

742-3-06

Calculation of on-duty disability benefits on less than ~~three~~the requisite years of salary.

- (A) This rule shall only apply to a member who has been granted an on-duty disability and who has less than ~~three full~~the requisite years of "salary," as ~~defined set forth in section 742.01 of the Revised Code~~divisions (G) and (L) of section 742.01 of the Revised Code and rule 742-3-02 of the Administrative Code, as of the effective date of retirement.
- (B) For purposes of calculating the on-duty disability benefit pursuant to section 742.39 of the Revised Code, the member's "average annual salary" shall be based on the actual "salary" paid during OP&F membership divided by the service credit applicable to the pay periods covered, with the balance of the months being based on the average "salary" over the reported time period calculated according to the aforementioned formula.

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Certification

Date

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Rule Amplifies: 742.01, 742.39
Prior Effective Dates: 01/03/77, 05/01/00, 04/05/05

742-7-01

Issue date of pension checks.

~~Beginning April 1, 1974, the~~The issue date of pension checks to police and fire retirants and their eligible survivors shall be the first of each month.

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742-7-08

Cost-of-living allowance.

- (A) The benefits and contributions of any member shall be calculated on the basis of the member's salary as defined by ~~division~~divisions (G) and (L) of section 742.01 of the Revised Code and rule 742-3-02 of the Administrative Code.
- (B) All members having fifteen years of service credit as of January 1, 1989 shall be provided a form upon which they can elect the basis of benefit and contribution calculations under section 742.3716 of the Revised Code. For purposes of this determining a member's eligibility for this election, years of service credit shall include any credit purchased prior to January 1, 1989.
- (C) A beneficiary's "anniversary date" shall be July first, for those eligible for the first cost-of-living allowance on that date or the anniversary of the beneficiary's effective date of retirement or benefits for those not eligible for the first cost-of-living allowance. When a beneficiary's anniversary date does not fall on the first of a month, a pro rata payment of the first month's cost-of-living allowance shall be paid.
- (D) A beneficiary's "base benefit" shall be the amount of a benefit first calculated upon retirement, and shall exclude any medicare reimbursement, any amount by which a member reduces benefits under an optional plan of payment pursuant to section 742.3711 of the Revised Code, any actuarial reduction for early retirement, and any previous cost-of-living increases.
- (E) The benefit paid to an eligible survivor under an optional plan of payment shall be based upon the amount last received by the member, excluding medicare reimbursement and the amount of any reduction chosen by the member, but including any cost-of-living allowance received by the member. Such survivor shall be entitled to cost-of-living adjustments based upon the original base of the survivor under the optional plan of payment.
- (F) Upon the election by an eligible member to cancel an optional plan of payment and to return to a single life annuity, previously awarded cost-of-living allowances shall be adjusted to the amount the member would have received had the member always been paid a single life annuity.

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2/7/00 (Emer.), 5/1/2000, 2/14/2005

742-7-11

Responsibility for health care coverage.

(A) For the purpose of this rule:

- (1) "Age and service retirant" means a former member who is receiving a retirement allowance pursuant to division (C) of section 742.37 of the Revised Code.
- (2) "Cost paid by the benefit recipient" means the amount equal to the percentages as of January 1, 2004 paid by the benefit recipient multiplied by the system's cost per benefit recipient.
- (3) "Dependent" means an eligible spouse or child of an eligible benefit recipient.
- (4) "Disability benefit recipient" means a member who is receiving a benefit or allowance pursuant to section 742.38 or former division (C)(2), (C)(3), or (C)(4) of section 742.37 of the Revised Code.
- (5) "Effective benefit date" means the effective date of retirement, as outlined in rule 742-3-01 of the Administrative Code or the effective date of the survivor benefits.
- (6) "Eligible benefit recipient" means an age and service retirant, disability or survivor benefit recipient who is eligible for health care coverage.
- (7) "Health care coverage" means the benefit under the health care plan sponsored by OP&F including, but not limited to, the medical coverage, dental and the vision coverage, the prescription drug coverage, and the medicare part B premium reimbursement.
- (8) "Ohio retirement system" means public employees retirement system, state teachers retirement system, school employees retirement system, or highway patrol retirement system.
- (9) "Survivor benefit recipient" means a beneficiary receiving a benefit pursuant to division (D), (E), or (F) of section 742.37 of the Revised Code.

(B) Except as otherwise provided in this rule, this retirement system shall be the system responsible for health care coverage for eligible benefit recipients who receive a benefit or allowance from this system.

(C) This retirement system shall not be the system responsible for health care coverage

for eligible benefit recipients in the following situations.

- (1) Where an eligible benefit recipient who is an age and service retirant of this system also is an eligible benefit recipient receiving an age and service benefit from another Ohio retirement system and the effective benefit date in this system is later than the effective benefit date in the other system.
- (2)
 - (a) Where an eligible recipient who is a disability benefit recipient of this system also is an eligible benefit recipient receiving an age and service benefit from another Ohio retirement system.
 - (b) Where an eligible benefit recipient who is a survivor benefit recipient of this system also is an eligible benefit recipient receiving an age and service benefit or a disability benefit from another Ohio retirement system.
- (3) Where an eligible benefit recipient who is a disability benefit recipient of this system also is an eligible benefit recipient receiving a disability benefit from another Ohio retirement system and the effective benefit date of the benefit from this system is later than the effective date in the other system.
- (4) Where an eligible benefit recipient who is a survivor benefit recipient of this system also is an eligible benefit recipient receiving a survivor benefit from another Ohio retirement system and the effective benefit date of the benefit from this system is later than the effective date in the other system.
- (5)
 - (a) Where the effective benefit dates for an eligible benefit recipient in the situation described in paragraph (C)(1), (C)(3) or (C)(4) of this rule are the same in each system, and the benefit recipient has less service credit in this system than in the other system.
 - (b) Where an effective date and service credit for an eligible benefit recipient in the situation described in paragraph (C)(1), (C)(3) or (C)(4) of this rule are the same in each system, and the employee contributions in the account upon which the benefit in this system is based are less than the employee contributions in the account upon which the benefit in the other system was based.

(D)

(1)

- (a) Where this system is responsible for health care coverage pursuant to this rule, an eligible benefit recipient of this system who also is an eligible benefit recipient of another Ohio retirement system may irrevocably waive such health care coverage in order to be covered by the other Ohio retirement system, if the other system has agreed in writing to offer such coverage. Such recipient shall waive such coverage in writing to this system. Health care coverage in this system shall cease beginning the first of the month following receipt of the waiver by this system.
- (b) In the event a recipient has waived health care coverage as provided in paragraph (D)(1)(a) of this rule, this system shall:
- (i) Promptly notify the other Ohio retirement system that the benefit recipient has waived health care coverage and the effective date of such non-coverage; and
- (ii) For covered benefit recipients and dependents transfer to the other system annually for each month covered an amount equal to the sum of:
- (a) The lesser of this system's average monthly medical including health maintenance organization cost per benefit recipient less the cost paid by the benefit recipient, or the other system's average monthly medical including health maintenance organization cost per benefit recipient.
- (b) The lesser of this system's average monthly cost of the prescription drug program per benefit recipient, or the other system's average monthly cost of the prescription drug program per benefit recipient.
- (c) The lesser of the monthly cost of the medicare part B premium that would be reimbursed by the system for the benefit recipient or the monthly cost of the medicare part B premium that would be reimbursed by the other system for the benefit recipient.

(d) This system shall transfer the amounts due pursuant to paragraph (D)(1)(b)(ii) of this rule no later than the last business day of February each year for the preceding calendar year after the following occur:

(i) This system receives from the other system a list containing the names of benefit recipients and the number of months during which the recipients were covered by the other system for the preceding calendar year; and

(ii) This system prepares an itemized accounting of the amount transferred for each such benefit recipient.

(2)

(a) Where this system is not responsible for health care coverage pursuant to this rule, an eligible benefit recipient of another Ohio retirement system who also is an eligible benefit recipient or dependent of an eligible benefit recipient of this system may irrevocably waive health care coverage in the other system to be covered by this system as a benefit recipient or dependent if otherwise eligible. Health care coverage in this system shall be effective the first of the month following the termination of coverage in the other system.

(b) Where an eligible benefit recipient or dependent of an eligible benefit recipient of this system has waived health care coverage in another Ohio retirement system, this system shall be responsible to provide health care coverage only if this system:

(i) Is promptly notified by the other system that the benefit recipient or dependent has waived health care coverage and the effective date of termination of coverage; and

(ii) For covered benefit recipients and dependents the other system pays annually to this system for each month covered an amount equal to the sum of:

(a) The lesser of this system's average monthly medical including health maintenance organization cost per benefit recipient less the cost paid by the benefit recipient, or the other system's average monthly medical including health

maintenance organization cost per benefit recipient.

(b) The lesser of this system's average monthly prescription drug program per benefit recipient, or the other system's average monthly cost of the prescription drug program per benefit recipient.

(c) The lesser of the monthly cost of the medicare part B premium that would be reimbursed by the system for the benefit recipient or the monthly cost of the medicare part B premium that would be reimbursed by the other system for the benefit recipient.

(E)

(1) Not later than three years from the effective date of this rule this system shall contact the other Ohio retirement systems to review the adequacy of the transfer of funds described in paragraph (D) of this rule.

(2) If there is a material change in this system's plan or circumstances, this system shall notify the other Ohio retirement systems ninety days prior to the effective date of such change to discuss the impact of such change on this rule.

(F) The waiver program outlined in paragraphs (D) and (E) of this rule shall ~~continue between OP&F and~~ cease with the state teachers retirement system (~~STRS~~) ~~through December 31, 2007 and will cease with STRS~~ for the plan year beginning on January 1, 2008, ~~but~~ and the waiver program with the Ohio public employees retirement system and the school employees retirement system has been discontinued in accordance with the dates established by these respective retirement systems. The highway patrol retirement system has never participated with OP&F in the waiver program outlined in this rule. Notwithstanding the discontinuation of the waiver program, any OP&F benefit recipient who irrevocably waived OP&F healthcare coverage as outlined in this rule shall remain in effect.

~~(G) The provisions of this rule shall apply beginning January 1, 2005 until otherwise amended or rescinded. The provisions of the prior version of this rule shall apply through December 31, 2004.~~

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742-16-01 **Policy for reimbursement of trustee business and educational travel expense.**

- (A) Subject to the provisions of section ~~742.44742.101~~ of the Revised Code and this rule, board members may receive reimbursement from police and fire pension fund for all proper, reasonable and necessary expenses actually incurred in the performance of their official duties, as more fully described in the board's travel policy. Eligible reimbursable expenses include, but are not limited to reasonable charges for meals, beverages, tips, lodging, airfare, ground transportation, telephone calls, and registration fees, subject to the limitations outlined in the board's travel policy.
- (B) Reimbursement from the fund for out-of-state travel shall require approval in advance by a majority of the board at a regularly scheduled board meeting after review and recommendation by the audit/administration committee, with the following exception. In the case of an emergency, out-of-state travel requires approval by the chairman of the board and the executive director of the fund. In the case of an emergency, reimbursement for in-state travel shall be approved by the chairman of the board or the executive director.
- (C) Official duties may include:
- (1) Attendance at a conference, convention, educational seminar, school or meeting which will serve to help the trustee become a better, more knowledgeable and active trustee.
 - (2) Meetings with OP&F staff, other trustees, members and associates on pension matters.
 - (3) Other travel on fund business, as required by the board or executive director.
- (D) For all travel and business expenses on which reimbursement is sought by a trustee, expense reports must be submitted on forms provided by OP&F.

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