

Ohio PERS NEWS

Your Benefit Connection

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

Pension reform legislation update - what we do and do not know

OPERS members and retirees have expressed concern over a lack of clarity surrounding the current pension reform legislation. We share your concerns and have consistently used our website, www.opers.org, and our blog, PERSpective, in an attempt to keep our members informed of the legislation's progress and to dispel any misinformation.

State budget at the end of June, but as of now it's uncertain whether that will be the case. Because so many of the details of pension reform remain unclear, we thought it best to provide an explanation of what we do and do not know at this time.

To recap, in November 2009, the OPERS Board of Trustees approved a set of substantive changes to our plan design that would ensure the continued sustainability of our defined benefit fund and our health care fund well into the future. All of 2010 passed without action by the legislature. We are advocating that these plan design changes be enacted this year.

What we know

1 - We have seen introduction of pension reform legislation – House Bill 69 and Senate Bill 3 – this year. These bills were brought forth as placeholders (containing only the recommendations submitted by each system), meaning that further details would be coming in the future. As of the end of April, substitute bills have not been introduced. Members of the House of Representatives and the Senate are working on new versions of the bills.

OPERS will provide written updates when more definitive information is available. However, in order to keep our membership continually informed and avoid mailing newsletters containing outdated information, we will continue to use our online communication vehicles to report the latest news. To receive updates via e-mail, please be sure to provide us your

e-mail address by registering for My Benefits System (MBS) on our website.

The original stated preference was to have pension reform passed concurrently with the

(continued on page 2)

inside this issue

Facts about our proposed COLA changes

o o o **3**

Karen Carraher named Interim Executive Director

o o o **4**

Study shows OPERS benefits align with public sector

o o o **4**

OPERS launches social media program

o o o **5**

Legislative Update

o o o **6**

A primary care provider - your partner in care

o o o **8**

2011 benefit payment dates

o o o **12**

pension reform legislation update

(continued from page 1)

OPERS NEWS – Your Benefit Connection is a quarterly newsletter providing news and information to more than 160,000 age and service retirees, disability benefit recipients and survivor benefit recipients of 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.

CONTACT INFORMATION:

www.opers.org

1-800-222-7377

Monday - Friday

7:30 a.m. to 5:00 p.m.

newsfeedback@opers.org

2 - There have been 11 hearings on House Bill 69 and three hearings on Senate Bill 3. Further hearings have been suspended as work continues on legislative changes. The new bill may or may not incorporate the recommendations that our Board has proposed to sustain our fund for decades.

3 - On May 5, 2011, the House of Representatives voted to approve H.B. 153, the State biennial budget bill. The bill did not contain language that would have altered the contributions that public employees and employers make to OPERS. The administration's original state budget proposal contained a shift in contributions -- decreasing two percent from employers and increasing the employee share by two percent. As requested by OPERS Interim Executive Director Karen Carraher in testimony, the House removed the provision from substitute H.B.153.

What we do NOT know at this time

1 - When a substitute pension bill will be introduced or what language it will contain.

2 - When pension reform will become law. The timing of the legislation is important because many of our members are considering their own retirement plans. We do not know when pension reform will be enacted, nor do we have the ability to set that date. It is up to the Ohio General Assembly to make that final decision.

3 - What details will be in the final reform bill. We have heard that while most of the plan design changes that our Board submitted are supported, some of them may not go far enough. For example, the minimum retirement age could be increased to reflect a higher retirement age than age 55, and other changes could be made.

As soon as the substitute bill is introduced, we will be posting this information on the OPERS website and educating our members and retirees on its content. Now, more than ever before, our members should consult the online resources we provide to educate themselves on the latest details surrounding this important legislation. Please see page 5 for a complete description of our resources for information online.

Published in *PERSpective* (OPERS blog), April 22, 2011

It is your responsibility to be certain that OPERS has your current address on file. If OPERS is not made aware of address changes, we cannot guarantee that you will receive important information pertaining to your OPERS account.

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.

Facts about our proposed COLA changes

One of the most talked about provisions of our proposed pension reform concerns the cost of living adjustment, or COLA, the annual increase in pension benefit paid to retirees. Our current policy, which has been in effect since 2001, is to provide retirees a simple, 3 percent COLA on their first anniversary of retirement and every 12 months thereafter.

Our proposal is to link cost of living adjustments for future retirees to the Consumer Price Index (CPI), a measurement based on a market basket of goods and services. The maximum increase would be 3 percent. Over the past three decades, the CPI has averaged 3.17 percent per year. Our projection for the next 30 years is that the CPI will average 2.8 percent annually.

Based on our proposal, current retirees would retain the 3 percent COLA. The new adjustment would apply to anyone whose effective date of retirement comes on or after the effective date of the legislation, which is typically 90 days after the governor signs it. To be fully grandfathered, a member's last day of work should be in the month preceding the effective date of the legislation.

Our proposal also allows for a transition period for members who retire within the first five years after the effective date of the legislation. Those members would receive the simple 3 percent COLA during the transition period. Their COLA would be tied to the CPI after the five-year transition period expires. OPERS members who retire more than five years after the effective date of the legislation would receive the COLA adjustment that's tied to the CPI.

As of this moment, we do not know when pension reform will take effect, nor do we know if the Ohio legislature will adopt our recommendation regarding the COLA.

It's important to note that OPERS used the CPI as a cost-of-living basis from 1971 until 2001. We proposed to use it again because it's a recognized index upon which the Social Security Administration bases its cost-of-living raises. We estimate that this change will decrease our unfunded actuarial assumed liability by \$417.5 million and reduce the amortization period of our unfunded liabilities by 1.6 years.

Unlike typical Social Security raises, our COLA is a simple, rather than a compound, adjustment. That means that it's always based on the initial benefit. For example, if a member's initial benefit is \$2,000 per month, the 3 percent COLA will always be \$60. So after the first year, the monthly pension amount will be \$2,060, after the second year it will be \$2,120, and so on.

Please continue to watch the OPERS website, our blog (PERSpective), and our Facebook page for the latest information regarding pension reform legislation.

*Published in **PERSpective** (OPERS blog), April 7, 2011*

Karen Carraher named interim Executive Director

In the wake of Chris DeRose's departure as OPERS' chief executive officer, Karen Carraher, OPERS director of finance, has been named interim executive director by the OPERS Board of Trustees. Carraher officially began serving as interim director Feb. 28.

DeRose resigned Feb. 2 to pursue a career opportunity in the private sector. DeRose joined OPERS in October 2006 after nine years as chief executive officer of the Michigan Office of Retirement Systems.

Carraher joined OPERS in December 2002. She had served as the director of business services for the Ohio Education Association and was controller for both Mount Carmel Health and Riverside Methodist Hospitals.

Carraher earned her Bachelor of Science degree in business administration from The Ohio State University and her Master of Business Administration from Capital University. She is a certified public accountant.

The Board has begun the process of a nationwide search for a new executive director and will continue to advocate for the OPERS-recommended legislative plan design changes, while providing the necessary leadership to move the organization forward.

Study shows OPERS benefits align with those of private sector

The retirement benefits and health care coverage OPERS provides to its members are on par with those of large, Ohio-based private employers, according to a study by Aon Hewitt, an independent benefits consultant.

Aon Hewitt defined pension-related benefits as pensions, matched savings, death and disability coverage, and Social Security benefits. Retiree health care included comparable benefits that the peer companies provide: medical, dental, vision, and hearing coverage; spending accounts; and premium reimbursements.

OPERS member benefits rank eighth overall in a direct comparison with 15 large, Ohio-based private employers, said Aon Hewitt in a salary and benefit comparison commissioned by OPERS in 2010. The Aon Hewitt Benefit Index showed OPERS pension benefits rank tenth out of 16, while retiree health care coverage ranks third in the group.

Specific companies were chosen for the comparison in part because, like OPERS, they have more than 500 employees. OPERS has 365,229 active, contributing

members. Aon Hewitt said the population it studied mirrors salaried employees found in a typical industrial organization.

Recent studies and media reports indicate public worker benefits outpace those available to private sector workers. However, the Aon Hewitt study shows that OPERS benefits are not out of line with those enjoyed by retirees of large, Ohio-based private employers.

Further, if the Ohio legislature were to fully adopt the pension reforms that we have proposed, Ohio PERS would drop to 12th in the overall comparison ranking and to 15th in pension benefits. We would remain third in retiree health care coverage.

Visit the OPERS website, www.opers.org to read the Aon Hewitt Benefit Index summary. The summary, as well as a list of companies surveyed, can also be found by visiting the OPERS blog, *PERSpective* at <http://perspective.opers.org>.

Published in PERSpective (OPERS blog), March 10, 2011

OPERS launches social media program

OPERS recently launched a new social media communication initiative, which includes a presence on Facebook and Twitter, a weblog (blog), increased e-mail correspondence and the continued use of the opers.org website. As our membership's use of digital communication grows, we intend to reach out to our members through multiple communication channels. The use of new communication tools will help keep members, retirees and other stakeholders updated on important issues that will affect your retirement benefit.

PERSpective - The first step in our social media initiative was PERSpective, a blog we're employing to share our thoughts on important pension-related issues. Our goal for the blog is to share our perspective with you and, in turn, listen to your thoughts on issues impacting retirement. We will bring you regular updates on such topics as legislative efforts to reform pensions, the performance of our investment fund, and health care. We'll also use PERSpective to respond to academic studies, industry reports and media studies that touch the lives of our members. We invite you to respond and become an active partner in your retirement. Subscribe to PERSpective by clicking on the RSS feed logo on www.opers.org, or read it regularly at <http://perspective.opers.org>.

Facebook and Twitter - Once the blog was established, we created a Facebook page, which uses the name "Ohio PERS," and started "tweeting" via the microblogging service Twitter, using the name "ohiopers."

Facebook and Twitter messages are used in tandem with PERSpective as a way to keep people informed of news, events and items of interest. We encourage you to follow us on Twitter by searching @ohiopers. Be sure to "Like" us on Facebook in order to receive updates from OPERS within your newsfeed. Nearly 3,000 members and retirees have chosen to "Like" our Facebook page in the first month alone. However, you do not need to have a Facebook account to read the news and comments on the OPERS page. Simply use the link from our website to access the Facebook page at any time.

eNewsNow - As part of our efforts to increase electronic correspondence with members and retirees, OPERS launched a mass e-mail capability, eNewsNow. eNewsNow allows us to provide members and retirees with timely information more quickly and efficiently than ever before. The first eNewsNow was sent to more than 200,000 OPERS members and retirees in late January. If you did not receive eNewsNow, you are either not registered for My Benefits System (MBS), or your current e-mail address is not on file with OPERS. To begin receiving these important e-mail alerts, register for or log in to MBS and update your contact information.

OPERS will continue to utilize our website and printed newsletters to communicate important messages, but social media allows us to reach our retirees immediately when something important or newsworthy occurs between scheduled publications.

You can access our social media outlets by going to the home page of the OPERS website, <https://www.opers.org>.

We also have direct links to the sites:

PERSpective: <http://perspective.opers.org>

Facebook: <http://www.facebook.com/pages/OhioPERS/189641364396921>

Twitter: <http://www.twitter.com/ohiopers>



Legislative update

Senate Bill 20

OPERS provided supportive testimony to the Senate Government Oversight & Reform Committee on Senate Bill 20 sponsored by Sen. Tim Grendell (R - Chesterland). This bill is identical to S.B. 219 (128th General Assembly) in that it addresses the termination of disability benefits from a state retirement system if the recipient is convicted of certain felonies committed while serving in a position of honor, trust or profit. The Board instructed staff to take a favorable position on the bill as introduced based on strong public policy. The provisions of S.B. 20 were added to the Bureau of Workers' Compensation budget bill (H.B. 123) which was signed by the Governor on April 25, 2011. We expect the provisions of S.B. 20 contained in H.B. 123 will take effect in late July.

Public Employee Pension Transparency Act (HR 567)

U.S. Rep. Devin Nunes (R-CA) reintroduced his Public Employee Pension Transparency Act (HR 567) on Feb. 9, 2011. The bill would, among other things, impose federal

reporting requirements on state and local government pension plans. The Nunes bill, HR 567, would require pension funds to report debt with a discount rate based on U.S. Treasury bonds along with their regular plan for handling debt. If the debt using a lower discount rate is not reported, the state could not issue bonds that are exempt from federal taxes. The bill also would ban federal bailouts of state and local public pensions.

U.S. Senate Bill 347

Sen. Richard Burr (R-NC) has introduced a companion bill to HR 567 in the U.S. Senate (S 347). The National Association of State Retirement Administrators (NASRA), of which OPERS is a member, has gone on record opposing these legislative measures. Additionally, the OPERS government relations staff has drafted an OPERS-specific response to be sent to each member of the Ohio Congressional Delegation.

Federal tax withholding changes effective in 2011

The following is a general explanation for an increase in federal tax withheld from OPERS pension payments in 2011.

The Making Work Pay credit expired as of Dec. 31, 2010. Therefore, income tax withholding tables for 2011 are no longer adjusted to include this credit. In addition, the optional withholding adjustment for pensions that was available in 2009 and 2010 is no longer available. As an OPERS benefit recipient, you may have seen an increase in your 2011 federal tax withholding due to these changes.

Also, in late December 2010, Congress passed tax changes effective Jan. 1, 2011. These changes included a reduction in the social security tax rate for 2011 for those who pay into Social Security. The rate in effect for 2011 is 4.2 percent, a decrease of 2 percent. This change will not affect most OPERS benefit recipients.

The IRS has a withholding calculator available to help you determine if you are withholding enough taxes for 2011. The calculator can be found on the IRS website, www.irs.gov.

Questions should be directed to your tax advisor or to the Internal Revenue Service at 1-800-829-1040.

OPERS Disability Benefits Program

New partnership with third party administrator

OPERS is committed to providing our members and retirees with a disability benefits program that is fair, equitable and aligned with accepted industry standards. To ensure our ability to provide and deliver benefits to those who truly need them, OPERS is partnering with the MLS Group of Companies, Inc. to provide quality medical assessments and customer service to our disability benefit applicants and disability benefit recipients.

About the MLS Group - The MLS Group of Companies, Inc. is a provider of independent medical evaluations, peer review services and functional capacity evaluations. The MLS Group of Companies, Inc. includes: Managed Medical Review Organization (MMro); MLS Peer Review Services; and MLS National Medical Evaluation Services. They have developed a qualified network of health care professionals throughout the U.S.

OPERS and MLS Partnership - OPERS and MLS will partner to better facilitate the processing of new applications, appeals, continued treatment, annual reviews, employment assessments, benefit termination requests and early survivor benefit disability decisions.

Disability benefit recipients who are required to undergo annual medical reviews will submit their attending physician statements and supporting medical documentation to OPERS. OPERS will then have MMro review and evaluate the information to determine the best path for assessment of each recipient's condition. If an independent medical examination is needed, MMro will work directly with recipients to coordinate the date and time of examinations.

Once the medical examination is completed, MMro will review all the medical documentation and forward to

OPERS a recommendation of their assessment. The OPERS Board of Trustees continues to make final determinations of disability. This process will result in a fair and comprehensive assessment.

Disability benefit recipients who are under a continued treatment program will work directly with MMro in managing their ongoing care.

Please note that if you receive disability benefits and are required to undergo an annual review or continued treatment, you can expect to receive various correspondence and communication from a representative or physician who is part of the MLS group. This new partnership is an important part of our disability benefits program that will allow OPERS to continue delivering disability benefits efficiently and professionally.

Important update for retirees enrolled in the OPERS health care plan

If you decide to become re-employed by a public employer, it is important you review and understand the following information as it impacts your health care coverage through OPERS.

Federal law prohibits re-employed retirees from being covered by the OPERS health care plan as secondary when enrolled in an employer's high-deductible health plan (HDHP) and a health savings account (HSA). For more information, please consult *IRS Publication 969: Health Savings Accounts and Other Tax-Favored Health Plans*.

If your employer offers a high-deductible health plan (HDHP) for employees, please note: If you are a re-employed retiree with access to employer coverage (even if it is an HDHP) you must take it according to Ohio Revised Code 145.38 and Ohio Administrative Code 145-1-75(E). However, if you take the HDHP plan, you are not eligible for and may not have OPERS' secondary health care coverage.

A primary care provider - your partner in care

As your health care plan sponsor, OPERS encourages you to explore the advantages of having a primary care provider who can help you navigate the health care system and provide consistent care.

What Is a Primary Care Provider?

A primary care provider (PCP) is a doctor who is trained to be your personal health manager for all your health care needs. He or she is in charge of your overall health picture and acts as your partner and connection between you, your other doctors and the medical community.

What Can a PCP Do For You?

Your PCP not only knows you, but he or she has all your medical information in one place so you both can make informed decisions about your care. Here are some other reasons why it's good to have a PCP.

- 1 Personal History** - A doctor who knows you well will have a sense of your values, family, pressures and goals, which can all profoundly impact your health.
- 2 Consistent Care** - Visiting one doctor helps you steer clear of fragmented, uncoordinated care. Your PCP will recommend a specialist or alternate treatment if necessary. You will avoid the risk of forgetting something important and receive medical care consistent with recommended guidelines.
- 3 Communication** - When you have a relationship with your PCP, you may feel more comfortable sharing what might seem like private information, which can enhance the accuracy of any diagnosis.
- 4 Track Changes** - Your PCP will look for symptoms you might not notice. An annual exam allows a PCP to monitor and track any changes so he or she can guide you toward lifestyle habits that will keep you healthier.
- 5 Number Knowledge** - When you visit the doctor on a regular basis, it's easier to monitor key numbers like blood pressure, cholesterol, heart rate, blood sugar and body mass index (BMI).

6 Up-To-Date Vaccinations - Seeing one doctor makes it easier to keep track of routine vaccinations and immunizations. You can stay current on necessary immunizations and you'll know when it's time for your seasonal flu shot.

7 Regular Screenings - A PCP will be familiar with your personal history and risk factors, helping to establish a schedule for routine screenings such as a mammogram or a colonoscopy. A PCP will be able to recommend specific tests based on your current health and background.

8 Save Money - Having a PCP who knows your medical history and can address current concerns can help you avoid unnecessary—and often costly—care, such as trips to the emergency room. In addition, visiting a PCP will cost you less out of your pocket in 2011 than visiting a specialist. Discuss your symptoms first with your PCP and let him or her suggest the correct specialist, if needed.

Finding the Right One

For most, a good choice for a PCP is usually a family practice, general practice or internal medicine doctor. If you don't have a PCP, your medical plan administrator can help you choose an in-network doctor who is accepting new patients. Or, if you don't have a PCP but instead usually see a specialist for your care, you can ask the specialist doctor to recommend a PCP who meets your needs.

Once you've established a relationship with a PCP, you can relax knowing you have a partner who will help you meet all your health care needs.

Information reprinted from Medical Mutual's *Healthy Outlooks* magazine.

Federal health care reform requires changes to OPERS health care plan

The Patient Protection and Affordable Care Act – PPACA (a.k.a. health care reform) signed into law by President Obama March 23, 2010 contains provisions that impacted the OPERS health care plan beginning in 2011. We continue to analyze the legislation and its impact on our plan in future years. Below is a recap of the changes effective in 2011 and a notice regarding the Early Retiree Reinsurance Program required by the Centers for Medicare and Medicaid Services (CMS).

Effective Jan. 1, 2011, OPERS complied with federal health care reform legislation by making the following changes to the OPERS retiree health care plan:

- Adult children up to age 26 can be covered under the OPERS health care plan regardless of marital status or enrollment as a full-time student.
- There is no longer a lifetime medical coverage maximum for non-Medicare plan participants.
- The following preventive tests are now covered at 100 percent and are not subject to plan deductibles or co-insurance providing the services are billed as either routine or preventive.
 - Diabetes screening
 - Abdominal aortic aneurysm screening
 - Colorectal cancer screening
 - Cervical cancer screening
 - Breast and ovarian cancer genetic testing
- OPERS is participating in the Early Retirement Reinsurance Program (ERRP). The ERRP was designed to provide financial assistance for health plan sponsors – including for-profit companies, schools and other educational institutions, unions, state and local governments, religious organizations and other non-profits – to help early retirees and their families continue to have access to quality, affordable health care coverage. The ERRP reimburses participating plan sponsors for a portion of the costs of providing health care coverage to early retirees and their spouses, surviving spouses, and dependents.

NOTICE ABOUT THE EARLY RETIREE REINSURANCE PROGRAM

(Printed as required by CMS)

You are a plan participant, or are being offered the opportunity to enroll as a plan participant, in an employment-based health plan that is certified for participation in the Early Retiree Reinsurance Program. The Early Retiree Reinsurance Program is a Federal program that was established under the Affordable Care Act. Under the Early Retiree Reinsurance Program, the Federal government reimburses a plan sponsor of an employment-based health plan for some of the costs of health care benefits paid on behalf of, or by, early retirees and certain family members of early retirees participating in the employment-based plan. By law, the program expires Jan. 1, 2014.

Under the Early Retiree Reinsurance Program, your plan sponsor may choose to use any reimbursements it receives from this program to reduce or offset increases in plan participants' premium contributions, co-payments, deductibles, co-insurance, or other out-of-pocket costs. If the plan sponsor chooses to use the Early Retiree Reinsurance Program reimbursements in this way, you, as a plan participant, may experience changes that may be advantageous to you, in your health plan coverage terms and conditions, for so long as the reimbursements under this program are available and this plan sponsor chooses to use the reimbursements for this purpose. A plan sponsor may also use the Early Retiree Reinsurance Program reimbursements to reduce or offset increases in its own costs for maintaining your health benefits coverage, which may increase the likelihood that it will continue to offer health benefits coverage to its retirees and employees and their families.

If you have received this notice by e-mail, you are responsible for providing a copy of this notice to your family members who are participants in this plan.

Health care seminars for retirees

The 2011 OPERS retiree health care seminar schedule is listed below. These seminars are designed to address the needs of those participating in the OPERS health care plan. Topics include medical/pharmacy coverage, dental and vision coverage, preventive coverage and wellness programs. Each seminar will also feature a question and answer session at the end.

Registration is required and seminars do fill quickly. Please register by calling OPERS at 1-800-222-7377 or visiting www.opers.org to register using My Benefits System (MBS). All seminars last approximately two hours.

2011 - Medicare Retirees, 10 a.m.

Akron June 17	Columbus (OPERS) Dec. 9	Mansfield (Bellville) May 13 July 29
Athens June 24	Columbus (Reynoldsburg) Aug. 19	Mentor Dec. 2
Cambridge May 20	Dayton July 15	Perrysburg Nov. 17
Canton Nov. 10	Huron June 10	Portsmouth June 3
Cincinnati Aug. 26	Independence Sept. 9	Ravenna (Rootstown) Aug. 5
Cleveland (Westlake) July 22	Lima Aug. 12	

2011 - Non- Medicare Retirees, 1 p.m.

Akron June 17	Dayton July 15
Athens June 24	Lima Aug. 12
Canton Nov. 10	Mansfield (Bellville) July 29

Humana contacts plan participants to complete HRA

If you are enrolled in the Humana Medicare Advantage Plan, you may receive a phone call from a Humana representative between now and the end of July. The purpose of this call will be to ask you to complete a Health Risk Assessment (HRA) over the phone. If you have completed an HRA in the last 12 months, either by phone or on paper, you will not be contacted.

If you choose to complete the HRA, you will earn a \$50 deposit into your Retiree Medical Account (RMA). If you do not yet have an RMA, one will be established for you. OPERS has a contract with Aetna to administer the RMA.

Eight weeks after completing the HRA, you will receive a welcome packet from OPERS with instructions for how to use the funds in your account. With a balance in your RMA, Aetna will reimburse you for qualified expenses such as deductibles, co-pays and co-insurance amounts that are not covered by your medical or pharmacy plan.

In addition to earning a \$50 RMA deposit, completing an HRA will identify any risks to your health. You can use this information to prepare a plan for reducing the risks, including taking advantage of the OPERS health and disease management programs. Participating in one of these programs and completing pre-determined goals will allow you to earn even more incentive dollars - up to \$100 in RMA deposits per year.

Please contact Aetna at 1-888-672-9136 with questions regarding the administration of your RMA.

See the next page for an example of how to use the incentive dollars in your RMA.

Three easy steps to better health and rewards

Step 1 Complete

Complete and/or earn incentive-eligible activities

Step 2 Receive

RMA deposit – Eight weeks later

Step 3 Redeem

Obtain reimbursement for eligible expenses

Let's consider how "William", an OPERS retiree, will Complete, Receive and Redeem

William is a Medicare-eligible retiree participating in the Humana Medicare Advantage Plan. William receives a call from Humana and completes a Health Risk Assessment (HRA) over the phone. Completing an assessment qualifies him for a \$50 deposit into a Retiree Medical Account (RMA). Through conversations with the Humana representative, William learns that he also qualifies for a weight management program.

Humana notifies OPERS that William has completed his HRA. OPERS deposits the \$50 incentive into an RMA established in his name.

In the weeks to follow, William is contacted by Humana to begin a series of coaching calls aimed at managing his weight. Over the next 12 months, Humana works with William, assisting him in reaching some pre-determined goals. He eventually completes his program and is awarded with another \$50 RMA deposit.

During the course of the year, William has paid prescription co-pays equal to \$45. William downloads a claim form from the Aetna website, www.aetna.com/fsa. He completes the form and sends it, along with copies of his prescription co-pay receipts, to the address on the form. Aetna receives the form, confirms that he has enough funds in his RMA to be reimbursed and sends him a check reimbursing him for his prescription co-pays.

Not only is William at a healthier weight after completing the program, but he has received reimbursement for eligible health care expenses as well.

Ohio PERS Board of Trustees

The 11-member Ohio PERS Board of Trustees 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, 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.

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Interim Executive Director



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2011 benefit payment schedule

Pension benefit payments will be issued on the first business day of the month. If that day falls on a weekend or holiday, payments will be issued on the last business day of the previous month (except January when, for tax purposes, the payment must be issued on the first business day of the month).

June 1, 2011	September 30, 2011
July 1, 2011	November 1, 2011
August 1, 2011	December 1, 2011
September 1, 2011	January 3, 2012

2011 OPERS retiree seminars

This three-hour seminar is designed exclusively for OPERS retirees and benefit recipients. Topics range from taxation of OPERS pension benefits and re-employment to health care coverage and Social Security. There is no cost to attend and you may bring a guest. Please register your guest's name when you enroll yourself. You can also register for this seminar using My Benefits System (MBS) at www.opers.org.

2011 RETIREE SEMINARS

Cincinnati East Aug. 23	Dayton/ Miamisburg June 15	Perrysburg July 19
Cincinnati North/ West Chester May 17	Eastlake July 12	
Columbus OPERS July 6 Sept. 8	Independence Aug. 9	