

145-2-18

Service credit in the traditional pension plan for participation in combined plan or member-directed plan.

- (A) This rule amplifies section 145.814 of the Revised Code and sections 2.03, 2.04, and 6.01 of the combined and member-directed plan documents.
- (B) For each member participating in the traditional pension plan who elects under division (D) of section 145.814 of the Revised Code, the public employees retirement system shall prepare a statement of cost for service credit to be purchased in the traditional pension plan based on participation in the combined plan or member-directed plan, as appropriate, at the request of an eligible member. An actuary employed by the public employees retirement board shall determine the additional liability, as defined in section 145.814 of the Revised Code, as described in rule 145-2-02 of the Administrative Code.
- (C) An eligible member shall purchase the service credit only by a lump-sum payment of the amount on deposit, as defined in rule 145-1-35 of the Administrative Code, except that a member described in division (D)(1) of section 145.814 of the Revised Code may pay any additional liability that exceeds the amount on deposit by initiating payroll deduction under rule 145-1-38 of the Administrative Code or by direct partial payment. For plan elections effective on or before July 1, 2015, the payroll deduction must be initiated or direct partial payment shall be made not later than one hundred eighty days after the effective date of an election to participate in the traditional pension plan under section 2.03 of the combined plan document. Service credit purchased under this rule shall be included in the member's total service credit in the traditional pension plan but shall not be used in the calculation of a benefit under section 145.332 of the Revised Code. If the member elects to receive pro-rated service credit, the period of service upon which contributing service is based shall be the member's earliest service credit available to purchase under this rule.
- (D) Any funds remaining in an eligible member's accounts, as defined in section 1.01 of the combined or member-directed plan document, after the purchase of service credit under this rule shall be deposited in an additional annuity account in accordance with rule 145-2-43 of the Administrative Code. A member may also elect, at the time of service purchase, to leave any remaining funds on deposit in the prior plan; any funds remaining in the prior plan shall be credited to the member's rollover account, as defined in section 1.35 of the combined plan document and section 1.31 of the member-directed plan document, and treated as a rollover.
- (E)
- (1) Service credit purchased under this rule cancels the corresponding years of service credit in the combined plan or years of participation in the member-directed plan, as applicable.

- (2) For plan elections effective on or before July 1, 2015, service credit that is not purchased under this rule shall be cancelled immediately upon the expiration of the one hundred eighty day period following the effective date of an election to participate in the traditional pension plan under section 2.03 of the combined or member-directed plan document.
- (F) For each member described in paragraph (B) of this rule who transferred the member's accumulated contributions under section 145.191 of the Revised Code, the statement of cost shall include the cost to restore in the traditional pension plan the accumulated contributions and service credit cancelled under that section. The cost shall consist of the amount transferred, with interest on such amount, compounded annually at a rate to be determined by the public employees retirement board from the first day of the month of transfer to and including the month of redeposit. The amount redeposited shall be considered the accumulated contributions of the member and shall be credited in the same manner as a redeposit under section 145.31 of the Revised Code.
- (G) For each member described in paragraph (B) of this rule who purchased service credit under rule 145-3-21 or rule 145-3-40 of the Administrative Code, the statement of cost shall include, if applicable, the difference between the amount paid in the combined plan to purchase the service credit and the cost to purchase the service credit in the traditional pension plan as determined at the time the statement of cost is issued under this rule. Pursuant to section 6.01 of the combined plan document, if the amount paid in the combined plan to purchase the service credit was less than the cost to purchase the service credit in the traditional pension plan, the member may elect to receive a pro-rated amount of service credit in the traditional pension plan or may make an additional payment equal to the difference in order to receive the full amount of service credit.

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03/24/2013, 07/07/2013 (Emer.), 09/16/2013,
03/23/2015 (Emer.), 06/06/2015, 01/01/2017

145-2-43

Additional annuity accounts.

- (A) A member or contributor who makes a deposit for an additional annuity pursuant to section 145.62 of the Revised Code shall remit the first deposit with a form provided by the public employees retirement system. The retirement system shall not accept a payment for less than fifteen dollars. Deposits shall be credited to the current tax year, except that a deposit may be credited to the prior tax year if the deposit was received by the retirement system or postmarked on or before December thirty-first of the prior tax year.
- (B) A member or contributor may elect to have an eligible rollover distribution paid directly to an additional annuity account as a direct rollover. Any non-taxable portion of an eligible rollover distribution shall be separately accounted for by the retirement system and shall only be accepted in a direct trustee-to-trustee transfer to the additional annuity account. The following definitions apply to this paragraph:
- (1) "Eligible rollover distribution" means any distribution of all or any portion of the balance to the credit of a member or contributor from an eligible retirement plan. An eligible rollover distribution does not include:
- (a) Any distribution that is one of a series of substantially equal periodic payments (not less frequently than annually) made for the life (or life expectancy) of the member or contributor or the joint lives (or joint life expectancies) of the member or contributor and the member or contributor's designated beneficiary, or for a specified period of ten years or more;
 - (b) Any distribution to the extent such distribution is required under section 401(a)(9) of the Internal Revenue Code of 1986, 26 U.S.C.A. 401;
 - (c) Any distribution that is made upon hardship of the member or participant; or
 - (d) The portion of any distribution that is not includible in gross income, unless the distribution is being rolled over to either (i) a traditional individual retirement account or individual retirement annuity under sections 408(a) or 408(b) of the Internal Revenue Code of 1986, 26 U.S.C.A. 408, or (ii) a qualified trust which is part of a plan which is a defined contribution plan under sections 401(a) or 403(a) of the Internal Revenue Code of 1986, 26 U.S.C.A. 403, that will separately account for the distribution, including the taxable and non-taxable portions of the distribution, in a direct trustee-to-trustee transfer.
- (2) "Eligible retirement plan" means any program defined in sections 401(a)(31) and 402(c)(8)(B) of the Internal Revenue Code of 1986, 26 U.S.C.A. 402, from

which the member or contributor has a right to an eligible rollover distribution, as follows:

- (a) An individual retirement account under section 408(a) of the Internal Revenue Code;
- (b) An individual retirement annuity under section 408(b) of the Internal Revenue Code (other than an endowment contract);
- (c) A qualified trust;
- (d) An annuity plan under section 403(a) of the Internal Revenue Code;
- (e) An eligible deferred compensation plan under section 457(b) of the Internal Revenue Code of 1986, 26 U.S.C.A. 457, that is maintained by an eligible employer under section 457(e)(1)(A) of the Internal Revenue Code;
- (f) An annuity contract under section 403(b) of the Internal Revenue Code; and
- (g) Effective January 1, 2008, a Roth individual retirement account or annuity described in section 408A of the Internal Revenue Code, subject to the limitations set forth in such Internal Revenue Code provision; provided, however, that the plan is not responsible for assuring that a distributee is eligible to make such a rollover.

(3) "Direct rollover" means a payment to the additional annuity account from an eligible retirement plan specified by the member or contributor.

(C) A member or contributor shall make application for an additional annuity payment under section 145.64 of the Revised Code or a one-time lump sum payment under section 145.63 of the Revised Code on a form provided by the public employees retirement system. In the event a member or contributor is deceased, the qualifying beneficiary shall make application. Except as provided in this paragraph, a member or contributor may apply for a one-time lump sum payment at any time. If, at the time of application for a one-time lump sum payment, the additional annuity account of the member or contributor includes mandatory ~~member~~employee or employer contributions that were transferred to the account in accordance with ~~rules~~rules 145-1-74 or 145-2-18 of the Administrative Code, the member or contributor may only apply for a one-time lump sum payment under the circumstances described in section 145.63 of the Revised Code if the member has terminated service.

(D) Except as provided in this paragraph, monthly additional annuity payments shall commence at the time of issuance of an initial benefit payment, as defined in paragraph (A)(5) of rule 145-1-65 of the Administrative Code. In the case of a

member or contributor who indicates on a form provided by the retirement system that the member or contributor will be making additional deposits into their additional annuity account, monthly additional annuity payments shall not be issued until one hundred twenty days following the initial benefit payment or, in the case of an additional annuity commenced in connection with a benefit under section 145.384 of the Revised Code, one hundred twenty days from issuance of the first payment under that section.

- (E) All amounts on deposit with the retirement system on December 31, 2007, for an additional annuity, including any interest as may have been allowed by the public employees retirement board under former section 145.23 of the Revised Code, section 145.62 of the Revised Code, or prior versions of this rule, and any deposits made on or after January 1, 2008, shall be invested in the OPERS stable value fund, as described in the statement of investment objectives and policies for the defined contribution fund. The retirement system shall value the amounts described in this paragraph in accordance with the daily values determined for the OPERS stable value fund and acceptable industry practices. The board and the retirement system are not liable for losses or depreciation in the value of the amounts described in this paragraph.
- (F) Pursuant to division (B)(6) of section 145.64 of the Revised Code, a member or contributor who fails to select a plan of payment for the monthly additional annuity shall receive monthly annuity payments under a plan of payment that is consistent with the marital status of the member or contributor.
- (G) On application for a payment under section 145.63 or 145.64 of the Revised Code by a member, contributor, or beneficiary whose deposits were transferred to the income fund as described in section 145.41 of the Revised Code, the retirement system shall credit interest and invest the deposits as described in paragraph (E) of this rule.

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04/01/2008 (Emer.), 06/23/2008, 01/01/2011,
02/01/2011 (Emer.), 04/18/2011, 01/01/2012,
01/07/2013 (Emer.), 03/24/2013, 08/01/2015 (Emer.),
09/30/2015, 01/01/2017

145-2-46

Beneficiary's percentage under ~~the~~ joint-life and multiple-life plans.

Unless a court order specifically requires a member to allocate to the member's former spouse less than ten per cent of the member's monthly retirement allowance, the portion of a retirement allowance that continues after death to a member's surviving beneficiary pursuant to the plan of payment described in division (B)(1) or (B)(3) of section 145.46 of the Revised Code or section 9.03 (e)(1)(i) or (e)(1)(iii) of the combined plan document shall be expressed as a whole percentage and shall meet or exceed the greater of the following:

- (A) Ten percent of the member's monthly retirement allowance;
- (B) A percentage that causes the beneficiary's monthly benefit to be at least ~~one hundred~~fifty dollars.

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07/01/2007, 01/01/2010, 01/07/2013 (Emer.),
03/24/2013, 09/01/2013 (Emer.), 09/16/2013

145-3-13

Beneficiary and payment plan changes after retirement.

- (A) This rule amplifies section 9.03(e) of the combined plan document and, in the case of a monthly annuity payment option only, sections 9.02 of the combined and member-directed plan documents.
- (B) Beneficiary and plan of payment changes for a retirement allowance under section 9.03(e) of the combined plan document, ~~or for a monthly annuity under section 9.02 of the combined plan document,~~ or a monthly annuity under Section 9.02 of the member-directed plan document shall be made in accordance with rules 145-2-44, 145-2-46, and 145-2-47 of the Administrative Code.
- ~~(C) Beneficiary and plan of payment changes for a monthly annuity under section 9.02 of the member-directed plan document shall be made in accordance with rules 145-2-44 and 145-2-47 of the Administrative Code.~~

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145-3-40

Service credit in the combined plan for participation in member-directed plan.

- (A) This rule amplifies section 145.814 of the Revised Code and ~~section~~sections 2.03, 2.04, and 6.02 of the member-directed plan document.
- (B) For each member who elects to transfer funds from the member-directed plan to purchase service in the combined plan under division (D) of section 145.814 of the Revised Code and section 2.03 of the member-directed plan document, the public employees retirement system shall prepare a statement of cost for service credit to be purchased in the combined plan based on participation in the member-directed plan, at the request of an eligible member. An actuary employed by the public employees retirement board shall determine the additional liability, as defined in section 145.814 of the Revised Code, as described in rule 145-3-23 of the Administrative Code.
- (C) An eligible member shall purchase the service credit only by a lump-sum payment of the amount on deposit, as defined in rule 145-1-35 of the Administrative Code, except that a member described in division (D)(1) of section 145.814 of the Revised Code may, pay any additional liability that exceeds the amount on deposit by initiating payroll deduction under rule 145-1-38 of the Administrative Code or by direct partial payment. For plan elections effective on or before July 1, 2015, the payroll deduction shall be initiated or direct partial payment shall be made not later than one hundred eighty days after the effective date of an election to participate in the combined plan under section 2.03 of the member-directed plan document. Service credit purchased under this rule shall be included in the member's total service credit in the combined plan. If the member elects to receive pro-rated service credit, for purposes of section 1.41 of the combined plan document, the period of service upon which contributing service is based shall be the member's earliest service credit available to purchase under this rule.
- (D) Any funds remaining in an eligible member's accounts, as defined in section 1.01 of the member-directed plan document, after the purchase of service credit under this rule shall be credited to the member's rollover account in the combined plan and treated as a rollover, except that amounts transferred to the member-directed plan under section 2.02 of the member-directed plan document shall be credited to the participant contribution account in the combined plan, as if the contributions had been originally transferred under section 2.02 of the combined plan document. A member may also elect, at the time of service purchase, to leave any remaining funds on deposit in the member-directed plan; any funds remaining shall be credited to the member's rollover account, as defined in section 1.31 of the member-directed plan document, and treated as a rollover.

(E)

- (1) Service credit purchased under this rule cancels the corresponding years of participation in the member-directed plan.
- (2) For plan elections effective on or before July 1, 2015, years of participation in the member-directed plan that are not purchased under this rule shall be cancelled immediately upon the expiration of the one hundred eighty day period following the effective date of an election to participate in the combined plan under section 2.03 of the member-directed plan document.

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(Emer.), 03/24/2013, 06/06/2015

145-4-01 **Health care definitions.**

As used in this chapter:

- (A) "Wellness retiree medical account" means the public employees retirement system of Ohio retiree medical account plan established on January 1, 2007 by the former versions of rules 145-4-40, 145-4-42, and 145-4-44 of the Administrative Code, funded by the 115 trust, and integrated with the pre-medicare health care coverage sponsored by the retirement system.
- (B) "115 trust" means the Ohio public employees retirement system trust agreement for funding employee benefit plans, the assets of which qualify for exclusion from federal income taxation under section 115 of the Internal Revenue Code of 1986, 26 U.S.C.A. 115.
- (C) "Age and service retirant" means a former member who is receiving a retirement allowance pursuant to section 145.33, 145.331, 145.332, 145.37 or 145.46 of the Revised Code or section 9.03 of the combined plan document.
- (D) "Benefit recipient" means the primary benefit recipient who is eligible for health care coverage or the health reimbursement arrangement, if living. If the member or primary benefit recipient is deceased, "benefit recipient" shall mean the survivor benefit recipient who is eligible for health care coverage.
- (E) "Disability benefit recipient" has the same meaning as in section 145.01 of the Revised Code and includes a member or former member who is receiving a disability benefit pursuant to article X of the combined plan document.
- (F) "Health care coverage" means the coverage authorized under sections 145.58 and 145.584 of the Revised Code, excluding the reimbursement of the medicare part A and B premiums, the and dental and vision coverage, and the health reimbursement arrangement.
- (G) "Health reimbursement arrangement" or "HRA" means the public employees retirement system of Ohio health reimbursement arrangement plan, effective October 1, 2015, funded by the 115 trust or such other funding vehicle or mechanism established by the retirement system, from which the reimbursement of qualifying medical expenses may be made. The text of the ~~HRA~~public employees retirement system of Ohio health reimbursement arrangement plan shall not be incorporated into this or any other rule of the Administrative Code. The current version of ~~the HRA~~ is available at www.opers.org.
- (H) "Initial benefit payment" has the same meaning as in rule 145-1-65 of the Administrative Code.

- (I) "Monthly health care allowance" or "monthly allowance" means the monthly amount that is allocated to each individual enrolled in health care coverage or health reimbursement arrangement. For health care coverage, this allowance shall be used to purchase health care coverage sponsored by the board and is based on the self-supporting rate, as determined by the board, and as adjusted by the member or primary benefit recipient's qualified years of employer contributions. For a medicare-eligible benefit recipient who is not subject to rule 145-4-62 of the Administrative Code, the monthly allowance shall be determined by the board and offered in the form of a notional credit to the health reimbursement arrangement consistent with the provisions of that plan. For effective dates of retirement on and after January 1, 2015, the monthly health care allowance shall also be based on the member or primary benefit recipient's attained age at the time of initial enrollment in the coverage.
- (J) "Ohio retirement system" means the public employees retirement system, state teachers retirement system, school employees retirement system, Ohio police and fire pension fund, or highway patrol retirement system.
- (K) "Primary benefit recipient" means an age and service retiree or disability benefit recipient is eligible for health care coverage or the health reimbursement arrangement.
- (L) "Qualified medical expense" means medical care, as defined in section 213(d) of the Internal Revenue Code of 1986, 26 U.S.C.A. 213(d), and applicable regulations thereunder and are excludable from income in accordance with sections 105 and 106 of the Internal Revenue Code.
- (M) "Qualified years of employer contributions" means years of employer contributions and the years purchased or transferred under section 145.295, 145.2911, or 145.37 of the Revised Code that, if earned or obtained in the public employees retirement system, would be the equivalent of the years of employer contributions. Qualified years of employer contributions do not include the contributions that are the basis of a lump sum payment or refund pursuant to division (I)(2)(b) or (I)(3)(b) of section 145.332 paragraph (B) of 145-2-49 of the Revised Administrative Code, unless the payment or refund are issued pursuant to division (N)(3) of section 145.332 of the Revised Code.
- (N) "Retiree medical account" means the group health plan described in the document entitled the "public employees retirement system of Ohio retiree medical account" that was effective on January 1, 2003, and includes amendments adopted through June 30, 2016. The text of the public employees retirement system of Ohio retiree medical account shall not be incorporated into this or any other rule of the Administrative Code. The current version is available at www.opers.org.

- (O) "Self-supporting rate" means the adjusted per capita cost for providing health care coverage for any given year, as determined by the board.
- (P) "Service manager" means the individual or entity appointed by the public employees retirement system to administer the retiree medical accounts or the wellness retiree medical accounts.
- (Q) "Survivor benefit recipient" means a qualified spouse or child who is eligible for health care coverage and receiving a benefit pursuant to section 145.45 or 145.46 of the Revised Code or section 9.03 of the combined plan document.
- (R) "Years of employer contributions" means the years or portions of a year for which the member's employer contributed to the public employees retirement system under section 145.302, 145.48, or 145.483 of the Revised Code, section 3.02 of the combined plan document, or article VI of the combined or member-directed plan document. Beginning January 1, 2014, "years of employer contributions" means the years or portions of a year described in this paragraph for which the member's monthly earnable salary on and after January 1, 2014, is one thousand dollars or greater.

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03/24/2017, 01/01/2019

145-4-06

Eligibility for health care in traditional pension and combined plans.

(A) For effective dates of benefits before January 1, 2014, “ineligible individual” means all of the following:

- (1) A former member receiving benefits pursuant to section 145.32, 145.33, 145.331, 145.332, or 145.46 or former section 145.34 of the Revised Code or section 9.03 of the combined plan for whom eligibility is established after June 13, 1986, and who, at the time of establishing eligibility, has accrued less than ten years of service credit, exclusive of credit obtained pursuant to section 145.297 or 145.298 of the Revised Code, credit obtained after January 29, 1981, pursuant to section 145.293 or 145.301 of the Revised Code, credit obtained after May 4, 1992, pursuant to section 145.28 of the Revised Code, and credit obtained in the combined plan after January 1, 2003, pursuant to section 145.28, 145.293, or 145.301 of the Revised Code;
- (2) The spouse of the former member;
- (3) The beneficiary of the former member receiving benefits pursuant to section 145.46 of the Revised Code or section 9.03(e) of the combined plan, as amended on January 7, 2013.

(B) For effective dates of benefits on and after January 1, 2014, but before January 1, 2015, “ineligible individual” means any individual who does not meet any of the following:

- (1) A former member receiving benefits pursuant to section 145.32, 145.33, 145.331, 145.332, or 145.46 or former section 145.34 of the Revised Code or section 9.03 of the combined plan, and who has accrued at least ten years of qualified years of employer contributions.
- (2) The spouse of the former member;
- (3) The beneficiary of the former member receiving benefits pursuant to section 145.46 of the Revised Code or section 9.03(e) of the combined plan, as amended on January 7, 2013.

(C) For effective dates of benefits on or after January 1, 2015, “ineligible individual” means any individual who does not meet any of the following:

- (1) A former member described in this paragraph who has attained age sixty and has accrued at least twenty qualified years of employer contributions or is any age and has accrued at least thirty qualified years of employer contributions. The former member shall be receiving benefits pursuant to division (A) of

section 145.32, section 145.33, division (A) of 145.332, section 145.46 or former section 145.34 of the Revised Code or sections 9.01(a) and 9.03 of the combined plan.

- (2) A former member described in this paragraph who has attained age sixty and has accrued at least twenty qualified years of employer contributions, has attained age fifty-two and has accrued at least thirty-one qualified years of employer contributions, or is any age and has accrued at least ~~thirty-one~~thirty-two qualified years of employer contributions. The former member shall be receiving benefits pursuant to division (B) of section 145.32, section 145.33, division (B) of 145.332, or section 145.46 of the Revised Code or sections 9.01(b) and 9.03 of the combined plan.
- (3) A former member described in the paragraph who has attained age sixty and has accrued at least twenty qualified years of employer contributions or is any age and has accrued at least thirty-two qualified years of employer contributions. The former member shall be receiving benefits pursuant to division (C) of section 145.32, division (C) of section 145.332, or section 145.46 of the Revised Code or sections 9.01(c) and 9.03 of the combined plan.
- (4) A former member receiving benefits pursuant to section 145.331 of the Revised Code who is one of the following:
 - (a) Had an effective date of benefits under section 145.361 of the Revised Code prior to January 1, 2015, and had accrued at least ten qualified years of employer contributions; or
 - (b) Had an effective date of benefits under section 145.361 of the Revised Code on or after January 1, 2015, and either attained age sixty and accrued at least twenty years of qualified employer contributions or ~~is any age and~~ meets one of the following criteria:
 - (i) If, had the member retired on age and service retirement, the member would have received benefits described in paragraph (C)(1) of this rule, the member is any age and has accrued a least thirty qualified years of employer contributions;
 - (ii) If, had the member retired on age and service retirement, the member would have received benefits described in paragraph (C) (2) of this rule, the member is either age fifty-two and has accrued at least thirty-one qualified years of employer contributions or is any age and has accrued at least ~~thirty-one~~thirty-two qualified years of employer contributions;

(iii) If, had the member retired on age and service retirement, the member would have received benefits described in paragraph (C)(3) of this rule, the member is any age and has accrued at least thirty-two qualified years of employer contributions.

- (5) The spouse of the former member;
- (6) The beneficiary of the former member receiving benefits pursuant to section 145.46 of the Revised Code or section 9.03(e) of the combined plan, as amended on January 7, 2013.
- (D) Beginning January 1, 2014, as used in section 145.58 of the Revised Code, an “ineligible individual” includes a disability benefit recipient who has an effective date of benefits that is on or after January 1, 2014, and has been receiving a disability benefit for more than five years unless the recipient meets one of the following:
- (1) The recipient has met the eligibility requirements described in paragraph (B) or (C) of this rule;
 - (2) The recipient qualifies for federal hospital insurance benefits under the Social Security Amendments of 1965, 79 Stat. 291, 42 U.S.C.A. 1395c, on the basis of a disability and has not attained age sixty-five;
 - (3) The recipient is not eligible to participate in medicare part A at no cost to the recipient and has not attained age sixty-five.
- (E) A member participating in the combined plan shall be a member of the traditional pension plan for purposes of the coverage described in sections 145.58 and 145.584 of the Revised Code.

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01/01/2019

145-4-26 **Dental and vision coverage.**

- (A) The public employees retirement system may offer dental or vision coverage that is administered by a third party administrator(s) to individuals who are receiving a benefit from the system and eligible dependents. For purposes of this rule, "benefit" includes monthly amounts paid to an individual pursuant to section 145.32, 145.33, 145.331, 145.332, 145.35, 145.36, 145.361, 145.37, 145.384, 145.45, or 145.46 of the Revised Code, or section 9.02, article X, or article XI of the combined plan document.
- (B) The dental and vision coverage offered by the system shall be administered consistent with health care coverage as follows: enrollment in the coverage as described in paragraphs (B), ~~(F)(D)~~, and ~~(F)(E)~~ of rule 145-4-30 of the Administrative Code and paragraph (D) of rule 145-4-62 of the Administrative Code; effective dates of coverage as described in rule 145-4-32 of the Administrative Code; and enrollment of dependents as described rules 145-4-30, 145-4-34, 145-4-36, 145-4-62, 145-4-62, and 145-4-66 of the Administrative Code; and payment of charges and disenrollment for nonpayment as described in rule 145-4-17 of the Administrative Code.
- (C) The following provisions also apply to the dental and vision coverage offered by the system:
- (1) The coverage shall be in effect for a calendar year.
 - (2) An individual enrolled in dental or vision coverage can voluntarily terminate the individual's enrollment in the coverage or a dependent's enrollment in the coverage only at the end of each calendar year by filing the notice of cancellation in a form and manner approved by the system during the annual open enrollment period.
 - (3) The system may require the automatic withholding of coverage premiums from the benefit paid to the enrolled individuals or, if necessary, may require the direct payment of premiums by the individual to the system or the third party administrator(s).
- (D) The retirement system shall offer continuation coverage, as applicable, in accordance with the requirements of the Consolidated Omnibus Budget and Reconciliation Act of 1985 ("COBRA"), 42 U.S.C.A. 300gg-1.

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Rule Amplifies: 145.58, 145.584
Prior Effective Dates: 01/01/2015, 01/01/2016, 01/01/2019

145-4-30

Pre-medicare coverage sponsored by the system.

- (A) This rule applies to health care coverage sponsored by the Ohio public employees retirement system to eligible recipients and dependents who are not yet eligible for coverage under medicare. Health care coverage for an eligible primary benefit recipient may be available upon application on a form provided by the public employees retirement system. A primary benefit recipient may enroll an eligible dependent as defined in rule 145-4-09 of the Administrative Code. Except as provided in paragraph (G) of this rule, eligibility for coverage described in this rule terminates upon the individual's attainment of eligibility for coverage under medicare.
- (B)
- (1) Except as provided in this paragraph, applications for health care coverage must be received by the public employees retirement system not later than thirty days after the benefit recipient's initial benefit payment. During this thirty-day period, the applicant may make one change to the filed application. If the application is received more than thirty days after the initial benefit payment or the benefit recipient fails to file an application within that period, the benefit recipient shall be treated as described in paragraph (E) of this rule.
- (2) The system may accept and process an application received more than thirty days after the benefit recipient's initial benefit payment if either of the following occur:
- (a) The system determines that a physical or mental incapacity prevented the benefit recipient from making application within the initial thirty-day benefit period. The effective date of coverage shall be determined in accordance with rule 145-4-32 of the Administrative Code.
- (b) The benefit recipient did not apply for coverage and later submits an application due to involuntary termination of coverage under another group plan. The benefit recipient shall submit the application within thirty-one days of the involuntary termination together with proof of such termination.
- (3) No application for health care coverage shall be accepted or processed after December 31, 2021.
- (C) Upon the recommendation of the actuary retained by the board, the board shall determine annually the portion of the self-supporting rate it may pay for eligible benefit recipients and eligible dependents enrolled in health care coverage.

~~(D)~~ An ineligible individual, as defined in rule 145-4-06 of the Administrative Code, may remain enrolled in a health care plan administered by a third party health care administrator(s). Such ineligible individual shall pay all required premiums directly to the health care administrator in the time and manner prescribed by the third party health care administrator. New enrollments to this plan shall not be permitted on or after January 1, 2014. Except to the extent required under paragraph (I) of this rule, the retirement system shall not be responsible for any premiums, claims, or withholding of premiums for such health care plan.

~~(E)~~(D)

- (1) An eligible benefit recipient may defer enrollment in health care coverage. The deferral applies to both the benefit recipient and the benefit recipient's dependents.
- (2) A benefit recipient who is described in paragraph ~~(E)~~(D)(1) of this rule or who waived coverage under a version of this rule in effect prior to January 1, 2014, may enroll by filing an application for enrollment in health care coverage during one of the following: subject to paragraph (B)(3) of this rule:
 - (a) The annual open enrollment period for health care coverage, except that the deferral or waiver remains effective until January first of the next year;
 - (b) Within sixty days of involuntary termination of coverage under another group plan, and with proof of such termination.

~~(F)~~(E) An individual who is eligible for health care coverage from more than one benefit may not enroll for health care coverage simultaneously under more than one benefit.

~~(G)~~(F)

- (1) Except as provided in paragraph ~~(G)~~(F)(2) of this rule and regardless of the reason for eligibility, all enrolled benefit recipients and dependents shall enroll in medicare parts A and B at the benefit recipient or eligible dependent's first eligible date.
- (2) A benefit recipient or dependent approved for early medicare coverage shall enroll in and provide the retirement system with evidence of the medicare coverage not later than thirty days after the recipient is notified of coverage by the centers for medicare and medicaid services. The system may cover or coordinate the benefit recipient's retroactive claims with medicare and continue the coverage or coordination for not more than four months following the date the recipient was notified of coverage by the centers for medicare and medicaid services.

When the coordination period described in this paragraph or other medicare coordination period required for end-stage renal disease expires, the benefit recipient is no longer eligible for participation in pre-medicare coverage sponsored by the retirement system and may be eligible to participate in the plans described in paragraph (C) or (D) of rule 145-4-60 of the Administrative Code.

~~(H)~~(G) The retirement system shall offer continuation coverage, as applicable, in accordance with the requirements of the Consolidated Omnibus Budget and Reconciliation Act of 1985 ("COBRA"), 42 United States Code 300gg-1.

~~(H)~~(H) Benefit recipients under this rule are not eligible for coverage during any period of benefit suspension or forfeiture.

Effective:

Five Year Review (FYR) Dates: 9/20/2023

Certification

Date

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Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.58, 145.584
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05/04/2000, 10/09/2000, 03/22/2002, 08/08/2002,
01/01/2003, 04/15/2004, 01/01/2005, 01/01/2007,
01/01/2009, 01/01/2011, 01/01/2012, 09/10/2012,
12/10/2012, 01/07/2013 (Emer.), 03/24/2013,
01/01/2014, 01/01/2015, 01/01/2016, 09/01/2017,
01/01/2019

145-4-32

Effective date of pre-medicare health care coverage.

- (A) Except as otherwise provided in this rule or rule 145-4-30 of the Administrative Code, the effective date of health care coverage shall be the later of the following:
- (1) The effective benefit date of the benefit that is the basis of the health care coverage,
or
 - (2) The first day of the month during which an application for the benefit is received by the public employees retirement system.
- (B) For benefit recipients of survivor benefits under section 145.45 of the Revised Code and article XI of the combined plan document, the effective date of health care coverage shall be the effective date of the survivor benefit, but shall not exceed more than one year prior to the date on which the system receives an application for enrollment in health care coverage.
- (C) If the retirement system or health care administrator has not paid claims for health care coverage for an eligible benefit recipient or eligible dependent, the benefit recipient may elect an effective date of health care coverage that is after the date described in paragraph (A) of this rule but is not later than thirty days after the initial benefit payment. An election under this paragraph shall be made not later than thirty days after the initial benefit payment.
- (D) The effective date of health care coverage shall be on the first day of a month and not later than December 1, 2021.

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01/01/2003, 04/15/2004, 01/01/2005, 01/01/2007,
01/01/2012, 12/10/2012, 01/01/2016, 09/01/2017

145-4-36

Enrollment of eligible dependents outside of open enrollment period.

- (A) A benefit recipient may enroll an eligible dependent in pre-medicare health care coverage at any time outside of the annual health care open enrollment period if any of the following apply:
- (1) The primary benefit recipient may enroll a new spouse upon marriage;
 - (2) The benefit recipient may enroll an eligible child upon the birth or adoption of that child;
 - (3) The benefit recipient may enroll an eligible dependent who has involuntarily lost health care coverage from another source;
 - (4) The primary benefit recipient is ordered to enroll a child pursuant to a national medical support order;
 - (5) The dependent first achieves an eligibility threshold described in rule 145-4-09 of the Administrative Code.
- (B) Enrollment of an eligible dependent under this rule shall be made on an application provided by the public employees retirement system and, subject to paragraph (C) of this rule, must be received not later than sixty days after of the occurrence of the event described in paragraph (A) of this rule.
- (C) No application for health care coverage for an eligible dependent shall be accepted or processed after December 31, 2021.

Effective:

Five Year Review (FYR) Dates: 9/20/2023

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.58
Prior Effective Dates: 01/01/2007, 01/01/2011, 01/01/2015, 01/01/2016

145-4-38

Reenrollment following voluntary termination of pre-medicare health care coverage.

(A) An eligible benefit recipient enrolled in health care coverage under rule 145-4-30 of the Administrative Code may voluntarily terminate coverage. The termination of coverage applies to both the benefit recipient and the benefit recipient's dependents. The Subject to paragraph (A)(3) of this rule, the effective date of the termination of coverage shall be determined as follows:

(1) If the termination of coverage is received by the retirement system not later than thirty days after issuance of the initial benefit payment and the public employees retirement system has not paid claims for health care coverage of the benefit recipient or dependent, the termination is effective on the effective date of benefits. The benefit recipient shall be treated as an individual who did not enroll in coverage under paragraph ~~(B)~~(D)(1) of rule 145-4-30 of the Administrative Code.

(2) If the termination of coverage is received by the retirement system more than thirty days after the issuance of the initial benefit payment, the termination is effective on the first day of the month following receipt of the termination.

(3) A termination of coverage under this rule shall be no later than December 31, 2021.

(B) A benefit recipient who voluntarily terminated coverage as described in paragraph (A) of this rule on or after January 1, 2014, may reenroll in coverage by one of the following actions:

(1) During the annual open enrollment period in calendar year 2020, the benefit recipient applies for health care coverage and provides proof of creditable coverage in another health care plan that is effective at the time of application;
or

(2) Within sixty days of involuntary termination of health care coverage under another plan, the benefit recipient submits ~~and an~~ application for health care coverage not later than December 31, 2021, and provides proof of creditable coverage in the prior plan.

(C) This rule does not apply to any of the following:

(1) A benefit recipient whose disenrollment occurred under rule 145-4-17 of the Administrative Code;

- (2) A benefit recipient whose health care coverage has been suspended for failure to submit the documentation necessary to administer the individual's enrollment in the coverage.
- (3) A benefit recipient who is eligible for medicare.

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Five Year Review (FYR) Dates: 9/20/2023

Certification

Date

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Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.58, 145.584
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09/01/2017, 01/01/2019

145-4-40

Pre-medicare health care coverage during public employment.

(A) Public employer and other coverage available

- (1) A public employer that employs a primary benefit recipient shall provide health care coverage for such benefit recipient consistent with the provisions of section 145.38 of the Revised Code. At the time the employer provides notice of employment under section 145.38 of the Revised Code, the employer shall also notify the public employees retirement system of the status of health care coverage for the employed benefit recipient.
 - (2) If the primary benefit recipient should be covered under the employer's health care plan as required by section 145.38 of the Revised Code but fails to enroll in the employer's health care plan or other comparable coverage, the recipient is ineligible to participate in a plan provided by the retirement system during public employment.
 - (3) If the benefit recipient is covered under the public employer's health care coverage or other comparable coverage, this system's coverage shall pay only the remaining medical claims cost not paid or reimbursed by the comparable or employer's coverage, up to the systems's limits in coverage.
- (B) The retirement system may offer health care coverage for pre-medicare benefit recipients during public employment. The benefit recipient shall apply for coverage on a form provided by the retirement system and received by the retirement system not later than sixty days after public employment commences but not later than December 31, 2021. If applicable, a primary benefit recipient must provide evidence of enrollment in the employer's or other comparable coverage. A benefit recipient enrolled in the coverage described in this paragraph may enroll an eligible dependent in the appropriate coverage determined by the retirement system.

(C)

- (1) An eligible benefit recipient may defer enrollment in health care coverage under paragraph (B) of this rule. The deferral applies to both the benefit recipient and the benefit recipient's dependents.
- (2) A benefit recipient who is described in paragraph (C)(1) of this rule may enroll by filing an application for enrollment in health care coverage during one of the following:
 - (a) The annual open enrollment period ~~for health care coverage~~ in calendar year 2020, except that the deferral or waiver remains effective until January first of the next year;

- (b) Within sixty days of involuntary termination of coverage under another group plan, and with proof of such termination, but not later than December 31, 2021.
- (D) In all other regards, the coverage provided under this rule shall be administered substantially similar to other pre-medicare coverage sponsored by the retirement system and may differ or coordinate with such coverage as determined by the retirement system. For enrolled recipients, the retirement system shall transfer enrollment to the coverage described in rule 145-4-30 of the Administrative Code effective the first day of the month following termination of the public employment.

Effective:

Five Year Review (FYR) Dates: 9/20/2023

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.38, 145.58, 145.584
Prior Effective Dates: 09/01/2017, 01/01/2019

145-4-60

Plans offered to medicare-eligible benefit recipients.

- (A) Rules 145-4-60 to ~~145-4-68~~145-4-69 of the Administrative Code apply to the plans sponsored by the public employees retirement system and offered to medicare-eligible benefit recipients and their dependents.
- (B) “Public employee” and “public employer” have the same meanings as in section 145.01 of the Revised Code.
- (C) Upon a benefit recipient or dependent becoming eligible for medicare, the system may provide an eligible benefit recipient with access to a monthly allowance through a health reimbursement arrangement ~~account plan~~. A benefit recipient who is a public employee shall not participate in the health reimbursement arrangement sponsored by the system during any month that the recipient is a public employee.
- (D) The system may provide to a medicare-eligible benefit recipient who is a public employee health care coverage that pays secondary to medicare as described in rules 145-4-62 to ~~145-4-68~~145-4-69 of the Administrative Code, but may do so no later than December 31, 2021. In its sole discretion, the system may also make this coverage available on a temporary basis to eligible benefit recipients who are not public employees until such time as the benefit recipient : (1) begins participation in the health reimbursement arrangement or (2) becomes medicare-eligible following a medicare coordination period.
- (E) Medicare-eligible benefit recipients are not eligible for coverage or allowances described in paragraph (C) or (D) of this rule during any period of benefit suspension or forfeiture.
- (F) The retirement system shall offer continuation coverage, as applicable, in accordance with the requirements of the Consolidated Omnibus Budget and Reconciliation Act of 1985 (“COBRA”), 42 United States Code 300gg-1.

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Five Year Review (FYR) Dates: 9/20/2023

Certification

Date

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Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.58, 145.584
Prior Effective Dates: 01/01/2016, 09/01/2017, 01/01/2019

145-4-62

Coverage for medicare-eligible benefit recipient during public employment.**(A) Public employer or other coverage**

- (1) As used in section 145.38 of the Revised Code, “comparable coverage” does not include medicare coverage.
- (2) A public employer that employs a primary benefit recipient shall provide health care coverage for such benefit recipient consistent with the provisions of section 145.38 of the Revised Code. At the time the employer provides notice of employment under section 145.38 of the Revised Code, the employer shall also notify the retirement system of the status of health care coverage for the employed benefit recipient.
- (3) If the benefit recipient is covered under the public employer's health care coverage and the benefit recipient is also enrolled in coverage that pays secondary to medicare that is sponsored by the public employees retirement system, this system's coverage shall pay only the remaining medical claims costs not paid or reimbursed by the employer's coverage or medicare up to the system's limits in coverage.

(B) Except as provided in rule 145-4-68 of the Administrative Code, this system's health care coverage that pays secondary to medicare may be available to medicare-eligible benefit recipients who are public employees upon application on a form provided by the system and received by the system not later than sixty days after public employment commences but not later than December 31, 2021. A primary benefit recipient enrolled in the coverage described in this paragraph may enroll an eligible dependent as defined in rule 145-4-09 of the Administrative Code.

(C) Upon the recommendation of the actuary retained by the board, the board shall determine annually the portion of the self-supporting rate it may pay for eligible benefit recipients and eligible dependents enrolled in health care coverage described in paragraph (B) of this rule.

(D)

- (1) An eligible benefit recipient may defer enrollment in health care coverage under paragraph (B) of this rule. The deferral applies to both the benefit recipient and the benefit recipient's dependents
- (2) A benefit recipient who is described in paragraph (E)(1) of this rule may enroll by filing an application for enrollment in health care coverage during one of the following:

- (a) The annual open enrollment period ~~for health care coverage, in calendar year 2020~~, except that the deferral or waiver remains effective until January first of the next year;
 - (b) Within sixty days of involuntary termination of coverage under another group plan, and with proof of such termination, but not later than December 31, 2021.
- (E) Except as provided in rule 145-4-68 of the Administrative Code, a benefit recipient is eligible for the health care coverage described in this rule while the recipient is a public employee. Eligibility for this coverage shall extend through the earlier of thirty days after the date a benefit recipient is notified of ineligibility for this coverage due to termination of public employment or the benefit recipient is a participant in the health reimbursement arrangement. Eligibility for this coverage shall not extend later than December 31, 2021. The benefit recipient is eligible for participation in the health reimbursement arrangement on the first day of the month following termination of public employment.

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Five Year Review (FYR) Dates: 9/20/2023

Certification

Date

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Rule Amplifies: 145.38, 145.58, 145.584
Prior Effective Dates: 01/01/2016, 01/01/2019

145-4-66

Enrollment of eligible dependents outside of open enrollment period.

- (A) A benefit recipient enrolled in coverage described in paragraph (B) of rule 145-4-62 of the Administrative Code may enroll an eligible dependent in health care coverage at any time outside of the annual health care open enrollment period if any of the following apply:
- (1) The primary benefit recipient may enroll a new spouse upon marriage;
 - (2) The benefit recipient may enroll an eligible child upon the birth or adoption of that child;
 - (3) The benefit recipient may enroll an eligible dependent who has involuntarily lost health care coverage from another source;
 - (4) The primary benefit recipient is ordered to enroll a child pursuant to a national medical support order;
 - (5) The dependent first achieves an eligibility threshold described in rule 145-4-09 of the Administrative Code.
- (B) Enrollment of an eligible dependent under this rule shall be made on an application provided by the public employees retirement system and, subject to paragraph (C) of this rule, must be received not later than sixty days after of the occurrence of the event described in paragraph (A) of this rule.
- (C) No application for health care coverage for an eligible dependent shall be accepted or processed after December 31, 2021.

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Five Year Review (FYR) Dates: 9/20/2023

Certification

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Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.58
Prior Effective Dates: 01/01/2016

145-4-69

Reenrollment following voluntary termination of health care coverage for medicare-eligible benefit recipients.

- (A) An eligible benefit recipient enrolled in health care coverage under paragraph (D) of rule 145-4-60 of the Administrative Code may voluntarily terminate coverage. ~~The Subject to paragraph (A)(3) of this rule, the~~ termination of coverage applies to both the benefit recipient and the benefit recipient's dependents. The effective date of the termination of coverage shall be determined as follows:
- (1) If the termination of coverage is received by the retirement system not later than thirty days after issuance of the initial benefit payment and the public employees retirement system has not paid claims for health care coverage of the benefit recipient or dependent, the termination is effective on the effective date of benefits. The benefit recipient shall be treated as an individual who did not enroll in coverage under paragraph (D)(1) of rule 145-4-62 of Administrative Code.
 - (2) If the termination of coverage is received by the retirement system more than thirty days after the issuance of the initial benefit payment, the termination is effective on the first day of the month following receipt of the termination.
 - (3) A termination of coverage under this rule shall be no later than December 31, 2021.
- (B) A benefit recipient who voluntarily terminated coverage as described in paragraph (A) of this rule on or after January 1, 2014, may reenroll in coverage by one of the following actions:
- (1) During the annual open enrollment period in calendar year 2020, the benefit recipient applies for health care coverage and provides proof of creditable coverage in another health care plan that is effective at the time of application; or
 - (2) Within sixty days of involuntary termination of health care coverage under another plan, the benefit recipient submits an application for health care coverage not later than December 31, 2021, and provides proof of creditable coverage in the prior plan.
- (C) This rule does not apply to any of the following:
- (1) A benefit recipient whose disenrollment occurred under rule 145-4-17 of the Administrative Code;

- (2) A benefit recipient whose health care coverage has been suspended for failure to submit the documentation necessary to administer the individual's enrollment in coverage.

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Promulgated Under: 111.15
Statutory Authority: 145.09, 145.58
Rule Amplifies: 145.58, 145.584
Prior Effective Dates: 01/01/2019

742-1-02

Member minimum medical testing and diagnostic procedures.**(A) Requirements.**

Pursuant to section 742.38 of the Revised Code, all employers of prospective members of the Ohio police and fire pension fund (OP&F) are required to do the following:

(1) Physical examination for prospective OP&F members.

The employer shall cause the prospective members of OP&F to submit to a physical examination which includes the minimum medical testing and diagnostic procedures set forth in paragraph (B) of this rule.

(2) Tests done before employee's membership in OP&F.

The physical examination which includes the minimum medical testing and diagnostic procedures prescribed by this rule must be done no later than eleven fifty-nine p.m. on the date the employee becomes an OP&F member, but in no event can the tests and procedures be done earlier than nine months before that membership date.

(3) Physician's report filed with OP&F.

The employer must file a physician's report with OP&F that meets the following criteria:

- (a) The physician certification must be in the form prescribed by OP&F or a form substantially similar, as determined by OP&F in its sole and absolute discretion, which must include the physician's diagnosis and evaluation of the existence of any cancer, heart disease, cardiovascular disease, or respiratory disease identified in the medical testing and diagnostic procedures established under this rule. The physician certification must be fully completed and signed by a licensed physician who is licensed to practice medicine in the state in which the examination was conducted, and the physician certification must state the date of the examination and the report cannot be signed more than nine months before the potential employee's membership with OP&F;
- (b) The member's medical questionnaire completed by the member must be in the form prescribed by OP&F and cannot be signed more than nine months before the potential employee's membership with OP&F; and

(c) From and after the effective date of this rule, copies of the medical tests and procedures and medical questionnaire outlined in this rule must be included as part of the physician's report.

(4) The physician's report must be timely filed with OP&F.

In order to be timely filed, a properly completed physician certification, medical questionnaire meeting the criteria of this rule, and copies of the required medical testing and diagnostic procedures outlined by this rule, must be received by OP&F no later than sixty days after the employee becomes an OP&F member, as required by division (A)(2) of section 742.38 of the Revised Code.

(B) Minimum medical testing/diagnostic procedures.

The minimum medical testing and diagnostic procedures to be incorporated into a member's physical examination administered by physicians to prospective members of the fund shall include the following:

- (1) Spirometry that represents at least a valid and reproducible forced expiratory volume at one second (FEV1), forced vital capacity (FVC), and forced expiratory volume at one second/forced vital capacity (FEV1/FVC) that meets the criteria of the American thoracic society;
- (2) A chest x-ray that is at least a P.A. 72" (i.e. front to back);
- (3) Lipid profile that includes total cholesterol, triglycerides, LDL cholesterol, and HDL cholesterol; and
- (4) A cardiac stress test performed consistent with standard Bruce protocol that includes an electrocardiogram (EKG).

(C) Determination of OP&F membership.

For purposes of administering section 742.38 of the Revised Code and this rule, OP&F will use the occurrence of the following events for purposes of determining when a prospective employee becomes an OP&F member:

- (1) The member's appointment as a "member of the police department" or "member of the fire department," as such terms are defined in divisions (A)(2) and (B)(2) of section 742.01 of the Revised Code respectively; and
- (2) The date on which the prospective member became a "member of the fund," as defined in division (E) of section 742.01 of the Revised Code; and

- (3) The first date on which the employee is contributing or should have been contributing a percentage of his/her salary to OP&F.

For purposes of this paragraph, OP&F shall consider the first date the employee is contributing a percentage of his/her salary to OP&F to be based on payroll submitted for a pay period six weeks prior to the filing of such payroll, until the actual date is determined by OP&F and at that time, an adjustment of the penalties shall thereafter be made based on the actual dates ~~provided~~submitted to OP&F by the employer on ~~thea form provided by OP&F personal history record form.~~

- (D) For members who are reinstated to OP&F membership by agreement or by order of a court or arbitrator, no new pre-employment physical will be required. In order to make this determination, the employer shall provide OP&F with a copy of the agreement or court order.
- (E) In cases where the person was laid off from an OP&F covered employer and the person already has a proper pre-employment physical on file with OP&F and returns to an OP&F covered position within two years of the effective date of his/her lay-off and accumulated member contributions remain on deposit with OP&F, no additional pre-employment physical will be required.
- (F) For members who transfer from one employer to another without a loss in membership with OP&F, as outlined above, the new employer will not be required to cause such person to undergo the medical testing and diagnostic procedures referenced in this rule, unless the person became an OP&F member on or after September 16, 1998 and OP&F does not have a pre-employment physical on file that meets the definition set forth in section 742.38 of the Revised Code. In order to reach this determination, however, the new employer will need to obtain this information from OP&F. In the event the original employer did not cause an employee who became an OP&F member on or after September 16, 1998 to undergo all of the tests and procedures outlined in this rule, then OP&F will give notice to the new employer of any tests and procedures that need to be completed and this documentation must be received by OP&F no later than sixty days after the new hire date.
- (G) In no event shall the provisions of this rule be intended to supercede or eliminate any other legal requirement imposed on the employer under Ohio law, including, but not limited to, sections 124.41 and 124.42 of the Revised Code.
- (H) If the employer is unable to obtain a test due to the member's medical condition, the member's religious beliefs or the member's refusal to undergo a specific test, the employer shall provide supporting documentation to OP&F in support of such fact and may request a waiver of such test or report for such reason. If the waiver request is for medical reasons, the supporting documentation shall be in the form

of a medical report signed by a licensed physician in the state in which the medical examination was conducted, if the waiver request is for religious reasons, the supporting documentation shall be in the form of an affidavit signed by the member before a notary public that certifies such fact, and if the waiver request is the result of the member's refusal, the supporting documentation shall be in the form of a written document signed by the member before a notary public that certifies that fact and acknowledges that the member understands that his/her refusal shall result in his/her inability to use the presumptive disability provision outlined in section 742.38 of the Revised Code.

Within thirty days after OP&F's receipt of such request, OP&F shall notify the employer if such waiver is granted. If OP&F grants a waiver, the employer shall not be obligated to cause such person to undergo the specific tests specified in such waiver.

Any waiver granted under the terms of this section shall result in the member's inability to use the presumptive disability provisions outlined in section 742.38 of the Revised Code.

Effective:

Five Year Review (FYR) Dates: 4/6/2022

Certification

Date

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Statutory Authority: 742.10
Rule Amplifies: 742.38
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02/11/2002 (Emer.), 05/30/2002 (Emer.), 08/22/2002,
01/22/2004, 11/29/2004, 10/13/2005, 01/17/2011,
02/09/2014, 04/06/2017 (Emer.), 06/22/2017

742-2-01 **Board of trustee election rules.**

- (A) Conduct of trustee elections. Ohio police and fire pension fund ("OP&F") shall conduct elections in accordance with Chapter 742. of the Revised Code and this rule.
- (B) Notice of election. For an election of the OP&F firefighter or police officer member of the board of trustees, a "notice of election" will be sent to each police or fire department in the state of Ohio having members in OP&F, as the case may be, not later than the first Monday in February of the year of the election. For any election of the OP&F retirant member of the board of trustees, a "notice of election" will be sent to each eligible retirant member through appropriate means not later than the first Monday in February of the year of the election.
- (C) Nominating petitions.
- (1) Nominating petitions must be in a form approved by the board of trustees. Other petitions substantially conforming to board requirements may, in the board's discretion, be accepted.
 - (2) Nomination petitions may be obtained at the offices of OP&F during normal business hours beginning on the first Monday in February of the year of the election. As an added courtesy, the nominating petitions will also be available on www.op-f.org.
 - (3) Petitions secured from OP&F or nominating petitions drawn up by individuals or entities other than OP&F must be signed on or after the first Monday in February of the year of the election.
 - (a) For an "employee member," the petition must be signed by at least one hundred active members of the class that is the subject of the election, with at least twenty signers from each of at least five counties of the state (i.e., county of residence).
 - (b) For a "retirant member," the petition must be signed by at least fifty retired members of the class that is the subject of the election, with at least ten signers from each of at least five counties of the state (i.e., county of residence).
 - (4) Nominating petitions must be filed in the office of OP&F not later than four p.m. on the first Monday in April of the year of the election.
 - (5) Persons filing nominating petitions who wish to submit a black and white photograph of himself or herself for reproduction in the ballot must deliver such photograph to the offices of OP&F not later than the deadline referenced

in paragraph (C)(4) of this rule. OP&F and the independent elections administrator chosen by OP&F reserve the right to crop the photograph in their sole and absolute discretion.

- (6) Petition signatures and candidate eligibility shall be verified based on OP&F's records. Signatures that cannot be conclusively verified shall not be counted.
 - (7) All petitions shall be certified by the independent elections administrator under contract with OP&F or by the office of the Ohio secretary of state and shall be subject to an audit by the secretary of state. In the event that there is a discrepancy between the certification by the independent elections administrator and the results of the review and audit by the secretary of state, the determination of the secretary of state shall control and final.
 - (8) In case of a contested election, the names of the qualified candidates shall be placed on the ballot for election.
- (D) Certification on eligibility. In addition to filing the required nominating petitions, all candidates must file a certification of eligibility in the form approved by the board of trustees that confirms that the person is not ineligible to run for election to the board of trustees for any of the reasons outlined in section 742.046 of the Revised Code. This certificate of eligibility must be filed in the office of OP&F not later than four p.m. on the first Monday of April of the year of the election.

(E) Ballots.

- (1) The independent elections administrator will prepare and mail out the ballots containing the names and photographs of candidates who filed the required nominating petitions and certificate of eligibility, as certified by the independent elections administrator or the officer of the secretary of state, as the case may be.
- (2) Ballots will contain the names of the candidates and the position of the names on such ballots will be rotated so that each candidate's name appears in the top position an equal number of times to the extent possible. The reverse side of each ballot will contain specific instructions on how a vote should be cast. If the instructions are not explicitly followed, the ballot will be void.
- (3) Ballots for the election shall be sent to each member of OP&F who is eligible to vote in ~~this~~the election, as provided in section 742.04 of the Revised Code, to the address of such eligible member. ~~For an election of the "employee member," the deadline is as of the close of business on the first Monday in March of the year of the election provided the person is not a retirant on the first Monday in~~

~~April of the year of the election, as shown in OP&F's records. For an election of the "retirant member," the deadline is as of the close of business on the first Monday in April of the year of the election, as shown in OP&F's records. In furtherance thereof, OP&F will determine the person's eligibility status as a "member" of OP&F, based upon the payroll that is posted to OP&F's books and records, after having been filed in accordance with the terms of section 742.32 of the Revised Code and rule 742-5-03 of the Administrative Code and approved by OP&F.~~

- (4) Ballots are to be returned directly to the independent elections administrator and must be received not later than four p.m. on the third Tuesday in May of the year of the election. Ballots received later than that date will not be counted, but if OP&F receives a ballot prior to this deadline, the ballot will be sent to the elections administrator.
- (5) Prior to the ballots being mailed to each eligible OP&F member, OP&F may, as a courtesy, send a notice to the member on the need to send in any change of address in order to vote in the election, which OP&F cannot assure will be delivered to that person if the person has failed to maintain his/her current address with OP&F. The elections administrator will not forward any undeliverable ballot to a new address.
- (6) The independent elections administrator will make the final determination of the validity of all ballots, count the ballots and announce and certify the results of the election to the board of trustees not later than the last Wednesday in May following the date that the ballots were mailed to eligible members.

(F) Voting.

- (1) The election may be conducted by paper ballots, through electronic or other alternate methods, such as telephone voting, or a combination thereof, as determined by the board of trustees from time to time.
- (2) The first vote cast will be the controlling vote.
- (3) The counting of the ballots shall be conducted by an independent elections administrator or the secretary of state, as the case may be, and may be subject to additional rules that are established by the independent elections administrator.

(G) Uncontested election. As authorized by section 742.041 of the Revised Code, in the event of an uncontested election for a particular position for either the "employee member" or the "retirant member," no ballots will be mailed and the board will declare

the sole candidate of that position as the winner of OP&F's board of trustees for a term of four years commencing on the first Monday in June of the year of the election.

(H) Vacancies.

- (1) If a vacancy occurs in the term of an employee member or retirant member of the board, the board of trustees shall declare the seat vacant and establish a schedule to nominate, interview and select a successor.
- (2) Candidates shall qualify under the same eligibility requirements as the predecessor in office.
- (3) The names of qualified candidates shall be certified by the retirement system and shall be subject to review and audit by the secretary of state.
- (4) The independent elections administrator or the secretary of state shall certify the results of any election conducted under the terms of section 742.05 of the Revised Code and this paragraph.
- (5) All documents regarding the filling of the vacancy, including the resumes and forms required by the retirement system shall be made available to any person upon request.

(I) Elections in 2020 postponed due to COVID-19/Coronavirus Pandemic.

- (1) As authorized by Amended Substitute House Bill 197 of the 133rd General Assembly, the trustee elections that were to occur in May 2020 were postponed by the board of trustees until December 1, 2020.
- (2) As required by Amended Substitute House Bill 197 of the 133rd General Assembly, the dates in section 742.04 of the Revised Code and this rule shall be adjusted as follows:
 - (a) The notices of election outlined in paragraph (B) of this rule will be sent not later than September 8, 2020.
 - (b) The nominating petitions outlined in paragraph (C) of this rule may be obtained at the offices of OP&F during normal business hours beginning on September 8, 2020. The nominating petitions will also be available on that date on www.op-f.org.
 - (c) The nominating petitions, the certificate of eligibility outlined in paragraph (D) of this rule, and any candidate photo outlined in paragraph (C)(5) of

this rule shall be filed with OP&F not later than four p.m. on October 12, 2020.

(d) The independent elections administrator will prepare and mail out the ballots on or before October 26, 2020. The ballots shall be sent to each member of OP&F who is eligible to vote in this election to the address of such eligible member.

(i) For the elections of the "police employee member" and "firefighter employee member," a police officer or firefighter is eligible to vote in their respective elections if he or she is a member of the fund on August 31, 2020, as shown in OP&F's records.

(ii) For the election of the "police officer retirant member," a retired police officer is eligible to vote in the election if he or she is receiving an age or service retirement benefit or disability benefit from OP&F as of August 31, 2020, as shown in OP&F's records. A surviving spouse who is receiving a benefit as a result of the deceased member's service in a police department is also eligible to vote in the election.

(e) The ballots shall be returned directly to the independent elections administrator and must be received not later than four p.m. on December 1, 2020.

(f) The independent elections administrator will make the final determination of all ballots, and announce and certify the results of the election not later than December 21, 2020.

(g) On certification of the election results, the candidates receiving the highest number of votes in each election shall be elected as trustees with terms commencing on January 4, 2021. Since Amended Substitute House Bill 197 of the 133rd General Assembly did not extend the four-year terms that were to begin on the first Monday in June of 2020, the new terms commencing on January 4, 2021 shall expire on June 2, 2024.

(3) All other requirements set forth in this rule shall apply to the postponed 2020 elections.

Effective: 8/27/2020

CERTIFIED ELECTRONICALLY

Certification

08/27/2020

Date

Promulgated Under: 111.15
Statutory Authority: 742.045, 742.10
Rule Amplifies: 742.045
Prior Effective Dates: 04/21/2005, 12/27/2007 (Emer.), 04/03/2008,
08/17/2018

742-3-02

Definition and usage of terminal pay and salary in benefit and pension calculations.

- (A) For benefit calculation purposes, all payments made by an employer to an employee shall be reported to and considered by the Ohio police and fire pension fund ("OP&F") according to the definitions contained in section 742.01 of the Revised Code and this rule.
- (B) "Terminal pay" includes, but is not limited to, the specific payments defined in this rule, subject to the other provisions of this rule.
- (1) "~~Vacation or furlough~~ pay" refers to sums paid to employees for periods during which they do not work, pursuant to normal employment arrangement. It also includes additional compensation paid to employees for foregoing vacation.
 - (2) "Sick leave" represents amounts paid directly by employers to employees for periods during which they do not work due to personal injury or sickness.
 - (3) "Personal leave" is paid leave other than vacation or sick leave. If its usage results in debiting another paid leave account for the employee, then it is not considered to be personal days, but is defined by the form of payment from the debited account.
 - (4) "Compensatory time" results from employees being credited for hours worked in excess of the employers' standard workday.
 - (5) "Holiday compensation" is payment received by an employee for a day that is customarily observed in the community in celebration of a historical or religious occasion, regardless of whether or not the employee works that holiday.
 - (6) "Longevity" is a regular, recurring payment received by an employee based on a years-of-service schedule.
 - (7) "Overtime" is payment received by an employee for duty-related work performed in excess of a standard workweek. For purposes of divisions (K)(3) and (L)(1) of section 742.01 of the Revised Code, the payroll period shall be determined by the employer's practice for reporting overtime, as documented by OP&F's books and records, but in no event shall the employer report overtime to OP&F more than sixty days after the date on which the overtime is worked.
 - (8) "Paid leave" is compensated leave received by an employee which is a combination of vacation and sick leave.
 - (9) "Combined leave" is paid leave received by an employee which is a combination of any leave described in paragraph (B) of this rule.

- (10) "Hazard pay" is a regular payment received by an employee for employment in a high-risk occupation.
 - (11) "Stress pay" is a regular payment received by an employee to compensate for employment in a stressful occupation.
 - (12) "Premium pay" is payment received by an employee that is between his regular rate of pay and his overtime rate of pay.
 - (13) A "Kelly Day" is compensation paid to a member of OP&F which is not vacation, sick leave, or personal leave for a continuous period of off duty time for the purpose of reducing the hours worked in a week as specified by contract.
- (C) Use of terminal pay in pension/benefit calculation
- (1) Cost-of-living allowance (COLA) method: For each person whose effective date of retirement falls after July 24, 1986 who has not made an election under division (B) of section 742.3716 of the Revised Code to forego possible cost-of-living allowances in exchange for receiving a pension or benefit in which "terminal pay" has been used shall have his/her pension calculated under the terms outlined in this paragraph.
 - (a) An employee's receipt of cash for sick leave, personal leave, compensatory time, paid leave, vacation, and similar payments shall not be used in the calculation of pension and benefits, regardless of the COLA or non-COLA election.
 - (b) Holidays and longevity may be used in the calculation provided that payment occurs within one year of when it is earned, subject to the following limitation: in no event shall floating holidays and personal days/leave be included in the calculation, even if these items are included as part of the holiday and longevity pay provided for under an employee's contract.
 - (c) Subject to the provisions of paragraph (B)(7) of this rule, overtime must be used in the calculation if it is paid during the pay period in which it is earned or the pay period not later than sixty days after the overtime is earned.
 - (d) Hazard pay, stress pay, and similar special payments may be used in the calculation if paid within one year of the date it is earned.

- (e) Combined leave shall be divided into its individual components, and each component will be treated as a separate leave item for calculation purposes.
 - (f) To be used in the calculation, a "Kelly Day" must be worked and the compensation for such worked "Kelly Day" must be paid in the pay period earned or the pay period immediately following.
- (2) Non-cost-of-living (Non-COLA) method: If a member has elected to forego possible cost-of-living allowances under division (A) of section 742.3716 of the Revised Code by making an election under division (B) of section 742.3716 of the Revised Code, then terminal pay shall be incorporated in the calculation of a pension or benefit as herein described.
- (a) Terminal pay actually earned during the period over which a pension or benefit is based shall be incorporated in the calculation base, and such terminal pay shall be subject to employee and employer contributions.
 - (b) Vacation, paid leave, sick leave, personal leave, and compensatory time alone are governed by the "first-in, first-out" principle.
- (D) For purposes of calculating pensions and benefits, "salary," as defined in division (L) of section 742.01 of the Revised Code, is limited to compensation earned during the period over which a pension or benefit is based.
- (E) For purposes of calculating pensions and benefits consistent with OP&F's past practices, "compensation for services outside the scope of the employee's regular employment" includes any compensation paid to members based on their length of service with the employer, including terminal pay (as defined in section 742.01 of the Revised Code and this rule) that is converted to additional compensation paid to the member upon the achievement of a certain length of service with the employer, but no longer characterized as terminal pay, and not included as part of the member's base pay from and after the entry into and exit from such salary program; provided, however, that if this compensation is rejected by OP&F for the calculation of a pension or benefit, OP&F will allow the member to unwind the conversion of any terminal pay to such additional compensation in order to include the terminal pay in the calculation of pensions and benefits, as permitted by the terms of sections 742.01 and 742.3716 of the Revised Code and this rule.
- (F) Pursuant to the authority granted to the board in section 742.013 of the Revised Code, the definition of "salary" shall include amounts that exceed the salary benchmark determined in division (G) of section 742.01 of the Revised Code if such amounts are

the result of a promotion in rank. Any other amounts that exceed the salary benchmark shall not be included in "salary."

Effective: 6/19/2020

CERTIFIED ELECTRONICALLY

Certification

06/19/2020

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.01, 742.32, 742.37, 742.39
Prior Effective Dates: 01/01/1977, 05/12/1983, 07/24/1986 (Emer.),
10/16/1986, 03/19/1987, 08/04/1988, 07/19/1999,
02/07/2000 (Emer.), 05/01/2000, 03/09/2001 (Emer.),
04/09/2001 (Emer.), 05/24/2001, 04/28/2006,
01/07/2013 (Emer.), 03/24/2013

742-3-17

Withdrawal of application for service retirement or disability benefits.

- (A) For a member of Ohio police and fire pension fund ("OP&F") who wishes to withdraw an application for service retirement or disability benefits, the provisions of paragraph ~~B or C~~ (B) or (C) of this rule shall govern, depending on which paragraph applies to the particular situation. For pending disability benefit applications, the withdrawal of the application is also governed by paragraph (C)(6) of rule 742-3-05 of the Administrative Code.
- (B) In cases where OP&F has not issued a warrant for the payment of the benefit or made a payment of the benefit through direct deposit, the member can withdraw the application for service retirement or disability benefits by filing a written statement authorizing OP&F to withdraw the application.
- (C) In cases where OP&F has already issued a warrant for the payment of the benefit, whether on an interim or final payment basis, whichever is the first to occur, the member shall return the first warrant and any subsequent warrants uncashed to OP&F. For benefit payments made through direct deposit, OP&F must be able to reverse the electronic funds transfer from the member's financial institution. The member shall also file with OP&F a written statement authorizing OP&F to withdraw the application for benefits and revoke any direct deposit authorization. The member's written statement, uncashed warrants, and return of payments made through direct deposit shall be received by OP&F no later than thirty days after the date on which the first warrant was sent to the member or deposited into the member's account by OP&F.
- (D) For a member of OP&F who fails to withdraw the application for service retirement or disability benefits in accordance with paragraph (B) or (C) of this rule, such person will be deemed to have accepted the benefit and no withdrawal will be permitted. In the case of disability benefit recipients, they will be prohibited from applying for any new, changed, or different benefit, except as expressly provided for in division (D) (5) of section 742.38 of the Revised Code.

Effective:

Five Year Review (FYR) Dates: 2/4/2021

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.38
Prior Effective Dates: 03/19/2001, 02/16/2006, 04/07/2016

742-5-03

Contributing Service Credit.

(A) As used in this rule:

(1) “Contributing service credit” means service credit earned by a member of the police and fire pension fund (“OP&F”) as a result of OP&F receiving employee contributions on salary of that member, as required under section 742.31 of the Revised Code, for full-time contributing service rendered by an OP&F member to a covered employer.

(2) Except as provided in this rule, “full-time contributing service credit” means either of the following:

(a) For a standard forty-hour work week, a member has been compensated for working (including paid leave) a minimum of thirty-seven and a half hours for each week in any normal monthly payroll reporting period; or

(b) For a platoon system (i.e., twenty-four hours then followed by forty-eight hours off), a member has been compensated for working (including paid leave) a minimum of forty-five hours for each week included in any normal monthly payroll reporting period.

(3) “Partial contributing service credit” means prorated service credit allowed for members determined by OP&F to be full-time whose hours of service for each week included in any normal monthly payroll reporting period temporarily falls below “full-time contributing service credit,” as defined in paragraph (A)(2) of this rule.

For partial contributing service credit, OP&F shall prorate the service credit by dividing the hours compensated by the regularly reported hours for the monthly payroll reporting period.

(4) “Furlough” means a temporary unpaid leave of absence that occurs between March 9, 2020 and June 30, 2021, which results in a member being paid less than the standard hours set forth in paragraph (A)(2) of this rule.

(B) Not more than twelve months of contributing service credit can be allowed in a calendar year.

(C) Notwithstanding this rule, no person shall be allowed contributing service credit before the date the person becomes a member of OP&F or after the member's effective date of termination or retirement.

(D) In the event of a furlough, the employer shall notify OP&F in writing of the planned furlough, the number of hours members will work, and the duration of the furlough

not to exceed six total months in the period. A member shall receive up to a maximum of six months of full-time contributing service credit during the furlough period March 9, 2020 to June 30, 2021, as long as the member is compensated as follows:

- (1) If an employer has less than two hundred OP&F members, OP&F will accept a minimum of thirty-two hours out of a standard forty-hour work week or, for a platoon system, thirty-eight hours out of forty-eight hours a week, for each week included in a normal payroll reporting period.
- (2) If an employer has two hundred or more OP&F members, the minimum number of hours necessary for full-time contributing service credit will be determined on an ad hoc basis based on the actuarial impact to OP&F.

Effective: 6/19/2020

CERTIFIED ELECTRONICALLY

Certification

06/19/2020

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.31, 742.32

742-5-04

Military service credit.

- (A) The first full-time Ohio public service covered under any state or in a municipal retirement system of this state which is subject to purchase or transfer under section 742.21, 742.212, 742.51, 742.511, 742.512, 742.513, 742.514, or 742.515 of the Revised Code, subject to purchase under section 742.23, 742.24, 742.371, 742.375, 742.376, 742.511, or 742.512 of the Revised Code, or subject to redeposit under section 742.371 of the Revised Code, shall be considered "the first year of full-time service in Ohio" covered by any state or municipal retirement system of this state following termination of military service as used in section 742.52 of the Revised Code in reference to the purchase of military service credit.

As used in section 742.52 of the Revised Code, "annual compensation" means the initial annual salary rate for the full-time position used to compute the cost of purchasing credit for military service.

- (B) The employer contribution required under section 742.521 of the Revised Code shall be based on the base salary the police officer or fire fighter would have earned had military service not interrupted the member's police or fire service. Base salary is the hourly rate equivalent upon which the overtime compensation rate, if any, is based.

The employer contribution required under section 742.521 of the Revised Code shall not be levied in connection with any credit granted for military service that occurred prior to October 29, 1996.

- (C) For purposes of section 742.52 of the Revised Code, a person shall be deemed to be receiving a disability benefit or pension if the person fails to withdraw his/her application, as outlined in rule 742-3-17 of the Administrative Code.
- (D) The recovery procedures outlined in division (E)(2) of section 742.52 of the Revised Code shall include, but not be limited to, the recovery procedures outlined in rule 742-3-08 of the Administrative Code.
- (E) Prior to September 21, 2000, the nominal method shall be used for the calculation of compounded interest at the rate established by the board of trustees. Beginning on September 21, 2000, the effective method shall be used for the calculation of compounded interest at the rate established by the board of trustees.

Five Year Review (FYR) Dates: 10/8/2020 and 10/08/2025

CERTIFIED ELECTRONICALLY

Certification

10/08/2020

Date

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Rule Amplifies: 742.21, 742.212, 742.23, 742.24, 742.371, 742.375,
742.376, 742.51, 742.511, 742.512, 742.513, 742.514,
742.515, 742.52, 742.521
Prior Effective Dates: 06/30/1976, 01/18/1997, 03/19/2001, 04/28/2006

ACTION: Original

DATE: 10/08/2020 9:35 AM

TO BE RESCINDED

742-5-05

Merchant marine service.

Merchant marine service during wartime shall be considered service in the "armed forces of the United States" for the purpose of purchasing service credit to be used in making pension benefit calculations under section 742.52 of the Revised Code.

Effective:

Five Year Review (FYR) Dates: 10/8/2020

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.52
Prior Effective Dates: 01/01/1977, 04/28/2006

742-5-07

Service credit purchases and transfers.

- (A) For purposes of sections 742.21 and 742.251 of the Revised Code, a "purchase" shall mean that the Ohio police and fire pension fund ("OP&F") member withdrew his/her contributions from the applicable retirement system or out-of-state or local government and a "transfer" shall mean that the OP&F member maintained his/her contributions with the applicable retirement system.
- (B) For purposes of divisions (B) and (C) of section 742.21 of the Revised Code, "amount withdrawn" shall mean contributions paid by the member to the applicable retirement system for service credit, which are later withdrawn from that retirement system by the member, but shall not include interest paid to the member on such contributions by the withdrawing retirement system. In no event, however, shall this definition impact OP&F's right to the payment of interest according to that section the Revised Code.
- (C) For purposes of determining whether an OP&F member is not receiving a pension or benefit payment, as outlined in sections 742.21 and 742.251 of the Revised Code, OP&F will rely upon its books and records.
- (D) For purposes of determining "full-time service," OP&F shall request the employer and the member to certify the full-time service, but in any event, OP&F will determine that the contributing credit was for "full-time service." In order for the service to be "full-time", as provided for in divisions (A) and (B) of section 742.01 of the Revised Code: (1) the service credit to be purchased or transferred must have been rendered while employed in a full-time public position; and (2) the individual must meet the criteria for "full-time contributing service," as outlined in rule 742-5-03 of the Administrative Code. As a result, any pay period in which OP&F will prorate service credit for a member if the overall service is determined by OP&F to be full-time for occasions when the member failed to work be compensated the equivalent of thirty-seven and one half or more minimum number of hours per week as set forth in paragraph (A)(2) of rule 742-5-03 of the Administrative Code does not qualify as "full-time" and, in such event, OP&F will pro-rate such credit.
- (E) As required by section 742.21 of the Revised Code, in no event can credit be purchased or directly transferred for employment in a part-time position. For purposes of meeting the definition of "full-time service" in section 742.21 of the Revised Code and this rule, periods of service in part-time positions cannot be combined to equal "full-time service."
- (F) Credit may not be purchased or directly transferred for periods of employment concurrent with any employment for which the member has already received OP&F service credit.

- (G) Subject to the other provisions of this rule, an OP&F member who is not receiving a pension or benefit payment from OP&F may purchase qualifying service credit for periods of full-time service in a full-time public position as a member of a state or municipal retirement system in the state of Ohio, provided that such service credit has been canceled by the system in which it was earned.
- (H) Subject to the provisions of section 742.251 of the Revised Code and the other provisions of this rule, an OP&F member who is not receiving a pension or benefit payment from OP&F may purchase qualifying service credit for periods of full-time service in a full-time public position as an employee of an entity of an out-of-state or local government, or of an entity of the United States government, provided that such service credit is not used in the calculation of any public or private retirement benefit, other than federal social security benefits.

A member who chooses to purchase service credit under this paragraph rather than transferring the qualifying service credit under paragraph (I) of this rule is entitled to be granted service credit for periods of active duty military service, as provided for in section 742.521 of the Revised Code.

- (I) To initiate the transfer of eligible service credit to OP&F under section 742.21 of the Revised Code, the member shall initiate the request with the transferring retirement system. Within a reasonable time from OP&F's receipt of the ledger of contributions and the employer address from the transferring system, OP&F will send a transfer packet to the member containing a certification to be completed and signed by the member and a certification to be completed by the employer where the service credit that is being transferred was earned. The certification forms should be returned together to OP&F. Upon receipt of this information, OP&F will then review the certifications and ledger information and notify the transferring system of the eligible service credit that should be transferred pursuant to section 742.21 of the Revised Code. In the event that the transferring system transfers monies to OP&F without OP&F's review and approval, OP&F reserves the right to reject service credit that does not meet the criteria for "full-time," as outlined in this rule.
- (J) To initiate the purchase of eligible service credit from OP&F, the member shall notify OP&F to request a cost to purchase the service credit. Within a reasonable time period of such notice, OP&F will send the member a purchase packet containing a certification to be completed and signed by the member and a certification to be completed by the member's employer(s) where the purchasable service credit was earned. The certification forms should be returned together to OP&F. Notwithstanding these certifications, OP&F will review the documentation and determine if the service is "full-time," as required by section 742.21 of the Revised Code, and as more fully outlined in this rule. Once OP&F determines the service credit meets the statutory and administrative requirements, OP&F will provide the

eligible member with a cost statement. Once the member purchases the service credit, OP&F will bill the former system for monies associated with the purchase, as required by section 742.21 of the Revised Code. In the event that the former system pays the monies to OP&F without OP&F's review and approval, OP&F reserves the right to reject service credit that does not meet the criteria for "full-time," as outlined in this rule.

- (K) For purposes of division (K) of section 742.21 of the Revised Code, purchased service credit not only includes purchased service credit, but it shall also include service credit transferred by the Cincinnati retirement system, a non-uniform retirement system, or the other uniform retirement system to OP&F.
- (L) The interest rate charged for the purchase of civilian service credit shall be the actuarial interest assumption adopted by the board.

Effective: 6/23/2020

CERTIFIED ELECTRONICALLY

Certification

06/23/2020

Date

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08/05/1996, 02/22/2002, 11/03/2003, 01/16/2014,
03/03/2019

742-7-02

Use of member's records.

- (A) All records and files of the board and Ohio police & fire pension fund ("OP&F") shall be public information, including an employer's status of the payment of contributions generally due under sections 742.30, 742.31, 742.33, and 742.34 of the Revised Code, but shall not include any member's personal history record (as hereinafter defined), except as otherwise provided by law. A member's personal history record ~~(as hereinafter defined)~~ may only be released to the member or a third party upon OP&F's receipt of a written authorization from the member or his/her authorized representative or agent using forms provided by OP&F or a form substantially similar to OP&F's form, subject to any internal policies adopted by OP&F and to the extent provided by such authorization, but any such authorization must be signed before a notary public.
- (B) "Member's personal history record" includes all information related to an OP&F member, including the name, address, telephone number, social security number, record of contributions, correspondence to or from OP&F, any report of a pre-employment physical, any medical reports and recommendations (subject to the terms of paragraph (C) of this rule), the status of any application for benefits, any record identifying the service history or service credit of a member or benefit recipient, but excluding:
- (1) The member's status with OP&F (i.e. active, or retired, or disabled); but does not include whether or not the member made an election to participate in DROP;
 - ~~(2) The provision of law under which a member retired;~~
 - ~~(3)(2) The award given to a member or his/her survivors, as the case may be, by the board of trustees for a disability reconsideration or an application for benefits under the Ohio public safety officers death benefit fund and the member's name and employer; and~~
 - ~~(4) Disability award, both appeal and initial determinations granted by the board of trustees and accepted by the member.~~
 - ~~(5)(3) Any information disclosed by OP&F in accordance with the permitted exceptions of the Health Insurance Portability And Accountability Act of 1996 and OP&F HIPAA policies and procedures.~~
- (C) Medical reports and recommendations are considered to be the property of Ohio police and fire pension fund. The medical reports and recommendations for a member may be released to the member, unless an OP&F physician or psychiatrist determines for OP&F that the disclosure of information is likely to have an adverse effect on the member. In the event the OP&F physician or psychiatrist determines that a disclosure

of medical reports and recommendations to a member will have an adverse effect on the member, the information shall only be released to a physician, psychiatrist, or psychologist who is designated by the member or his/her authorized representative or agent only after OP&F's receipt of a written authorization from the member or his/her authorized representative or agent using forms provided by OP&F or a form substantially similar to OP&F's form, subject to any internal policies adopted by OP&F to the extent provided by such authorization. Notwithstanding any other restrictions referenced in this rule, the medical reports and recommendations of a member may be released to OP&F appointed physicians and vocational evaluators when necessary for the proper administration of the benefits offered by OP&F. Except as otherwise provided in this rule, these records may be released to the member and may be released to the member's attorney, physician, or duly authorized agent only upon written authorization of the member or the member's authorized representative or agent using forms provided by OP&F or a form substantially similar to OP&F's form, but any such authorization must be signed before a notary public. Any other release is prohibited.

- (D) As provided by law and only at the request of any organization or association of members of OP&F, OP&F shall provide a list of names and addresses of members and other system retirants (as defined in section ~~742.01~~ 742.26 of the Revised Code). OP&F shall comply with such a request at least once a year.
- (E) Reasonable fees may be charged for any expenses incurred in compiling, copying, mailing, or examining the records of OP&F.
- (F) The executive director may designate a staff member to authenticate retirement system's records of OP&F that will be sent to a court officer of this state.
- (G) An authorization given by a member or his/her authorized agent or representative shall be valid for only one year from the date that it was issued.
- (H) OP&F shall make the determination on compliance with the terms of this rule and its decision shall be final.
- (I) For purposes of this rule, a ~~"Member"~~ shall have "member" has the same meaning set forth ~~in~~ as in division (E) of section 742.01 of the Revised Code.

Effective:

Five Year Review (FYR) Dates: 8/28/2020

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.41
Prior Effective Dates: 01/01/1977, 07/16/1984, 05/12/1986, 10/16/1986,
05/04/2000, 08/08/2000, 12/23/2000, 05/24/2003
(Emer.), 07/31/2003, 10/13/2005

TO BE RESCINDED

742-7-04 **Extended benefits.**

- (A) For purposes of division (E) of section 742.37 of the Revised Code (hereinafter referred to as the "Extended Benefits"), "full time curriculum requirements" shall mean at least twelve hours, subject to the other provisions of this rule.
- (B) As provided for in division (E) of section 742.37 of the Revised Code, the criteria determined by OP&F's board of trustees for the institution of learning or training is that the school must be a high school, vocational or trade school, college or university and the course of study must be designed for at least one school year of full-time study or its equivalent in part-time study, subject to the limitations referenced in paragraph (D) of this rule.
- (C) In order to apply for "Extended Benefits," the parent or guardian and the student must complete an application in the form approved by OP&F. In addition, a separate application must be completed and filed with OP&F for each child who wishes to apply for "Extended Benefits."
- (D) If a student is out of school more than four months and returns to school, a new application must be made before benefit payments will be resumed.
- (1) If the child's pension was terminated when he/she attained age eighteen if he/she did not attend an "institution of learning or training" and he/she attends an "institution of learning or training" that meets the foregoing criteria, a new application for him/her shall be completed and filed with OP&F in the OP&F approved form before his/her benefits will be paid if he/she meets the statutory criteria set forth in division (E) of section 742.37 of the Revised Code, and such benefits shall commence the earlier of the month following OP&F's receipt of the fully-completed application or the date on which the child began attending an institution of learning or training.
- (2) If an unmarried child of a deceased member between the ages of eighteen and twenty-one files for "Extended Benefits" and he/she has never received a benefit from OP&F under division (E) of section 742.37 of the Revised Code, a copy of his/her birth certificate must accompany the completed application before OP&F can pay the benefit.
- (3) For purposes of the application process for "Extended Benefits," a certification from the school the eligible child is attending is required as a part of the application process. A new certification must be completed for each school period of enrollment otherwise, the child will not be eligible for benefits under division (E) of section 742.37 of the Revised Code.

For purposes of determining whether the student has met the requirement for "two-thirds of regular school work," OP&F will allow students to be paid through the vacation period, which is considered as four months and can be taken any time during the year. If the student takes more than four months, he/she is not eligible for a benefit for the extra time off. For example, OP&F will pay a full year of "Extended Benefits" if the eligible child is in school, takes the summer months off, but returns to school in September; or, if the child takes a quarter off and goes to school in the summer.

- (E) Since "Extended Benefits" will be paid to surviving children of OP&F members, the benefits for children shall be paid to the parent or guardian and the eligible child, unless the eligible child is no longer minor. The parent or guardian, or the child if no longer a minor, as the case may be, shall be held responsible for any overpayments of benefits that result from the surviving child no longer being eligible to receive "Extended Benefits" due under division (E) of section 742.37 of the Revised Code and this rule.

Effective:

Five Year Review (FYR) Dates: 2/4/2021

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.37(E)
Prior Effective Dates: 01/01/1977, 02/22/2002, 06/30/2011

742-7-14

Recognition of pick-up of contributions.

- (A) For reporting and tax purposes, the Ohio police and fire pension fund ("OP&F") will recognize any payment of a member's contributions under section 742.32 of the Revised Code or amounts designated by the member's employer for the purchase of service credit by payroll deduction with picked-up contributions if the member's employer has adopted and filed with OP&F a resolution authorizing the deduction and payment of contributions or service credit purchases for its employees with amounts designated as picked-up contributions under section 414(h)(2) of the Internal Revenue Code, in such form approved by OP&F's board of trustees, including an effective date (the "approved resolution"). The resolution must be filed at least thirty days prior to submitting contributions to OP&F as picked-up.
- (B) The employer's reporting requirement under section 742.32 of the Revised Code shall also include the reporting of picked-up contributions consistent with the terms of this rule.
- (C) To be compliant for reporting purposes under section 742.32 of the Revised Code and rule 742-9-10 of the Administrative Code, the employer must meet the following criteria:
- (1) Timely file with OP&F a resolution authorizing the payment of contributions or purchase of service credit for its employees with amounts designated as picked-up contributions under section 414(h)(2) of the Internal Revenue Code in accordance with the deadline outlined in paragraph (A) of this rule;
 - (2) Timely report the amount of picked-up contributions by member as part of section 742.32 of the Revised Code and rule 742-9-10 of the Administrative Code and consistent with the applicable approved resolution on file with and approved by OP&F;
 - (3) Timely file a separate resolution for police and fire and then by unit/division, if applicable, or clearly outline the pick-up by unit/division;
 - (4) Timely file any changes to any approved resolution, which needs to be reviewed and approved by OP&F as if it were an originally-filed approved resolution;
- (D) Applicable penalties and interest will apply for employers who fail to:
- (1) Timely file a resolution for picked-up contributions with OP&F in accordance with the deadlines of this rule; and
 - (2) Timely report picked-up contributions under section 742.32 of the Revised Code.

- (E) If OP&F receives an employer report under rule 742-9-10 of the Administrative Code that does not conform to the resolution on file with OP&F, OP&F shall send a written notice to the employer of the non-conforming nature of the resolution or reporting and allow the employer to have an opportunity to take corrective actions noted in the notice within thirty days of OP&F's written notice. OP&F shall not assess further penalties and interest under section 742.35 of the Revised Code until the expiration of this grace period for those employers who fail to take the corrective action noted by OP&F's written notice.
- (F) For those employers who file an approved resolution and report contributions as picked-up, but fail to provide an effective date, this shall not be deemed to be non-compliant. In this case, the effective date will be the date of authorized signature or other supporting documentation provided by the employer, which is acceptable to OP&F.
- (G) The requirements of this rule shall also apply to any changes or modifications to picked-up contributions and they will be treated as if they are a new resolution.

Five Year Review (FYR) Dates: 8/28/2020 and 08/28/2025

CERTIFIED ELECTRONICALLY

Certification

08/28/2020

Date

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Rule Amplifies: 742.32
Prior Effective Dates: 11/25/2003 (Emer.), 02/09/2004, 07/19/2004,
06/08/2005 (Emer.), 09/26/2005, 10/04/2010,
12/19/2010

742-7-15

Delinquent employers payment plan.

- (A) For outstanding fines and penalties due under sections 742.352 and/or 742.353 of the Revised Code, OP&F shall offer a delinquent employer a payment plan if the employer meets the following criteria:
- (1) The employer has no past due employee contributions; and
 - (2) The employer has satisfied any pre-existing payment plan promissory note; and
 - (3) The employer meets one of the following criteria:
 - (a) Employers on fiscal watch or fiscal emergency, as defined by the auditor of state, and who have past due contributions or have accrued reporting and/or pre-employment penalties and interest; or
 - (b) Employers who have accrued reporting and/or pre-employment penalties and interest which exceed the dollar amount of past due employer contributions, which have been past due for three or more quarters; or
 - (c) Employers who are inactive and have past due employer contributions, penalties, or interest; or
 - (d) Employers who have employer contributions that are three or more quarters past due and have no ability to pay (based on the financial formulas outlined below).
 - (i) Penalties and interest exceed twenty-five per cent of general fund revenues; or
 - (ii) Penalties and interest exceed eighty per cent of general fund ending fund balance; or
 - (iii) Penalties and interest exceed fifty per cent of general fund receipt over expenditures.
- (B) The offering of this plan of payment by OP&F will precede any actions taken by OP&F to certify the amount due from the employer in accordance with section 742.35 of the Revised Code.
- (C) The plan of payment shall be offered to the employers who meet the criteria outlined in paragraph (A) of this rule in accordance with the following provisions:

- (1) OP&F will review the eligibility of certain employers who may be able to take advantage of a payment plan. OP&F will notify those employers of the program and request that such employers contact OP&F for additional information.
- (2) For any inquiries received from employers, OP&F will notify such employers of their eligibility to participate in a payment plan.
- (3) OP&F shall designate a deadline by which the employer must elect to participate in the payment plan and sign the required documentation and if the employer fails to meet the deadlines, the payment plan will not be available to the employers and penalties and interest will continue to accrue.
- (4) The employer will have several payment term options in order to permit the employer to choose the best option within the employer's budget considerations, but in no event will the term exceed fifteen years.
- (5) The employer must sign a promissory note and agreement that will require signature by the designated authorities/officers of the municipality.
- (6) As a condition to participating, the employer must pay in full all past accumulated interest incurred to date to OP&F. Should the employer be unable to remit the interest accrued in full, and all other conditions are met, the board will permit the employer to enter into the payment plan, however the employer's payments will be first applied to the accrued interest portion and then to the past due balance related to contributions and penalties. Interest on those past due balances and penalties will apply until the remaining balance is fully satisfied and based on the repayment term. The total repayment term is limited to the provisions otherwise outlined in paragraph (C)(4) of this rule.
- (7) Upon OP&F's receipt of the required documents from the employer, further penalties will be suspended in exchange for the time certain repayment of funds due to OP&F made on a regular, periodic basis (monthly) as outlined on the payment schedule.
- (8) For active employers who are participating in full compliance with the payment plan, the payment for regular quarterly bills will continue as normal and the billing statement will remove any reference to the unpaid penalties and interest covered under this arrangement unless the employer defaults.
- (9) Interest will be calculated on accumulated penalty balance based on payment term selected. The balance due (penalty and interest) is to be amortized and repaid within the terms of the promissory note at the actuarial assumed rate of interest; ~~which is currently 8.25 per cent and subject to change.~~

- (10) The employer will be given strict payment dates with a fifteen day grace period for late payments. Further, each employer will only be allowed two late payments in any twelve calendar months. Employers will be notified of their late payment and failure to conform to promissory note terms on each occurrence may trigger a default covered by paragraph (D) of this rule.
- (D) Failure to comply with the terms of the signed promissory note and agreement as described in paragraph (C) of this rule will put the employer in default status and OP&F shall terminate the agreement, at its option, and re-establish penalties retroactively back to the effective date of the promissory note, with a reduction of penalties for all payments of principal and interest made under the promissory note. The exercise of OP&F's right to declare a default shall be determined by OP&F's executive director.
- (1) Upon default, the employer will be notified of the employer's failure to conform to the terms of the promissory note and agreement as well as OP&F's decision to terminate the agreement.
 - (2) OP&F will initiate the certification process with the county where the employer resides to collect the balance of funds due to OP&F.
- (E) All payments due under a payment plan shall be made as follows:
- (1) Payments shall be due on the first of each month.
 - (2) Payments for active employers shall be sent to OP&F separately and not commingled with normal employer and employee contribution, which are paid quarterly.
 - (3) There is no prepayment penalty; excess amounts will be applied to principal.
 - (4) At the end of the term, any overpayments due to prepayment will be refunded back to the employer.
 - (5) Bounced checks will be charged back to employers with fees consistent with normal OP&F practices.

Effective:

Five Year Review (FYR) Dates: 11/2/2020

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.352, 742.353
Prior Effective Dates: 10/22/2004, 07/27/2005 (Emer.), 10/13/2005,
10/04/2010

742-8-07

Penalties and interest under section 742.352 of the Ohio Revised Code.

- (A) Pursuant to the authority outlined in division (C) of section 742.352 of the Revised Code, the board of trustees hereby modifies the statutory penalties and interest in accordance with the following provisions.
- (B) Subject to the provisions of paragraph (D) of this rule, an employer with no more than twenty members shall be penalized for failing to transmit reports and payment in accordance with sections 742.32 and 742.56 of the Revised Code and corresponding administrative rules or payments in accordance with section 742.35 of the Revised Code as follows:
- (1) If a report or payment is at least one but not more than fifteen days past due, fifty dollars;
 - (2) If a report or payment is at least sixteen but not more than sixty days past due, one hundred dollars;
 - (3) If a report or payment is at least sixty-one but not more than one hundred eighty days past due, the greater of five hundred dollars or two per cent of the payment.
 - (4) If a report or payment is at least one hundred eighty-one days but not more than two hundred forty days past due, the greater of one thousand dollars or three per cent of the payment;
 - (5) If a report or payment is at least than two hundred forty-one days past due, the greater of three thousand dollars or four per cent of the payment.
- (C) Pursuant to division (C) of section 742.352 of the Revised Code, an employer with twenty-one or more members shall be penalized for failing to transmit reports and payment in accordance with sections 742.32 and 742.56 of the Revised Code and corresponding administrative rules or payments in accordance with section 742.35 of the Revised Code as follows:
- (1) If a report or payment is at least one but not more than fifteen days past due, one hundred dollars;
 - (2) If a report or payment is at least sixteen but not more than sixty days past due, the greater of five hundred dollars or one per cent of the payment;
 - (3) If a report or payment is at least sixty-one but not more than one hundred eighty days past due, the greater of one thousand dollars or two per cent of the payment.

- (4) If a report or payment is at least one hundred eighty-one days but not more than two hundred forty days past due, the greater of three thousand dollars or three per cent of the payment;
 - (5) If a report or payment is at least two hundred forty-one days past due, the greater of seven thousand five hundred dollars or four per cent of the payment.
- (D) Notwithstanding the provisions of paragraph (B) of this rule, employers with no more than five members shall have a cap on penalties equal to five hundred dollars for each failure to transmit reports and payment in accordance with sections 742.32 and 742.56 of the Revised Code or payments in accordance with section 742.35 of the Revised Code. Such employers shall also be eligible to participate in the payment plan outlined in rule 742-7-15 of the Administrative Code to the extent that they require an additional amount of time to repay penalties and interest.

Five Year Review (FYR) Dates: 2/4/2021 and 02/04/2026

CERTIFIED ELECTRONICALLY

Certification

02/04/2021

Date

Promulgated Under: 111.15
Statutory Authority: 742.10, 742.352
Rule Amplifies: 742.352
Prior Effective Dates: 03/20/2006 (Emer.), 04/03/2006 (Emer.), 05/15/2006,
04/07/2016

742-9-10

Employer reporting requirements.

- (A) For purposes of this rule, "required penalties" shall mean the penalties prescribed by section 742.352 of the Revised Code, as modified by rule 742-8-07 of the Administrative Code.
- (B) For purposes of section 742.32 of the Revised Code, the "report of employee deductions" that employers must transmit to Ohio police & fire pension fund ("OP&F") shall be on the report of retirement deductions form provided by OP&F and found on OP&F's website, www.op-f.org, and shall be consistent with the requirements outlined in this rule.
- (C) For purposes of section 742.32 of the Revised Code, the term "employee" shall refer to a "member", as such term is defined in divisions (A)(2)(a) and (B)(2)(a) of section 742.01 of the Revised Code.
- (D) For purposes of section 742.32 of the Revised Code, the deduction shall be taken on "salary" paid by the employer to the employee for the month covered in that report, pursuant to the terms of division (L) of section 742.01 of the Revised Code and the rules of the Administrative Code adopted pursuant to that section.
- (E) The form of the employer's report of employee deductions shall be deemed properly filed with OP&F if all of the following occurs:
- (1) The completed form of the report that is filed with OP&F by the statutory deadline is consistent with the report of retirement deductions form and meets all the following requirements:
 - (a) A separate report for the report of deductions for firefighter members and a separate report for the report of deductions for police officer members;
 - (b) For electronic filings, it meets the technical specifications provided to the employers by OP&F, as may be amended from time to time with prior notice to the employer;
 - (c) The reporting of "salary" is consistent with the requirements outlined in this rule; and
 - (d) The reporting of picked-up contributions, whether done through a salary reduction or paid on behalf of the member, must be consistent with the requirements outlined in rule 742-7-14 of the Administrative Code.
 - (2) The report and/or payment is accompanied by a completed OP&F recap form as referenced in rule 742-9-17 of the Administrative Code, and is received by OP&F by the statutory deadline. It is OP&F's preference that the recap form

is sent along with the payment, rather than the report. For electronic filers, the recap form must still be received by OP&F by the statutory deadline.

- (3) The contributions due under section 742.32 of the Revised Code must be paid to OP&F by the statutory deadline, must match the amount outlined in the recap form referenced in rule 742-9-17 of the Administrative Code, and must match the total amount reported on the report referenced in paragraph (E)(1)(a) of this rule. As referenced in paragraph (E)(2) of this rule, it is OP&F's preference that the recap form accompany this payment.
 - (4) For newly hired members, the report and payment is accompanied by a ~~completed OP&F personal history record in the form~~ provided by OP&F and documentation showing the member's appointment to a full-time position as a police officer or firefighter to the extent that it exists.
- (F) In order to verify the reporting of "salary" consistent with the provisions of division (L) of section 742.01 of the Revised Code and section 742.32 of the Revised Code and the corresponding rules of the Administrative Code, OP&F may request detailed pay records involving the member's wages and/or service credit from the employer at any time.
- (G) For purposes of assessing the required penalties for all filings due OP&F under section 742.32 of the Revised Code, OP&F shall take the following course of action:
- (1) No report/no payment. If the required payment prescribed by section 742.32 of the Revised Code is not made in accordance with the deadline outlined in such section and no report of employee deductions is filed with OP&F in accordance with the deadline outlined in such section, which includes the recap form, OP&F shall assess the required penalties.
 - (2) Report/no payment. If the required report of employee deductions prescribed by section 742.32 of the Revised Code and more fully outlined in this rule is filed with OP&F in accordance with the deadline outlined in such section, but the proper payment is not paid to OP&F in accordance with the deadline outlined in such section, OP&F shall assess the required penalties.
 - (3) No report/payment. If the required report of employee deductions prescribed by section 742.32 of the Revised Code and more fully outlined in this rule is not filed with OP&F in accordance with the deadline outlined in such section, but a payment is made with OP&F in accordance with the deadline outlined in such section, OP&F shall assess the required penalties.
 - (4) All other cases, the following shall apply:

- (a) Non-conforming payroll report. OP&F shall give notice to the employer of the non-conforming nature of the report and allow the employer to have an opportunity to take corrective actions to cure such deficiencies within thirty days of OP&F's notice of deficiency (referred to herein as the "cure period"), and the following shall apply:
 - (i) If the employer files a correct report of employee deductions in OP&F's approved format and such report is received by OP&F on or before the expiration of the cure period, no penalties will be assessed by OP&F against the employer.
 - (ii) If OP&F does not receive from the employer the proper report of employee deductions on or before the expiration of such cure period, then OP&F will assess the required penalties beginning the day after the expiration of the cure period.
 - (b) In all other situations, OP&F will notify the employer of the employer's failure to comply with the provisions of section 742.32 of the Revised Code and shall allow the employer to still have an opportunity to take the corrective actions identified in the notice from OP&F within thirty days of OP&F's notice (referred to herein as the "cure period"), and the following shall apply:
 - (i) If the employer files a correct report of employee deductions in OP&F's approved format and such report is received by OP&F on or before the expiration of the cure period, no penalties will be assessed by OP&F against the employer.
 - (ii) If OP&F does not receive from the employer the proper report of employee deductions on or before the expiration of such cure period, then OP&F will assess the required penalties, beginning the day after the expiration of the cure period.
 - (5) Even with the cure period, the employer will still be assessed any statutory fines for late filings and/or payments, as the case may be under the applicable statutory provision.
 - (6) This rule shall apply once the payment and/or report has been filed with OP&F and shall not limit any other remedies available to OP&F by law.
- (H) The provisions of this rule will not change the amounts of the required penalited.

Effective:

Five Year Review (FYR) Dates: 11/19/2023

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 742.10
Rule Amplifies: 742.32, 742.352
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11/23/2000, 02/11/2002 (Emer.), 04/29/2002,
05/30/2002 (Emer.), 08/22/2002, 11/17/2003,
11/30/2005 (Emer.), 02/16/2006, 06/04/2006,
07/19/2007, 05/22/2008, 09/22/2008, 12/12/2013

742-9-12

Employer's compliance.

For purposes of determining whether an employer has met the requirements set forth in sections ~~742.32 and 742.33~~ this chapter and chapter 742 of the Revised Code, ~~as more fully described in Chapters 742-7, 742-8 and 742-9 of the Administrative Code,~~ the records of OP&F may conclusively rely upon its books and records prevail.

Effective:

Five Year Review (FYR) Dates: 10/8/2020

Certification

Date

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Rule Amplifies: 742.32, 742.33
Prior Effective Dates: 11/18/1999 (Emer.), 02/05/2000, 05/18/2006,
01/22/2016

ACTION: No Change

DATE: 10/08/2020 10:38 AM

742-9-14

Reliance on records for purposes of determining taxability.

In furtherance of the policy adopted by the board of trustees of the Ohio police and fire pension fund ("OP&F"), the information used in determining the taxability of benefits payable to those members outlined in OP&F's policy will be based on OP&F's books and records as of the date the form 1099 is issued, as such information is provided to OP&F by the employers, members, and benefit recipients.

Five Year Review (FYR) Dates: 10/8/2020 and 01/22/2026

CERTIFIED ELECTRONICALLY

Certification

10/08/2020

Date

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Rule Amplifies: 742.10, 742.32, 742.37, 742.63
Prior Effective Dates: 03/09/2001 (Emer.), 05/24/2001

742-21-03

Administration of method of payment section of approved division of property order format.

- (A) As used in this rule, “the approved DPO format” shall mean the division of property order form required by sections 3105.82 and 3105.90 of the Revised Code and adopted by OP&F in rule 742-21-01 of the Administrative Code.
- (B) For purposes of administering the method of payment section of the approved DPO format, “a plan of payment that consists of either periodic benefits or a lump sum payment” shall apply to all of the following OP&F benefits or payments: age and service retirement benefit, disability monthly benefit, account refund, and reemployed retiree monthly annuity or lump sum refund.
- (C) For purposes of administering the method of payment section of the approved DPO format, “a plan of payment consisting of both a lump sum benefit and a periodic benefit” shall apply to distributions from the deferred retirement option plan (“DROP”).
- (D) Partial distributions from DROP, as outlined in paragraph (A)(1) of rule 742-4-16 of the Administrative Code, shall be considered lump sum payments for purposes of administering the DPO method of payment.

Five Year Review (FYR) Dates: 8/28/2020 and 08/28/2025

CERTIFIED ELECTRONICALLY

Certification

08/28/2020

Date

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Statutory Authority:	742.10
Rule Amplifies:	742.462
Prior Effective Dates:	04/16/2006

3309-1-11 **Membership determinations.**

(A) A request for a determination as to whether an individual or a group of individuals are required to be members of the school employees retirement system may be initiated by an employer, an affected individual, or the retirement system.

(1) An employer or individual who has a question as to membership requirements shall request in writing a determination by the retirement system. Such determination shall be made as provided in rule 3309-1-03 of the Administrative Code.

(2) When a membership determination has been initiated, the employer and any affected individual or individuals shall furnish such documents and information requested by the retirement system.

(B) If contributions have not been remitted and the retirement system determines the individual is covered by this system, the employer shall be liable for employee and employer compulsory contributions pursuant to rule 3309-1-13 of the Administrative Code. If no membership record and/or contributions are received by the system within thirty days of the determination, a charge, based on an estimated salary for such individual's position, against the employer shall be made for collection through the state school foundation program if available or by direct billing.

(C) If contributions have been remitted and the retirement system determines the individual is not covered by this system, any contributions received shall be unauthorized and shall be refunded.

(D) ~~The~~

(1) The definition of "employee" in division (B)(2) of section 3309.01 of the Revised Code does not include a person who holds a position for which the person is required to have a certificate or license issued pursuant to sections 3319.22 to 3319.31 of the Revised Code.

(2) The retirement board has determined that the phrase "service common to the normal daily operation of an educational unit" as used in division (B)(2) of section 3309.01 of the Revised Code means:

~~(1)~~(a) Any service required to be provided by an educational unit or the provision of which is governed by law, statute, or rule; or

~~(2)~~(b) Any service necessary on a regular continuous basis to the efficient operation of an educational unit; or

~~(3)~~(c) Any service which, through custom and usage, has become a service commonly provided or procured by an educational unit on a regular continuous basis.

Effective:

Five Year Review (FYR) Dates: 1/31/2024

Certification

Date

Promulgated Under: 111.15
Statutory Authority: 3309.04
Rule Amplifies: 3309.01, 3309.23
Prior Effective Dates: 09/27/2004, 04/03/2009

3309-1-12

Contributing service credit; determination of.

- (A) Any contribution or contributions received for a particular month, beginning with September 1, 1937 and ending June 30, 1955, for credit to a member's savings account shall receive .125% of a year's service credit for that particular month, provided, that no more than one year of service credit shall be granted for all service rendered in any one fiscal year.
- (B) Any contribution or contributions received for a particular month, subsequent to June 30, 1955, but prior to July 1, 1977, for credit to a member's savings account, shall receive one-ninth of a year's service credit for that particular month, provided that not more than one year of service credit shall be granted for all service rendered in any one fiscal year.
- (C) Service credit granted under the provisions of paragraphs (A) and (B) of this rule, shall be subject to such adjustment by the retirement board as provided by law.
- (D) Contributing service credit for school employment rendered on or after July 1, 1977 shall be credited to members as follows:
- (1) A full year of service credit will be credited for one hundred twenty or more days of paid school employment during a year.
 - (2) For less than the above described one hundred twenty days during a year, a fraction of a year credit shall be credited, and shall be determined by dividing the actual number of days paid in a year by one hundred eighty days.
- (E) Contributing service as a school board member or governing board member will be credited as provided in paragraph (D) of this rule. A day of "paid school employment" for a board member shall mean any day for which the board member was compensated for attending a regular or special meeting of the board or an approved training program. Payment or reimbursement of fees or expenses by the school district or educational service center does not constitute compensation.
- (F) The number of days and the number of hours of paid school employment shall be certified by the employer in a manner specified by the retirement board.
- (G) A "year" shall mean the period July first through the following June thirtieth.
- (H) Any portion of a day paid shall be considered a full day.
- (I) Credit for school service rendered before July 1, 1977 shall continue to be determined pursuant to paragraphs (A) to (C) of this rule.

Five Year Review (FYR) Dates: 2/1/2021 and 02/01/2026

CERTIFIED ELECTRONICALLY

Certification

02/01/2021

Date

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Statutory Authority:	3309.04
Rule Amplifies:	3309.30, 3309.012
Prior Effective Dates:	12/24/1976, 02/18/1977, 02/01/1992, 02/06/1998, 10/28/2002, 11/03/2008

3309-1-44

Purchase of service credit; pregnancy and adoption resignation.

A member who resigned due to pregnancy or adoption of a child may purchase service credit for such period(s) of resignation during which no contributions were made to the system and no service credit granted under any other section of the Revised Code in accordance with section 3309.473 of the Revised Code and this rule.

(A)

- (1) The member must have resigned from a contributing position under Chapter 3309. of the Revised Code due to pregnancy or adoption of a child;
- (2) The member must have returned to a contributing position under Chapter 3309. of the Revised Code not later than the first day of classes of the third school year following the date of the resignation; and
- (3) The member must have earned a minimum of one year of school employees retirement system contributing service credit after the resignation.

(B)

- (1) A member who meets the requirements of paragraph (A) of this rule shall apply to the system to purchase service credit for a period of resignation on a form provided by the system;
- (2) The member shall provide, with the application to purchase service credit, documentation satisfactory to the system that the resignation was due to pregnancy or adoption of a child. Such documentation may include, but is not limited to:
 - (a) In case of resignation due to pregnancy, copies of the member's child's birth certificate, copies of hospital or medical records, or an attending physician's statement; or
 - (b) In the case of resignation due to adoption, copies of the adoption decree.
- (3) The employer who accepted the resignation shall certify on a form provided by the system, the date of the member's resignation and the reason, if any, given for the resignation;
- (4) For each year of service credit purchased, the member shall pay to the system for credit to the member's accumulated account an amount equal to the member's retirement contributions for full-time employment for the first year of contributing service subsequent to the member's return from the period of resignation, plus interest thereon compounded annually at a rate set by the board

of the school employees retirement system from the date of the member's return to contributing service to the date of payment.

- (5) For each year of service credit purchased, the employer who accepted the resignation shall pay to the system an amount equal to the employer contribution for full-time employment for the member's first year of contributing service subsequent to the member's return from the period of resignation, plus interest thereon compounded annually at a rate set by the board of the school employees retirement system from the date of the member's return to contributing service to the date of payment. Payment shall be made:
- (a) In one lump-sum payment from the employer directly to the school employees retirement system; or
 - (b) By authorization of the employer from the amounts allocated to the employer under Chapter 3317, of the Revised Code.
- (C) A member who meets the foregoing requirements is eligible to purchase service credit for the lesser of the actual period of time from the resignation to the return to employment in a contributing position or two years.

Five Year Review (FYR) Dates: 2/1/2021 and 02/01/2026

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02/01/2021

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Statutory Authority:	3309.04
Rule Amplifies:	3309.473
Prior Effective Dates:	05/02/2001, 05/11/2006

3309-1-56

Alternative retirement programs.

(A) For the purpose of this rule:

- (1) "Administrative employee" means an administrative employee as defined in division (A) of section 3305.05 of the Revised Code for whom the school employees retirement system would be the applicable state retirement system.
- (2) "Eligible employee" means an employee as defined in division (C) of section 3305.01 of the Revised Code for whom this retirement system would be the applicable state retirement system.
- (3) "Election period" means:
 - (a) For administrative employees who made elections under division (B) of section 3305.051 of the Revised Code, the one hundred twenty days after the employee's first day on the institution's payroll.
 - (b) For administrative employees who made elections under division (C) of section 3305.051 of the Revised Code, the one hundred twenty days after the effective date of the alternative retirement program adopted by the institution.
 - (c) For eligible employees who make elections under division (B)(1) of section 3305.05 of the Revised Code, the one hundred twenty days after August 1, 2005.
 - (d) For eligible employees who make elections under division (B)(2) or (B)(3) of section 3305.05 of the Revised Code, the one hundred twenty days after the employee's first day on the institution's payroll.
- (4) "Employee" means either an administrative employee or an eligible employee.
- (5) "Institution" means a public institution of higher education as defined in division (A) of section 3305.01 of the Revised Code.

(B) Within thirty days of its adoption of an alternative retirement plan under Chapter 3305. of the Revised Code, an institution shall file notice with the retirement system of its adoption of the plan. The notice shall:

- (1) Be given in the manner and form prescribed by the retirement system.
- (2) Include a copy of the plan adopted.

- (3) Include a report in the manner and form prescribed by the retirement system of all current employees.

(C)

- (1) Each institution of higher education that employs an employee eligible to elect an alternative retirement program shall:
 - (a) Notify the retirement system at the time it employs the employee, but in no event later than ten days after the employee's first day on the institution's payroll.
 - (b) Notify the retirement system at the time an employee of the institution changes to a classification which qualifies the employee to elect an alternative retirement plan but in no event later than ten days after the effective date of the employee's reclassification.
- (2) The notice required under paragraph (C)(1) of this rule shall be given in the manner and form prescribed by the retirement system, and shall include the employee's name, address, social security number, date of birth, sex, annual compensation, first date on the institution's payroll, and any other information required by the school employees retirement system.

(D)

- (1) Elections by an employee of an alternative retirement plan shall be made on forms provided by the retirement system and completed by the employee and the institution.
- (2) Not later than ten days after an election is filed with the institution, the institution shall file a certified copy with the retirement system.

(E)

- (1) Elections made by employees under divisions (B)(2) and (B)(3) of section 3305.05 or division (B) of section 3305.051 of the Revised Code will be implemented no later than thirty days after a certified copy of the employee's election is filed with the retirement system.
- (2) The election, when implemented, shall be effective as of the first day upon which the employee appears on the institution's payroll or was reclassified to a position as an administrative or eligible employee.

- (3) Once an election is filed with the system, it is not affected by the death of the employee and it shall be implemented and effective as set forth in this rule.

(F)

- (1) Elections made by employees under division (B)(1) of section 3305.05 of the Revised Code will be implemented no later than thirty days after a certified copy of the employee's election is filed with the retirement system.
- (2) The election, when implemented shall be effective as of the day the employee's election is irrevocable:
- (3) Once an election is filed with the system, it is not affected by the death of the employee and it shall be implemented and effective as set forth in this rule.

(G)

- (1) Elections made by administrative employees under division (C) of section 3305.051 of the Revised Code will be implemented no later than thirty days after the certified copy of the employee's election is filed with the retirement system.
- (2) The elections when implemented shall be effective as of the following dates:
 - (a) On March 31, 1998 where the public institution's alternative retirement program is established on or after December 8, 1998 but no later than March 31, 1999; or
 - (b) On the first day of the month in which the public institution's alternative retirement program is established where the program is established after March 31, 1999.
- (3) Once an election is filed with the system, it is not affected by the death of the employee and it shall be implemented and effective as set forth in this rule.

(H)

- (1) Employee and employer contributions for an employee shall be collected and remitted to the retirement system until an election is implemented pursuant to paragraph (E)(1), (F)(1) or (G)(1) of this rule.
- (2) Those employee and employer contributions received after the effective date of an election as determined by this rule for an employee who elects an alternative retirement plan shall be refunded as unauthorized contributions to the provider

identified as provided in paragraph (D) of this rule. The amount of employer contributions refunded shall be less the amount due pursuant to division (D) of the section 3305.06 of the Revised Code.

(I)

(1) An application under division (B) of section 3309.42 of the Revised Code for payment of a member's accumulated contributions to the provider of an alternative retirement plan shall be made in a manner and form prescribed by the retirement system.

(2) The institution shall certify:

(a) The name and address of the institution's plan administrator; and

(b) The plan is eligible to receive a trustee-to-trustee transfer from the retirement system which is a plan qualified under Internal Revenue Code section 401(a).

(3) The death of the employee prior to payment of the accumulated contributions to an alternative retirement plan cancels the application for payment.

(J) Not later than the fifteenth day of each month following a month in which an institution employed an employee who elected an alternative retirement, plan the institution shall:

(1) Remit to the retirement system the contributions required under division (D) of section 3305.06 of the Revised Code.

(2) Submit a report on all employees who have elected an alternative retirement plan in a form and manner prescribed by the retirement system.

Five Year Review (FYR) Dates: 2/1/2021 and 02/01/2026

CERTIFIED ELECTRONICALLY

Certification

02/01/2021

Date

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Rule Amplifies: 3305.05, 3305.051, 3305.052, 3305.06, 3309.011,
3309.42
Prior Effective Dates: 08/10/1998, 04/11/1999, 05/02/2001, 08/11/2005

3309-1-58

Retirement of member pursuant to section 3309.343 of the Revised Code.

(A) For purposes of section 3309.343 of the Revised Code and this rule:

- (1) "Active position" means a position a member worked in the month before retirement and for which contributions were being received by a state retirement system at the time of retirement pursuant to section 3309.343 of the Revised Code.
- (2) "SERS annual compensation" means a member's compensation for an active position reported by an employer to the school employees retirement system for the most recent twelve-month period. If the compensation has been reported for less than a twelve-month period, the system shall convert the compensation to an annual basis.
- (3) "Other retirement system annual compensation" means a member's annual earnable salary or compensation for an active position as certified to this system by the public employees retirement system or the state teachers retirement system.
- (4) "Highest annual compensation" means the highest of the SERS annual compensation or the other retirement system annual compensation for an active position.
- (5) "Position" means employment for which a member is covered and contributes to a state retirement system.
- (6) "State retirement system" means the school employees retirement system, the public employees retirement system or the state teachers retirement system.
- (7) "Other retirement system" means the public employees retirement system or the state teachers retirement system.

(B)

- (1) When a member holds more than one active position in this system, no active positions in an other retirement system, and is electing to take a retirement benefit pursuant to section 3309.343 of the Revised Code, the member shall:
 - (a) Apply for a benefit pursuant to section 3309.35, 3309.36, or 3309.46 of the Revised Code, for the active position which has the highest SERS annual compensation; and

(b) Select which other active position or positions upon which the member shall continue to contribute to this system.

(2) In computing the benefit described in paragraph (B)(1) of this rule all service credit in this system shall be used.

(C)

(1) When a member holds one or more active positions in this system and one or more active positions in an other retirement system, and the active position which has the highest annual compensation is in this system, the member shall:

(a) Apply for a benefit pursuant to section 3309.35, 3309.36, or 3309.46 of the Revised Code, for the active position which has the highest annual compensation; and

(b) Select which other active position or positions upon which the member shall continue to contribute to this system or to an other retirement system.

(2) In computing the benefit described in paragraph (C)(1) of this rule, all service credit in any state retirement system shall be used.

(D) Employment in any position covered by this system that begins subsequent to the effective retirement benefit date under section 3309.343 of the Revised Code shall be subject to section 3309.341 of the Revised Code, and rule 3309-1-50 of the Administrative Code.

Five Year Review (FYR) Dates: 2/1/2021 and 02/01/2026

CERTIFIED ELECTRONICALLY

Certification

02/01/2021

Date

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Statutory Authority: 3309.04
Rule Amplifies: 3309.343
Prior Effective Dates: 05/02/2001, 05/11/2006, 07/10/2016, 10/11/2018

3309-1-63

Plan F - multiple beneficiaries.

- (A) Amounts due to a retirant receiving a retirement allowance under the plan described in division (B)(3)(e) of section 3309.46 of the Revised Code and unpaid at death shall be paid to the retirant's surviving beneficiaries under the plan on a prorated basis based on the monthly benefit payable to the beneficiary compared to the total monthly benefits payable to all beneficiaries.
- (B) Beneficiaries designated in a plan described in division (B)(3)(e) of section 3309.46 of the Revised Code shall be prioritized for purposes of calculation.
- (1) A beneficiary who is a former spouse whom the member has been ordered to provide a specified amount to in an order described in division (B)(1)(b)(ii) of section 3309.46 of the Revised Code shall have priority over all other beneficiaries. When a member is subject to more than one order described in division (B)(1)(b)(ii) of section 3309.46 of the Revised Code, the former spouses shall be entitled to beneficiary priority in order of earliest retention by the retirement system.
 - (2) A current spouse shall have priority over any beneficiaries who are not the subject of an order described in division (B)(1)(b)(ii) of section 3309.46 of the Revised Code.
 - (3) The member shall designate the priority of any beneficiary who is not a former spouse and the subject of an order described in division (B)(1)(b)(ii) of section 3309.46 of the Revised Code or a current spouse.
- (C) In no event shall a member have more than four beneficiaries under the plan described in division (B)(3)(e) of section 3309.46 of the Revised Code.

Five Year Review (FYR) Dates: 2/1/2021 and 02/01/2026

CERTIFIED ELECTRONICALLY

Certification

02/01/2021

Date

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Statutory Authority:	3309.04
Rule Amplifies:	3309.44, 3309.46
Prior Effective Dates:	10/27/2006

5505-3-06

Board review of employment termination.

- (A) Upon the resignation or discharge of a member of the state highway patrol who has fifteen or more years of total service credit, the board may consider whether the reason for separation was dishonesty, cowardice, intemperate habits, or conviction of a felony.
- (B) The board may schedule a hearing to consider all available evidence.
- (1) The former member shall be given notice of the hearing by certified mail. The notice of hearing shall be sent at least sixty days prior to the hearing. The notice shall inform that former member that he/she may submit documents to HPRS and may appear, with or without counsel, to present testimony. Documents must be received at least ten days prior to the hearing date.
 - (2) HPRS staff shall provide a summary memorandum and may be represented by the office of the attorney general.
 - (3) The former member shall be notified of the board's findings by certified mail.
- (C) A former member who disagrees with the board's findings may request reconsideration.
- (1) A request for reconsideration must be accompanied by new evidence and received by the executive director in writing within forty days of the mailing of the board's determination. If new evidence is not received, as determined by the board chair, the request for reconsideration shall be denied and the board's initial determination shall become final.
 - (2) The former member shall be given notice of the reconsideration hearing by certified mail. The former member shall be given the opportunity to present any new evidence submitted. No additional documentation or testimony will be accepted during the reconsideration hearing.
 - (3) Within ten business days, the former member shall be notified of the board's reconsideration findings by certified mail. The board's decision is final.

Five Year Review (FYR) Dates: 9/21/2020 and 09/21/2025

CERTIFIED ELECTRONICALLY

Certification

09/21/2020

Date

Promulgated Under: 111.15
Statutory Authority: 5505.07
Rule Amplifies: 5505.17
Prior Effective Dates: 09/28/2010, 09/08/2015

5505-7-02

Survivor benefits.

- (A) A surviving spouse is a wife or husband as set forth in a statutorily valid certificate of marriage or as recognized by judgment of a court establishing a common-law relationship.
- (B) For the purpose of this rule, rule 5505-7-03 of the Administrative Code, and section 5505.17 of the Revised Code, "child" and "surviving child" shall mean a biological child, lawfully adopted child, or child placed for adoption of a member or retirant.
- (C) A survivor shall apply for benefits on a form prescribed by the board, including a certified death certificate. In addition, a survivor shall provide proof of eligibility by submitting a certified marriage certificate, birth certificate, or other document that establishes marriage or parenthood.
- (D) Survivor benefits shall be effective the day following a member's death and the first of the month following a retirant's death.
- (E) The board reserves the right to deny benefits for failure to provide satisfactory proof of eligibility.

Five Year Review (FYR) Dates: 9/21/2020 and 09/21/2025

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09/21/2020

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Rule Amplifies: 5505.17
Prior Effective Dates: 01/01/1986, 02/01/1990, 02/01/1992, 12/23/2005,
09/28/2010, 09/08/2015

5505-7-06

Monthly benefit payments.

- (A) Monthly benefit payments shall be issued by the twenty-fifth of each month. Payment of benefits will be for the period ending the last day of the month in which benefits are paid.
- (B) Except as provided in rule 5505-3-03 of the Administrative Code, benefit payments shall be due and payable through the current month during which the benefit recipient dies or a dependent child becomes ineligible for benefits.

Five Year Review (FYR) Dates: 9/21/2020 and 09/21/2025

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Certification

09/21/2020

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Rule Amplifies: 5505.17, 5505.18
Prior Effective Dates: 01/01/1986, 12/01/1987, 10/21/2005, 09/28/2010,
09/08/2015

5505-9-04

Notice of retirement board meetings.

(A) This rule is adopted in compliance with and under the authority of division (F) of section 121.22 of the Revised Code.

(B) Any person may request the time and place of all regularly scheduled meetings and the time, place, and purpose of all special meetings for the board of trustees of the state highway patrol retirement system (HPRS) by:

(1) Writing to the following address:

"Highway Patrol Retirement System, Attention: Executive Director, 1900 Polaris Parkway, Suite 201, Columbus, Ohio 43240."

(2) Calling one of the following telephone numbers during HPRS' normal business hours:

(614) 431-0781 or (800) 860-2268.

(C) Any representative of the news media may obtain notice of all special meetings by requesting in writing that such notice be provided. Such notice will only be given, however, to one representative of any particular publication or radio or television station. A request for such notification shall be addressed to HPRS' executive director at the address outlined in paragraph (B) of this rule.

(1) The request shall provide the name of the individual media representative to be contacted, the mailing address and a maximum of two telephone numbers where such representative can be reached. HPRS shall maintain a list of all representatives of the news media who have requested notice of special meetings pursuant to this rule.

(2) In the event of a special meeting not of an emergency nature, HPRS shall notify all media representatives on the list of such meeting by doing at least one of the following:

(a) Sending written notice, which must be mailed not later than four calendar days prior to the day of the special meeting;

(b) Sending notice by e-mail which must be sent no later than twenty-four hours prior to the time of the meeting;

(c) Notifying such representatives by telephone no later than twenty-four hours prior to the special meeting, with proper telephone notice if a message has been left for the representatives at the telephone numbers provided to

HPRS from such representative or if, after reasonable effort, HPRS has been unable to provide such telephone notice;

- (d) Informing such representatives personally no later than twenty-four hours prior to the special meeting.
 - (3) In the event of a special meeting of an emergency nature, HPRS shall notify all media representatives on the list of such meeting by providing the notice described in paragraph (C)(1)(c) or (C)(1)(d) of this rule, or notifying the clerk of the state house press room. In such event, however, the notice need not be given twenty-four hours prior to the meeting, but shall be given as soon as possible.
 - (4) In giving the notices required by this rule, HPRS may rely on assistance provided by any member of HPRS and any such notice is given if such notice is given by a member in the manner provided in this rule.
- (D) HPRS shall maintain a list of all persons, other than media representatives, who have requested, in writing, notice of all meetings of HPRS.

Five Year Review (FYR) Dates: 9/21/2020 and 09/21/2025

CERTIFIED ELECTRONICALLY

Certification

09/21/2020

Date

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Statutory Authority: 5505.04
Rule Amplifies: 5505.04
Prior Effective Dates: 11/01/1990, 08/01/1994, 10/21/2005, 09/28/2010,
09/08/2015

5505-9-05

Release of records.

- (A) All information contained in the records of the retirement system shall be open to public inspection except the following:
- (1) The personal history record as defined in division (~~DC~~) of section 5505.04 of the Revised Code.
 - (2) The amount of any pension, benefit, or allowance paid to any benefit recipient.
 - (3) Medical reports or recommendations, except that this information shall be made available to the member or the member's designee, and to any other persons as necessary for the proper administration of the retirement system.
 - (4) Information of which the release is prohibited by the Ohio Revised Code, or if the board determines the information is confidential.
- (B) Any member, former member, or benefit recipient may authorize, in writing, the release of personal history records or medical reports or recommendations.
- (C) Requested documents may be subject to a fee of five cents a copy, plus any packaging and mailing costs.
- (D) There shall be no charge to a member or benefit recipient for a copy of specific data produced by HPRS that is a part of the individual's personal history record.
- (E) Nothing in paragraph (A) or (B) of this rule is intended to prohibit the release of personal history records as provided in divisions (C), ~~and (D)~~ and (E) of section 5505.04 of the Revised Code.
- (F) As used in division (~~EE~~) of section 5505.04 of the Revised Code, the retirement system logo on official letterhead will function as the system's official seal.
- (G) Records of the retirement system may be maintained in digital form. Physical records are subject to immediate destruction; however, records that are deemed to be critical by the retirement board, including member and retirant files, will be retained in printed form for a minimum of six months after imaging.

Effective:

Five Year Review (FYR) Dates: 10/26/2022

Certification

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12/11/2009