

Teachers' Retirement Insurance Program of the State of Illinois

GASB Statements No.74 and 75

Accounting and Financial Reporting for
Postemployment Benefits Other than Pensions

Actuarial Valuation Report as of
June 30, 2021





October 27, 2022

Illinois Department of Central Management Services
401 South Spring Street
Springfield, Illinois 62706

Subject: GASB Statements No. 74 and 75 Actuarial Valuation as of June 30, 2021, for Illinois TRIP

Submitted in this report are the results of the actuarial valuation as of June 30, 2021, of the liabilities associated with the employer financed retiree health benefits provided through the State of Illinois Teachers' Retirement Insurance Program (TRIP), a benefit plan designed to provide postemployment healthcare benefits to certain members receiving pension benefits under the Teachers' Retirement System of Illinois (TRS).

This report was prepared at the request of the Department of Central Management Services (CMS) and is intended for use by CMS and those designated or approved by CMS. This report may be provided to other parties only in its entirety and only with the permission of CMS.

The actuarial valuation as of June 30, 2021, was prepared for purposes of complying with the requirements of Statements No. 74 and 75 of the Governmental Accounting Standards Board (GASB). The calculations reported herein have been made on a basis consistent with our understanding of these accounting standards. Determinations of the liability associated with the benefits described in this report for purposes other than satisfying the financial reporting requirements of TRIP and participating employers may produce significantly different results. The actuarial valuation was based upon:

- Census information used in the June 30, 2021, TRS pension actuarial valuation as provided by the System's actuary and TRS;
- Healthcare data and census data as of June 30, 2021, for TRIP as provided by the Department of Central Management Services (CMS);
- Average expected per member costs by plan type for plan year end June 30, 2022, reviewed by the State's healthcare actuary and provided by CMS;
- The Aetna MAPD plan which becomes effective on January 1, 2023, and is based on zero premiums over at least the next five years;
- Substantive plan information provided by TRS and CMS;
- Economic assumptions approved by the State, including a discount rate of 1.92 percent as of June 30, 2021, and 3.69 percent as of June 30, 2022, which comply with the requirements of GASB Statements No. 74 and 75;
- An ultimate trend rate assumption of 4.25 percent;
- Other healthcare-related assumptions, including participation and lapse, recommended by GRS and approved by the State; and
- Demographic assumptions consistent with the TRS actuarial valuation as of June 30, 2021, which reflect updates based on an experience study for the period from July 1, 2017, through June 30, 2020.

We checked for internal and year-to-year consistency, but did not audit the data. We are not responsible for the accuracy or completeness of the information provided by TRS or CMS. Authorization of the assumptions and methods applicable to this actuarial valuation was granted by the State, and they are disclosed in the assumptions and methods section of this report.

The Net OPEB Liability and Annual OPEB Expense were developed in accordance with the requirements of GASB Statements No. 74 and 75, and are applicable only for financial reporting purposes. The Net OPEB Liability, annual OPEB Expense, Annual Required Contribution, and the expected benefits disclosed in this report should not be used to assess the level of plan assets needed to settle the plan's benefit obligations or the pay-as-you go contributions for current and future years.

Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; and changes in plan provisions or applicable law. Due to the limited scope of the actuary's assignment, the actuary did not perform an analysis of the potential range of such future measurements.

This report was prepared using our proprietary valuation model and related software which, in our professional judgment, has the capability to provide results that are consistent with the purposes of the valuation. We performed tests to ensure that the model reasonably represents that which is intended to be modeled. We are relying on the GRS actuaries and Internal Software, Training, and Processes Team who developed and maintain the model.

The signing actuaries are independent of the plan sponsor.

To the best of our knowledge the information contained in this report is accurate and fairly presents the actuarial position of TRIP as of the actuarial valuation date. All calculations have been made in conformity with generally accepted actuarial principles and practices, with the Actuarial Standards of Practice issued by the Actuarial Standards Board and with applicable statutes.

Alex Rivera and Abra D. Hill are Members of the American Academy of Actuaries and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinions contained herein.

Respectfully submitted,
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SECTION A

EXECUTIVE SUMMARY

Executive Summary

Introduction

The Governmental Accounting Standards Board (GASB) has issued accounting standards, Statements No. 74 and 75, relating to Other Postemployment Benefits (OPEB). For the participating members of the Teachers' Retirement Insurance Program of Illinois (TRIP), OPEB primarily includes medical and prescription drug insurance benefits provided to former public school employees and their spouses receiving pension benefits under the Teachers' Retirement System of Illinois (TRS). Any other OPEB offered to the members of the Teachers' Retirement System of Illinois are outside the scope of this report. For example, OPEB offered by the local school districts such as vision, dental, life insurance, or explicit healthcare subsidies to help defray the costs of the retiree's share of the TRIP premium, are not reflected in this actuarial valuation.

The purpose of this Report is to provide: (a) results of the actuarial calculations necessary for financial reporting pursuant to GASB Statements No. 74 and 75 and (b) various other actuarial, statistical, and benefit information useful to management for the operation of TRIP.

We understand TRIP is a cost-sharing multiple employer plan and as of June 30, 2021, 979 employers are participating in the plan.

Funded and Unfunded Plans

Currently, benefits offered through TRIP are financed through a combination of retiree premiums and percentage-of-payroll contributions from active employees, local school districts, the State, and subsidies from the Federal Government. Contributions are made to the Teacher Health Insurance Security Fund. For fiscal year 2022, active members contribute 0.9 percent of pay, school districts contribute 0.67 percent of pay, and the State contributes 0.9 percent of pay. Retired members contribute through premium payments based on the coverage elected, Medicare eligibility, and the age of the member and dependents. The premium for retired members is not permitted to increase by more than 5.0 percent per year by statute. The Federal Government provides a Medicare Part D subsidy.

The current objective is to fund the Trust in order to maintain benefits through individual annual periods with appropriate margins for incurred but not paid liabilities. That is, there is no arrangement into which the participating employers would make contributions to advance-fund the obligation. However, a Trust does exist into which participating employers are making contributions that have historically marginally exceeded the annual expected net claim payments. This trust has an asset balance of \$313.2 million as of June 30, 2021, and \$378.6 million as of June 30, 2022. Historically, these assets have been invested in cash and other short-term investments according to the current investment policy, and benefit obligations are effectively funded on a pay-as-you-go basis.

Consequently, according to GASB Statements No. 74 and 75, the discount rate used to calculate the present values and costs of the OPEB, for programs funded on a pay-as-you-go basis, should be consistent with an index of high quality 20-year general obligation bonds as of the measurement date. For this purpose, the plan sponsor has selected an interest discount rate of 1.92 percent as of June 30, 2021, and 3.69 percent as of June 30, 2022.

There is no current requirement by State or Federal Statute or regulation to pre-fund the OPEB obligations with real cash in a Trust. GASB Statements No. 74 and 75 only require the measurement and



Executive Summary

recognition of the Net OPEB Liability, Annual OPEB Expense, and disclosure in the financial statements, as applicable.

Results of the Study

The actuarial valuation as of June 30, 2021, for purposes of financial reporting under GASB Statements No. 74 and 75 requires:

- If benefits are funded on a pay-as-you-go basis, a discount rate based on the expected return for an index of high-quality 20-year general obligation bonds. For this purpose the sponsor selected a discount rate of 1.92 percent as of June 30, 2021, and 3.69 percent as of June 30, 2022.
- The Entry Age Normal cost method.

The following table shows a reconciliation of the Actuarial Accrued Liability since the last actuarial valuation:

Reconciliation of the Change in Actuarial Accrued Liability

Projected Actuarial Accrued Liability at June 30, 2021, at 1.92%	\$	22,368,621,581
(Gain)/Loss due to:		
Demographic Experience	\$	(700,390,039)
Claims and Premium Experience		(3,322,086,321)
Change in Pension Assumptions		(513,581,704)
Change in OPEB Assumptions		(2,669,146,995)
Updated MAPD Rates and Assumptions		(6,776,250,446)
Change in Discount Rate Assumption from 1.92% to 3.69%		(1,486,650,584)
Total	\$	(15,468,106,089)
Actuarial Accrued Liability at June 30, 2021, at 3.69%	\$	6,900,515,492

The Actuarial Accrued Liability as of June 30, 2021, using a discount rate of 3.69 percent, is projected to June 30, 2022, for GASB Statements No. 74 and 75 financial reporting.

Liabilities decreased more than expected due to the following reasons:

- Favorable MAPD premium rates including expected zero premium rates from 2023 to 2028, and significantly reduced MAPD premium rates after 2028;
- Favorable claims and premium experience for fiscal year end June 30, 2021, compared with assumed trend rates from the previous actuarial valuation;
- Change in OPEB-related assumptions including updates to participation and lapse rates;
- Increase in discount rate from 1.92 percent to 3.69 percent; and
- Minimal gains due to demographic experience.

Liabilities decreased slightly due to pension-related assumption changes.



Executive Summary

In fiscal year 2022, employer costs, as reported in the fiscal year 2022 financial statements of the State and TRIP, and information provided by CMS, were allocated as follows:

Stakeholder/ Revenue Source	2022 Cost Sharing (\$ in millions)	Percent of Total Revenue	Statutory Requirement FY 2022	Statutory Requirement FY 2023
State	\$ 106.58	25.3%	0.90% of pay	0.90% of pay
School Districts	78.67	18.7%	0.67% of pay	0.67% of pay
Federal Part-D Subsidy	0.44	0.1%	Percent of Rx Claims Paid	Percent of Rx Claims Paid
Active Members	106.58	25.3%	0.90% of pay	0.90% of pay
Retirees	128.75	30.6%	Percent of premium	Percent of premium
COBRA	0.05	0.0%		
Total	\$ 421.07	100.0%		
Benefits and Expenses Paid	\$ 355.81			
Benefits and Expenses Covered by Revenue	118%			



Executive Summary

Actuarial Assumptions

In any long-term actuarial valuation (such as for Pensions and OPEBs), certain demographic, economic, and behavioral assumptions are made concerning the population, the investment discount rates, and the benefits provided. These actuarial assumptions form the basis for the actuarial model which is used to project the future population, the future benefits provided, and the future contributions collected. The discount rate assumption is used to discount projected net OPEB benefits to a present value. This and other related present values are used to calculate the Annual OPEB Expense and the Net OPEB Liability that will be disclosed in the Plan's and Plan Sponsor's financial statements.

This actuarial valuation of TRIP is similar to the actuarial valuation performed for the TRS pension plan. The demographic assumptions (rates of retirement, termination, and disability) used in this OPEB actuarial valuation were identical to those used in the TRS actuarial valuation as of June 30, 2021. TRS conducted an Experience Study for the period from July 1, 2017, to June 30, 2020, and updated actuarial assumptions which were adopted for the TRS actuarial valuation as of June 30, 2021.

Certain assumptions are unique to healthcare benefits. These assumptions include the healthcare trend, per capita claim costs, and the likelihood that a member selects healthcare coverage. Section E of this Report titled, "Summary of Actuarial Assumptions and Methods" contains a detailed discussion and disclosure of all the relevant actuarial assumptions and methods used in this actuarial valuation.

The following OPEB-related assumption changes were made since the last actuarial valuation as of June 30, 2020:

- Per capita claim costs for plan year end June 30, 2022, were updated based on projected claims and enrollment experience through June 30, 2022, and updated premium rates through plan year 2023; and
- Effective as of January 1, 2023, projected per capita costs reflect the newly established zero premium MAPD plan. Based on discussions with CMS, the MAPD costs are zero for calendar years 2023 through 2027, increase to \$42 per member per month in calendar year 2028, and increases ratably to \$102 per member per month in calendar year 2032. After 2032, costs increase according to the assumed trend rates;
- The healthcare trend assumption was updated based on claim and enrollment experience through June 30, 2021, projected plan cost for plan year end June 30, 2022, premium changes through plan year end 2023, and expectation of future trend increases after June 30, 2022;
- Healthcare plan participation and lapse rates were updated based on observed experience; and
- The discount rate was changed from 1.92 percent at June 30, 2021, to 3.69 percent at June 30, 2022.



Executive Summary

Actuarial Cost Methods

The actuarial valuation results are based on the Entry Age Normal cost method as required by GASB Statements No. 74 and 75.

The remainder of the report is an integral component of the actuarial valuation and includes:

- Key actuarial valuation results;
- An overview of the GASB Statements No. 74 and 75 requirements;
- Additional actuarial valuation exhibits and financial disclosure required under GASB Statements No. 74 and 75; and
- Summary of assumptions and methods and plan provisions.

SECTION B

ACTUARIAL VALUATION RESULTS

Actuarial Valuation Results

The following section shows actuarial valuation results as of June 30, 2021, projected to June 30, 2022, using two alternative discount rates of 1.92 percent and 3.69 percent.

Plan benefits are funded based on a pay-as-you-go policy. The current funding policy includes revenues from five sources: current retirees, current active employees, local school districts, the State, and the Medicare Part D subsidy from the Federal Government. Current retirees contribute a portion of the premium to participate in the program. All liability and expense numbers throughout the report are net of the retiree's share of premiums.

The unfunded actuarial accrued liability represents the portion of the total actuarial present value of all future employer-provided benefits which is attributable to prior years, minus any actuarial valuation assets. It represents a measure of the unfunded accrued liability allocable to past service. The cost and liabilities shown on the following page are employer costs and liabilities, net of any co-pays, deductibles, retiree coinsurance, or retiree contributions using the Entry Age Normal cost method.



Actuarial Valuation Results

**Teachers' Retirement Insurance Program
Retiree Healthcare Program
Exhibit 1**

Discount Rate	1.92%	3.69%
Ultimate Trend Pre-Medicare	4.25%	4.25%
Ultimate Trend Post-Medicare	4.25%	4.25%

Summary of Actuarial Valuation Results as of	June 30, 2021	June 30, 2021
A) Actuarial Accrued Liability (AAL) ¹		
i) Active employees - Full-Time and Part-Time	\$ 5,927,710,188	\$ 4,890,952,922
ii) Active employees - Hourly and Substitute	90,928,614	66,238,689
iii) Current retirees and their covered dependents	1,652,735,234	1,412,441,180
iv) Waived retirees and their covered dependents ²	217,018,175	174,879,472
v) Deferred vesteds ^{2,3}	465,892,905	334,294,198
vi) Deferred vesteds ^{2,4}	32,880,960	21,709,031
vii) Total	\$ 8,387,166,076	\$ 6,900,515,492
B) Market Value of Assets	\$ 313,246,000	\$ 313,246,000
C) Unfunded Actuarial Accrued Liability (UAAL)	\$ 8,073,920,076	\$ 6,587,269,492
D) Funded Ratio: [B / A]	3.7%	4.5%
E) UAAL as a percentage of covered payroll	74.4%	60.7%
F) Gross Normal Cost	\$ 480,495,099	\$ 331,678,906
Expected Active Employee Contributions ⁵	97,662,218	97,662,218
Net Annual Normal Cost	\$ 382,832,881	\$ 234,016,688
G) Expected First Year Benefit Payments	270,791,698	\$ 270,791,698
H) Interest Cost	\$ 167,671,854	\$ 261,917,124
I) Projected Actuarial Accrued Liability at end of Year	\$ 8,764,541,331	\$ 7,223,319,824
J) Covered Payroll	\$ 10,851,357,580	\$ 10,851,357,580
K) Participant Information		
i) Number of Covered Participants		
a) Active employees - Full Time and Part Time	134,810	
b) Active employees - Hourly and Substitute	19,024	
c) Current retirees and survivors	65,908	
d) Waived retirees	19,420	
e) Dependents	11,017	
f) Deferred vesteds ^{2,3}	11,885	
g) Deferred vesteds ^{2,4}	6,186	
h) Deferred Survivors	22	
i) Total	268,272	

¹ Actuarial accrued liability as of June 30, 2021, based on census, assumptions, and methods as of June 30, 2021.

² Valuation assumes a percentage of waived retirees and deferred vested members under the age of 70 as of June 30, 2021, and waived beneficiaries over the age of 26 and under the age of 70 as of June 30, 2021, will elect retiree healthcare coverage in the future.

³ Members with at least 7 years of service.

⁴ Members with 5 to 7 years of service. Liability amount represents approximately 50% of the total liability determined for this group. Approximately 50% is allocated to TRIP and 50% is allocated to SEGIP.

⁵ Active members contribute 0.90% of pay for fiscal year 2022. Based on expected payroll for FY 2022.



SECTION C

GASB STATEMENTS NO. 74 AND 75 INFORMATION

Auditor's Note: This information is intended to assist in preparation of the financial statements of the Teacher's Retirement Insurance Program of Illinois. Financial statements are the responsibility of management, subject to the auditor's review. Please let us know if the auditor recommends any changes.

Discussion

Accounting Standard

For post-employment (OPEB) benefit plans that are administered through trusts or equivalent arrangements, Governmental Accounting Standards Board (GASB) Statement No. 74, “Financial Reporting for Postemployment Benefit Plans Other Than Pension Plans,” replaces the requirements of GASB Statement No. 43, “Financial Reporting for Postemployment Benefit Plans Other Than Pension Plans.” GASB Statement No. 74 establishes standards of financial reporting for separately issued financial reports of state and local government OPEB plans.

GASB Statement No. 75 replaces the requirements of GASB Statement No. 45, Accounting and Financial Reporting by Employers for Postemployment Benefits Other Than Pensions, as amended, and GASB Statement No. 57, OPEB Measurements by Agent Employers and Agent Multiple-Employer Plans, for OPEB.

GASB Statements No. 74 and 75 are effective for fiscal years beginning after June 15, 2016, and June 15, 2017, respectively.

The following discussion provides a summary of the information that is required to be disclosed under these accounting standards. A number of these disclosure items are provided in this report. However, certain non-actuarial information, such as notes regarding accounting policies and investments, is not included in this report. As a result, the plan sponsor will be responsible for preparing and disclosing the non-actuarial information needed to comply with these accounting standards.

Plan Financial Statements

GASB Statement No. 74 requires defined benefit OPEB plans which are administered as trusts or equivalent arrangements to present two financial statements: a statement of fiduciary net position and a statement of changes in fiduciary net position. The statement of fiduciary net position presents the assets and liabilities of the OPEB plan at the end of the OPEB plan’s reporting period. The statement of changes in fiduciary net position presents the additions, such as contributions and investment income, and deductions, such as benefit payments and expense, and net increase or decrease in the fiduciary net position.

GASB Statement No. 75 requires state and local government employers to recognize the net OPEB liability and the OPEB expense on their financial statements, along with the related deferred outflows and inflows of resources. The net OPEB liability is the difference between the total OPEB liability and the plan’s fiduciary net position. In traditional actuarial terms, this is analogous to the accrued liability less the market value of assets.

The OPEB expense recognized each fiscal year is equal to the change in the net OPEB liability from the beginning of the year to the end of the year, adjusted for deferred recognition of the liability and investment experience.

GASB Statements No. 74 and 75 Information

The GASB Statement No. 74 information contained in this report is based on an actuarial valuation date of June 30, 2021, projected to a measurement date of June 30, 2022.

For GASB Statement No. 75 reporting purposes, the plan sponsor's fiscal year end June 30, 2023, financial reporting will be based on a measurement date of June 30, 2022.

The information contained in this report does not incorporate any employer contributions made subsequent to the measurement date of June 30, 2022.

GASB Statement No. 75 requires that employer contributions made to the OPEB plan subsequent to the measurement date and before the end of the employer's reporting period should be reported as a deferred outflow of resources.

Notes to Financial Statements

GASB Statement No. 75 requires the notes of the employer's financial statements to disclose the total OPEB expense, the OPEB plan's liabilities and assets, and deferred outflows of resources and inflows of resources related to OPEB.

GASB Statements No. 74 and 75 require the notes of the financial statements for the Plan and Plan Sponsor to include certain additional information. The list of disclosure items should include:

- The name of the OPEB plan, the administrator of the OPEB plan, and the identification of whether the OPEB plan is a single-employer, agent, or cost-sharing OPEB plan;
- A description of the benefits provided by the plan;
- A brief description of changes in benefit terms or assumptions that affected the measurement of the total OPEB liability since the prior measurement date;
- The number of plan members by category and if the plan is closed;
- A description of the plan's funding policy, which includes member and employer contribution requirements;
- The OPEB plan's investment policies;
- The OPEB plan's fiduciary net position and the net OPEB liability;
- The net OPEB liability using +/- one percentage point change on the discount rate;
- The net OPEB liability using +/- one percentage point change on the healthcare trend rate;
- Significant assumptions and methods used to calculate the total OPEB liability;
- Inputs to the discount rates; and
- Certain information about mortality assumptions and the dates of experience studies.

OPEB plans that are administered through trusts or equivalent arrangements are required to disclose additional information in accordance with GASB Statement No. 74. This information includes:

- The composition of the OPEB plan's Board and the authority under which benefit terms may be amended;
- A description of how fair value is determined;



GASB Statements No. 74 and 75 Information

- Information regarding certain reserves and investments, which include concentrations of investments greater than or equal to 5 percent, receivables and insurance contracts excluded from plan assets; and
- Annual money-weighted rate of return.

Required Supplementary Information

GASB Statement No. 74 requires a 10-year fiscal history of:

- Sources of changes in the net OPEB liability;
- Information about the components of the net OPEB liability and related ratios, including the OPEB plan's fiduciary net position as a percentage of the total OPEB liability, and the net OPEB liability as a percent of covered-employee payroll;
- Comparison of the actual employer contributions to the actuarially determined contributions, if applicable, based on the plan's funding policy; and
- For plans with an actuarially determined contribution, the schedule covering each of the 10 most recent fiscal years of the actuarially determined contribution, contributions to the OPEB plan and related ratios.

Frequency and Timing of the Actuarial Valuation

An actuarial valuation to determine the total OPEB liability is required to be performed at least every two years. For the employer's financial reporting purposes, the net OPEB liability and OPEB expense should be measured as of the employer's "measurement date," which may not be earlier than the employer's prior fiscal year-end date. If the actuarial valuation used to determine the total OPEB liability is not calculated as of the measurement date, the total OPEB liability is required to be rolled forward from the actuarial valuation date to the measurement date.

Single Discount Rate

Projected benefit payments are required to be discounted to their actuarial present values using a Single Discount Rate that reflects (1) a long-term expected rate of return on OPEB plan investments (to the extent that the plan's fiduciary net position is projected to be sufficient to pay benefits), and (2) tax-exempt municipal bond rate based on an index of 20-year general obligation bonds with an average AA credit rating as of the measurement date (to the extent that the contributions for use with the long-term expected rate of return are not met).

Since TRIP is financed on a pay-as-you-go basis, the sponsor has selected a discount rate consistent with the 20-year general obligation bond index described above. The discount rates are 1.92 percent as of June 30, 2021, and 3.69 percent as of June 30, 2022.

Actuarial Assumptions

The actuarial assumptions used to value the liabilities are outlined in detail in Section E. The assumptions include details on the healthcare trend assumption and the aging factors, as well as the cost method used to develop the OPEB expense.



GASB Statements No. 74 and 75 Information

The pension-related assumptions were based on an experience study for the period July 1, 2017, to June 30, 2020, conducted by the pension system's actuary as approved by the pension system. The OPEB-related assumptions were recommended by GRS and approved by CMS.

Future Uncertainty or Risk

Future results may differ from those anticipated in this actuarial valuation. Reasons include, but are not limited to:

- Claims experience differing from expected;
- Medical trend experience differing from expected;
- Changes in the healthcare plan designs offered to active and retired members;
- Changes in healthcare related costs due to recent experience; and
- Participant behavior differing from expected; e.g.,
 - Elections at retirement;
 - One-person versus two-person coverage elections; and
 - Timing of retirement or termination.

Benefits Valued

The benefit provisions that were valued are described in Section F. The actuarial valuation is required to be performed on the current benefit terms and existing legal agreements. Consideration is to be given to the written plan document as well as other communications between the employer and plan members and an established pattern of practice for cost sharing. The summary of major plan provisions is designed to outline principal plan benefits.

GASB Statements No. 74 and 75 Information

This section contains the following GASB Statements No. 74 and 75 information:

- GASB Statements No. 74 and 75 Summary;
- GASB Statement No. 74 Changes in Net OPEB Liability for plan year end June 30, 2022;
- GASB Statement No. 74 Multiyear Net OPEB Liability;
- GASB Statement No. 74 Schedule of Contributions;
- Notes to Schedule of Contributions;
- GASB Statements No. 74 and 75 Sensitivity of Net OPEB Liability plan year end June 30, 2022;
- GASB Statement No. 75 Changes in Net OPEB Liability for plan year end June 30, 2022, applicable to sponsor's fiscal year end June 30, 2023;
- GASB Statement No. 75 Expense measured as of plan year end June 30, 2022, and applicable to sponsor's fiscal year end June 30, 2023; and
- GASB Statement No. 75 Development of Inflows and Outflows as of June 30, 2022.



GASB Statements No. 74 and 75 Information

Summary of GASB Statements No. 74 and 75 Results

	2022
Actuarial Valuation Date	June 30, 2021
Measurement Date of the Net OPEB Liability	June 30, 2022
Plan Year End for GASB Statement No. 74	June 30, 2022
Employer's Fiscal Year End for GASB Statement No. 75	June 30, 2023
Membership	
Number of	
- Retirees and Beneficiaries	65,908
- Inactive, Nonretired Members	37,513
- Active Members	153,834
- Total	257,255
Covered Payroll	\$ 10,851,357,580
Net OPEB Liability	
Total OPEB Liability	\$ 7,223,319,824
Plan Fiduciary Net Position	378,630,000
Net OPEB Liability	\$ 6,844,689,824
Plan Fiduciary Net Position as a Percentage of Total OPEB Liability	5.24%
Net OPEB Liability as a Percentage of Covered Payroll	63.08%
Development of the Single Discount Rate	
Single Discount Rate Beginning of Year	1.92%
Single Discount Rate End of Year	3.69%
Long-Term Expected Rate of Investment Return, Beginning of Year	2.75%
Long-Term Expected Rate of Investment Return, End of Year	2.75%
Long-Term Municipal Bond Rate Beginning of Year ^a	1.92%
Long-Term Municipal Bond Rate End of Year ^a	3.69%
Total OPEB Expense for Fiscal Year End June 30, 2022, Applicable to Sponsor's Fiscal Year End June 30, 2023	\$ (2,954,583,249)

Deferred Outflows and Deferred Inflows of Resources by Source to be Recognized in Future OPEB Expenses as of June 30, 2023

	Deferred Outflows of Resources	Deferred (Inflows) of Resources
Difference Between Expected and Actual Experience	\$ -	\$ (4,476,763,654)
Changes in Assumptions	6,174,772	(16,884,028,667)
Net Difference Between projected and Actual Earnings on OPEB Plan Investments	988,295	(156,600)
Total	\$ 7,163,067	\$ (21,360,948,920)

^aSource: Fixed-income municipal bonds with 20 years to maturity that include only federally tax-exempt municipal bonds as reported in Fidelity Index's "20-Year Municipal GO AA Index." In describing this index, Fidelity notes that the municipal curves are constructed using option-adjusted analytics of a diverse population of over 10,000 tax-exempt securities.



GASB Statements No. 74 and 75 Information

GASB Statement No. 74 Schedule of Changes in Net OPEB Liability and Related Ratios Multiyear

Fiscal Year Ending June 30,	2022	2021	2020	2019	2018	2017
Total OPEB Liability						
Service Cost	\$ 480,495,099	\$ 1,109,767,854	\$ 1,207,781,377	\$ 1,203,231,213	\$ 1,282,452,212	\$ 1,684,864,123
Interest on the Total OPEB Liability	167,671,854	491,582,744	730,741,073	895,428,024	921,017,244	820,960,601
Changes of Benefit Terms	-	-	-	-	-	-
Difference between Expected and Actual Experience	(4,075,426,058)	(490,742,013)	(361,511,693)	(431,808,998)	(94,796,551)	(16,955,687)
Changes of Assumptions	(11,500,200,652)	(5,422,677,158)	(2,160,325,236)	11,932,136	(1,410,427,032)	(3,564,237,510)
Benefit Payments ^a	(217,842,000)	(244,045,000)	(237,466,000)	(260,652,000)	(275,400,000)	(296,480,000)
Net Change in Total OPEB Liability	(15,145,301,757)	(4,556,113,573)	(820,780,479)	1,418,130,375	422,845,873	(1,371,848,473)
Total OPEB Liability - Beginning	22,368,621,581	26,924,735,154	27,745,515,633	26,327,385,258	25,904,539,385	27,276,387,858
Total OPEB Liability - Ending (a)	\$ 7,223,319,824	\$ 22,368,621,581	\$ 26,924,735,154	\$ 27,745,515,633	\$ 26,327,385,258	\$ 25,904,539,385
Plan Fiduciary Net Position						
Employer Contributions	\$ 185,245,000	\$ 238,764,000	\$ 232,712,000	\$ 226,089,000	\$ 208,564,000	\$ 210,466,000
Active Member Contributions	106,576,000	137,436,000	133,896,000	130,068,000	119,906,000	111,734,000
Net Investment Income	143,000	51,000	193,000	397,000	743,000	357,000
Benefit Payments ^a	(217,842,000)	(244,045,000)	(237,466,000)	(260,652,000)	(275,400,000)	(296,480,000)
Operating Expenses	(9,220,000)	(9,526,000)	(9,472,000)	(10,430,000)	(14,226,000)	(13,790,000)
Other	482,000	1,744,000	895,000	1,079,000	1,614,000	2,099,000
Net Change in Plan Fiduciary Net Position	65,384,000	124,424,000	120,758,000	86,551,000	41,201,000	14,386,000
Plan Fiduciary Net Position - Beginning^b	313,246,000	188,822,000	68,064,000	(18,487,000)	(59,688,000)	(59,415,000)
Plan Fiduciary Net Position - Ending (b)	378,630,000	313,246,000	188,822,000	68,064,000	(18,487,000)	(45,029,000)
Net OPEB Liability - Ending (a) - (b)	\$ 6,844,689,824	\$ 22,055,375,581	\$ 26,735,913,154	\$ 27,677,451,632	\$ 26,345,872,258	\$ 25,949,568,385
Plan Fiduciary Net Position as a Percentage of Total OPEB Liability	5.24%	1.40%	0.70%	0.25%	-0.07%	-0.17%
Covered-Employee Payroll	\$ 10,851,357,580	\$ 10,497,876,022	\$ 10,184,005,548	\$ 9,879,265,292	\$ 9,600,528,968	\$ 9,444,442,000
Net OPEB Liability as a Percentage of Covered-Employee Payroll	63.08%	210.09%	262.53%	280.16%	274.42%	274.76%

^a Actual benefits paid by sponsor.

^b Plan Fiduciary Net Position was restated from \$(45,029,000) as of June 30, 2017, to \$(59,688,000) as of July 1, 2017.



GASB Statements No. 74 and 75 Information

GASB Statement No. 74 Schedule of Net OPEB Liability Multiyear

FY Ending June 30,	Total OPEB Liability	Fiduciary Net Position ^a	Net OPEB Liability	Fiduciary Net Position as a % of Total OPEB Liability	Covered Payroll ^b	Net OPEB Liability as a % of Covered Payroll
2016	\$ 27,276,387,858	\$ (59,415,000)	\$ 27,335,802,858	-0.22%	\$ 9,147,159,000	298.84%
2017	25,904,539,385	(45,029,000)	25,949,568,385	-0.17%	9,444,442,000	274.76%
2018	26,327,385,258	(18,487,000)	26,345,872,258	-0.07%	9,600,528,968	274.42%
2019	27,745,515,633	68,064,000	27,677,451,632	0.25%	9,879,265,292	280.16%
2020	26,924,735,154	188,822,000	26,735,913,154	0.70%	10,184,005,548	262.53%
2021	22,368,621,581	313,246,000	22,055,375,581	1.40%	10,497,876,022	210.09%
2022	7,223,319,824	378,630,000	6,844,689,824	5.24%	10,851,357,580	63.08%

^a Plan Fiduciary Net Position was restated from \$(45,029,000) as of June 30, 2017, to \$(59,688,000) as of July 1, 2017.

^b Estimated payroll for fiscal year end June 30, 2016, based on fiscal year end June 30, 2017, payroll adjusted by wage inflation assumption of 3.25 percent.



GASB Statements No. 74 and 75 Information

GASB Statement No. 74 Schedule of Contributions Multiyear

FY Ending June 30,	Actuarially Determined Contribution	Actual Employer Contribution	Contribution Deficiency (Excess)	Covered Payroll	Actual Contribution as a % of Covered Payroll
2016	N/A	\$ 194,405,000	N/A	\$ 9,147,159,000	2.13%
2017	N/A	210,466,000	N/A	9,444,442,000	2.23%
2018	N/A	208,564,000	N/A	9,600,528,968	2.17%
2019	N/A	226,089,000	N/A	9,879,265,292	2.29%
2020	N/A	232,712,000	N/A	10,184,005,548	2.29%
2021	N/A	238,764,000	N/A	10,497,876,022	2.27%
2022	N/A	185,245,000	N/A	10,851,357,580	1.71%

Contributions for TRIP are defined by State statute and Actuarially Determined Contributions are not developed. Benefits are financed on a pay-as-you go basis, based on contribution rates defined by statute. For fiscal year end June 30, 2022, contribution rates are 0.9 percent of pay for active members, 0.67 percent of pay for school districts, and 0.9 percent of pay for the State. Retired members contribute a percentage of premium rates. The goal of the policy is to finance current year costs plus a margin for incurred but not paid plan costs.



GASB Statements No. 74 and 75 Information

Notes to Schedule of Contributions

Valuation Date	June 30, 2021
Measurement Date	June 30, 2022
Sponsor's Fiscal Year End	June 30, 2023

Methods and Assumptions Used to Determine Actuarial Liability and Contributions:

Actuarial Cost Method	Entry Age Normal, used to measure the Total OPEB Liability
Contribution Policy	Benefits are financed on a pay-as-you-go basis. Contribution rates are defined by statute. For fiscal year end June 30, 2022, contribution rates are 0.90% of pay for active members, 0.67% of pay for school districts, and 0.90% of pay for the State. Retired members contribute a percentage of premium rates. The goal of the policy is to finance current year costs plus a margin for incurred but not paid plan costs.
Asset Valuation Method	Market value
Investment Rate of Return	2.75%, net of OPEB plan investment expense, including inflation, for all plan years.
Inflation	2.25%
Salary Increases	Depends on service and ranges from 8.50% at 1 year of service to 3.50% at 20 or more years of service.
Retirement Age	Experience-based table of rates that are specific to the type of eligibility condition. Last updated for the actuarial valuation as of June 30, 2021.
Mortality	Retirement and Beneficiary Annuitants: PubT-2010 Retiree Mortality Table, adjusted for TRS experience. Disabled Annuitants: PubNS-2010 Non-Safety Disabled Retiree Table. Pre-Retirement: PubT-2010 Employee Mortality Table. All tables reflect future mortality improvements using Projection Scale MP-2020.
Healthcare Cost Trend Rates	Trend rates for plan year 2023 are based on actual premium increases. For non-medicare costs, trend rates start at 8.00% for plan year 2024 and decrease gradually to an ultimate rate of 4.25% in 2039. For MAPD costs, trend rates are 0% in 2024 to 2028, 19.42% in 2029 to 2033 and 5.81% in 2034, declining gradually to an ultimate rate of 4.25% in 2039.
Aging Factors	Based on the 2013 SOA Study "Health Care Costs - From Birth to Death"
Expenses	Health administrative expenses are included in the development of the per capita claims costs. Operating expenses are included as a component of the Annual OPEB Expense.



GASB Statements No. 74 and 75 Information

Single Discount Rate

The State, school districts, and active members contribute 0.9 percent, 0.67 percent, and 0.9 percent of pay, respectively, for fiscal year 2022. Retirees contribute a percentage of the premium rate. The State also contributes an additional amount to cover plan costs in excess of contributions and investment income. Because plan benefits are financed on a pay-as-you-go basis, the single discount rate is based on a tax-exempt municipal bond rate index of 20-year general obligation bonds with an average AA credit rating as of the measurement date. A single discount rate of 1.92 percent at June 30, 2021, and 3.69 percent at June 30, 2022, was used to measure the total OPEB liability. The increase in the single discount rate, from 1.92 percent to 3.69 percent, caused the total OPEB liability to decrease by approximately \$1,448 million as of June 30, 2022.

Investment Return

During plan year end June 30, 2022, the trust earned \$143,000 in interest, and the market value of assets at June 30, 2022, is \$378.63 million. The long-term investment return was assumed to be 2.75 percent.

Money-Weighted Rate of Return

The annual money-weighted rate of return was estimated based on monthly investment performance, net of investment expenses, adjusted for changing amounts actually invested. The annual money-weighted rate of return was 0.304 percent for plan year end June 30, 2022, and 0.320 percent for plan year end June 30, 2021.

Sensitivity of Net OPEB Liability

The following table shows the plan's net OPEB liability as of June 30, 2022, using the current single discount rate of 3.69 percent and sensitivity single discount rates that are either one percentage point higher or lower:

Current Single Discount		
1% Decrease	Rate Assumption	1% Increase
2.69%	3.69%	4.69%
\$ 7,606,959,211	\$ 6,844,689,824	\$ 6,061,491,738



GASB Statements No. 74 and 75 Information

The following table shows the plan's net OPEB liability as of June 30, 2022, using current trend rates and sensitivity trend rates that are either one percentage point higher or lower.

Healthcare Cost		
1% Decrease ^b	Trend Rates Assumption ^a	1% Increase ^c
\$ 5,783,954,139	\$ 6,844,689,824	\$ 8,008,831,608

^a Current healthcare trend rates -

Pre-Medicare per capita costs: 6.00% in 2023, 8.00% in 2024, decreasing by 0.25% per year to an ultimate rate of 4.25% in 2039.

Post-Medicare per capita costs: 3.22% in 2023, 0.00% from 2024 to 2028, 19.42% from 2029 to 2033, 5.81% in 2034 decreasing ratably to an ultimate trend rate of 4.25% in 2039.

^b One percentage point decrease in current healthcare trend rates -

Pre-Medicare per capita costs: 5.00% in 2023, 7.00% in 2024, decreasing by 0.25% per year to an ultimate rate of 3.25% in 2039.

Post-Medicare per capita costs: 2.22% in 2023, 0.00% from 2024 to 2028, 18.42% from 2029 to 2033, 4.81% in 2034 decreasing ratably to an ultimate trend rate of 3.25% in 2039.

^c One percentage point increase in current healthcare trend rates -

Pre-Medicare per capita costs: 7.00% in 2023, 9.00% in 2024, decreasing by 0.25% per year to an ultimate rate of 5.25% in 2039.

Post-Medicare per capita costs: 4.22% in 2023, 1.00% from 2024 to 2028, 20.42% from 2029 to 2033, 6.81% in 2034 decreasing ratably to an ultimate trend rate of 5.25% in 2039.



GASB Statements No. 74 and 75 Information

Schedule of Changes in Net OPEB Liability under GASB Statement No. 75 Measured as of June 30, 2022 Applicable to Plan Sponsor's Fiscal Year End of June 30, 2023

Fiscal Year Ending June 30,	2022	2021	2020	2019	2018	2017
Total OPEB Liability						
Service Cost	\$ 480,495,099	\$ 1,109,767,854	\$ 1,207,781,377	\$ 1,203,231,213	\$ 1,282,452,212	\$ 1,684,864,123
Interest on the Total OPEB Liability	167,671,854	491,582,744	730,741,073	895,428,024	921,017,244	820,960,601
Changes of Benefit Terms	-	-	-	-	-	-
Difference between Expected and Actual Experience	(4,075,426,058)	(490,742,013)	(361,511,693)	(431,808,998)	(94,796,551)	(16,955,687)
Changes of Assumptions	(11,500,200,652)	(5,422,677,158)	(2,160,325,236)	11,932,136	(1,410,427,032)	(3,564,237,510)
Benefit Payments ^a	(217,842,000)	(244,045,000)	(237,466,000)	(260,652,000)	(275,400,000)	(296,480,000)
Net Change in Total OPEB Liability	(15,145,301,757)	(4,556,113,573)	(820,780,479)	1,418,130,375	422,845,873	(1,371,848,473)
Total OPEB Liability - Beginning	22,368,621,581	26,924,735,154	27,745,515,633	26,327,385,258	25,904,539,385	27,276,387,858
Total OPEB Liability - Ending (a)	\$ 7,223,319,824	\$ 22,368,621,581	\$ 26,924,735,154	\$ 27,745,515,633	\$ 26,327,385,258	\$ 25,904,539,385
Plan Fiduciary Net Position						
Employer Contributions	\$ 185,245,000	\$ 238,764,000	\$ 232,712,000	\$ 226,089,000	\$ 208,564,000	\$ 210,466,000
Active Member Contributions	106,576,000	137,436,000	133,896,000	130,068,000	119,906,000	111,734,000
Net Investment Income	143,000	51,000	193,000	397,000	743,000	357,000
Benefit Payments ^a	(217,842,000)	(244,045,000)	(237,466,000)	(260,652,000)	(275,400,000)	(296,480,000)
Operating Expenses	(9,220,000)	(9,526,000)	(9,472,000)	(10,430,000)	(14,226,000)	(13,790,000)
Other	482,000	1,744,000	895,000	1,079,000	1,614,000	2,099,000
Net Change in Plan Fiduciary Net Position	65,384,000	124,424,000	120,758,000	86,551,000	41,201,000	14,386,000
Plan Fiduciary Net Position - Beginning^b	313,246,000	188,822,000	68,064,000	(18,487,000)	(59,688,000)	(59,415,000)
Plan Fiduciary Net Position - Ending (b)	378,630,000	313,246,000	188,822,000	68,064,000	(18,487,000)	(45,029,000)
Net OPEB Liability - Ending (a) - (b)	\$ 6,844,689,824	\$ 22,055,375,581	\$ 26,735,913,154	\$ 27,677,451,632	\$ 26,345,872,258	\$ 25,949,568,385
Plan Fiduciary Net Position as a Percentage of Total OPEB Liability	5.24%	1.40%	0.70%	0.25%	-0.07%	-0.17%
Covered-Employee Payroll	\$ 10,851,357,580	\$ 10,497,876,022	\$ 10,184,005,548	\$ 9,879,265,292	\$ 9,600,528,968	\$ 9,444,442,000
Net OPEB Liability as a Percentage of Covered-Employee Payroll	63.08%	210.09%	262.53%	280.16%	274.42%	274.76%

^a Actual benefits paid by sponsor.

^b Plan Fiduciary Net Position was restated from \$(45,029,000) as of June 30, 2017, to \$(59,688,000) as of July 1, 2017.



GASB Statements No. 74 and 75 Information

Statement of OPEB Expense under GASB Statement No. 75 Measured as of June 30, 2022 Applicable to Plan Sponsor's Fiscal Year End June 30, 2023

A. Expense

1. Service Cost	\$	480,495,099
2. Interest on the Total OPEB Liability		167,671,854
3. Current-Period Benefit Changes		-
4. Active Member Contributions		(106,576,000)
5. Projected Earnings on Plan Investments		(1,052,106)
6. OPEB Plan Operating Expenses		9,220,000
7. Other Changes in Plan Fiduciary Net Position		(482,000)
8. Recognition of Outflow/(Inflow) due to Liability Experience		(630,385,414)
9. Recognition of Outflow/(Inflow) due to Assumption Changes		(2,873,476,907)
10. Recognition of Outflow/(Inflow) due to Investment Experience		2,225
11. Total OPEB Expense	\$	(2,954,583,249)

B. Reconciliation of Net OPEB Liability

1. Net OPEB Liability Beginning of Year	\$	22,055,375,581
2. OPEB Expense		(2,954,583,249)
3. Employer Contributions		(185,245,000)
4. Change in Liability Experience Outflows/(Inflows) Recognized in Current Liabilities		(3,445,040,644)
5. Change in Assumption Changes Experience Outflows/(Inflows) Recognized in Current Liabilities		(8,626,723,745)
6. Change in Investment Experience Outflows/(Inflows) Recognized in Current Assets		906,881
7. Net OPEB Liability End of Year	\$	6,844,689,824



GASB Statements No. 74 and 75 Information

Recognition of Deferred Outflows and Inflows of Resources

Differences between expected and actual experience and changes in assumptions are recognized in OPEB expense using a systematic and rational method over a closed period equal to the average of the expected remaining service lives of all employees that are provided with OPEB through the OPEB plan (active employees and inactive employees) determined as of the beginning of the measurement period.

At the beginning of the current measurement period, the expected remaining service lives of all active employees in the plan was approximately 2,273,300 years. Additionally, the total plan membership (active employees and inactive employees) was 257,255. As a result, the average of the expected remaining service lives for purposes of recognizing the applicable deferred outflows and inflows of resources established in the current measurement period is 8.84 years.

Additionally, differences between projected and actual earnings on OPEB plan investments should be recognized in OPEB expense using a systematic and rational method over a closed five-year period. For this purpose, the deferred outflows and inflows of resources are recognized in the OPEB expense as a level dollar amount over the closed period identified above.



GASB Statements No. 74 and 75 Information

Statement of Outflows and Inflows Arising from Current and Prior Reporting Periods Measured as of June 30, 2022, Applicable to Plan Sponsor's Fiscal Year End June 30, 2023

A. Outflows and (Inflows) of Resources Recognized in Current and Future OPEB Expenses as of Plan Year End June 30, 2022

Experience (Gain)/Loss	Original			Amount Recognized in Past OPEB Expenses	Amount Recognized in Current OPEB Expense	Deferred (Inflows) to be Recognized in Future OPEB Expenses	Deferred Outflows to be Recognized in Future OPEB Expenses
	Original Balance	Date Established	Recognition Period/ Amortization Factor				
1. Liability (Gain)/Loss	\$ (4,075,426,058)	June 30, 2022	8.8400	\$ -	\$ (461,021,047)	\$ (3,614,405,011)	\$ -
	(490,742,013)	June 30, 2021	8.3300	(58,912,607)	(58,912,607)	(372,916,800)	-
	(361,511,693)	June 30, 2020	8.3300	(86,797,525)	(43,398,763)	(231,315,405)	-
	(431,808,998)	June 30, 2019	8.2900	(156,263,811)	(52,087,937)	(223,457,250)	-
	(94,796,551)	June 30, 2018	7.4600	(50,829,250)	(12,707,312)	(31,259,989)	-
	(16,955,687)	June 30, 2017	7.5100	(11,288,740)	(2,257,748)	(3,409,199)	-
				\$ (364,091,933)	\$ (630,385,414)	\$ (4,476,763,654)	\$ -
2. Assumption Changes	\$ (11,500,200,652)	June 30, 2022	8.8400	\$ -	\$ (1,300,927,676)	\$ (10,199,272,976)	\$ -
	(5,422,677,158)	June 30, 2021	8.3300	(650,981,652)	(650,981,652)	(4,120,713,855)	-
	(2,160,325,236)	June 30, 2020	8.3300	(518,685,531)	(259,342,765)	(1,382,296,940)	-
	11,932,136	June 30, 2019	8.2900	4,318,022	1,439,341	-	6,174,772
	(1,410,427,032)	June 30, 2018	7.4600	(756,261,143)	(189,065,286)	(465,100,603)	-
	(3,564,237,510)	June 30, 2017	7.5100	(2,372,994,348)	(474,598,870)	(716,644,293)	-
				\$ (4,294,604,651)	\$ (2,873,476,907)	\$ (16,884,028,667)	\$ 6,174,772
3. Investment (Gain)/Loss and Actual Investment Earnings	\$ 909,106	June 30, 2022	5.0000	\$ -	\$ 181,821	\$ -	\$ 727,285
	435,017	June 30, 2021	5.0000	87,003	87,003	-	261,010
	(193,000)	June 30, 2020	5.0000	(77,200)	(38,600)	(77,200)	-
	(397,000)	June 30, 2019	5.0000	(238,200)	(79,400)	(79,400)	-
	(743,000)	June 30, 2018	5.0000	(594,400)	(148,600)	-	-
	(357,000)	June 30, 2017	5.0000	(357,000)	-	-	-
				\$ (1,179,797)	\$ 2,225	\$ (156,600)	\$ 988,295
4. Total				\$ (4,659,876,380)	\$ (3,503,860,096)	\$ (21,360,948,920)	\$ 7,163,067

B. Deferred Outflows and Deferred (Inflows) of Resources by Year to be Recognized in Future OPEB Expenses

Year Ending June 30,	Liability			Assumption Changes			Investment			Year Ending June 30,	Deferred Outflows		Deferred (Inflows)		Net Outflows/(Inflows)
	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)	Outflows / (Inflows)		Outflows / (Inflows)	Outflows / (Inflows)			
2023	\$ (630,385,414)	\$ (2,873,476,907)	\$ 150,825	2023	\$ 1,708,165	\$ (3,505,419,662)	\$ (3,503,711,496)								
2024	\$ (629,279,118)	\$ (2,640,923,461)	\$ 230,225	2024	\$ 1,708,165	\$ (3,271,680,519)	\$ (3,269,972,354)								
2025	\$ (621,265,717)	\$ (2,296,782,783)	\$ 268,825	2025	\$ 1,708,165	\$ (2,919,487,841)	\$ (2,917,779,676)								
2026	\$ (615,420,354)	\$ (2,209,812,752)	\$ 181,821	2026	\$ 1,621,162	\$ (2,826,672,446)	\$ (2,825,051,284)								
2027	\$ (578,437,918)	\$ (2,210,834,684)	\$ -	2027	\$ 417,409	\$ (2,789,690,011)	\$ (2,789,272,602)								
2028	\$ (534,255,246)	\$ (2,037,492,440)	\$ -	2028	\$ -	\$ (2,571,747,685)	\$ (2,571,747,685)								
2029	\$ (480,462,207)	\$ (1,515,751,621)	\$ -	2029	\$ -	\$ (1,996,213,828)	\$ (1,996,213,828)								
2030	\$ (387,257,680)	\$ (1,092,779,247)	\$ -	2030	\$ -	\$ (1,480,036,927)	\$ (1,480,036,927)								
2031	\$ -	\$ -	\$ -	2031	\$ -	\$ -	\$ -								
Total	\$ (4,476,763,654)	\$ (16,877,853,895)	\$ 831,695		\$ 7,163,067	\$ (21,360,948,920)	\$ (21,353,785,853)								
Change in Outflows/(Inflows)	\$ (3,445,040,644)	\$ (8,626,723,745)	\$ 906,881												

Numbers may not add due to rounding.



SECTION D

ADDITIONAL ACTUARIAL VALUATION EXHIBITS

Additional Valuation Exhibits

Exhibit 1

40-Year Projection of Expected Employer Claims ^a

Fiscal Year End June 30	Expected Employer Claims ^b	Fiscal Year End June 30	Expected Employer Claims
2022	\$ 270,791,698	2042	\$ 924,421,000
2023	226,511,220	2043	942,903,800
2024	181,190,200	2044	950,953,700
2025	201,717,600	2045	938,630,500
2026	226,268,400	2046	905,115,100
2027	277,923,700	2047	851,871,400
2028	316,334,100	2048	775,719,500
2029	358,994,500	2049	693,059,900
2030	405,908,000	2050	608,131,600
2031	456,875,800	2051	534,126,900
2032	509,175,100	2052	477,339,700
2033	557,241,900	2053	436,065,500
2034	603,691,700	2054	410,531,000
2035	644,699,000	2055	394,985,400
2036	681,400,700	2056	380,393,100
2037	720,560,300	2057	369,432,400
2038	764,083,100	2058	359,708,600
2039	809,401,700	2059	350,188,700
2040	851,636,400	2060	336,395,800
2041	891,904,000	2061	308,818,200

^a Expected claims net of retiree contributions for current participants.

^b Expected net employer costs after December 31, 2022, reflect the significantly reduced MAPD capitation rates.



Additional Valuation Exhibits

Exhibit 2

Summary of Demographic Information as of June 30, 2021

A) Active Participants - Full-Time and Part-Time ^a	Primary Member	Dependent	Total
i) Counts	134,810		134,810
ii) Average Age	42		42
iii) Average Service	13		13
B) Active Participants - Hourly and Substitute			
i) Counts	19,024		19,024
ii) Average Age	44		44
iii) Average Service	2		2
C) Retirees and Dependents Under Age 65 ^b			
i) Counts	9,925	1,321	11,246
ii) Average Age	61	60	61
D) Retirees and Dependents Over Age 65 ^b			
i) Counts	55,980	9,057	65,037
ii) Average Age	75	75	75
E) Waived Retirees and Dependents ^c			
i) Counts	19,420		19,420
ii) Average Age	64		64
F) Children			
i) Counts	3	639	642
ii) Average Age	15	21	21
G) Deferred Vesteds ^d			
i) Counts	11,885		11,885
ii) Average Age	48		48
H) Deferred Vesteds ^e			
i) Counts	6,186		6,186
ii) Average Age	45		45
I) Deferred Survivors			
i) Counts	22		22
ii) Average Age	41		41
J) Total Participants	257,255	11,017	268,272

^a Excludes members who are active in TRS and categorized as a dependent in SEGIP, and 1,198 active members in TRS with vested benefits in SERS, SURS, GARS, or JRS.

^b Only includes members and dependents currently receiving benefits through TRIP.

^c Includes members currently under the age of 70 and waived beneficiaries over the age of 26 and under 70.

^d Members with at least 7 years of service and currently under the age of 70.

^e Members with 5 to 7 years of service and currently under the age of 70.



Additional Valuation Exhibits

Exhibit 3

Assets Available for Benefits

As of June 30,

	2021	2022
--	------	------

Net Assets Held in Trust for Post-Employment Benefits, Beginning of Year	\$ 188,822,000	\$ 313,246,000
Adjustment to Net Assets, Beginning of Year	-	-
Net Assets, Beginning of Year	\$ 188,822,000	\$ 313,246,000

Revenues

State Contributions	\$ 137,436,000	\$ 106,576,000
Employer Contributions	101,328,000	78,669,000
Federal Government Medicare Part D Subsidy	1,648,000	436,000
Active Member Contributions	137,436,000	106,576,000
Retired Member Contributions	139,764,386	128,746,939
COBRA	96,000	46,000
Interest	51,000	143,000
Total Revenues	\$ 517,759,386	\$ 421,192,939

Deductions

Benefits	383,809,386	\$ 346,588,939
Administrative Expense	9,526,000	9,220,000
Total Deductions	\$ 393,335,386	\$ 355,808,939

Net Change	\$ 124,424,000	\$ 65,384,000
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Net Assets Held in Trust for Post-Employment Benefits, End of Year	\$ 313,246,000	\$ 378,630,000
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SECTION E

SUMMARY OF ACTUARIAL ASSUMPTIONS AND METHODS

Summary of Actuarial Assumptions and Methods

Development of Per Capita Claim Costs

The per capita claims used in the actuarial valuation are based on average per member costs by plan type for the periods from July 1, 2021, through June 30, 2022, and from July 1, 2020, through June 30, 2021, as provided by the Department of Central Management Services (CMS) and reviewed by CMS' healthcare actuary. The per capita claims for the MAPD plans used in the actuarial valuation were based on weighted average premium rates, as provided by CMS. The average costs were adjusted at each respective retirement age by the morbidity factors disclosed in the assumption section of the report.

Effective as of January 1, 2023, the Aetna MAPD plan will be the only MAPD plan provided to Medicare retirees. CMS has negotiated a zero premium plan with Aetna for calendar years 2023 through 2027. The zero premium plan may also be extended for another five years after 2027.

Based on discussions with CMS, we have assumed an MAPD premium rate of approximately \$42 per member per month starting in calendar year 2028. This rate includes administrative expenses of approximately \$6 per member per month.

After calendar year 2028, we have assumed the MAPD premium rate will increase by approximately 19.42 percent per year for next five years resulting in a rate of approximately \$102 per member per month in calendar year 2032. After calendar year 2032, MAPD premium rates are assumed to increase using the trend rate provided on page E-2.

Retired members are assumed to pay 25 percent of the premium and dependents are assumed to pay 75 percent of the premium.

Cost Method and Expense Calculations for Retiree Healthcare Benefits

The retiree healthcare actuarial valuation was based on the Entry Age Normal cost method. Under this method, the normal cost and actuarial accrued liability are directly proportional to the employee's salary. The normal cost rate equals the present value of future benefits at entry age divided by the present value of future salary at entry age. The normal cost at the member's attained age equals the normal cost rate at entry age multiplied by the salary at attained age. The actuarial accrued liability equals the present value of benefits at attained age less present value of future salaries at attained age multiplied by normal cost rate at entry age.

Under GASB Statements No. 74 and 75, the Entry Age Normal Method is the required cost method.

Census Data

The actuarial valuation was based on TRS active, inactive and retiree data as of June 30, 2021, and TRIP retiree data as of June 30, 2021.



Summary of Actuarial Assumptions and Methods

Actuarial Assumptions

The actuarial assumptions used in our actuarial valuation are outlined on the following pages.

Actuarial Valuation Date	June 30, 2021
Measurement Date	June 30, 2022
Discount Rate	1.92% at June 30, 2021 3.69% at June 30, 2022
Inflation¹	2.25%
Ultimate Salary Increase²	3.50%

OPEB Assumptions

Fiscal Year	Healthcare Trend			
	TCHP and MC	MAPD	TCHP and MC	MAPD
	<u>End 6/30</u> <u>Medical and RX</u>	<u>Medical and RX</u>	<u>Retiree Premium</u>	<u>Retiree Premium</u>
2023	6.00%	3.22%	5.00%	-5.16%
2024	8.00%	0.00%	5.00%	0.00%
2025	7.75%	0.00%	5.00%	0.00%
2026	7.50%	0.00%	5.00%	0.00%
2027	7.25%	0.00%	5.00%	0.00%
2028	7.00%	0.00%	5.00%	0.00%
2029	6.75%	19.42%	5.00%	19.42%
2030	6.50%	19.42%	5.00%	19.42%
2031	6.25%	19.42%	5.00%	19.42%
2032	6.00%	19.42%	5.00%	19.42%
2033	5.75%	19.42%	5.00%	19.42%
2034	5.50%	5.81%	5.00%	5.00%
2035	5.25%	5.50%	5.00%	5.00%
2036	5.00%	5.19%	5.00%	5.00%
2037	4.75%	4.88%	4.75%	4.75%
2038	4.50%	4.56%	4.50%	4.50%
2039	4.25%	4.25%	4.25%	4.25%

¹ Underlying Inflation used to develop ultimate salary increase, trend rates, and investment return assumptions.

² Ultimate salary increase used to project payroll.



Summary of Actuarial Assumptions and Methods

<u>Age</u>	<u>Morbidity Factor</u>	
	<u>Male</u>	<u>Female</u>
50	5.81%	3.46%
55	5.44%	2.84%
60	5.02%	3.66%
65	1.68%	2.46%
70	1.72%	1.89%
75	1.07%	1.20%
80	0.62%	0.97%
85	-0.37%	0.36%
90	-0.28%	-0.14%
95	-0.38%	-2.21%

Annual Per Capita Claims Costs for Pre 65, Not Medicare Eligible Members

<u>TCHP</u>			<u>OAP</u>			<u>HMO</u>		
<u>Age</u>	<u>Medical and Rx</u>		<u>Age</u>	<u>Medical and Rx</u>		<u>Age</u>	<u>Medical and Rx</u>	
	<u>Male</u>	<u>Female</u>		<u>Male</u>	<u>Female</u>		<u>Male</u>	<u>Female</u>
20	\$ 3,748	\$ 4,905	20	\$ 3,858	\$ 5,048	20	\$ 3,239	\$ 4,238
25	3,173	6,487	25	3,266	6,677	25	2,742	5,605
30	3,886	9,144	30	3,999	9,411	30	3,357	7,900
35	4,841	9,947	35	4,983	10,238	35	4,183	8,594
40	6,046	9,824	40	6,222	10,111	40	5,223	8,488
45	7,526	10,387	45	7,746	10,691	45	6,503	8,974
50	9,800	12,072	50	10,086	12,425	50	8,467	10,431
51	10,369	12,490	51	10,672	12,855	51	8,959	10,792
52	10,962	12,900	52	11,282	13,277	52	9,471	11,146
53	11,579	13,299	53	11,917	13,687	53	10,004	11,490
54	12,223	13,690	54	12,580	14,090	54	10,561	11,828
55	12,895	14,080	55	13,272	14,492	55	11,142	12,165
56	13,596	14,480	56	13,994	14,903	56	11,747	12,511
57	14,325	14,902	57	14,744	15,337	57	12,377	12,875
58	15,078	15,356	58	15,519	15,805	58	13,027	13,268
59	15,853	15,853	59	16,317	16,317	59	13,697	13,697
60	16,655	16,400	60	17,142	16,879	60	14,390	14,169
61	17,492	17,000	61	18,003	17,497	61	15,113	14,688
62	18,368	17,654	62	18,905	18,170	62	15,870	15,253
63	19,288	18,359	63	19,852	18,896	63	16,665	15,863
64	20,253	19,114	64	20,845	19,672	64	17,499	16,514



Summary of Actuarial Assumptions and Methods

Annual Per Capita Claims Costs for Medicare Eligible Members

Age	TCHP		OAP		HMO		MAPD	
	Medical and Rx		Medical and Rx		Medical and Rx		Medical and Rx	
	Male	Female	Male	Female	Male	Female	Male	Female
65	\$ 7,353	\$ 6,936	\$ 6,814	\$ 6,427	\$ 5,684	\$ 5,361	\$ 1,700	\$ 1,603
66	7,477	7,106	6,928	6,585	5,779	5,493	1,728	1,643
67	7,604	7,274	7,046	6,740	5,877	5,622	1,758	1,681
68	7,735	7,438	7,168	6,892	5,979	5,749	1,788	1,719
69	7,871	7,598	7,294	7,040	6,084	5,872	1,819	1,756
70	8,010	7,751	7,423	7,183	6,191	5,991	1,852	1,792
71	8,148	7,898	7,551	7,318	6,298	6,104	1,883	1,825
72	8,279	8,036	7,672	7,447	6,399	6,211	1,914	1,858
73	8,398	8,166	7,782	7,567	6,491	6,312	1,941	1,887
74	8,505	8,285	7,881	7,678	6,574	6,404	1,966	1,915
75	8,603	8,395	7,972	7,779	6,650	6,489	1,989	1,940
76	8,695	8,496	8,057	7,873	6,721	6,567	2,010	1,964
77	8,785	8,592	8,141	7,962	6,790	6,641	2,031	1,986
78	8,874	8,687	8,223	8,050	6,859	6,714	2,051	2,008
79	8,958	8,781	8,301	8,137	6,924	6,787	2,071	2,030
80	9,032	8,874	8,369	8,223	6,981	6,859	2,088	2,051
81	9,088	8,960	8,421	8,303	7,024	6,925	2,101	2,071
82	9,122	9,037	8,453	8,374	7,051	6,985	2,108	2,089
83	9,133	9,104	8,462	8,436	7,059	7,036	2,111	2,104
84	9,122	9,160	8,453	8,488	7,051	7,080	2,109	2,117
85	9,097	9,205	8,430	8,529	7,032	7,114	2,103	2,128
86	9,064	9,238	8,399	8,560	7,006	7,140	2,095	2,135
87+	9,027	9,262	8,365	8,582	6,977	7,159	2,086	2,141

Preceding MAPD per capita costs apply from July 1, 2021, through December 31, 2022, adjusted for trend. Effective as of January 1, 2023, the Aetna MAPD plan will be the only MAPD plan provided to Medicare retirees. CMS has negotiated a zero premium plan with Aetna for calendar years 2023 through 2027. The zero premium plan may also be extended for another five years after 2027.

Based on discussions with CMS, we have assumed an MAPD premium rate of approximately \$42 per member per month starting in calendar year 2028. This rate includes administrative expenses of approximately \$6 per member per month.

After calendar year 2028, we have assumed the MAPD premium rate will increase by approximately 19.42 percent per year for the next five years resulting in a rate of approximately \$102 per member per month in calendar year 2032. After calendar year 2032, MAPD premium rates are assumed to increase using the trend rate provided on page E-2.



Summary of Actuarial Assumptions and Methods

Annual Per Capita Claims Costs for Post 65, Not Medicare Eligible Members

TCHP			OAP			HMO		
Medical and Rx			Medical and Rx			Medical and Rx		
Age	Male	Female	Age	Male	Female	Age	Male	Female
65	\$ 25,391	\$ 23,949	65	\$ 23,098	\$ 21,786	65	\$ 16,700	\$ 15,751
66	25,818	24,538	66	23,486	22,322	66	16,980	16,139
67	26,258	25,116	67	23,886	22,847	67	17,270	16,519
68	26,711	25,683	68	24,298	23,363	68	17,568	16,892
69	27,179	26,235	69	24,724	23,865	69	17,876	17,255
70	27,660	26,766	70	25,162	24,348	70	18,192	17,604
71	28,137	27,271	71	25,595	24,808	71	18,506	17,937
72	28,588	27,750	72	26,005	25,243	72	18,802	18,251
73	28,998	28,197	73	26,379	25,650	73	19,072	18,545
74	29,370	28,610	74	26,717	26,026	74	19,316	18,817
75	29,708	28,988	75	27,024	26,370	75	19,539	19,066
76	30,026	29,337	76	27,314	26,687	76	19,748	19,295
77	30,337	29,669	77	27,596	26,989	77	19,952	19,514
78	30,643	29,996	78	27,875	27,287	78	20,154	19,729
79	30,934	30,323	79	28,139	27,584	79	20,345	19,943
80	31,187	30,642	80	28,370	27,874	80	20,512	20,153
81	31,382	30,939	81	28,547	28,145	81	20,640	20,349
82	31,499	31,204	82	28,654	28,385	82	20,717	20,523
83	31,535	31,435	83	28,687	28,596	83	20,741	20,675
84	31,500	31,630	84	28,655	28,773	84	20,718	20,803
85	31,414	31,784	85	28,577	28,913	85	20,661	20,904
86	31,298	31,898	86	28,471	29,017	86	20,585	20,980
87+	31,170	31,982	87+	28,355	29,093	87+	20,501	21,035



Summary of Actuarial Assumptions and Methods

Participation

Active members are assumed to retire and elect TRIP healthcare coverage at the following rates:

Participation Rates		
(Current Active TRIP Participants)		
	Full-time and Part-time	Substitute and Hourly
Age	Members	Members
Less than 60	80%	80%
60-64	80%	60%
65+	60%	40%

Thirty-five percent of current deferred vested participants with at least seven years of service and younger than age 70 as of June 30, 2021, are assumed to elect TRIP healthcare coverage.

Ten percent of current deferred vested participants with five to seven years of service and younger than age 70 as of June 30, 2021, are assumed to elect healthcare coverage. The liability for this group is allocated equally between TRIP and SEGIP.

Retired TRS annuitants, who have waived TRIP coverage are assume to elect TRIP healthcare coverage at the following rates:

TRIP Election Rates		
(Current Waived TRS Annuitants)		
	Period Receiving TRS	
Age	Pension Annuity	TRIP Election Rate
Less than 65	Less than 2 years	40%
Less than 65	2 years +	20%
65-69	Any Period	10%
70+	Any Period	0%

Current and future retirees and survivors receiving healthcare coverage through CIP are assumed to lapse coverage at ages 65 through 67 with the rates shown on the following page.

Summary of Actuarial Assumptions and Methods

Healthcare Coverage Lapse Rates (Current and Future Retirees with TRIP Coverage)

Age	Male	Female
64 and under	0%	0%
65	10%	14%
66	8%	11%
67	4%	5%
68+	0%	0%

Eighty percent elect single coverage and twenty percent elect two-person coverage.

The percentage of future members electing coverage under the TCHP, OAP, and other HMO plans was based on the actual election percentages of the current TRIP population. Currently for pre-Medicare participants, about 37 percent participate in the TCHP, 31 percent participate in the OAP and 32 percent participate in HMO plans.

Future retired members are assumed to participate in an MAPD plan one month after attaining age 65.

One hundred percent of spouses are expected to continue coverage after the death of the retiree.

Females are assumed to be three years younger than their spouses in cases where no spouse date of birth is supplied.

Coverage for healthy children of retired members is assumed to end at age 23. Disabled children are assumed to receive benefits during their lifetime.

Pension-Related Assumptions

The pension-related assumptions disclosed in the Teachers' Retirement System (TRS) experience study for the period from July 1, 2017, to June 30, 2020, as used for the TRS actuarial valuation report as of June 30, 2021, were applied to the TRIP actuarial valuation as of June 30, 2021.

Rates are applied consistently with the pension actuarial valuations, using the census data as of June 30, 2021, as provided by TRS and CMS. Retirement rates are applied at first eligibility for pension benefits, although retiree healthcare benefits may not be payable.

Deferred vested members are assumed to commence benefits at age 62.



Summary of Actuarial Assumptions and Methods

Salary Increase	
Service	Annual Increase
1	8.50%
2	6.75%
3	6.25%
4	6.25%
5	6.00%
6	5.75%
7	5.50%
8	5.50%
9	5.25%
10	5.00%
11	5.00%
12	4.75%
13	4.50%
14	4.50%
15	4.50%
16	4.25%
17	4.00%
18	4.00%
19	3.75%
20 & above	3.50%

Summary of Actuarial Assumptions and Methods

Demographic Assumptions

Mortality

Healthy Life Mortality, Post-Retirement

PubT-2010 Retiree Mortality Table projected generationally with Scale MP-2020, with female rates multiplied by 91% for ages under 75 and 109% for ages 75 and older and male rates multiplied by 105% for ages under 85 and 115% for ages 85 and older. (Adopted effective June 30, 2021.)

Healthy Life Mortality, Post-Retirement Beneficiary

Pub-2010 Contingent Survivor Mortality Table projected generationally with Scale MP-2020, with female rates multiplied by 98% for all ages and male rates multiplied by 110% for all ages. (Adopted effective June 30, 2021.)

Healthy Life Mortality, Pre-Retirement

PubT-2010 Employee Mortality Table projected generationally with Scale MP-2020, with female and male rates multiplied by 90% for all ages. (Adopted effective June 30, 2021.)

Disabled Life Mortality, Post-Retirement

PubNS-2010 Non-Safety Disabled Retiree Mortality Table projected generationally with Scale MP-2020, with no adjustments to female or male rates. (Adopted effective June 30, 2021.)

Summary of Actuarial Assumptions and Methods

Spouse and Marriage Assumptions:

Eighty percent of active male participants and 70.0 percent of active female participants are assumed to be married. If no data is available, the female spouse is assumed to be three years younger than the male spouse.

Sample Turnover Rates				
% Separating Within Next Year				
Age	Under 5 Years of Service		5 or More Years of Service	
	Male	Female	Male	Female
25	6.5%	6.3%	4.5%	4.5%
30	6.8%	6.8%	3.0%	4.3%
35	7.0%	7.3%	1.5%	2.5%
40	9.5%	7.3%	1.5%	1.3%
45	11.3%	7.3%	1.0%	1.0%
50	11.8%	8.5%	1.0%	1.3%
55	11.3%	10.3%	1.8%	2.0%
60	12.3%	13.0%	3.5%	2.3%
65	29.3%	32.5%	3.5%	2.5%

Sample Disability Rates		
% Separating Within Next Year		
Age	Male	Female
25	0.01%	0.02%
30	0.01%	0.03%
35	0.02%	0.05%
40	0.02%	0.06%
45	0.04%	0.09%
50	0.08%	0.15%
55	0.11%	0.17%
60	0.14%	0.23%
65	0.19%	0.26%

Summary of Actuarial Assumptions and Methods

The following assumptions apply to members hired before January 1, 2011:

Sample Normal Retirement Rates				
% Separating Within Next Year (Age-Based)				
Age	Service			
	5 - 18	19 - 29	30-33	34 +
54	0%	7%	8%	45%
55	0%	6%	8%	44%
56	0%	6%	7%	46%
57	0%	7%	8%	46%
58	0%	8%	12%	45%
59	0%	33%	40%	48%
60	21%	33%	46%	44%
61	17%	28%	35%	41%
62	17%	28%	43%	41%
63	16%	29%	35%	44%
64	26%	40%	50%	40%
65	27%	40%	52%	43%
66	23%	42%	42%	38%
67	25%	39%	43%	38%
68	23%	39%	40%	35%
69	28%	38%	32%	44%
70	100%	100%	100%	31%
71	100%	100%	100%	39%
72	100%	100%	100%	24%
73	100%	100%	100%	36%
74	100%	100%	100%	36%
75 & older	100%	100%	100%	100%

Summary of Actuarial Assumptions and Methods

The following assumptions apply to members hired on or after January 1, 2011:

Sample Normal Retirement Rates					
% Separating Within Next Year (Age-Based)					
Age	Service				
	9 - 18	19 - 30	31	32 - 33	34 +
61 and younger	0%	0%	0%	0%	0%
62	13%	15%	20%	25%	25%
63	8%	10%	15%	20%	20%
64	8%	10%	15%	20%	20%
65	8%	10%	15%	20%	20%
66	20%	10%	15%	20%	20%
67	20%	40%	70%	70%	70%
68	20%	40%	40%	40%	40%
69	20%	40%	40%	40%	40%
70	100%	100%	100%	100%	100%

SECTION F

SUMMARY OF PRINCIPAL PLAN PROVISIONS

Summary of Principal Plan Provisions

PLAN MEMBERS

All members receiving monthly benefits from the Teachers' Retirement System (TRS) who have at least eight years of creditable service with TRS, the survivor of an annuitant or benefit recipient who had at least eight years of creditable service or a recipient of a monthly disability benefit are eligible to enroll in TRIP. Certain members covered under TRS for pension purposes are eligible for retiree healthcare benefits under the State Employees Group Insurance Program (SEGIP). Members eligible for coverage under SEGIP include: certified teachers working for certain State agencies, executives working for the Board of Education, regional superintendents, regional assistant superintendents, TRS fund staff, and certain members with reciprocal service. Any member that was a participant in the plan that preceded TRIP is eligible to participate in TRIP.

ELIGIBLE SERVICE

Eligible Service includes creditable service used for purposes of determining pension benefits payable from TRS.

NORMAL RETIREMENT

Retirees are eligible to participate in TRIP if they retire under the conditions of TRS and have a minimum of eight years of TRS service. The eligibility conditions for normal retirement under TRS are shown below.

Eligibility conditions

Age 60 with 10 years of service, age 62 with 5 years of service or age 55 with 35 years of service for members hired before January 1, 2011.

Age 67 with 10 years of service for members hired on or after January 1, 2011.

EARLY RETIREMENT

Early retirees are eligible to participate in TRIP if they retire under the conditions of TRS and have a minimum of eight years of TRS service. The eligibility conditions for early retirement under TRS are shown below.

Eligibility conditions

Age 55 with 20 years of service for members hired before January 1, 2011.

Age 62 with 10 years of service for members hired on or after January 1, 2011.

DISABILITY RETIREMENT

Disabled members are eligible to participate in TRIP if they are receiving disability benefits under the conditions of TRS.

Eligibility conditions

There is no specific age or service requirement for receipt of disability benefits except for temporary disability benefits which require a minimum of three years of TRS service.

VESTED TERMINATIONS

Members who terminate with more than eight years of service are eligible to enroll in TRIP once they begin receiving retirement benefits. Members hired on or after January 1, 2011, are vested after 10 years of service.



Summary of Principal Plan Provisions

DEPENDENTS ELIGIBLE FOR COVERAGE

If a plan member enrolls in TRIP, they may enroll the following dependents: spouses; unmarried children age 26 and under; unmarried children age 26 and under that are full-time students, financially dependent for at least one-half of their support, and eligible to be claimed on income tax return; disabled children that have been continuously disabled from causes originating prior to age 26, financially dependent for at least one-half of their support, and eligible to be claimed on income tax return; and parents if they are financially dependent for at least one-half of their support and eligible to be claimed on income tax return.

ENROLLMENT TIMING

Members who have not previously enrolled in TRIP are eligible to enroll when they begin receiving pension benefits through TRS, during any annual open enrollment period, when turning 65 or becoming Medicare eligible or after losing coverage by a former plan. Members and beneficiaries who previously were enrolled in TRIP, and subsequently waive coverage, are only eligible to reenroll due to the loss of prior coverage by a former plan or at the attainment of age 65 or when Medicare eligible.

SURVIVING SPOUSE COVERAGE

Spouses of employees/retirees who die are eligible to maintain health insurance coverage until the surviving spouse's death. If the surviving spouse elects a monthly benefit, he or she becomes the member with the same TRIP rights.

MEDICARE

Coverage through TRIP becomes secondary to Medicare after Medicare eligibility has been reached. Members must enroll in Medicare Parts A and B to receive the reduced premium available to Medicare eligible participants. Benefits are coordinated so that Teachers' Choice Health Plan (TCHP) pays the 20 percent of approved charges not covered by Medicare. If the provider does not accept Medicare assignment, TCHP pays all amounts Medicare does not cover, up to the Medicare maximum limiting charges.

Prescription drug coverage provided by the plan is at least as valuable as benefits provided through Medicare Part D.

DENTAL AND VISION BENEFITS

Dental and vision benefits are not provided through TRIP.

FUNDING POLICY

Retiree healthcare benefits are funded on a pay-as-you-go basis. Medical benefits provided through TRIP are self-insured. The cost of TRIP is shared among active members, retirees, the individual school districts, and the state. Contributions are made to the Teacher Health Insurance Security Fund. For fiscal year 2022, active members contribute 0.9 percent of pay, school districts contribute 0.67 percent of pay and the State contributes 0.9 percent of pay. Retired members contribute through premium payments based on the coverage elected and the age of the member and dependents. The premium for retired members is not permitted to increase by more than 5.0 percent per year per statute.



Summary of Principal Plan Provisions

HEALTHCARE PLANS

Members may elect coverage in the TCHP, a managed care HMO plan or the Healthlink Open Access Plan (OAP). The TCHP is a traditional medical indemnity plan. There are six HMOs offering coverage that varies by location throughout the state. The OAP is a managed care plan that offers three benefit levels based on the provider used.

Premium rates for members depend on the coverage elected and whether a managed care plan is available in their County of residence. The following table gives the member premium amounts by type of coverage and availability of a managed care plan.

The premiums charged to members reflect approximately a 75 percent subsidy for members that elect a managed care plan or elect the TCHP plan if a managed care plan is either not available or only partially available. Members receive approximately a 50 percent subsidy if they elect the TCHP when a managed care plan is available. Medicare primary dependent beneficiaries enrolled in a managed care plan or in the TCHP when no managed care plan is available receive a premium subsidy.

TOTAL RETIREE ADVANTAGE ILLINOIS (TRAIL)

Annuitants and survivors who become enrolled in Medicare Parts A and B and meet all the criteria for enrollment in the Medicare Advantage Program are required to choose a Medicare Advantage Plan or opt out of all TRIP coverage.



Summary of Principal Plan Provisions

TRIP Member Premium from July 1, 2021, to June 30, 2022

	Not Medicare Primary Under Age 26	Not Medicare Primary Age 26-64	Not Medicare Primary Age 65 & Above	Medicare Primary All Ages ¹
Benefit recipient enrolled in any managed care plan	\$96.55	\$299.92	\$408.64	\$118.53
Benefit recipient enrolled in TCHP when a managed care plan is available	\$250.58	\$699.96	\$1,063.69	\$281.05
Benefit recipient enrolled in TCHP when a managed care plan is not available	\$125.29	\$349.98	\$531.86	\$140.53
Dependent beneficiary enrolled in any managed care plan	\$386.36	\$1,199.69	\$1,634.51	\$408.38
Dependent beneficiary enrolled in TCHP when a managed care plan is available	\$501.18	\$1,399.91	\$2,127.38	\$562.10
Dependent beneficiary enrolled in TCHP when a managed care plan is not available	\$501.18	\$1,399.91	\$2,127.38	\$421.59

For plans other than MAPD plans, Member Premium for Plan Year End June 30, 2023, increased by 5.0 percent.

TRIP MAPD Premiums from January 1, 2022, through December 31, 2022

	HMO Plans			PPO Plan
	Coventry Advantra	Health Alliance	Humana	United Healthcare
Member Rate	\$35.46	\$43.42	\$36.31	\$38.17
Dependent Rate	\$106.38	\$130.25	\$108.93	\$114.50

TRIP MAPD Premiums from January 1, 2023, through December 31, 2023

	Aetna MAPD Rates, before Administrative Charges
Member Rate	\$0.00
Dependent Rate	\$0.00

¹ Member must enroll in Medicare Parts A and B to qualify for lower premiums.



Summary of Principal Plan Provisions

TCHP

<i>Plan Feature</i>	<i>In Network</i>	<i>Out of Network ¹</i>																					
Annual Deductible	\$500 per enrollee	\$500 per enrollee																					
Annual Out of Pocket Limit	\$1,200 per individual \$2,750 per family, per plan year	\$4,400 per individual \$8,800 per family, per plan year																					
<u>Covered Services</u>	<u>Coinsurance</u>	<u>Coinsurance</u>																					
-Office Visits	80% after deductible	60% after deductible																					
-Emergency Room	\$400 copay, deductible applies	\$400 copay, deductible applies																					
-Inpatient Services	\$200 copay, then 80% after deductible	\$400 copay, then 60% after deductible																					
-Outpatient Services																							
-Lab/X-ray	80% after plan deductible	60% after plan deductible																					
-Other	80% after plan deductible	60% after plan deductible																					
TCHP Prescription Drug Copays	<p>TCHP applies 20% member coinsurance to retail cost not to exceed maximum copayment or be less than the minimum copayment.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>Retail</u></th> <th style="text-align: center;"><u>Retail</u></th> <th style="text-align: center;"><u>Maintenance Choice</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Tier 1</td> <td style="text-align: center;">Greater of 20% or \$7</td> <td style="text-align: center;">Greater of 20% or \$14</td> <td style="text-align: center;">Greater of 10% or \$14</td> </tr> <tr> <td style="text-align: center;">Tier 2</td> <td style="text-align: center;">Greater of 20% or \$14</td> <td style="text-align: center;">Greater of 20% or \$28</td> <td style="text-align: center;">Greater of 10% or \$28</td> </tr> <tr> <td style="text-align: center;">Tier 3</td> <td style="text-align: center;">Greater of 20% or \$28</td> <td style="text-align: center;">Greater of 20% or \$56</td> <td style="text-align: center;">Greater of 10% or \$56</td> </tr> <tr> <td style="text-align: center;">Supply</td> <td style="text-align: center;">30-days</td> <td style="text-align: center;">90-days</td> <td style="text-align: center;">90-days</td> </tr> </tbody> </table>				<u>Retail</u>	<u>Retail</u>	<u>Maintenance Choice</u>	Tier 1	Greater of 20% or \$7	Greater of 20% or \$14	Greater of 10% or \$14	Tier 2	Greater of 20% or \$14	Greater of 20% or \$28	Greater of 10% or \$28	Tier 3	Greater of 20% or \$28	Greater of 20% or \$56	Greater of 10% or \$56	Supply	30-days	90-days	90-days
	<u>Retail</u>	<u>Retail</u>	<u>Maintenance Choice</u>																				
Tier 1	Greater of 20% or \$7	Greater of 20% or \$14	Greater of 10% or \$14																				
Tier 2	Greater of 20% or \$14	Greater of 20% or \$28	Greater of 10% or \$28																				
Tier 3	Greater of 20% or \$28	Greater of 20% or \$56	Greater of 10% or \$56																				
Supply	30-days	90-days	90-days																				
Maximum Lifetime Benefit	Unlimited																						

¹ Out of network claims covered only up to usual and customary amount.

Summary of Principal Plan Provisions

HMO

<i>Plan Feature</i>																			
Annual Deductible	\$0																		
Out of Pocket Maximum	\$3,000 individual \$6,000 family																		
<u>Covered Services</u>	<u>Coinsurance</u>																		
-Physicians Visits	\$20 Copay																		
-Emergency Care	\$200 Copay																		
-Inpatient Services	\$250 Copay																		
-Outpatient Services	\$150 Copay																		
TRIP HMO Prescription Drug Copays	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>Preferred Retail</u></th> <th style="text-align: center;"><u>Preferred Retail</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Reduced Tier 1</td> <td style="text-align: center;">\$4.00</td> <td style="text-align: center;">\$10.00</td> </tr> <tr> <td style="text-align: center;">Tier 1</td> <td style="text-align: center;">\$10.00</td> <td style="text-align: center;">\$25.00</td> </tr> <tr> <td style="text-align: center;">Tier 2</td> <td style="text-align: center;">\$20.00</td> <td style="text-align: center;">\$50.00</td> </tr> <tr> <td style="text-align: center;">Tier 3</td> <td style="text-align: center;">\$40.00</td> <td style="text-align: center;">\$100.00</td> </tr> <tr> <td style="text-align: center;">Supply</td> <td style="text-align: center;">30-days</td> <td style="text-align: center;">90-days</td> </tr> </tbody> </table>		<u>Preferred Retail</u>	<u>Preferred Retail</u>	Reduced Tier 1	\$4.00	\$10.00	Tier 1	\$10.00	\$25.00	Tier 2	\$20.00	\$50.00	Tier 3	\$40.00	\$100.00	Supply	30-days	90-days
	<u>Preferred Retail</u>	<u>Preferred Retail</u>																	
Reduced Tier 1	\$4.00	\$10.00																	
Tier 1	\$10.00	\$25.00																	
Tier 2	\$20.00	\$50.00																	
Tier 3	\$40.00	\$100.00																	
Supply	30-days	90-days																	
Maximum Lifetime Benefit	Unlimited																		



Summary of Principal Plan Provisions

OAP

<i>Plan Feature</i>	<i>Tier I</i>	<i>Tier II</i>	<i>Tier III</i>
Annual Deductible	\$0	\$300 per enrollee	\$400 per enrollee
Annual Out of Pocket Limit	\$6,600 per enrollee \$13,200 per family Tier I and Tier II charges combined		N/A
<u>Covered Services</u>	<u>Coinsurance/Copay</u> ¹	<u>Coinsurance/Copay</u> ¹	<u>Coinsurance/Copay</u> ²
-Office Visits	\$20 copay	80%	60%
-Emergency Room	\$200 copay	\$200 copay	\$200 copay
-Inpatient Services	\$250 copay	\$300 copay, then 80%	\$400 copay, then 60%
-Outpatient Services			
-Lab/X-ray	100%	80%	60%
-Other	100%	80%	60%
		<u>Retail</u>	<u>Maintenance Choice</u>
TRIP OAP	Tier 1	\$10.00	\$10.00
Prescription Drug Copays	Tier 2	\$20.00	\$20.00
	Tier 3	\$40.00	\$40.00
	Supply	30-days	90-days
Maximum Lifetime Benefit	Unlimited	Unlimited	Unlimited

¹ Network charges.

² Usual and customary charges.



Summary of Principal Plan Provisions

TRAIL MAPD HMO

<i>Plan Feature</i>				
Annual Deductible	\$0			
Out of Pocket Maximum	\$3,000 per enrollee			
<u>Covered Services</u>	<u>Coinsurance</u>			
-Physicians Visits	\$20 Copay			
-Emergency Care	\$120 Copay Copay waived if admitted within 24 hours			
-Inpatient Services	\$250 Copay			
-Outpatient Services	\$150 Copay			
TRIP TRAIL HMO Prescription Drug Copays ¹		<u>Retail</u>	<u>Retail</u>	<u>Retail</u>
	Tier 1	\$10.00	\$20.00	\$30.00
	Tier 2	\$20.00	\$40.00	\$60.00
	Tier 3	\$40.00	\$80.00	\$120.00
	Tier 4 Specialty	\$40.00	\$80.00	\$120.00
Supply	30-days	60-days	90-days	
Maximum Lifetime Benefit	Unlimited			

¹ To obtain a 90-day supply, copayments are 2.5 times the 30-day supply copayment. Copayments are capped once a member reaches \$7,050 in "true out-of-pocket" prescription drug costs.



Summary of Principal Plan Provisions

TRAIL MAPD PPO

<i>Plan Feature</i>	<i>In Network</i>	<i>Out of Network</i>		
Annual Deductible	\$250 per enrollee	\$250 per enrollee		
Annual Out of Pocket Limit	\$1,100 per enrollee	\$1,100 per enrollee		
<u>Covered Services</u>	<u>Coinsurance</u>	<u>Coinsurance</u>		
-Office Visits	80% after deductible	80% after deductible		
-Emergency Room	\$120 Copay Copay waived if admitted within 24 hours	\$120 Copay Copay waived if admitted within 24 hours		
-Inpatient Services	80% after deductible	80% after deductible		
-Outpatient Services	80% after plan deductible	80% after plan deductible		
TRIP TRAIL PPO Prescription Drug Copays ¹		<u>Retail</u>	<u>Retail</u>	<u>Retail</u>
	Tier 1	\$10.00	\$20.00	\$30.00
	Tier 2	\$25.00	\$50.00	\$75.00
	Tier 3	\$50.00	\$100.00	\$150.00
	Tier 4 Specialty	\$50.00	\$100.00	\$150.00
	Supply	30-days	60-days	90-days
Maximum Lifetime Benefit	Unlimited			

¹ To obtain a 90 day mail-order supply, copayments are 2.5 times the 30-day supply copayment.
Copayments are capped once a member reaches \$7,050 in "true out-of-pocket" prescription drug costs.



SECTION G

GLOSSARY

Glossary

Accrued Service. The service credited under the plan, which was rendered before the date of the actuarial valuation.

Actuarial Accrued Liability (AAL). The difference between (i) the actuarial present value of future plan benefits; and (ii) the actuarial present value of future normal cost, which is sometimes referred to as "accrued liability" or "past service liability."

Actuarial Assumptions. Estimates of future plan experience with respect to rates of mortality, disability, turnover, retirement, rate or rates of investment income, and salary increases. Decrement assumptions (rates of mortality, disability, turnover and retirement) are generally based on past experience, often modified for projected changes in conditions. Economic assumptions (salary increases and investment income) consist of an underlying rate in an inflation-free environment plus a provision for a long-term average rate of inflation.

Actuarial Cost Method. A mathematical budgeting procedure for allocating the dollar amount of the "actuarial present value of future plan benefits" between the actuarial present value of future normal cost and the actuarial accrued liability. Sometimes referred to as the "actuarial funding method."

Actuarial Equivalent. A single amount or series of amounts of equal value to another single amount or series of amounts, computed on the basis of the rate(s) of interest and mortality tables used by the plan.

Actuarial Present Value. The amount of funds presently required to provide a payment or series of payments in the future. It is determined by discounting the future payments at a predetermined rate of interest, taking into account the probability of payment.

Actuarial Value of Assets. The value of cash, investments, and other property belonging to a pension or OPEB plan, as used by the actuary for the purpose of an actuarial valuation.

Actuarially Determined Contribution (ADC). The ADC is the normal cost plus the portion of the unfunded actuarial accrued liability to be amortized in the current period. The ADC is an amount that is actuarially determined in accordance with the requirements so that, if paid on an ongoing basis, it would be expected to provide sufficient resources to fund both the normal cost for each year and the amortized unfunded liability.

Amortization. Paying off an interest-bearing liability by means of periodic payments of interest and principal, as opposed to paying it off with a lump sum payment.

Annual OPEB Expense. An accrual-basis measure of the periodic cost of an employer's participation in a defined OPEB plan.

Discount Rate. The rate used to adjust a series of future payments to reflect the time value of money.



Glossary

Entry Age Normal Cost Method. A method under which the normal cost and actuarial accrued liability are directly proportional to the employee's salary. The normal cost rate equals the present value of future benefits at entry age divided by the present value of future salary at entry age. The normal cost at the member's attained age equals the normal cost rate at entry age multiplied by the salary at attained age. The actuarial accrued liability equals the present value of benefits at attained age less present value of future salaries at attained age multiplied by normal cost rate at entry age.

Expected Net Employer Contributions. The difference between the age-adjusted premium or expected retiree healthcare claims and retired member's share of the premium. This amount is used to offset the Annual OPEB Cost during the fiscal year.

Explicit Rate Subsidy. The portion of the premium paid by the employer. The premium may be based on the experience of active and retired members or retired members only.

Governmental Accounting Standards Board (GASB). GASB is the private, nonpartisan, nonprofit organization that works to create and improve the rules U.S. state and local governments follow when accounting for their finances and reporting them to the public.

Implicit Rate Subsidy. The de facto subsidy of retirees by permitting them to pay lower than age-adjusted premiums through the use of a single common or blended premium for both retirees and active employees.

Medical Trend Rate (Health Inflation). The increase in the plan's cost over time. Trend includes all elements that may influence a plan's cost, assuming those enrollments and the plan benefits do not change. Trend includes such elements as pure price inflation, changes in utilization, advances in medical technology and cost shifting.

Normal Cost. The annual cost assigned, under the actuarial funding method, to current and subsequent plan years. Sometimes referred to as "current service cost." Any payment toward the unfunded actuarial accrued liability is not part of the normal cost.

Other Postemployment Benefits (OPEB). OPEB are postemployment benefits other than pensions. OPEB generally takes the form of health insurance and dental, vision, prescription drugs, or other healthcare benefits.

Pay-As-You-Go Funding. A method of financing benefits by making required payments only as they come due.

Plan Member. A plan's membership includes active service employees, terminated employees who are eligible to receive benefits but are not receiving them, and retired employees and beneficiaries currently receiving benefits.

Pre-Funding. A method of financing benefits by placing resources in trust as employees earn benefits so that the resources thus accumulated, along with related earnings, can be used to make benefit payments as they become due.



Glossary

Present Value of all Projected Benefits. The present value of the cost to finance benefits payable in the future, discounted to reflect the expected effects of the time value of money and the probabilities of payment.

Projected Unit Credit Cost Method. A method under which the normal cost and actuarial accrued liability are directly proportional to the employee's service. The normal cost equals the present value of future benefits divided by projected service at retirement, and the actuarial accrued liability equals the present value of benefits multiplied by the ratio of service at the actuarial valuation date to projected service at retirement.

Qualified Plan. A qualified plan is an employer-sponsored retirement plan that qualifies for special tax treatment under Section 401(a) of the Internal Revenue Code.

Reserve Account. An account used to indicate that funds have been set-aside for a specific purpose and are not generally available for other uses.

Unfunded Actuarial Accrued Liability (UAAL). The difference between the actuarial accrued liability and valuation assets. Sometimes referred to as "unfunded accrued liability."

Valuation Assets. The value of current plan assets recognized for actuarial valuation purposes.