

Sec. 145.58. AS USED IN THIS SECTION, "INELIGIBLE INDIVIDUAL" MEANS A FORMER MEMBER RECEIVING BENEFITS PURSUANT TO SECTION 145.32, 145.33, 145.34, OR 145.46 OF THE REVISED CODE FOR WHOM ELIGIBILITY IS ESTABLISHED MORE THAN FIVE YEARS AFTER THE EFFECTIVE DATE OF THIS AMENDMENT AND WHO, AT THE TIME OF ESTABLISHING ELIGIBILITY, HAS ACCRUED LESS THAN TEN YEARS SERVICE CREDIT, EXCLUSIVE OF CREDIT OBTAINED AFTER JANUARY 29, 1981, PURSUANT TO SECTION 145.293 OR 145.301 OF THE REVISED CODE; THE SPOUSE OF SUCH FORMER MEMBER; OR THE BENEFICIARY OF SUCH FORMER MEMBER

RECEIVING BENEFITS PURSUANT TO SECTION 145.46 OF THE REVISED CODE.

(A) The public employees retirement board may enter into agreements with insurance companies, hospital insurance associations, medical or health care corporations, or government agencies authorized to do business in the state for issuance of a policy or contract of health, medical, hospital, or surgical benefits, or any combination thereof, for those persons receiving age and service, disability, or survivor benefits subscribing to the plan.

Notwithstanding any other provision of this chapter, the policy or contract may also include coverage for any eligible person's spouse and dependent children and for such of his sponsored dependents as the board deems appropriate. If all or any portion of the policy or contract premium is to be paid by any person receiving a service, disability, or survivor benefit, the person shall, by written authorization, instruct the public employees retirement board to deduct from his benefit the premium agreed to be paid by him to the company, association, corporation, or agency.

The board may contract for such coverage on the basis of part or all of the cost of the premium for the coverage to be paid from appropriate funds of the public employees retirement system. The cost paid from the funds of the public employees retirement system shall be included in the employer's contribution rate provided by sections 145.48 and 145.51 of the Revised Code. THE BOARD SHALL NOT PAY OR REIMBURSE THE PREMIUM COST FOR INSURANCE UNDER THIS SECTION OR SECTION 145.325 OF THE REVISED CODE FOR ANY INELIGIBLE INDIVIDUAL.

The board may provide for self-insurance of risk or level of risk as set forth in the contract with the companies, associations, corporations, or agencies, and may provide through the self-insurance method specific benefits as authorized by rules of the board.

The board shall make all necessary rules pursuant to the purpose and intent of this section.

(B) On and after January 1, 1977, the board shall upon receipt of satisfactory evidence of the payment for coverage, pay monthly to each recipient of service, disability, or survivor benefits under the public employees retirement system who is eligible for medical insurance coverage under part B of "The Social Security Amendments of 1965j," 79 Stat. 301, 42 U.S.C.A. ~~1935~~ 1395j, as amended, an amount equal to the basic premium for such coverage, EXCEPT THAT THE BOARD SHALL MAKE NO SUCH PAYMENT TO ANY INELIGIBLE INDIVIDUAL.

SECTION 4. This act is hereby declared to be an emergency measure necessary for the immediate preservation of the public peace, health, and safety. The reason for such necessity lies in the fact that the benefit increases provided for in the act are to become effective July 1, 1981 and should be included in payments made by PERS and SERS for the month of July. Therefore, this act shall go into immediate effect.

Effective: -
June 13, 1981
Emergency