisfaction with Ohio PERS and their satisfaction in specific areas including benefits administration, the member services center, communications, and the OPERS Web site.

Consistent with past years, the survey results indicate the majority of OPERS retirees maintain a high level of satisfaction with the service they receive from us. The highest rating allowed by the survey is "very satisfied." Overall satisfaction with OPERS is rated at 93 percent "very satisfied." This is a slight decrease compared to 95 percent in 2005, although satisfaction in each specific area increased from or remained consistent with 2005 results.

Some interesting findings from this survey show an increase in the number of retirees utilizing our member services center and Web site to receive information about OPERS. According to survey results, retirees are contacting our member services center more than they did in 2005. In 2005, 72 percent of retirees reported never having contacted our member services center. The percentage in this same category decreased to just under 50 percent this year.

Also worthy of mention, just under half of all retirees report having access to the Internet in 2006. Only 28 percent indicated that they had Internet access in 2005. Six out of 10 retirees have never visited the OPERS Web site. This figure is down from 73 percent in 2005. Newer retirees are more likely to visit our Web site as opposed to those who have been retired for three or more years.



## MAXIMIZING HEALTH CARE DOLLARS

### OPERS ANSWERS YOUR QUESTIONS ABOUT THE RISING COSTS OF PRESCRIPTION MEDICATIONS AND RECENT COVERAGE CHANGES

It's no secret that health care costs are rising at an alarming rate and pharmacy costs are a leading contributor. One of the primary causes of this inflation is the rise in brand name prescription medication prices. Popular brand name products that have contributed to this inflation are: Nexium™, Lipitor™, Cozaar™, Fosamax™, Celebrex™, and Norvasc™.

We receive a variety of inquiries regarding the cost of prescription medications, the coverage we provide under our health care plan, and what we're doing to help control costs. To help keep you informed on this important issue, we have compiled answers to the most commonly asked questions.

#### Is OPERS doing anything to help contain rising prescription costs?

In the past two years alone, prescription drug inflation has cost OPERS approximately \$40 million and many popular medications have outpaced the Consumer Price Index (CPI) by nearly three times. These are dollars that go directly to drug manufacturers.

OPERS is working to preserve our health care plan for the future in several ways. As an advocate for health care reform, OPERS is active at the national, state, and local level. In addition to our work with the federal government in Washington D.C., OPERS is working with CMS (Medicare), the FTC (Federal Trade Commission), the FDA, and other agencies to help control prescription drug costs. We have helped lead the formation of the first and only national public sector health care coalition. For more information on various national policy endeavors, visit [www.healthcareroundtable.org](http://www.healthcareroundtable.org). We are also working directly with drug manufacturers and encourage you to express your concerns over drug inflation to them as well.

#### What can I do to get the most for my prescription medication dollars and help combat these rising prices?

First and foremost, diet and exercise are proven to help reduce the need for expensive pharmaceutical or medical procedures. Secondly, always ask your physician or pharmacist if there is an over-the-counter or generic medication that can effectively treat your condition. It's obvious that many of you have been doing

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## OHIO PERS ENCOURAGES HOSPITALS TO DO THEIR PART

As another step in our work to curb skyrocketing health care costs, Ohio PERS is leading an initiative to encourage hospitals to report on key quality and safety practices they have implemented to prevent medical mistakes. The survey results, compiled by the Washington DC-based Leapfrog Group, will be made available online to aid consumers in assessing the quality of local health care providers.

The need for consumers to make more informed health care decisions will undoubtedly increase the need for transparency from our Ohio hospitals. With this type of information available, a valid comparison can be made between hospitals using criteria other than proximity and at what hospital a physician has privileges.

On March 1, Ohio PERS sent letters to 24 hospitals in Franklin and surrounding counties strongly encouraging them to complete the Hospital Quality and Safety Survey available March 20. The survey gathers important information used to measure key indicators of quality and safety. We feel it is extremely important for Ohio hospitals to complete the survey, provide measurement and accountability information and do their part to help consumers make better health care decisions that will ultimately hold down costs.

We will continue to provide updates on this initiative including information on how to access the survey results when they become available.

**Ohio PERS spent approximately \$223.8 million on inpatient hospital expenses in 2005. Of this amount, \$47.2 million was spent in Franklin and the surrounding counties.**

## MAXIMIZING HEALTH CARE DOLLARS

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this over the past year. As a result, over half of all OPERS prescriptions are now filled with generics. On average, a generic medication is more than five times less costly while providing the exact same active ingredients. With your help, we saved over \$33 million dollars last year with generics. Many of the most prescribed brand name drugs, including Zocor™, Zithromax™, Zolof™, and Zyrtec™, will have a generic alternative available in the near future.

In most cases, over-the-counter options will save both you and OPERS even more. **Don't forget that your pharmacist can play an important role in this process. Even if your doctor has written you a prescription for a costly brand name medication, your pharmacist can help identify brand, generic or over-the-counter alternatives. Your pharmacist can even arrange to have a new prescription for you without another doctor visit and co-pay.**

### **Why did you recently decide to stop paying for some medications treating digestive disorders, such as Nexium™, when so many people have found relief by taking them?**

We have changed the prescription drug coverage for certain medications treating digestive disorders, specifically those classified as Proton Pump Inhibitors (PPIs). To be clear, OPERS is still providing coverage for all medications within the PPI class, but the coverage varies based on whether you are purchasing a name brand, generic, or over-the-counter medication. Many retiree health plan sponsors have eliminated or drastically reduced coverage for brand name drugs within this class. On average, retirees covered by other health plan sponsors pay between 40 and 50 percent of the total cost for a medication. The average amount that an OPERS retiree pays is less than 15 percent of the total cost. We had the option of not covering any brand name PPI medications, but instead opted to provide coverage for each PPI depending on the total costs. This allows members to have a choice without the burdensome process of prior-authorizations.

# 2007

## what you need to know

### MAXIMIZING HEALTH CARE DOLLARS

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As you may know, medications within the PPI class have also recently become available in lower cost over-the-counter and generic versions. In order to combat this and protect profits, drug manufacturers are aggressively marketing the brand name versions to both the public and physicians. Continuing to pay premium prices for brand name medications when alternatives are available allows drug companies to charge whatever they want. This is not the message that OPERS wishes to send as an organization dedicated to preserving health care coverage for our retirees and to making smart, practical decisions as health care consumers.

**My doctor has prescribed Nexium™ for my digestive disorder and it works very well for me. I don't think I can afford it after the coverage changes. What can I do?**

It's true that the cost of Nexium™ has been a contributor to overall prescription drug inflation. Keep in mind, all brand name PPI medications (including Nexium™, Prilosec™, Protonix™, Prevacid™, and Aciphex™) have been deemed clinically equivalent by numerous professional groups comprised of

#### OPERS PRESCRIPTION MEDICATION COVERAGE FACTS

- **In 2005, OPERS spent approximately \$366 million on prescription medications. This amount accounts for approximately 40 percent of our \$1 billion in health care expenditures.**
- **On average, OPERS retirees each receive 28 prescriptions per year.**
- **54 percent of all these prescriptions are generic medications.**
- **On average, each OPERS retiree takes between five and six medications for chronic conditions.**

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- 1 Beginning Jan. 1, 2007, Ohio PERS will implement a new health care plan in order to improve the financial solvency of our health care fund in the face of constantly rising health care costs. These changes are necessary for us to continue providing health care coverage for retirees and their dependents.
- 2 Under the new plan, retirees eligible for health care will receive a monthly allowance towards the cost of health care coverage. Current retirees will receive an allowance equal to 100 percent of the cost of health care in 2007. Qualifying dependents will receive between 75 and 90 percent of the retiree's allowance depending on the retiree's years of service at retirement. If you retired with fewer than 30 years of service credit, you will see an increase in your dependent premium amount. These increases will be phased in over a five year period.
- 3 Current retirees will be called upon to share in the cost of health care coverage if health care inflation exceeds wage inflation in any given year. This cost sharing provision will be evaluated annually and implemented at the discretion of the Ohio PERS Retirement Board. The Board can decide to implement this provision based on the financial position of the system. The most any retiree's premium will increase in a given year is five percent of the plan cost.
- 4 Under the new health care plan, retirees will use their monthly allowance to purchase health plan options consisting of medical/pharmacy, dental, vision and long-term care. Retirees can customize a health plan that suits their individual needs. They will have a choice of three different levels of coverage, some of which will result in a smaller premium. This fall, retirees will receive a personalized open enrollment statement containing information on the available choices and personalized cost estimates.



## IMPORTANT REMINDER Medicare Part D

Medicare began administering a new prescription drug coverage program (Medicare D) this year. **Ohio PERS is asking our retirees not to sign up for Medicare Part D coverage.** Our current prescription plan provides better coverage at this time.

**There is one exception to our request that Ohio PERS retirees not sign up for Medicare Part D coverage.** Persons whose income is low enough to allow them to be eligible for Medicare Part D coverage with a waived premium are encouraged to accept it in place of Ohio PERS prescription coverage. Medicare will contact you directly if you meet the eligibility requirements or feel free to contact them with questions.

**If you have questions, please call us at 1-800-222-7377. Information can also be found at [www.medicare.gov](http://www.medicare.gov) or by calling 1-800-MEDICARE.**

## DID YOU KNOW THAT YOU COULD GAIN MORE FROM EXERCISE THE OLDER YOU GET?

In general, older people tend to reach exhaustion more quickly than younger people when performing the same physical task. However, researchers recently found that when older people exercise regularly, they experience greater gains in exercise efficiency compared to younger people. Their bodies make greater strides over time in terms of being able to use less oxygen for the same amount of work.

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## MAXIMIZING HEALTH CARE DOLLARS

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physicians and pharmacists. **Now that Prilosec™, once a top selling prescription drug worldwide, is available over-the-counter (Prilosec OTC™) you may have an equally effective alternative that provides both you and OPERS with a tremendous cost saving.** See the cost difference on the chart below and ask your physician or pharmacist if *Prilosec OTC™* would work for you.

### What qualifies OPERS to decide what medications I can and cannot take?

It's important to understand that we are not deciding whether you can take a particular medication, only how we will subsidize its cost. In today's health care climate, if we are charged an excessive price for a particular drug, we must look for less costly alternatives and ask you to be an informed patient. Again, despite the great cost variance, we are pleased to offer some coverage for all drugs within the PPI class at this time (see chart below). We acknowledge that each of our retirees has his or her own unique medical situation. Therefore, we understand that your physician may prescribe a brand name PPI to treat a chronic digestive disorder. **We are asking that you review the different coverage levels we offer for medications in this class with your physician and/or pharmacist to determine whether a lower cost option would work for you.**

### 2006 COVERAGE FOR DIGESTIVE DISORDERS MEDICATIONS WITHIN THE PPI CLASS INCLUDING:

**OVER-THE-COUNTER** - Prilosec OTC™ (requires prescription for coverage)

**GENERIC** - Omeprazole™

**FORMULARY BRANDS** - Nexium™

**NON FORMULARY BRANDS** - Prilosec™ (prescription), Protonix™, Prevacid™, Prevacid NapraPAC™, Aciphex™

#### Retail Pharmacy

30-day supply	Total Cost	OPERS Cost	Retiree Cost
Prilosec OTC™	\$20	\$15	\$5
Generic	\$50+	\$25+	\$25
Formulary Brand	\$100	\$50	\$50
Non Formulary	\$100 - \$150	\$25 - \$75	\$75

#### Mail Order Pharmacy

90-day supply	Total Cost	OPERS Cost	Retiree Cost
Prilosec OTC™	<i>Not available by mail</i>		
Generic	\$150+	\$100 +	\$50
Formulary Brand	\$200+	\$100+	\$100
Non Formulary	\$200 - \$600	up to \$450	\$150

*Total Cost and OPERS Cost are approximate amounts.*

*Retiree cost as listed is a fixed co-payment as of 3/1/06 and is subject to change.*

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## MAXIMIZING HEALTH CARE DOLLARS

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### Can we expect more coverage changes?

Despite the on-going challenges within the health care marketplace, OPERS is in a unique and enviable position. As a result of careful planning, we are able to provide a comprehensive retiree health care coverage plan in a time when many pension systems offer limited retiree health coverage. Our goal is to have the financial resources to continue providing coverage at a comparable level into the future. In order to meet this goal, we have made some coverage changes and will continue to do so when necessary.

Another reason for increased health care costs is the explosion of new "biotech" medications becoming available. Although they are very expensive, we currently offer coverage for these medications. We offer this coverage because many of these products are truly remarkable and provide much needed help to patients with problems that have gone largely untreated in the past. Examples of "biotech" medications are Procrit™, used to treat anemia as a result of cancer treatment and Enbrel™, which treats rheumatoid arthritis.

"Biotech" medications are costly, at an average of more than \$6,000 per person each year. In 2005, OPERS spent 28 percent more on these medications than the year before and this growth is expected to continue. Nearly all "biotech" drugs are relatively new and also single source medications. **In other words, there are no lower cost alternatives currently available.** In order to continue providing coverage for these medications, changes need to be made within drug classes where multiple options are available, such as the PPI class.

Making changes that result in out-of-pocket costs for our retirees is never a decision we take lightly. These decisions are made only after careful consideration of the impact on every aspect of our health care plan. The decision to change our coverage for PPIs was made because we were able to offer comparable medication alternatives and it will have a positive financial impact on our health care plan. This decision also sends the message to drug manufacturers that OPERS and the retirees we serve are informed health care consumers and we are willing to make the changes necessary to combat the cost increases that are prevalent throughout the pharmaceutical industry.

## Need more information?

**SEMINARS** - Ohio PERS will be expanding our open enrollment seminar schedule this fall. We will be adding dates and visiting additional cities in order to help our retirees prepare to make their coverage choices for 2007 under the new health care plan. A schedule of these seminars will be available mid-summer. Please check our Web site and the July issue of *Ohio PERS NEWS* for details.

OPERS also offers an educational seminar for active and retired Traditional Pension Plan and Combined Plan members that explains the new Ohio PERS health care plan. These seminars are completely full for 2006. Our 2007 seminar dates will be posted to our Web site this summer.

**WEB SITE** - the Ohio PERS Web site, [www.opers.org](http://www.opers.org), contains a wealth of information regarding the new health care plan. Clicking on "Health Care" under the heading of "Retirees" on the home page will allow you to access a variety of presentations, documents, and frequently asked questions. Check the Web site frequently because we will soon be adding new tools including an online health care cost estimator and online open enrollment capabilities.

**BY PHONE** - An Ohio PERS member services representative can be reached by calling 1-800-222-7377. These individuals are not equipped to provide answers to questions regarding exact costs at this time, but they will be happy to help you understand features of the new plan structure.

## Legislative update

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### **Substitute version of H.B. 272 retains positive impact on funding status**

*OPERS continues to support critical piece of pension legislation*

The Ohio House Financial Institutions, Real Estate and Securities committee recently completed its seventh hearing on House Bill 272 and, in the process, requested additional information regarding a number of the bill's provisions. The provisions in question concern health care, minimum earnable salary and the change in the remittance of employer contributions. The committee also accepted a substitute version of the bill, which contained changes reviewed and approved by the Ohio Retirement Study Council.

H.B. 272 was then amended by the committee to remove the minimum earnable salary provision for earning full-time service credit. The provision would have increased the minimum from \$250 a month to \$450. While OPERS feels strongly that the increase would improve the system's funding status, a decision was reached to revisit this provision at a later date.

In response to concerns raised by committee members, Rep. Michelle Glass Schneider (R-Cincinnati), the bill's sponsor, has drafted an amendment, which would remove nearly all the health care provisions that were included in the substitute bill. If adopted, the health care provisions remaining in the bill would include:

- Authorizing the state retirement systems to establish voluntary medical savings accounts.
- Specifying that the boards of OPERS and Ohio Police & Fire have the authority to set the amount paid to benefit recipients for Medicare Part B coverage, which is now determined annually by the federal government.
- Authorizing the OPERS Board to establish the amount paid for Medicare Part A equivalent coverage to spouses of retirees who are ineligible for Medicare.

OPERS is hopeful that the Ohio House of Representatives will continue its work on this important piece of legislation and take action to enact the bill before summer recess in May.

### **OPERS continues to support efforts to reform the Government Pension Offset and Windfall Elimination provisions**

*Congress is unlikely to take significant action on Social Security reform legislation this session*

Although legislation aimed at reforming the Government Pension Offset (GPO) and Windfall Elimination Provision (WEP) continues to be introduced, it is not expected that these bills will see any resolution during the current Congressional session. Social Security reform is a complicated and sensitive topic with tremendous financial and quality of life considerations. With Congressional elections scheduled for this fall and because Congress is embroiled over the war in Iraq, ethics investigations, lobbying reform, immigration legislation, and the overall budget, it seems highly unlikely that Social Security reform will be addressed to any extent during this session. Until Congress is ready to address Social Security reform as a whole, it is doubtful that any current bills dealing with GPO and WEP reform will gain enough support on their own to see any significant action.

Despite the current status of Social Security reform in Congress, there are recent developments to report on this issue. H.R.147, which would repeal the GPO and WEP provisions, now has 316 co-sponsors. The National Education Association has launched a campaign to pressure members of Congress to act on the bill yet this year. However, no hearings have been heard on the bill and there are none currently scheduled.

The most recent bill to be introduced is S. 1799, otherwise known as the Government Pension Offset reform act. This bill, sponsored by Sen. Barbara Mikulski (D-Maryland) and Sen. George Voinovich (R-Ohio), would limit the offset of the spouse benefit from Social Security to two-thirds of the total pension benefit, not two-thirds of the non-Social Security benefit alone. Sen. Mikulski has presented this measure in past Congressional sessions, but it has never made it out of committee.

OPERS continues to support any efforts to repeal or reduce the effects of the Government Pension Offset and Windfall Elimination Provision on public employees in Ohio. We are also committed to keeping you informed of news surrounding this issue. Look for future installments of *Legislative Update* for the most current developments.

## 2006 calendar of educational seminars

Visit [www.opers.org](http://www.opers.org) or call 1-800-222-7377 to register for any seminar. All dates listed are for 2006.

**RETIREE SEMINAR** - This two- to three-hour seminar, designed exclusively for Ohio PERS retirees, focuses on reviewing your Ohio PERS pension and health care coverage and preserving your wealth. Topics range from taxation of your pension benefits and re-employment to health care coverage, and financial/estate planning. A continental breakfast will be provided.

There is no cost to attend this seminar and you may bring a guest. Just be sure to register your guest's name when you enroll yourself. To register for any of the dates listed below, please visit [www.opers.org](http://www.opers.org) or call us at 1-800-222-7377.

### RETIREE SEMINAR

<b>Canton</b> August 18	<b>Cuyahoga Falls</b> July 21	<b>Mansfield</b> June 23
<b>Cincinnati (North)</b> August 25	<b>Dayton</b> July 14 August 4 November 3	<b>Perrysburg</b> July 28
<b>Columbus (East)</b> September 8	<b>Dublin</b> July 7	<b>Wilmington</b> October 13
<b>Columbus (OPERS)</b> December 8	<b>Youngstown</b> August 25	

**REMOTE COUNSELING SESSIONS** - If you are a retiree living outside the Columbus area and would like to talk with a counselor about re-employment, the Money Purchase Plan, or even changing your beneficiaries, you can schedule a remote counseling session. Please call 1-800-222-7377 to schedule an appointment based on the dates and cities listed below. **Counseling sessions are also available at the Ohio PERS office in Columbus and by phone.**

### REMOTE COUNSELING SESSIONS

<b>Chillicothe</b> December 4 - 8	<b>Elyria/Lorain</b> August 21 - 25	<b>Strongsville</b> November 6 - 10
<b>Cuyahoga Falls</b> October 16 - 20	<b>Perrysburg</b> Oct.30 - Nov. 3	<b>Wickliffe</b> August 7 - 11
<b>Dayton</b> November 13 - 17	<b>Sharonville</b> October 2 - 6	<b>Wooster</b> July 24 - 28
<b>Dover/New Phil.</b> September 25 - 29		

## Ohio PERS retirement board

The 11-member Ohio PERS Retirement Board is responsible for the administration and management of Ohio PERS. Seven of the 11 members are elected by the groups that they represent (i.e., college and university non-teaching employees, state, county, municipal, and miscellaneous employees, and retired members); the Director of the Department of Administrative Services for the state of Ohio is a statutory member, and three members are investment experts appointed by the Governor, the Treasurer of State, and jointly by the Speaker of the Ohio House of Representatives and the President of the Ohio Senate.

### Elected Board Members

**Ronald C. Alexander**  
Chair  
State Employees

**Sharon M. Downs**  
Vice Chair  
Retired members

**John W. Maurer**  
Retired members

**Cynthia Sledz**  
Miscellaneous  
Employees

**Helen Youngblood**  
County Employees

**Ken Thomas**  
Municipal Employees

**Charlie Adkins**  
State College and  
University Employees

### Statutory Board Member

**Carol Nolan Drake**  
Director, Department  
of Administrative  
Services

### Appointed Board Members

**Robert C. Smith**  
Investment Expert  
Governor Appointee

**Warren W. Tyler**  
Investment Expert  
Treasurer of State  
Appointee

**vacant**  
Investment Expert  
General Assembly  
Appointee

**Blake W. Sherry**  
Interim Executive  
Director



Ohio Public Employees  
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277 East Town Street  
Columbus, OH 43215-4642

1-800-222-7377  
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## **IMPORTANT health care section enclosed**



Answers to your questions about rising prescription medication prices and recent coverage changes

What you need to know about changes to the OPERS health care plan in 2007

OPERS encourages hospitals to do their part

Reminder: Medicare Part D