

Sec. ~~3307.74~~ 3307.39. (A) The state teachers retirement board may enter into an agreement with insurance companies, health insuring 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 individuals receiving, UNDER THE PLAN DESCRIBED IN SECTIONS 3307.50 TO 3307.79 OF THE REVISED CODE, service retirement or a disability or survivor benefit ~~subscribing~~ WHO SUBSCRIBE to the plan. Notwithstanding any other provision of this chapter, the policy or contract may also include coverage for any eligible individual's spouse and dependent children and for any of the individual's sponsored dependents as the board considers appropriate. If all or any portion of the policy or contract premium is to be paid by any individual receiving service retirement or a disability or survivor benefit, the individual shall, by written authorization, instruct the board to deduct the premium agreed to be paid by the individual to the companies, corporations, or agencies.

The board may contract for coverage on the basis of part or all of the cost of the coverage to be paid from appropriate funds of the state teachers retirement system. The cost paid from the funds of the system shall be included in the employer's contribution rate provided by section ~~3307.53~~ 3307.28 of the Revised Code.

THE BOARD MAY ENTER INTO AN AGREEMENT UNDER THIS DIVISION FOR COVERAGE OF RECIPIENTS OF BENEFITS UNDER A PLAN ESTABLISHED UNDER SECTION 3307.81 OF THE REVISED CODE IF THE PLAN SELECTED INCLUDES HEALTH, MEDICAL, HOSPITAL, OR SURGICAL BENEFITS, OR ANY COMBINATION THEREOF. THE BOARD MAY CONTRACT FOR COVERAGE ON THE BASIS THAT THE COST OF THE COVERAGE WILL BE PAID BY THE RECIPIENT OR BY THE PLAN TO WHICH THE RECIPIENT CONTRIBUTED UNDER THIS CHAPTER. THE BOARD MAY OFFER TO RECIPIENTS PLANS THAT PROVIDE FOR DIFFERENT LEVELS OF COVERAGE OR FOR PREPAYMENT OF THE COST OF COVERAGE.

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

(B) If the board provides health, medical, hospital, or surgical benefits through any means other than a health insuring corporation, it shall offer to each individual eligible for the benefits the alternative of receiving benefits through enrollment in a health insuring corporation, if all of the following apply:

- (1) The health insuring corporation provides health care services in the geographical area in which the individual lives;
- (2) The eligible individual was receiving health care benefits through a health maintenance organization or a health insuring corporation before retirement;

(3) The rate and coverage provided by the health insuring corporation to eligible individuals is comparable to that currently provided by the board under division (A) of this section. If the rate or coverage provided by the health insuring corporation is not comparable to that currently provided by the board under division (A) of this section, the board may deduct the additional cost from the eligible individual's monthly benefit.

The health insuring corporation shall accept as an enrollee any eligible individual who requests enrollment.

The board shall permit each eligible individual to change from one plan to another at least once a year at a time determined by the board.

(C) The board shall, ~~beginning the month following receipt of satisfactory evidence of the payment for coverage,~~ make a monthly payment to each recipient of service retirement, or a disability or survivor benefit under the ~~state teachers retirement system~~ PLAN DESCRIBED IN SECTIONS 3307.50 TO 3307.79 OF THE REVISED CODE who is eligible for insurance coverage under part B of "The Social Security Amendments of 1965," 79 Stat. 301, 42 U.S.C.A. 1395j, as amended, AND MAY MAKE A MONTHLY PAYMENT TO A RECIPIENT OF BENEFITS UNDER A PLAN ESTABLISHED UNDER SECTION 3307.81 OF THE REVISED CODE WHO IS ELIGIBLE FOR THAT INSURANCE COVERAGE IF THE MONTHLY PAYMENTS ARE FUNDED THROUGH THE PLAN SELECTED BY THE RECIPIENT. The payment shall be the greater of the following:

- (1) Twenty-nine dollars and ninety cents;
- (2) An amount determined by multiplying the basic premium for the coverage by a percentage, not exceeding ninety per cent, determined by multiplying the years of service used in calculating the service retirement or benefit OR, IN THE CASE OF A RECIPIENT OF BENEFITS UNDER A PLAN ESTABLISHED UNDER SECTION 3307.81 OF THE REVISED CODE, THE PARTICIPANT'S YEARS OF SERVICE by a percentage determined by the board not exceeding three per cent.

THE BOARD SHALL MAKE ALL PAYMENTS UNDER THIS DIVISION BEGINNING THE MONTH FOLLOWING RECEIPT OF SATISFACTORY EVIDENCE OF THE PAYMENT FOR THE COVERAGE.

(D) The board shall establish by rule requirements for the coordination of any coverage, payment, or benefit provided under this section or section ~~3307.405~~ 3307.61 of the Revised Code with any similar coverage, payment, or benefit made available to the same individual by the public employees retirement system, Ohio police and fire pension fund, school employees retirement system, or state highway patrol retirement system.

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