NASRA

State OPEB Plan Designs

State	OPEB Plan Design(s) for State Employees and Other Participating Employers	Recent Changes
AL	The Alabama Retired State Employees' Health Care Trust is a single-employer defined benefit health care plan. For retirees who retired prior to October 1, 2005, the State pays 100 percent of the premium for a retiree who is over 65 and eligible for Medicare. A sliding scale premium is applied after 9/30/05 to all employees retiring after 9/30/05, based on their years of service. For those employees retiring with 25 years of service, the employer would pay 100% of the employer share of the premium. For each year less than 25, the employer share would be reduced by 2% and the retiree share will be increased accordingly. For each year over 25, the employer share would be increased by 2% and the retiree share reduced accordingly. For members retiring on or after 1/1/12, the 2% reduction in the employer share of the premium for each year of service less than 25 will be increased to 4%. In addition, a 1% reduction in the employer share of the premium will be added for each year of age less than the Medicare entitlement age. This additional age premium component will be removed upon attaining Medicare entitlement.	State paid 100 percent of premiums for retirees who retired prior to 10/1/05. For those who retired after 9/30/05, a sliding scale premium was implemented based on years of service. The retiree's share of the sliding scale premium was increased for those retiring on or after 1/1/12.
	The Public Education Employees' Health Insurance Plans was established to provide retiree health care benefits to eligible participants of the Teachers' Retirement System of Alabama. In November 2004, the Alabama Legislature enacted legislation (Act 2004-649) that required the PEEHIP Board to implement a sliding scale premium for all employees retiring after 9/30/05, based on their years of service at retirement. For those employees retiring with 25 years of service, the employer would pay 100% of the employer share of the premium. For each year less than 25, the employer share would be reduced by 2% and the retiree share will be increased accordingly. For each year over 25, the employer share would be increased by 2% and the retiree share is reduced accordingly. For members retiring on or after 1/1/12, Act 2011-704 establishes changes to the sliding scale premium calculation. Under the law there are three major changes to the retiree sliding scale premium. These changes are related to a retiree's years of service (Service Premium Component), age at the time of retirement (Age Component) and subsidy premium (Subsidy Component). An employee who retires with less than 25 years of service will contribute 4% of the employer share for each year under 25 years of service instead of 2% under the current law. The Service Premium Component continues for the retiree's lifetime. An employee who retires before becoming Medicare eligible will contribute 1% of the employer share for each year less than 65. Upon Medicare entitlement, the age component will be removed. An employee will contribute the net difference between the active employee subsidy and the non-Medicare eligible retiree subsidy (subsidy premium). The Fiscal Year 2019 subsidy premium amount is $162.93 per month. Upon Medicare entitlement, the subsidy component will be removed.	
AK	**Alaska PERS:** Major medical benefits, to cover medical expenses, are provided to retirees and their surviving spouses at no premium cost for all members hired before July 1, 1986 (Tier 1), and disabled retirees. Members hired after June 30, 1986 (Tier 2), and their surviving spouses with 5 years of credited service (or 10 years of credited service for those first hired after 6/30/96 [Tier 3]) must pay the full monthly premium if they are under age 60 and will receive benefits at no premium cost if they are over age 60. Tier 3 members with between 5 and 10 years of credited service must pay the full monthly premium regardless of their age. Tier 2 and Tier 3 members with less than five years of credited service are not eligible for postemployment healthcare benefits. Tier 2 members who are receiving a conditional benefit and are age eligible are eligible for postemployment healthcare benefits. In addition, peace officers and their surviving spouses with 25 years of peace officer membership service and all other members and their surviving spouses with 30 years of membership service receive benefits at no premium cost, regardless of their age or date of hire. Peace officers/firefighters who are disabled between 20 and 25 years must pay the full monthly premium. Tier 4 members (hired on or after 7/1/06) must pay the full premium if below the Medicare-eligible age. Those eligible for Medicare and with 10 years of service (25 years for peace officers/firefighters) pay a percentage of the premium ranging from 10% for those with 30+ years of service to 30% for those with 10-14 years of service.	Those in PERS Tier 4 and TRS Tier 3 (hired on or after 7/1/06) must pay the full premium if below Medicare-eligible age. Those in previous tiers received full or partial subsidized coverage.
	Alaska TRS: When pension benefits begin, major medical benefits are provided without cost to (1) all members first hired before July 1, 1990; (2) members hired after July 1, 1990, with 25 years of membership service; and (3) members who are disabled or age 60 or older, regardless of their initial hire dates. Members first hired after June 30, 1990, may receive major medical benefits prior to age 60 by paying premiums. Tier 3 members (hired on or after 7/1/06) must pay the full premium if below the Medicare-eligible age. Those eligible for Medicare and with 10 years of service pay a percentage of the premium ranging from 10% for those with 30+ years of service to 30% for those with 10-14 years of service.	

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AZ	The ADOA provides medical and accident benefits to retired State employees and their dependents, which is a single employer defined benefit post-employment plan. The ADOA pays the medical costs incurred by retired employees minus a specified premium amount, which is paid for entirely by the retiree or on behalf of the retiree. Premium rates are based on a blend of active employee and retiree experience, resulting in a contribution basis which is lower than the expected claim costs for retirees only, which results in an implicit subsidization of retirees by the State. Retired and disabled members, with at least five years of credited service, are eligible to participate in the HBS program administered by the Arizona State Retirement System. The maximum benefits for members with 10 or more years of service range from $150 to $215 depending on age (under or over 65) and presence or absence, and age of dependents.	
AR	The Arkansas State Employee Health Plan (ASE) offers postemployment benefits to retirees who are covered under the plan on their last day of employment and are retirees of one of the following: the Arkansas Public Employees Retirement System, the Arkansas Teachers Retirement System, the Arkansas State Highway Employees Retirement System, the Arkansas Judicial Retirement System, or an alternate retirement plan of a qualifying institution. The retiree's eligibility is based upon which plan the retiree participates in and the corresponding age and years of service requirements associated with each plan. Retirees and their spouses are eligible to continue participation in ASE until the death of each covered individual. Per AR Code § 21-5-414, participating entities' contribution is equal to the number of budgeted state employee positions multiplied by the monthly contribution authorized by the CFO of the State, not to exceed $425 for each state employee. The Arkansas State Police Medical and Rx Plan (ASP) offers postemployment benefits to the Director and State Police Officers who retire under the Arkansas State Police Retirement System, make the required contributions, and purchase Medicare Parts A and B. The retiree pays a premium based on eligibility for Medicare as well as dependents covered. Benefits are available when the retiree reaches 65 with five years of service, or at any age with 30 years of service.	
CA	The primary government provides health benefits (medical and prescription drug benefits) and dental benefits to annuitants of retirement systems through a substantive single-employer defined benefit plan to which the primary government contributes as an employer (state substantive plan). The design of health and dental benefit plans can be amended by the CalPERS Board of Administration and CalHR, respectively. To be eligible for these benefits, primary government first-tier plan annuitants must retire on or after age 50 with at least 5 years of service, and second-tier plan annuitants must retire on or after age 55 with at least 10 years of service. In accordance with the California Government Code, the State generally pays 100% of the health insurance premium cost for annuitants, plus 90% of the additional premium cost for the enrollment of family members of annuitants.	
CO	Eligible employees of the State of Colorado are provided with OPEB through the Health Care Trust Fund - a cost sharing multiple-employer defined benefit OPEB plan administered by PERA. The HCTF provides a health care premium subsidy to eligible participating PERA benefit recipients and retirees who choose to enroll in one of the PERA health care plans. The health care premium subsidy is based upon the benefit structure under which the member retires and the member's years of service credit. The maximum service-based premium subsidy is $230 per month for benefit recipients who are under 65 years of age and who are not entitled to Medicare; the maximum service-based subsidy is $115 per month for benefit recipients who are 65 years of age or older or who are under 65 years of age and entitled to Medicare. The basis for the maximum service-based subsidy, in each case, is for benefit recipients with retirement benefits based on 20 or more years of service credit. There is a 5 percent reduction in the subsidy for each year less than 20. The benefit recipient pays the remaining portion of the premium to the extent the subsidy does not cover the entire amount.	

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CT	SEOPEBP is a single-employer defined benefit OPEB plan that covers retired employees of the State who are receiving benefits from any State-sponsored retirement system, except the Teachers' Retirement System and the Municipal Employees' Retirement System. The cost of providing plan benefits is financed approximately 100 percent by the State on a pay-as you-go basis through an annual appropriation in the General fund. RTHP is a single-employer defined benefit OPEB plan that covers retired teachers and administrators of public schools in the State who are receiving benefits from the Teachers' Retirement System. Active teachers pay for one third of plan costs through a contribution of 1.25 percent of their annual salaries, retired teachers pay for one third of plan costs through monthly premiums, and the State pays for one third of plan costs through an annual appropriation in the General Fund.	
DE	The OPEB Trust is a cost-sharing multiple-employer defined benefit plan. The OPEB Trust provides retirement medical coverage to pensioners and their eligible dependents in the State Employees', Judiciary, New State Police, and Closed State Police pension plans. Substantially all State employees become eligible for post-retirement benefits if they reach retirement age while working for the State. The costs of providing these healthcare benefits for retirees and other eligible beneficiaries are shared between the State and the retired employee.	
FL	The Division of State Group Insurance (DSGI) Other Postemployment Benefits Plan (OPEB Plan) is a multiple-employer defined benefit plan which provides healthcare benefits to retired state and university employees. All public employers that offer benefits through a group insurance plan shall allow their retirees and their eligible dependents the option to continue participation in the plan during retirement. The law also requires the claims experience of the retirees under 65 group to be combined with the claims experience of active employees for premium determination and the premium offered to retired employees to be no more than the premium applicable to active employees. The Florida Retirement System administers the Health Insurance Subsidy (HIS) program, which provides a health insurance subsidy payment to most retired employees and beneficiaries. For the fiscal year ended June 30, 2018, retirees and beneficiaries received a monthly HIS payment equal to the number of years of creditable service completed at the time of retirement multiplied by $5. The payments are at least $30 but not more than $150 per month. To be eligible to receive a HIS benefit, a retiree under a state-administered retirement system must provide proof of health insurance coverage, which can include Medicare.	
GA	The State OPEB Fund provides postemployment health benefits due under the group health plan for employees of state organizations (including technical colleges) and other entities authorized by law. The School OPEB Fund provides postemployment health benefits due under the group health plan for public school teachers and other school employees. The State provides a premium subsidy in retirement that ranges from 0% for fewer than 10 years of service to 75% (but no greater than the subsidy percentage offered to active employees) for more 30 or more years of service. The subsidy for eligible dependents ranges from 0% to 55%.	
HI	The State provides certain health care and life insurance benefits to all qualified employees. Pursuant to Act 88, SLH 2001, the State contributes to the EUTF, an agent multiple-employer defined benefit plan. For employees hired on or after 7/1/01, and who retire with less than ten years of service, the State makes no contributions. For those retiring with at least ten but less than 15 years of service, the State pays 50% of the monthly contribution. For those retiring with at least 15 but fewer than 25 years of service, the State pays 100% of the monthly contribution.	State paid full contribution for those hired before 7/1/96 with more than 10 years of service, and 50% of the contribution for those with less than 10 years. For those hired after 6/30/96 but before 7/1/01, the state paid nothing for those with fewer than 10 years of service; 50% for those with at least 15 years; 75% for those with more than 15 but fewer than 25 years; and 100% for those with at least 25 years. Those hired on or after 7/1/01 must pay the difference if they elect family coverage.

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IA	The State of Iowa provides access to postretirement medical benefits to all retirees as required by Chapter 509A.13 of the Code of Iowa. Although the retirees generally must pay 100% of the premium rate, GASB No. 75 requires that employers recognize the Implicit Rate Subsidy that exists in postretirement medical plans provided by governmental employers.	
ID	A retired officer or employee of a state agency, department, institution, or other political subdivision, including an elected official, who receives monthly retirement benefits from the Public Employee Retirement System of Idaho (PERSI) may elect to purchase retiree health insurance coverage for themselves and eligible dependents. Coverage is not available to Medicare-eligible retirees or their Medicare-eligible dependents. Retirees eligible for medical health insurance pay the majority of the premium cost; however, the retiree plan costs are subsidized by the active employee plan.	Retirees hired after June 30, 2019 are not eligible for coverage unless they have credited state service of at least 20,800 hours before June 30, 2019 and subsequent to reemployment on or after July 1, 2019 accumulate an additional 6,240 continuous hours of state service.
IL	The State Employees Group Insurance Act of 1971 (“Act”), as amended, authorizes the State to provide health, dental, vision, and life insurance benefits for certain retirees and their dependents. Substantially all State and university component unit employees become eligible for these other postemployment benefits (“OPEB”) if they eventually become annuitants of one of the State sponsored pension plans. In accordance with the Act, the State contributes toward the cost of an annuitant’s coverage under the basic program of group health, dental, and vision benefits an amount equal to five percent of that cost for each full year of creditable service up to a maximum of one hundred percent for an annuitant with twenty or more years of creditable service. 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 Teachers Retirement Insurance Plan. 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. The premiums charged to members reflect approximately a 75 percent subsidy for members that elect a managed care plan or elect the Teachers' Choice Health 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. The premium for retired members is not permitted to increase by more than 5.0 percent per year per statute.	
IN	The State of Indiana sponsors and contributes to four single-employer defined benefit healthcare plans for state employees (SPP), legislators (LP), state police officers (ISPP), and conservation & excise police officers (CEPP). The State Personnel Department administers the SPP and LP. The Indiana State Police administer the ISPP. The CEPP is administered by the Indiana State Excise Police and Indiana Conservation Officers Health Insurance Committee. Retiree participants pay the full premium rate as determined by the administrators of these plans.	
KS	Kansas statute provides that postemployment healthcare benefits be extended to retired employees who have met age and/or service eligibility requirements. The health insurance benefit generally provides the same coverage for retirees and their dependents as for active employees and their dependents. The health insurance benefit plan is a single employer defined benefit plan administered by Kansas Health Care Finance. Prior to 1/1/17, non-Medicare participants were subsidized by the State, thus resulting in a liability to the State. Beginning 1/1/17, non-Medicare eligible retirees health insurance will no longer be subsidized per the Kansas Health Care Commission decision in June 2016.	Subsidized retiree health care was eliminated for non-Medicare eligible retirees effective 1/1/17.
KY	The Kentucky Retirement Systems’ Insurance Fund was established to provide hospital and medical insurance for eligible members receiving benefits from KERS, CERS, and SPRS. The eligible non-Medicare retirees are covered by the Department of Employee Insurance (DEI) plans. KRS submits the premium payments to DEI. As a result of House Bill 290 (2004 Kentucky General Assembly), medical insurance benefits are calculated differently for members who began participating on, or after, 7/1/03. Once members reach a minimum vesting period of 10 years, non-hazardous employees whose participation began on, or after, 7/1/03, earn $10 per month for insurance benefits at retirement for every year of earned service without regard to a maximum dollar amount. Hazardous employees whose participation	10-year vesting established for insurance benefits for state employees hired on or after 7/1/03. Those hired after that date receive an employer subsidy commensurate with their years of service, up to a maximum of 100% for those with 24+ years of service.

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	began on, or after, 7/1/03 earn $15 per month for insurance benefits at retirement for every year of earned service without regard to a maximum dollar amount. The TRS medical plan (MIF) is funded by employer and member contributions. To be eligible for medical benefits, the member must have retired either for service or disability. The TRS medical plan offers coverage to members under the age of 65 through the Kentucky Employees Health Plan (KEHP) administered by the Kentucky Department of Employee Insurance. TRS retired members are given a supplement to be used for payment of their health insurance premium. The amount of the member's supplement is based on a contribution supplement table approved by the TRS Board of Trustees	
LA	The Office of Group Benefits administers the State of Louisiana Post-Retirement Benefit Plan - a multiple employer defined benefit other post-employment benefit plan. The plan provides medical, prescription drug and life insurance benefits to retirees, disabled retirees, and their eligible beneficiaries through premium subsidies. Current employees who participate in an OGB health plan while active are eligible for plan benefits if they are enrolled in the OGB health plan immediately before the date of retirement and retire under one of the state retirement systems (LASERS, LSPRS, TRSL, or LSERS) or they retire from a participating employer that meets the qualifications in the Louisiana Administrative Code 32:3:303	
MA	The Commonwealth administers an OPEB plan as a single employer defined benefit program. Benefits are managed by the Group Insurance Commission (GIC) and investments are managed by PRIM. The GIC has representation on the Board of Trustees of the State Retirees' Benefits Trust (SRBT). As of 6/30/18 Commonwealth participants contributed 0% to 20% of premium costs, depending on the date of hire and whether the participant is active, retiree, or survivor status.	Those who retired on or before 7/1/94 contribute 10% of the cost of the plan. Those who retired after 7/1/14 but on or before 10/1/09 contribute 15% of the cost of the plan. Those who retired on or after 10/1/09 contribute 20% of the cost of the plan.
MD	The State Employee and Retiree Health and Welfare Benefits Program (Plan) is a single-employer defined benefit healthcare plan established by State Personnel and Pensions Article, Sections 2-501-2-516, of the Annotated Code of Maryland. The Plan is self-insured to provide medical, hospitalization, prescription drug and dental insurance benefits to eligible state employees, retirees and their dependents. For members hired on or after July 1, 2011, they are required to have completed at least 25 years of creditable service, retired directly from State service with at least ten years of creditable service, or ended State service with at least ten years of creditable service and within five years before the age at which a vested retirement allowance normally would begin. Based on current practice, the State subsidizes approximately 50% to 85% of retiree premiums to cover medical, dental, prescription and hospitalization costs, depending on the type of insurance plan.	
ME	The State has a single-employer defined benefit healthcare OPEB plan that is administered through a trust. The State pays 100 percent of postretirement health insurance premiums for state employee retirees who were first employed on or before July 1, 1991. A pro rata portion, ranging from zero percent for retirees with less than five years participation to 100 percent for retirees with ten or more years of participation, is paid for eligible individuals first employed after 7/1/91. The State also committed to pay a statutorily determined portion of the retiree healthcare premiums for retired Teachers and retired First Responders. Effective 1/1/06, the State contribution to retired teacher health premiums was increased to 45 percent of the retiree-only premium. The rate is based on a single rate for single and employee plus children coverage, or 50 percent of the two party rate for two party and family coverage. Eligibility mirrors that of State Employees.	

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MI	DB Tier 1 members of the Michigan State Employees' Retirement System are eligible to receive health, prescription drug, dental, and vision coverage on the first day they start receiving pension benefits. Defined Contribution Tier 2 participants who elected to retain the graded premium subsidy benefit under the reform elections of Public Act 264 of 2011 are also eligible to receive subsidized health, prescription drug, dental and vision coverage after terminating employment, if they meet eligibility requirements. Retirees of the Public School Employees' Retirement System have the option of health coverage, which, through 2012, was funded on a cash disbursement basis. Beginning fiscal year 2013, it is funded on a prefunded basis. A subsidized portion of the premium is paid by the System with the balance deducted from the monthly pension of each retiree healthcare recipient. For members who first worked before July 1, 2008, the subsidy is the maximum allowed by statute. To limit future OPEB liabilities, members who first worked on or after July 1, 2008 have a graded premium subsidy based on career length where they accrue credit towards their insurance premiums in retirement, not to exceed the maximum allowable by statute. Public Act 300 of 2012 sets the maximum subsidy at 80% beginning January 1, 2013; 90% for those Medicare eligible and enrolled in the insurances as of that date.	Effective in 2011, Tier 2 state employees (hired after April 1997) were given a choice to keep subsidized retiree health care or switch to a DC plan for financing retiree health care expenses. Effective 1/1/13 employer subsidies for retired public school employees are capped at 80% for pre-65 and 90% for post-65. Subsidized retiree health care is eliminated for state and public school employees hired on or after 9/4/12 and replaced with a DC plan with an employer match of up to 2% of compensation plus a lump sum of $1,000-$2,000 in to an HRA upon termination of employment.
MN	Other postemployment benefits (OPEB) are available to state employees and their dependents through a single employer defined benefit healthcare plan, as allowed by Minnesota Statutes 43A.27, Subdivision 3, and Minnesota Statutes 471.61, Subdivision 2a, and required under the terms of selected employment contracts. All pre-age-65 state retirees with at least 5 years of allowable pension service who are entitled at the time of retirement to receive an annuity under the state retirement program are eligible to participate in the state's health and dental insurance plan until age 65. Retirees not eligible for an employer subsidy must pay 100 percent of the premiums to continue receiving coverage.	
MO	Missouri Consolidated Health Care Plan (MCHCP) operates a cost-sharing multiple-employer, defined benefit Other Postemployment Benefits Plan (OPEB), the State Retiree Welfare Benefit Trust (SRWBT). Employees may participate at retirement, if eligible to receive a monthly retirement benefit from either Missouri Employees' Retirement System (MOSERS) or another retirement system whose members grandfathered for coverage under the MCHCP by law. The State pays a percentage of the premium for MCHCP participants for a designated plan and subtracts the total state subsidy from the premium cost for the plan chosen by the retiree to determine the retiree contribution amount. This percentage is 2.5% per year of service, up to a maximum of 65%. The retiree pays the remainder of the premium. The Missouri Department of Transportation and Highway Patrol Employees' Medical and Life Insurance Plan (MHPML) is a single-employer, defined benefit OPEB plan. The Missouri Highways and Transportation Commission contributes a percentage of medical premiums for retirees. For those who retired prior to January 1, 2015, an amount ranging from 40.0% to 57.0% of the premium is contributed, dependent on the level of coverage. Medical premiums, for employees who retire on or after January 1, 2015, are based on total years of service, with the Commission contributing 2.0% per year of service, not to exceed 50.0% of the total premium, with the retiree responsible for the remaining balance of the premiums. The Conservation Employees' Benefits Plan (CEIP) is a single employer defined benefit OPEB plan administered by the Conservation Employees' Benefits Plan Board of Trustees. The contribution requirements for CEIP are established by a trust agreement between the Conservation Commission and the Conservation Employees' Benefits Plan Board of Trustees, which grants the authority to establish and amend benefit terms and financing requirements to the Board of Trustees. The Commission contribution toward retiree medical premium is based on tenure or years of service with the State. At the time of retirement, employees who have 25+ years of service receive a 35% contribution, 20-24 years of service receive a 30% contribution, 15-19 years of service receive a 25% contribution, vested status up to 14 years of service receive a 20% contribution, and employees who retired prior to January 1, 2013 continue to receive a 35% contribution towards their premium	MoDOT & Patrol retirees prior to 1/1/15 receive a maximum employer premium contribution of 57%, depending on level of coverage. Those who retire on or after 1/1/15 receive a contribution of 2.0% per year of service, not to exceed 50%. Conservation employees who retire prior to 1/1/13 receive a 35% employer premium contribution; those who retire on or after 1/1/13 receive between 25-35%, depending on years of service.

State OPEB Plan Designs

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MS	The State and School Employees' Health Insurance Management Board (the Board) administers the State Life and Health Insurance Plan. State law mandates that all state, public education, library, junior and community college and retiring employees be offered health and life benefit coverage through the Plan. Benefits of the Plan consist of an implicit rate subsidy, which is essentially the difference between the average cost of providing healthcare benefits to retirees under age 65 and the average cost of providing healthcare benefits to all participants when premiums paid by retirees are not age-adjusted.	
MT	In accordance with Section 2-18-704, MCA, the State provides post-employment health insurance benefits to eligible employees who receive retirement benefits from the Public Employees' Retirement System (PERS) or various other State retirement systems, and elect to start medical coverage within 60 days of leaving employment. The healthcare OPEB plans allow retirees to participate, as a group, at a rate that does not cover all of the related costs.	
NC	The State of North Carolina administers the North Carolina State Health Plan for Teachers and State Employees, referred to as the State Health Plan, a healthcare plan exclusively for the benefit of employees of the State, the University of North Carolina System, community colleges, and certain other component units. In addition, Local Education Agencies (LEAs), charter schools, and some select local governments that are not part of the financial reporting entity also participate. Retirees are eligible for partial contributory coverage or noncontributory coverage depending on their date of hire and years of credited service.	2017 legislation eliminated retiree medical benefits for employees first hired after January 1, 2021.
ND	The Retiree Health Insurance Credit Fund is a cost-sharing multiple-employer OPEB plan administered by the North Dakota PERS to provide members retiring from a PERS pension plan a credit toward their monthly health insurance premium based upon the member's years of credited service. The benefits are equal to $5.00 for each of the member's years of credited service not to exceed the premium in effect for selected coverage.	
NE	The State administers a single-employer benefit plan, known as the State of Nebraska Retiree Health Insurance Program (Plan), which provides postemployment medical insurance benefits for retirees. State employees who are eligible for retirement and do retire, are provided the opportunity to continue health insurance coverage in a State health insurance plan until they reach age sixty-five or become Medicare eligible. Management of the Plan is governed by the State and administered by the Department of Administrative Services.	
NH	The NHRS administers a cost-sharing multiple employer defined benefit postemployment medical subsidy healthcare plan designated in statute by membership type. The maximum subsidy amounts for qualified retirees not eligible for Medicare the amounts were $375.56 for a single-person plan and $751.12 for a two person plan. For those qualified retirees eligible for Medicare, the amounts were $236.84 for a single-person plan and $473.68 for a two-person plan. There have been no increases in the monthly maximum subsidy amounts payable since July 1, 2007. The OPEB plan is closed to new entrants.	General employees and teachers who retired after 7/1/09, and public safety officers hired on or after 7/1/00 are not eligible for subsidized retiree health care.
NJ	The State of New Jersey pays for the health insurance coverage of all enrolled retired State employees and members of the Teachers' Pension and Annuity Fund (regardless of age) whose pensions are based upon 25 years or more of credited service or disability retirement regardless of years of service.	
NM	The New Mexico Retiree Health Care Authority (RHCA) was formed to administer the retiree health care fund which was created to provide comprehensive group health insurance coverage for individuals (and their spouses, dependents, and surviving spouses) who have retired or will retire from public service in New Mexico. Eligible retirees are retirees who make contributions to the fund for at least five years prior to retirement and whose eligible employer during that period made contributions as a participant in the Plan on the person's behalf. Each participating retiree pays a monthly premium according to a service-based subsidy rate schedule.	Those who retire before 1/1/21 receive 100 percent of the subsidy (one-half of the total cost) at 20 years of service; those who retire on or after 1/1/21 receive 100 percent of the subsidy at 25 years of service.
NV	Officers and employees of the State of Nevada and of certain other participating local governmental agencies within the State of Nevada are provided with OPEB through the Nevada Public Employees' Benefits Program (PEBP), a multiple-employer cost-sharing defined postemployment benefit plan. The "base" subsidy rates are set by PEBP and approved by the Legislature and vary depending on the number of dependents and the medical plan selected. These subsidy rates are subtracted from the premium to arrive at the "participant premium". The "years of service" subsidy rates are then used to adjust the "participant premium" based on years of service.	Those hired on or after 1/1/12, or hired on or after 1/1/10 who retire with less than 15 years of continuous service, are not eligible for subsidized retiree health care.

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NY	The New York State Health Insurance Program (NYSHIP) was established by the State Legislature in 1957 to provide health insurance to New York State employees, retirees, and their eligible dependents. At present, there are approximately 304 New York State agencies, 98 quasi-public agencies, and 809 local governments in NYSHIP. Substantially all of the State's employees may become eligible for postemployment benefits if they reach retirement age while working for the State. A retiree is generally required to pay on a monthly basis either 12 percent or 27 percent of the health insurance premium for enrollee coverage, or either 27 percent or 31 percent of the healthcare insurance premium for dependent coverage, which is reduced by the amount of sick leave credits available at the time of retirement factored by the employee's retirement age.	
OH	The Ohio Public Employees' Retirement System (OPERS) maintains a cost-sharing, multiple-employer postemployment health care plan for the Traditional Plan and Combined Plan, which includes hospitalization, medical expenses and prescription drugs for non-Medicare retirees and eligible dependents. To qualify for postemployment health care coverage, age-and-service retirees under the Traditional and Combined plans must have 20 years of qualifying Ohio service credit with a minimum age of 60, or 30 or more years of qualifying service at any age. Ohio School Employees Retirement System (SERS) provides retiree health care benefits to those with at least 10 years of qualified service at retirement, as well as those on disability retirement, and their spouses and dependents. Premium subsidies are provided to those with at least 20 years of service credit or on disability retirement. The Ohio State Teachers' Retirement System (STRS) offers a cost-sharing, multiple employer health care plan which provides access to health care to eligible retirees who participate in the Defined Benefit Plan or Combined Plan. Benefits include hospitalization, physician's fees, prescription drugs and reimbursement of a portion of the monthly Medicare Part B premiums. State law gives the STRS board discretionary authority over how much, if any, of associated health care costs are absorbed by the health care plan. All benefit recipients of the health care plan, for the most recent year, pay a portion of the health care costs in the form of a monthly premium. The Ohio Police & Fire Pension Fund administers health benefits for all pension benefit recipients. Members who enroll in an Ohio Police & Fire health care plan are responsible for paying all or part of the cost of health care coverage through a monthly premium deduction, copayments/coinsurance, and deductibles. Member premiums are a percentage of the OP&F full cost premiums. The applicable percentage is 25 percent for members, 50 percent for spouses and children of members who retired on or before July 24, 1986, and 75 percent for spouses and children of members who retired after July 24, 1986.	Effective 7/1/16, Medicare Eligible Ohio PERS retirees must select coverage through the OPERS Medicare Connector and may receive an allowance to offset a portion of the monthly premium to retirees and eligible dependents. The allowance is deposited into a Health Retirement Account to be used to reimburse eligible health care expenses. Effective 1/1/19, Medicare Part B premium reimbursements were discontinued for Ohio STRS retirees. Effective 1/1/19 the Ohio Police & Fire Pension fund will no longer sponsor group retiree health insurance coverage, and will instead provide retirees with a fixed monthly stipend that they may use to purchase private health insurance.
OK	The Employees Group Insurance Division (EGID), a division of the Office of Management and Enterprise Services (OMES) manages a legal trust which provides group health, life, dental and disability benefits for active employees and retirees (should they so elect) of state agencies, school districts and other governmental units. EGID, as a multi-line insurance provider, receives OPEB payments on behalf of retiree's from several of the state's pension plans and the Department of Wildlife Conservation. The state has one department of the Primary Government that makes payments to EGID on behalf of retirees, the Department of Wildlife Conservation. The Department provides $150 per month as established by its board toward health insurance coverage should retirees so elect at retirement. The state has two cost-sharing multi-employer retirement systems that make payments to EGID on behalf of retirees should a retiree so elect. These plans are the Oklahoma Public Employees Retirement System (OPERS) and the Teachers Retirement System of Oklahoma (TRS). The state also has two single employer retirement systems that make payments to EGID on behalf of retirees, the Uniform Retirement System for Judges and Justices (URSJJ) and the Oklahoma Law Enforcement Retirement System (OLERS). As mandated by statute, these plans pay between $100 and $105 per month to EGID on behalf of retirees if so elected.	

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OR	The Public Employees Retirement System (PERS) Board contracts for health insurance coverage on behalf of members of PERS. Eligible retirees pay their own age-adjusted premiums. To help retirees defray the cost of these premiums, PERS also administers two separate defined benefit other postemployment benefit (OPEB) plans: the Retirement Health Insurance Account (RHIA) and the Retiree Health Insurance Premium Account (RHIPA). The RHIA provides a payment of up to $60 toward the monthly cost of health insurance for eligible plan members (eligible plan members are those with at least 8 years of PERS service at the time of retirement, and those currently receiving Medicare parts A and B coverage). The RHIPA provides pre-Medicare retirees with a payment of the average difference between the health insurance premiums paid by retired state employees under contracts entered into by the PERS Board and health insurance premiums paid by state employees who are not retired. Both RHIA and RHIPA are closed to employees hired on or after August 29, 2003, who had not established membership prior to that date. The State participates in a defined benefit postemployment healthcare plan administered by the Public Employees Benefit Board (PEBB). This plan offers healthcare assistance to eligible retired employees and their beneficiaries. The PEBB plan's implicit rate subsidy, if not fully funded, represents an obligation of the State, the net OPEB obligation.	RHIA & RHIPA closed to employees hired on or after 8/29/03.
PA	The Commonwealth established and sponsors two primary plans which provide postemployment benefits other than pensions (OPEB). These two plans are the Retired Employees Health Program (REHP) and the Retired PA State Police Program (RPSPP) and both are established as trust equivalent arrangements. These two plans are administered by the Pennsylvania Employees Benefit Trust Fund (PEBTF). The Pennsylvania Public School Employees' Retirement System administers the Premium Assistance Program that provides a health insurance premium subsidy of up to $100 per month for those retirees who qualify. For employees who retired after June 30, 2005 and before July 1, 2007 the retiree contribution is set at 1% of employee's final annual salary. Most Commonwealth employees who retired on or after July 1, 2007 but before July 1, 2011 are currently required to pay retiree contributions of 3% of either their final annual salary or final average salary, whichever is less. Most employees who retire on or after July 1, 2011 are currently required to pay retiree contributions of 3% of their final average salary. Upon enrollment in Medicare, Commonwealth employees who are currently paying 3% will pay retiree contributions of 1.5% of either their final annual salary or final average salary, whichever applies. RPSPP plan members are not required to make contributions.	Those hired between 7/1/05 and 6/30/07 are required to make contributions equal to 1 percent of their final annual salary. Those hired between 7/1/07 and 6/30/11 pay the lesser of 3 percent of their final annual salary or final average salary. Those hired on or after 7/1/11 pay 3% of their final average salary.
RI	The State provides other postemployment benefits (OPEB) for its employees through multiple benefit plans. For State employees who retired on or before September 30, 2008, the State provides two types of subsidies for health care benefits. The Tier I subsidy applies to non-Medicare eligible plans and provides that the State will pay the portion of the cost of retiree health care for the retiree and any dependents above the active group rate. The retiree pays the active group monthly rate and the State pays the difference between the active group rate and the early retiree rate. This subsidy is not based on years of service and ends at age 65. In addition to the Tier I benefits, the State pays a portion of the cost of retiree health care above the Tier I costs for certain retirees meeting eligibility requirements based upon the age and service of the retiree, which is referred to as the Tier II benefit. State employees retiring on or before September 30, 2008 who are under 60 year of age at retirement may retire with a minimum of 28 years of service and must pay 0% - 10% of retiree health care costs, as determined by the number of years of each employee's service. Employees retiring on or before September 30, 2008 who are 60 years of age or over at retirement may retire with a minimum of 10 years of service and must pay 0% - 50% of retiree health care costs, as determined by the number of years of each employee's service.	State employees and teachers retiring before 10/1/08 pay the active group premium rate and receive an additional employer subsidy based on age and years of service. State employees retiring on or after 10/1/08 receive no additional employer subsidy. Teachers retiring on or after 10/1/08 receive no subsidized retiree health care.

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	Teachers who elect to participate in the System and retired on or before September 30, 2008, receive the Tier I subsidy but no other State cost sharing. For all teachers retiring on or after October 1, 2008, the Tier I subsidy ends and there is no other cost sharing by the State. Retired teachers may purchase coverage through the System at the actual cost for retirees.	
SC	The State provides postemployment health and dental and long-term disability benefits through the South Carolina Retiree Health Insurance Trust Fund (SCRHITF), which is administered by the Insurance Benefits Division of the South Carolina Public Employee Benefit Authority (PEBA). Generally, retirees are eligible for the health and dental benefits if they have established at least ten years of retirement service credit. For new hires on May 2, 2008 and after, retirees are eligible for benefits if they have established twenty-five years of service for 100% employer funding and fifteen through twenty-four years of service for 50% employer funding.	Those hired before 5/2/08 are eligible for subsidized benefits with 10 years of service. Those hired on or after 5/2/08 receive a state subsidy based on years of service at retirement: 1) 100% with at least 25 years of service 2) 50% with at least 15 but fewer than 25 years of service 3) 0% with fewer than 15 years of service
SD	In the spring of 2014, the State adjusted the retiree health plan premiums for the eligible retirees between the ages of 55 and 65 (pre 65). These adjusted premiums are projected to be fully supportive of the projected claim and fee costs of the pre 65 retiree health plan program thus eliminating the blended premium between the pre 65 retirees and the active employees. This premium change assured that the State would not provide a direct or indirect premium subsidy and therefore eliminated the implicit rate subsidy. As a result, the State has eliminated its entire other postemployment benefit liability	Adjusted premium rates for pre-65 retirees were phased in from between 7/1/14 and 1/1/15, after which point subsidized retiree healthcare was eliminated for all State employees.
TN	The Tennessee Department of Finance and Administration administers the Teacher Group OPEB Plan (TGOP) as well as the Tennessee OPEB Plan (TNP). Both plans are considered to be multiple-employer defined benefit plans that are used to provide postemployment benefits other than pensions. However, for accounting purposes, these plans will be treated as single-employer plans. All eligible pre-65 retired teachers and disability participants of local education agencies, who chose coverage, participate in the TGOP. All eligible post-65 retired teachers and disability participants of local education agencies, who choose coverage, participate in the TNP. These plans are closed to the employees of all participating employers that were hired on or after July 1, 2015. Retired plan members in the TGOP receive the same plan benefits, as active employees, at a blended premium rate that considers the cost of active and retired employees. This creates an implicit subsidy for the retirees. The retirees cost is then directly subsidized, by the employers, based on years of service. Therefore, retirees with 30 years of service are subsidized 80 percent; 20 but less than 30 years, 70 percent; and less than 20 years, 60 percent. The state contributes to the premiums of state and component unit retirees in the TNP, as well as, to the premiums of eligible retirees of local education agencies based on years of service. Therefore, retirees with 30 years of service receive $50 per month; 20 but less than 30 years, $37.50; and 15 but less than 20 years, $25.	The TGOP and TNP are closed to the employees of all participating employers hired on or after 7/1/15.
TX	The Employees' Retirement System (ERS) of Texas administers the State Retiree Health Plan (SRHP) is a cost-sharing multiple-employer postemployment health care plan with a special funding situation. This plan covers retired employees of the State, and other entities as specified by the State legislature. Current retirees and future retirees with 5+ years of service on September 1, 2014 receive a 100% state contribution. Future retirees with fewer than 5 years of service on September 1, 2014 receive a state contribution of 50% (if less than 15 years of service at retirement), 75% (if at least 15 but less than 20 years of service at retirement), or 100% (if at least 20 years of service at retirement. Retirees pay any premium over and above the employer contribution. The employer does not contribute toward dental or optional life insurance. Surviving spouses and their dependents do not receive any employer contribution. The Teacher Retirement System (TRS) of Texas administers TRS-Care, a health benefits program for eligible retired public education employees and their eligible dependents that was established in 1985. TRS-Care provides a basic health insurance coverage at no cost to all retirees from public schools, charter schools, regional	State employees with 5+ years of service as of 9/1/14 receive a 100% state premium contribution. State employees with fewer than 5 years of service as of 9/1/14 will receive a state contribution based on years of service at retirement: 1) 50% state contribution with at least 15 years of service 2) 75% state contribution with at least 15 but fewer than 20 years

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	education service centers and other educational districts who are members of the TRS Pension. Eligible non-Medicare retirees and their dependents may pay premiums to participate in one of the two standard insurance plans with more comprehensive benefits. Eligible Medicare retirees and dependents may pay premiums to participate in one of the two Medicare health plans. The premium rates for the optional health insurance are based on years of service of the member.	3) 100% state contribution with at least 20 years
UT	At the option of individual state agencies, employees may participate in the State Employee OPEB Plan, a single-employer defined benefit healthcare plan. Only state employees who are entitled to receive retirement benefits are eligible to receive postemployment health and life insurance benefits, and in some situations dental coverage, from the State Employee OPEB Plan. Upon retirement, employees receive up to 25 percent of the value of their unused accumulated sick leave, earned prior to January 1, 2006, as a mandatory employer contribution into a 401(k) account. Employees may exchange eight hours of their remaining unused accumulated sick leave for one month of paid health and life insurance coverage up to age 65. After age 65, employees may use the balance of unused accumulated sick leave, earned prior to 1/1/06, to exchange for spouse health insurance to age 65, or Medicare supplemental insurance for employee or spouse. For retirees who participate in the State Employee OPEB Plan, health insurance premiums are paid 100 percent by the State for individuals who retired before 7/1/00. Individuals retiring thereafter are required to contribute specified amounts monthly, ranging from 0 to 31.62 percent, toward the cost of health insurance premiums. The State Employee OPEB Plan is closed to new entrants since it is only applicable to employees eligible for retirement who have sick leave earned prior to 1/1/06, or employees of the Utah State Board of Education hired before 7/1/12.	No subsidized retiree health care for employees who do not have sick leave earned prior to 1/1/06, or employees of the Utah State Board of Education hired on or after 7/1/12.
VA	The Commonwealth provides a Pre-Medicare Retiree Healthcare (PMRH) plan established by Title 2.2 of the Code of Virginia for retirees who are not yet eligible to participate in Medicare. For a retiree to participate in the PMRH plan, the participant must be eligible for a monthly annuity from the VRS or a periodic benefit from one of the qualified Optional Retirement Plan (ORP) vendors. The employer does not pay a portion of the retirees' healthcare premium; however, since both active employees and retirees are included in the same pool for purposes of determining health insurance rates, this generally results in a higher rate for active employees. Therefore, the employer effectively subsidizes the costs of the participating retirees' healthcare through payment of the employer's portion of the premiums for active employees. The Retiree Health Insurance Credit Program is administered by the Virginia Retirement System and is composed of a single-employer plan for state employees; a cost-sharing multiple-employer plan for teachers; three cost-sharing, multiple employer plans for constitutional officers, social services employees and registrars; and an agent, multiple-employer plan for political subdivisions electing coverage. The Retiree Health Insurance Credit (RHIC) for state employees provides benefits for retired state employees, state police officers, other state law enforcement, correctional officers, and judges who have at least 15 years of service credit under the retirement plans. The program provides a credit reimbursement of $4 per month per year of service credit against the monthly health insurance premiums of eligible retirees. There is no cap on the credit. The health insurance credit plan for general registrars, constitutional officers, and their employees as well as local social service employees (RHIC Non-State) provides $1.50 per month per year of service with a maximum monthly credit of $45.	
VT	The Vermont State Postemployment Benefits Trust Fund (VSPB) (3 V.S.A. 479a), a single employer defined benefit OPEB plan, was established in fiscal year 2007 as an irrevocable trust fund for the purpose of accumulating and providing reserves to support retiree postemployment benefits other than pension benefits for members of the Vermont State Retirement System (VSRS). The VSPB is managed by the VSRS Retirement Board. Employees hired prior to 7/1/08 pay 20% of the cost of the premium. Employees hired after 6/30/08 pay a tiered retiree health care premium amount based on completed years of service. The tiered rate paid will range from 100% of the premium cost for retirees with less than 10 years of service to 20% of the premium cost for retirees with 20 or more years of service. The Retired Teachers' Health and Medical Benefit Fund (RTHMB) (16 V.S.A. 1944b), a cost-sharing multiple employer defined benefit OPEB plan with a special funding situation, was created by the legislature on 7/1/14, to explicitly appropriate State contributions to the fund for health care expenses separate from the	State employees hired before 7/1/08 pay 20% of the premium cost. State employees hired on or after 7/1/08 pay a tiered premium rate, ranging from 20%-100%, based on years of service.

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	State's contribution to the State Teachers' Retirement System (STRS) pension trust fund. If the member has a minimum of 10 years of creditable service at the time of retirement, the system picks up 80% of the retiree's premium only, based on the cost of the "standard plan" as defined by statute. The retiree must pick up the full cost of the premium for all covered dependents.	
WA	The Public Employees' Benefits Board (PEBB) is authorized to design benefits and determine the terms and conditions of employee and retired employee participation and coverage. Employers participating in the PEBB plan for the state include general government agencies, higher education institutions, and component units. Retirees in the non-Medicare risk pool receive an implicit subsidy. Medicare retirees receive an explicit subsidy in the form of reduced premiums. In calendar year 2018 the explicit subsidy was up to $150 per member per month. This will increase in calendar year 2019 to $168 per member per month.	
WI	The State Retiree Health Insurance program provides postemployment health insurance coverage to all eligible retired employees of the State, the University of Wisconsin, University of Wisconsin Hospital and Clinics Authority, Wisconsin Housing and Economic Development Authority and Wisconsin Economic Development Corporation. The employers do not directly pay any portion of the premium for participating retirees. However, because retirees pay the same premium rate set for active employees, an implicit rate subsidy exists for employers.	
WV	The West Virginia Retiree Health Benefits Trust (RHBT) administers and provides medical and prescription drug benefits to certain retired members receiving pension benefits under the PERS, TRS, TDCRS, TIAA-CREF, Plan G, Troopers Plan A or Troopers Plan B pension systems, as administered by the WV CPRB. Healthcare benefits are administered by the West Virginia Public Employees Insurance Agency (PEIA). Members hired on or after July 1, 2010, pay retiree healthcare contributions with no sponsor provided implicit or explicit subsidy. Members hired before 7/1/10, pay retiree healthcare contributions that are reduced by a sponsor subsidy which depends on the member's years of service at retirement.	Those hired on or after 7/1/10 are not eligible for subsidized retiree health care.
WY	Eligible employees of the State are provided with OPEB through the State of Wyoming Group Insurance Retiree Health Plan (Plan) – a cost-sharing multiple-employer defined benefit OPEB plan administered by the State of Wyoming Employee Group Insurance (EGI). Any employee of a participating employer is eligible for retiree coverage under the Plan at premium rates established by EGI, provided that: the employee had coverage in effect under the Plan for at least one year prior to retirement; and the employee is eligible to receive a retirement benefit under the Wyoming Retirement System or TIAA CREF and either has attained 50/4 or any/20.	