



















































## Schedule B – Summary of Main Benefit Provisions (continued)

### COVERED MEMBER RETIREE MEDICAL PLAN CONTRIBUTIONS:

**Under Age 65 Retiree Shared Responsibility Contribution:** Effective July 1, 2010, retirees under the age of 65 began a three-year phase-in of the Shared Responsibility Contribution. This contribution reduces the applicable amount of the full contribution provided by the System to retirees, by adjusting the Shared Responsibility Contribution amount by 100% less the appropriate percentage from the Retiree Percentage Contribution table below. Effective July 1, 2012, the full Shared Responsibility Contribution equals the Standard Medicare Part B premium paid by retirees ages 65 and older.

Monthly Under Age 65 Shared Responsibility Contribution Timeline			
Effective Date	Medicare Part B Monthly Cost	Formula	Shared Responsibility Contribution
July 1, 2010	\$110.50	(1/3 x \$110.50)	\$ 37.00
January 1, 2011	115.40	(1/3 x 115.40)	39.00
July 1, 2011	115.40	(2/3 x 115.40)	77.00
January 1, 2012	99.90	(2/3 x 99.90)	66.00
July 1, 2012	99.90	99.90	99.90
January 1, 2013	104.90	104.90	104.90
January 1, 2014	104.90	104.90	104.90
January 1, 2015	104.90	104.90	104.90
January 1, 2016	121.80	121.80	121.80
January 1, 2017	134.00	134.00	134.00
January 1, 2018	134.00	134.00	134.00

**Retiree Years of Service Percentage Contribution:** Retirees contribute the following percentages based on years of service at retirement, which are then applied to the Retiree Contribution Rate Basis:

Retiree Percentage Contribution*				
Year of Service	Entered System Before 7/1/2002		Entered System After 6/30/2002 and Before 7/1/2008	Entered System After 6/30/2008
	Age 65 or Older and Covered Before 1/1/2005	Age 65 After or Covered After 12/31/2004		
5 – 9.99	30%	75%	90%	Not Eligible
10 – 14.99	20	50	75	Not Eligible
15 – 19.99	10	25	55	55%
20 – 24.99	0	0	35	35
25 – 25.99	0	0	10	10
26 – 26.99	0	0	5	5
27 or more	0	0	0	0

\*0% for disabled retirees that retired prior to 1/1/2002





## Schedule B – Summary of Main Benefit Provisions (continued)

### COVERED MEMBER RETIREE MEDICAL PLAN CONTRIBUTIONS (CONTINUED):

Monthly Retiree Contribution Rate Basis Effective January 1, 2018					
Tier Elected	Under Age 65 (KEHP)				Ages-65 and Older (MEHP)
	LivingWell CDHP	LivingWell PPO	Standard PPO	Standard CDHP	
Single	\$ 660.04	\$ 646.96	\$ 635.46	\$ 656.60	\$258.00
Parent Plus	851.84	802.26	847.99	878.24	n/a
Couple	1,029.02	1,060.74	1,197.60	1,189.96	n/a
Family	1,131.64	1,105.34	1,314.66	1,303.24	n/a
Family C-R	738.64	719.12	743.42	771.84	n/a

**Under Age 65 Retiree Plan Cost Contribution:** An additional contribution according to the table below is required to be paid by retirees under the age of 65 based upon the plan elected:

Monthly Under Age 65 Plan Cost Contribution* Effective January 1, 2018				
Tier Elected	LivingWell CDHP	LivingWell PPO	Standard PPO	Standard CDHP
Single	\$ 49.42	\$ 82.38	\$ 49.92	\$ 26.20
Parent Plus	126.66	234.82	127.92	62.40
Couple	296.62	528.36	299.58	260.06
Family	348.12	662.26	351.60	312.06
Family C-R	80.32	157.56	81.12	29.10

\* Does not include the additional contribution required to be paid by retirees under the age of 65 who use tobacco (\$40 for Single or Family Cross-Reference, and \$80 for Parent Plus, Couple or Family). Also, this does not include the additional contribution required to be paid by retirees under the age of 65 who do not complete their LivingWell Promise, which is an additional \$40 per month for all levels of coverage—single, parent +, couple, and family. Approximately 600 retirees did not complete their LivingWell Promise for 2017.



## Schedule B – Summary of Main Benefit Provisions (continued)

### COVERED MEMBER MEDICAL PLAN CONTRIBUTIONS (CONTINUED):

**Spouse Contributions:** 100% of the full cost for non-Medicare eligible dependents is paid through a combination of payments from beneficiaries and the State. Spouses of current post-65 retirees and surviving spouses of deceased retirees with a date of death on or after July 1, 2002 pay 100% of the full contribution. Spouses of active members who died while eligible to retire prior to July 1, 2002, are provided the same subsidy by the System that would have been provided to the retiree for the lifetime of the spouse, or until remarriage. Spouses of active members who die while eligible to retire on or after July 1, 2002 or later pay 100% of the full contribution.

**Survivors:** Spouses of employees who die in service while eligible to retire, as well as survivors of service and disabled retirees, are eligible for Retiree Medical Plan coverage if elected within 30 days of the employee's/retiree's death with no future remarriage. Otherwise, survivor is not eligible for Retiree Medical Plan coverage.

**Spousal Shared Risk Waiver for MEHP:** Beginning in 2013, eligible spouses who waive the MEHP coverage, will no longer have the opportunity to enroll during any annual MEHP open enrollment so most spousal waivers on the MEHP are now permanent waivers unless a KTRS specific qualifying event is met. This does not apply to the KEHP. This MEHP eligibility rule became necessary to mitigate spousal adverse selection with zero premium Medicare Advantage plans on the individual and open market.

Monthly Surviving Spouse Contribution Effective January 1, 2018					
Tier Elected by Surviving Spouse	Under Age 65 (KEHP)				Ages 65 and Older (MEHP)
	LivingWell CDHP	LivingWell PPO	Standard PPO	Standard CDHP	
Single	\$716.90	\$736.78	\$692.82	\$690.24	\$258.00
Parent Plus	985.94	1,044.52	983.35	948.08	n/a

**SYSTEM RETIREE MEDICAL PLAN CONTRIBUTIONS:** The System Contribution Rate Basis is determined annually by the System; and the full cost is projected based on historical claims data. For retirees, the following percentages are based on years of service at retirement and are then applied to the System Contribution Rate Basis:

Percentage of System Contribution Rate Provided to Retirees*				
Year of Service	Entered System Before 7/1/2002		Entered System After 6/30/2002 and Before 7/1/2008	Entered System After 6/30/2008
	Age 65 or Older and Covered Before 1/1/2005	Age 65 After or Covered After 12/31/2004		
5 – 9.99	70%	25%	10%	Not Eligible
10 – 14.99	80	50	25	Not Eligible
15 – 19.99	90	75	45	45%
20 – 24.99	100	100	65	65
25 – 25.99	100	100	90	90
26 – 26.99	100	100	95	95
27 or more	100	100	100	100

\*100% for disabled retirees that retired prior to 1/1/2002



## Schedule B – Summary of Main Benefit Provisions (continued)

### SYSTEM RETIREE MEDICAL PLAN CONTRIBUTIONS:

Monthly System Contribution Rate Basis Effective January 1, 2018					
Tier Elected	Under Age 65 (KEHP)*				Ages-65 and Older (MEHP)
	LivingWell CDHP	LivingWell PPO	Standard PPO	Standard CDHP	
Single	\$ 660.04	\$ 646.96	\$ 635.46	\$ 656.60	\$258.00
Parent Plus	851.84	802.26	847.99	878.24	n/a
Couple	1,029.02	1,060.74	1,197.60	1,189.96	n/a
Family	1,131.64	1,105.34	1,314.66	1,303.24	n/a
Family C-R	738.64	719.12	743.42	771.84	n/a

*\*Irrespective of a participating retiree's service, an additional \$7.44 per month is paid by the System to the Department of Employee Insurance (DEI) for KEHP coverage.*

**ACTIVE MEMBER RETIREE MEDICAL PLAN CONTRIBUTIONS:** Actively employed members make payroll contributions to the Medical Insurance Fund based upon the following schedule:

Active Member Percentage of Payroll Contribution Made to Medical Insurance Fund

Active Member Percentage of Payroll Contribution Made to Medical Insurance Fund					
University Employees		School District Employees (Non-Federal)		Other Employees	
Hired Before 7/1/2008	Hired On or After 7/1/2008	Hired Before 7/1/2008	Hired On or After 7/1/2008	Hired Before 7/1/2008	Hired On or After 7/1/2008
2.775	2.775	3.750	3.750	3.750	3.750



## **Schedule B – Summary of Main Benefit Provisions (continued)**

### **LIFE INSURANCE PLAN BENEFITS:**

(1) Effective July 1, 2000, the Teachers' Retirement System shall:

- (a) Provide a life insurance benefit in a minimum amount of five thousand dollars (\$5,000) for its members who are retired for service or disability. This life insurance benefit shall be payable upon the death of a member retired for service or disability to the member's estate or to a party designated by the member on a form prescribed by the retirement system; and
- (b) Provide a life insurance benefit in a minimum amount of two thousand dollars (\$2,000) for its active contributing members. This life insurance benefit shall be payable upon the death of an active contributing member to the member's estate or to a party designated by the member on a form prescribed by the retirement system.

**Note:** Members employed on a substitute or part-time basis and working at least 69% of a full contract year in a single fiscal year will be eligible for a life insurance benefit for the balance of the fiscal year or the immediately succeeding fiscal year under certain conditions. For non-vested members employed on a substitute or part-time basis, the life insurance benefit is provided if death occurs as the result of a physical injury on the job. For vested members employed on a substitute or part-time basis, death does not have to be the result of a physical injury on the job for life insurance benefits to be provided.



## Schedule C – Statement of Actuarial Assumptions and Methods

The rates of retirement, disability, mortality, termination, salary increases, and rates of future benefit participation used in the valuation were selected based on the actuarial experience study prepared as of June 30, 2015, submitted to and adopted by the Board on September 19, 2016. The health care cost trend rates, and expected plan costs were determined by the actuary based on recent experience.

VALUATION DATE: June 30, 2017

DISCOUNT RATE: 8.0% per annum, compounded annually for the Medical Insurance Fund  
7.5% per annum, compounded annually for the Life Insurance Fund

HEALTH CARE COST TREND RATES: Following is a chart detailing health care trend assumptions.

Fiscal Year Ended	Annual Trend Rate		
	Medicare Part B	Under Age 65	Ages 65 and Older
2018	0.00%	7.75%	5.75%
2019	1.87	7.00	5.50
2020	4.29	6.50	5.25
2021	4.39	6.00	5.00
2022	4.88	5.50	5.00
2023	5.68	5.25	5.00
2024	5.19	5.00	5.00
2025	6.06	5.00	5.00
2026	6.49	5.00	5.00
2027	5.62	5.00	5.00
2028	5.37	5.00	5.00
2029	5.12	5.00	5.00
2030 and beyond	5.00	5.00	5.00

AGE RELATED MORBIDITY: For retirees ages 65 and older, per capita health care costs are adjusted to reflect expected health care cost changes related to age. The increase to the net incurred health care claims is assumed to be:

Participant Age	Annual Increase
65 – 69	3.0%
70 – 74	2.5
75 – 79	2.0
80 – 84	1.0
85 - 89	0.5
90 and over	0.0



## **Schedule C – Statement of Actuarial Assumptions and Methods (continued)**

For the retiree health care liabilities of those under age 65, the current premium charged by the Kentucky Employees' Health Plan (KEHP) is used as the base cost and is projected forward using the health care trend assumption. No implicit rate subsidy is calculated or recognized as the implicit rate subsidy is deemed the responsibility of the KEHP. Under Actuarial Standard of Practice No. 6 (ASOP No. 6), aging subsidies (or implicit rate subsidies) should be recognized, as the differences in health care utilization and cost due to age have been demonstrated and well quantified.

The impact of aging on a valuation's results can be as significant as the use of mortality, trend, and discounting. It has been the long-standing position that the responsibility for compliance with GASB Statement No. 43, when it relates to KEHP implicit subsidies, rests with KEHP, not the System, as the System has no operational authority over KEHP. As such, KEHP implicit subsidies are excluded from the OPEB valuation process of the Retiree Medical Plan. As GASB 74 and 75 prohibit such a deviation from ASOP No. 6, additional consideration to the current treatment of KEHP implicit rate subsidies may be needed in the future. The estimated impact of KEHP implicit subsidies to the actuarial accrued liability is an increase of \$687,878,632.



## Schedule C – Statement of Actuarial Assumptions and Methods (continued)

RETIREE MEDICAL PLAN COSTS: Assumed per capita health care costs were based on past experience and trended based on the assumptions. Following are charts detailing retiree per capita assumptions. These amounts include medical, drug, and administrative costs and represent the amount that the System pays as the full contribution amount. An additional \$7.44 per month is paid to the Department of Employee Insurance (DEI) and is not included in the under age 65 costs listed below. For retirees ages 65 and older, the average costs shown are normalized to age 65 and then age adjusted in calculating liabilities.

Monthly Under Age 65 (KEHP) Full Costs as of January 1, 2018				
Tier Elected	LivingWell CDHP	LivingWell PPO	Standard PPO	Standard CDHP
Single	\$ 709.46	\$ 729.34	\$ 685.38	\$ 682.80
Parent Plus	978.50	1,037.08	975.91	940.64
Couple	1,325.64	1,589.10	1,497.18	1,450.02
Family	1,479.76	1,767.60	1,666.26	1,615.30
Family C-R	818.96	876.68	824.54	800.94

Average Monthly System Full Costs and Contributions			
Year	Under Age-65 (KEHP) Contributions	Ages 65 and Older (MEHP) Full Costs	Ages 65 and Older (MEHP) Contributions
CY 2008	484	278	278
CY 2009	545	301 <sup>1</sup>	301
CY 2010	594	373 <sup>1</sup>	373
CY 2011	626	289 <sup>1</sup>	289
CY 2012	622	270 <sup>2</sup>	270
CY 2013	635	294 <sup>2</sup>	294
CY 2014	679	290 <sup>2</sup>	290
CY 2015	669	240 <sup>2</sup>	240
CY 2016	681	260 <sup>2</sup>	260
CY 2017	680	252 <sup>2</sup>	252
CY 2018	688	258 <sup>2</sup>	258

<sup>1</sup> Under GASB 45, cost reductions for the amount of the Medicare Part D Retiree Drug Subsidy cannot be taken into account in the gross cost calculations.

<sup>2</sup> 2,257 current, Medicare-eligible benefit recipients have been identified by the client to be ineligible for premium-free Medicare Part A benefits. For these individuals, the full cost of coverage is, on average, \$575 per month. It is assumed 9% of current retirees under the age of 65 who were hired prior to 4/1/1986 will be ineligible for premium-free Medicare Part A benefits upon reaching Medicare eligibility (age 65) and 0% of these retirees will cover a spouse. All active members are assumed to have begun contributing to Medicare as of 4/1/1986 and are assumed eligible for premium-free Medicare Part A benefits.



### Schedule C – Statement of Actuarial Assumptions and Methods (continued)

CURRENT RETIREE MEDICAL PLAN PARTICIPATION: Actual census data and current plan elections (including waivers) provided by the System were used for those retirees currently participating in the Retiree Medical Plan. Current participants are assumed to maintain their current Retiree Medical Plan coverage until they are no longer eligible.

ANTICIPATED RETIREE MEDICAL PLAN PARTICIPATION: The assumed annual rates of health care plan participation for future retirees are as follows:

Years of Service	Member Participation		
	Entered System Before 7/1/2002	Entered System After 6/30/2002 and Before 7/1/2008	Entered System After 6/30/2008
5-9.99	20%	20%	Not Eligible
10-14.99	49	20	Not Eligible
15-19.99	70	41	41%
20-24.99	91	61	61
25-25.99	91	76	76
26-26.99	91	84	84
27 or more	91	91	91

ANTICIPATED RETIREE MEDICAL PLAN ELECTIONS: The assumed rates of plan election for future retirees participating in the KEHP plans are provided in the following table. As the assumed plan election rates are estimates and actual results may be materially different, this assumption will need to be revised as experience evolves.

LivingWell CDHP	LivingWell PPO	Standard PPO	Standard CDHP
42%	43%	12%	3%

SPOUSE COVERAGE IN RETIREE MEDICAL PLAN: Actual census data and current plan elections were used for MEHP and KEHP covered spouses (including beneficiaries) of current retirees. For spouses of future retirees, 25% of future male retirees are assumed to cover their spouse and 15% of future female retirees are assumed to cover their spouse. Male retirees are assumed to be three years older than their spouse and female retirees are assumed to be one year younger than their spouse.

DISABLED DEPENDENT CHILDREN IN RETIREE MEDICAL PLAN: The liability associated with disabled dependent children was determined to be de minimis and was therefore excluded from this valuation.





## Schedule C – Statement of Actuarial Assumptions and Methods (continued)

WITHDRAWAL ASSUMPTION: Future vested members who terminate employment prior to retirement are assumed to elect to withdraw their contributions based upon their age and service at termination of employment as follows:

Rates of Withdrawal Upon Termination of Employment			
Age at Termination of Employment	Years of Service		
	5 - 10	10 - 15	15+
Under Age 55	20%	15%	10%
Ages 55+	10%	10%	10%

All vested members who terminate employment prior to retirement are assumed to elect to withdraw their contributions prior to receiving a pension benefit based upon their service as follows:

Rates of Withdrawal Prior to Receiving a Pension Benefit			
Years of Service			
5 - 10	10 - 15	15 - 27	27+
25%	15%	10%	25%

All vested members who terminate employment prior to retirement and who are assumed to elect to receive a pension benefit are assumed to begin receiving their benefit at age 60.

PAYROLL GROWTH: 3.50% per annum, compounded annually.

PRICE INFLATION: 3.00% per annum, compounded annually.

**AFFORDABLE CARE ACT (ACA):** The impact of the Affordable Care Act (ACA) was addressed in this valuation. Review of the information currently available did not identify any specific provisions of the ACA that are anticipated to significantly impact results. While the impact of certain provisions such as the excise tax on high-value health insurance plans beginning in 2020 (if applicable), mandated benefits and participation changes due to the individual mandate should be recognized in the determination of liabilities, overall future plan costs and the resulting liabilities are driven by the assumed rate of health care inflation (i.e., trend). The trend assumption forecasts the anticipated increase to initial per capita costs, taking into account health care cost inflation, increases in benefit utilization, government-mandated benefits, and technological advances. Given the uncertainty regarding the ACA's implementation (e.g., the impact of excise tax on high-value health insurance plans, changes in participation resulting from the implementation of state-based health insurance exchanges), continued monitoring of the ACA's impact on the Retiree Medical Plan's liability will be required.

ASSET VALUATION METHOD: Market Value of Assets.



**Schedule C – Statement of Actuarial Assumptions and Methods (continued)**

SEPARATIONS FROM SERVICE: Representative values of the assumed annual rates of salary increases, death, disability, withdrawal, service retirement and early retirement are as follows:

MALES								
Age	Annual Rate of							
	SALARY*	DEATH	DISABILITY	WITHDRAWAL			RETIREMENT	
				Years of Service			Before 27 Years of Service	After 27 Years of Service**
				0 – 4	5 – 9	10+		
20	7.20%	0.019%	0.01%	11.00%				
25	6.40	0.021	0.01	11.00	3.00%			
30	5.40	0.025	0.01	11.00	3.00	3.00%		
35	4.70	0.043	0.04	12.00	3.50	1.40		
40	4.20	0.060	0.09	12.00	4.50	1.40		
45	3.80	0.084	0.20	12.00	4.50	1.30		17.0%
50	3.70	0.119	0.30	14.00	4.50	1.90		17.0
55	3.50	0.202	0.58	15.00	4.50	2.40	5.0%	45.0
60	3.50	0.340	0.75	15.00	4.00	2.40	13.0	35.0
62	3.50	0.419	0.75	15.00	3.80	2.40	15.0	25.0
65	3.50	0.565	0.75	15.00	3.50	2.40	20.0	25.0
70	3.50	0.913	0.75	20.00	0.00	0.00	20.0	20.0
75	3.50	1.556	0.75	20.00	0.00	0.00	100.0	100.0

  

FEMALES								
Age	Annual Rate of							
	SALARY*	DEATH	DISABILITY	WITHDRAWAL			RETIREMENT	
				Years of Service			Before 27 Years of Service	After 27 Years of Service**
				0 – 4	5 – 9	10+		
20	7.20%	0.007%	0.01%	9.00%				
25	6.40	0.008	0.01	9.00	4.00%			
30	5.40	0.010	0.03	12.00	4.00	1.65%		
35	4.70	0.018	0.06	12.00	4.00	1.50		
40	4.20	0.026	0.12	12.00	4.00	1.30		
45	3.80	0.042	0.25	13.00	4.00	1.20		15.0%
50	3.70	0.062	0.44	13.00	5.00	1.50		18.0
55	3.50	0.096	0.65	15.00	5.00	2.00	5.5%	50.0
60	3.50	0.157	0.85	15.00	5.00	2.00	14.0	40.0
62	3.50	0.197	0.85	15.00	4.60	2.00	14.0	40.0
65	3.50	0.287	0.85	15.00	4.00	2.00	22.0	35.0
70	3.50	0.495	0.85	15.00	0.00	0.00	20.0	35.0
75	3.50	0.831	0.85	15.00	0.00	0.00	100.0	100.0

\* Includes wage inflation at 3.5% per annum.

\*\* Plus 7.5% in year when first eligible for unreduced retirement with 27 years of service.



**Schedule C – Statement of Actuarial Assumptions and Methods (continued)**

DEATHS AFTER RETIREMENT: The RP-2000 Combined Mortality Table projected to 2025 using scale BB (set forward two years for males and one year for females) is used for death after service retirement and beneficiaries. The RP-2000 Disabled Mortality Table (set forward two years for males and seven years for females) is used for death after disability retirement. There is a margin for future mortality improvement in the tables used by the System. Based on the results of the most recent experience study adopted by the Board on September 19, 2016, the numbers of expected future deaths are 15-19% less than the actual number of deaths that occurred during the study period for healthy retirees and 13-17% less than expected under the selected table for disabled retirees. Representative values of the assumed annual rates of death after service retirement and after disability retirement are shown below:

Age	Annual Rate of Death After			
	Service Retirement		Disability Retirement	
	Male	Female	Male	Female
45	0.1609%	0.1135%	2.3306%	1.2482%
50	0.2474	0.1718	2.9279	1.5650
55	0.4246	0.2658	3.4400	1.7807
60	0.6985	0.4409	3.5881	2.3164
65	1.1300	0.8100	3.8275	3.1687
70	1.8697	1.3739	4.7566	4.4032
75	3.2147	2.2899	6.3153	6.0857
80	5.5160	3.7551	8.3527	8.4679
85	9.5631	6.3873	10.9122	12.7572
90	17.2787	11.2476	17.2787	19.4718
95	27.1263	18.1190	27.1263	24.2074



## ***Schedule D – Actuarial Cost Method***

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The valuations of the MIF and LIF are prepared on the projected benefit basis, which is used to determine the present value of each member's expected benefit payable at retirement, disability or death. The calculations are based on the member's age, years of service, sex, compensation, expected future salary increases, and an assumed future investment rate of return. The calculations consider the probability of a member's death or termination of employment prior to becoming eligible for a benefit and the probability of the member terminating with a service, disability, or survivor's benefit. The present value of the expected benefits payable to active members is added to the present value of the expected future payments to current benefit recipients to obtain the present value of all expected benefits payable to the present group of members and survivors.

The employer contributions required to support the benefits of the MIF and LIF are determined following a level funding approach, and consist of a normal contribution and an accrued liability contribution.

The normal contribution is determined using the "entry age normal" method. Under this method, a calculation is made to determine the uniform and constant percentage rate of employer contribution which, if applied to the compensation of the average new member during the entire period of his anticipated covered service, would be required in addition to the contributions of the member, if applicable, to meet the cost of all benefits payable on his behalf.

The unfunded accrued liability is determined by subtracting the present value of prospective employer normal contributions and member contributions, together with the current actuarial value of assets held, from the present value of expected benefits to be paid from the MIF and LIF.