

SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO 300 E. BROAD ST., SUITE 100 • COLUMBUS, OHIO 43215-3746

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RICHARD STENSRUD Executive Director

HELEN M. NINOS Deputy Executive Director

November 17, 2017

Bethany Rhodes, Director/General Counsel Ohio Retirement Study Council 30 East Broad Street, 2nd Floor Columbus, OH 43215

Dear Bethany:

As required by section 3309.21(A) of the Ohio Revised Code, enclosed please find two new annual valuations prepared by SERS' actuary for our fiscal year ended June 30, 2017: the Report on the Annual Basic Benefits Valuation, and the Report on the Retiree Health Care Valuation.

As you review these reports, please feel free to contact us if you have any questions.

Sincerelv.

Richard Stensrud **Executive Director**

Enclosures

The Honorable William Coley, Chair, Senate Government Oversight & Reform CC: The Honorable Steven Arndt, Chair, House Aging and Long-Term Care

Timothy Keen, Director, Office of Budget and Management



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Report on the Annual Basic Benefits Valuation of the School Employees Retirement System of Ohio

Prepared as of June 30, 2017





November 7, 2017

Board of Trustees School Employees Retirement System of Ohio 300 East Broad Street Suite 100 Columbus, OH 43215-3746

Dear Members of the Board:

Presented in this report are the results of the annual actuarial valuation of the basic benefits provided under the School Employees Retirement System of Ohio (SERS) as of June 30, 2017. The purpose of the valuation was to measure the System's funding progress and to determine the actuarially determined employer contribution rates for the fiscal year beginning July 1, 2017.

The valuation is based upon data, furnished by the SERS staff, concerning active, inactive and retiree members along with pertinent financial information. The complete cooperation of the SERS staff in furnishing materials requested is hereby acknowledged with appreciation.

Future actuarial results may differ significantly from the current results presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period or additional cost or contribution requirements based on the plan's funded status); and changes in plan provisions or applicable law. Since the potential impact of such factors is outside the scope of a normal annual actuarial valuation, an analysis of the range of results is not presented herein.

The undersigned are members of the American Academy of Actuaries and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

Respectfully submitted,

Todd B. Green, ASA, FCA, MAAA Principal and Consulting Actuary

Todel B. G

John J. Garrett, ASA, FCA, MAAA Principal and Consulting Actuary

TBG/JJG:bvb



TABLE OF CONTENTS

<u>Section</u>	<u>ltem</u>	Page No.
	Executive Summary	1
1	Summary of Principal Results	7
II	Membership Data	9
III	Assets	11
IV	Comments on Valuation	12
V	Derivation of Experience Gains and Losses	13
VI	Actuarially Determined Contribution Rates	16
VII	Schedule of Funding Progress	17
<u>Schedule</u>		
Α	Valuation Balance Sheet and Solvency Test	18
В	Development of Actuarial Value of Assets	20
С	Statement of Actuarial Assumptions and Methods	21
D	Summary of Benefit and Contribution Provisions	24
E	Detailed Tabulations of the Data	30
F	Gain/Loss Analysis Details	41
G	Glossary	51
<u>Appendix</u>		
Α	Actuarial Accrued Liabilities	52
В	Breakdown of Total and Accrued Liabilities	53
С	Comparative Schedule	54



REPORT ON THE ANNUAL VALUATION OF THE SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

PREPARED AS OF JUNE 30, 2017

EXECUTIVE SUMMARY

The School Employees Retirement System of Ohio (SERS or System) is a defined benefit public pension fund that provides pensions and access to health care coverage for retired school employees who are covered in nonteaching positions. This includes bus drivers, custodians, treasurers, business officials, administrative assistants, food service providers, and educational aides. This report presents the results of the June 30, 2017 actuarial funding valuation of the System. The primary purposes of performing the actuarial funding valuation are to:

- determine the sufficiency of the Statutory Contribution Rate as set forth in the Ohio statutes;
- determine the experience of the System since the last valuation date;
- disclose asset and liability measures as of the valuation date; and
- analyze and report on trends in System contributions, assets, and liabilities over the past several years.

Since the previous valuation, the enactment of House Bill 49 (HB 49) will prospectively change the cost-of-living adjustment from the fixed 3.00% to a cost-of-living adjustment that is indexed to CPI-W not greater than 2.5% with a floor of 0%. In addition, with the authority granted the Board under HB 49, the Board has enacted a three-year COLA suspension for benefit recipients in calendar years 2018, 2019 and 2020.

The actuarial valuation results provide a "snapshot" view of the System's financial condition on June 30, 2017. Actuarial gains and losses result when the actual experience of the plan (such as asset return, pay increases, turnover, deaths, etc.) is different from that expected by the actuarial assumptions. The System's unfunded actuarial accrued liability (UAAL) was expected to be \$6,586.8 million as of June 30, 2017, taking into account contributions from the employers and members of \$804.4 million. The actual UAAL is \$5,875.3 million. The net decrease of \$711.5 million is primarily attributable to the enactment of HB 49 and the Board's adoption of the 3-year COLA suspension. The remaining amortization period of the UAAL is 27 years as of June 30, 2017. During the plan year there were other sources of experience gains and losses which are detailed in Section V.

The valuation is based on a set of actuarial assumptions which were adopted by the Board based on the five-year experience study for the period ending June 30, 2015. These assumptions are presented in Schedule C.



A summary of the key results from the June 30, 2017 actuarial valuation is shown below. Further detail on the valuation results can be found in the following sections of this Executive Summary.

	June 30, 2017 Valuation Results	June 30, 2016 Valuation Results
Actuarially Determined Contribution Rate	10.84%	13.60%
Employer Contribution Rate	13.50%	14.00%
Sufficiency/(Deficiency)	2.66%	0.40%
Remaining Amortization Period	27	28
Unfunded Actuarial Accrued Liability (\$M)	\$5,875.3	\$6,591.1
Basic Benefit Funded Ratio (Actuarial Assets)	70.01%	66.66%

The funded ratio of the basic benefits is 70.01%. Since this is greater than 70%, per the Board-adopted funding policy, the basic benefits may receive an employer contribution of 13.50% of compensation for FY2018. The Health Care Fund may receive an employer contribution of 0.50% of compensation. The valuation assumes an allocation of 13.50% allocated to the basic benefits and 0.50% allocated to health care consistent with SERS' funding policy. The funding policy requires at least 13.50% of the employers' contributions be allocated to SERS' basic benefits when the funded ratio is 70% but less than 80%, with the remainder allocated to the health care fund.

EXPERIENCE FOR THE LAST PLAN YEAR

Numerous factors contributed to the change in the System's assets, liabilities, and actuarial contribution rate between June 30, 2016 and June 30, 2017. The components are examined in the following discussion.

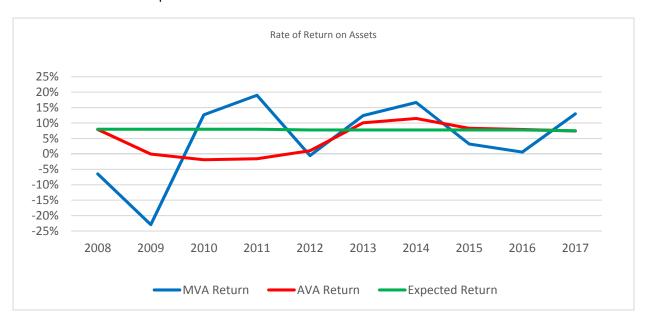
ASSETS

As of June 30, 2017, SERS' basic benefits had net assets of \$13,613,638,590, when measured on a market value basis. This was an increase of \$1,162,007,767 from the previous year. The market value of assets is not used directly in the calculation of the unfunded actuarial accrued liability and the actuarially determined contribution. The asset valuation method, which recognizes the annual unexpected portion of market value investment returns over a four-year period, attempts to dampen the effect of market volatility. The resulting amount is called the "actuarial value of assets" and is utilized to determine the actuarial valuation results. In this year's valuation, the actuarial value of assets as of June 30, 2017 was \$13,713,087,833, an increase of \$533,469,231 from the value in the prior year. The components of change in the asset values are shown in the table below.

		Actuarial Value		Market Value
Net Assets, June 30, 2016	\$	13,179,618,602	\$	12,451,630,823
- Employer and Member Contributions	+	804,424,396	+	804,424,396
- Benefit Payments	-	1,231,381,839	-	1,231,381,839
- Investment Income	+	960,426,674	+	1,588,965,210
Net Assets, June 30, 2017		13,713,087,833		13,613,638,590



The estimated investment return on the market value of assets for FY2017 was 12.98%. Due to the recognition of deferred investment losses from prior years, the resulting return on the smoothed actuarial value of assets was 7.41%. As this rate of return slightly lagged the assumed rate of 7.50%, there was a relatively minor actuarial investment experience loss of \$12.0 million. Please see Section III, Schedule B, and Schedule F of this report for more detailed information on the market and actuarial value of assets.



Market value returns have been very volatile. An asset smoothing method is used to calculate the actuarial value of assets that recognizes investment gains and losses equally over a four-year period. As can be seen in this graph, the return on actuarial assets is much smoother than the return on market value. The asset smoothing method impacts only the timing of when the actual market experience is recognized in the valuation process. The remaining deferred investment experience net loss of \$99.4 million will be absorbed in future years.

LIABILITIES

The actuarial accrued liability is that portion of the present value of future benefits allocated to service performed up to the valuation date. The difference between this liability and the actuarial value of assets is called the unfunded actuarial accrued liability (UAAL). The dollar amount of unfunded actuarial accrued liability is reduced if the contributions to the System exceed the normal cost for the year, plus interest on the prior year's UAAL.

The unfunded actuarial accrued liability is shown as of June 30, 2017 in the following table:

	Actuarial Value of Assets	Market Value of Assets
Actuarial Accrued Liability	\$19,588,417,687	\$19,588,417,687
Value of Assets	\$13,713,087,833	\$13,613,638,590
Unfunded Actuarial Accrued Liability*	\$5,875,329,854	\$5,974,779,097
Funded Ratio	70.01%	69.50%

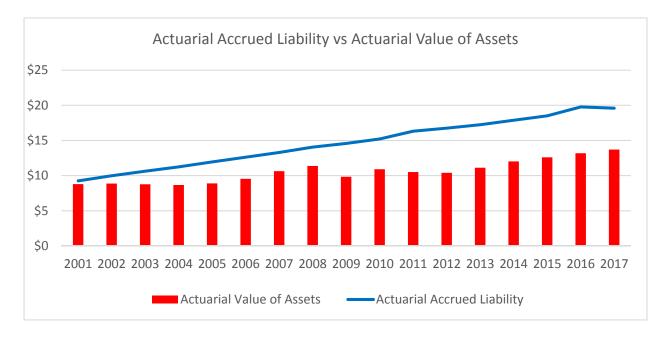
^{*} See Appendix B of the report for the detailed development of the unfunded actuarial accrued liability.



Changes in the UAAL occur for various reasons. The net decrease in the UAAL from June 30, 2016 to June 30, 2017 was \$715,759,665. The components of this net change are shown in the table below:

Unfunded Actuarial Accrued Liability, June 30, 2016 (\$ Millions)		\$6,591.1
Expected increase due to amortization method Investment experience Liability experience	(\$4.3) \$12.2 \$274.8 (\$998.5)	
Benefit Changes Total	(\$996.3)	(\$715.8)
Unfunded Actuarial Accrued Liability, June 30, 2017		\$5,875.3

As shown above, various components impacted the UAAL. Actuarial gains (losses) result from actual experience that is more (less) favorable than anticipated based on the actuarial assumptions. The amounts are measured as the difference between the expected unfunded actuarial accrued liability and the actual unfunded actuarial accrued liability net of any impact due to changes in actuarial assumptions and methods or benefit provisions. Overall, the System experienced a net decrease to the UAAL of \$715.8 million. The net UAAL decrease is comprised primarily of the reduction in liability due to the HB 49 and the Board's adopted COLA suspension. This decrease is partially offset due to a net liability experience loss and a small investment experience loss. The liability experience was the result of various components of actuarial gains and losses; the largest single source of liability losses was retirement experience.



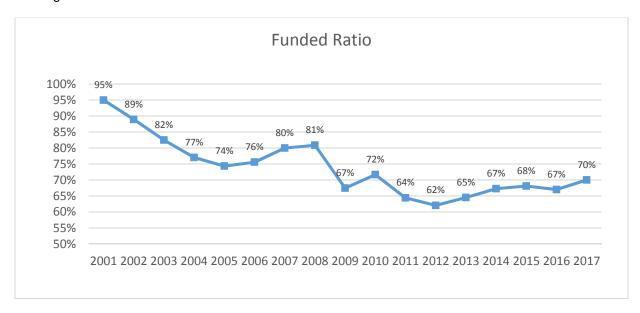
The actuarial value of assets was slightly higher than the actuarial accrued liability as of June 30, 2001. Investment experience below the assumed rate of return increased the difference between the actuarial accrued liability and actuarial assets. SERS implemented pension reform to improve the System's funding progress. In addition, the Board adopted a new funding policy that will allocate a higher portion of the employer contribution toward the basic benefits until the fund achieves a funded status of 90%.



An evaluation of the unfunded actuarial accrued liability on a pure dollar basis may not provide a complete analysis since only the difference between the assets and liabilities (which are both very large numbers) is reflected. Another way to evaluate the unfunded actuarial accrued liability and the progress made in its funding is to track the funded ratio, the ratio of the actuarial value of assets to the actuarial accrued liability.

	6/30/13	6/30/14	6/30/15	6/30/16	6/30/17
Funded Ratio	64.5%	67.3%	68.1%	66.7%	70.0%
Unfunded Actuarial Accrued Liability (\$M)	\$ 6,121.2	\$ 5,851.3	\$ 5,901.6	\$ 6,591.1	\$5,875.3

The longer-term historical funded ratio information is shown in the chart below.



Investment returns are the primary source of decreases in the funded ratio as can be seen during the 2001-2003 "tech bubble" recession and the "great" recession of 2008 – 2009.

CONTRIBUTION RATE

Under the Entry Age Normal cost method, the actuarial contribution rate consists of two components:

- a "normal cost" for the portion of projected liabilities allocated by the actuarial cost method to service
 of members during the year following the valuation date which is funded by both member and
 employer contributions, and
- an "unfunded actuarial accrued liability contribution" for the excess of the portion of projected liabilities allocated to service-to-date over the actuarial value of assets.



See Section VI of the report for the detailed development of these contribution rates which are summarized in the following table:

Contribution Rates	June 30, 2017	June 30, 2016
Employer Portion of Normal Cost Rate	0.44%	0.73%
2. UAAL Contribution Rate	10.40%	12.87%
3. Total Actuarial Determined Contribution Rate		
(1) + (2)	10.84%	13.60%
4. Funded Ratio	70.01%	66.66%
5. Total Employer Contribution Rate	14.00%	14.00%
6. Amount Allocated to Basic Benefits	13.50%	14.00%

As discussed earlier, SERS' basic benefits includes retirement, disability and survivor benefits, along with Medicare Part B reimbursements and lump sum retiree death benefits. SERS also provides access to health care coverage for retiree members. The Health Care Fund is partially supported by employer contributions that are not required for actuarially funding basic benefits. The new funding policy is expected to accelerate the pace at which SERS' basic benefits will achieve a funded ratio equal to 90%.



REPORT ON THE ANNUAL VALUATION OF THE SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

PREPARED AS OF JUNE 30, 2017

SECTION I – SUMMARY OF PRINCIPAL RESULTS

1. This report, prepared as of June 30, 2017, presents the results of the annual actuarial valuation of the basic benefits provided under the System, including pension, Medicare Part B reimbursement and post-retirement death benefits. For convenience of reference, the principal results of the valuation and a comparison with the preceding year's results are summarized in the following table.

SUMMARY OF PRINCIPAL RESULTS

	June 30, 2017	June 30, 2016
Active members included in valuation		
Number *	157,981	124,540
Annual Compensation	\$3,302,805,662	\$2,932,236,551
Retirees		
Number	79,157	76,280
Annual allowances	\$1,162,015,515	\$1,083,621,579
Deferred Vesteds		
Number **	4,735	6,819
Annual deferred allowances	\$24,428,538	\$30,389,808
Assets (net of Health Care Assets)		
Market related actuarial value	\$13,713,087,833	\$13,179,618,602
Market value	\$13,613,638,590	\$12,451,630,823
Unfunded Accrued Liability	\$5,875,329,854	\$6,591,089,519
Funded Ratio (MVA/AAL)		
Pension Benefits	70.70%	67.33%
Medicare Part B	38.00%	35.43%
Post-retirement Death Benefits	61.04%	58.51%
Actuarially Determined Contribution Rate		
Normal	0.44%	0.73%
Accrued liability	<u>10.40%</u>	<u>12.87%</u>
Total	10.84%	13.60%
Funding Policy Contribution Rate	13.50%	14.00%
Accrued liability amortization period (years)	27	28

^{*} The active member headcount reflects an increase of 32,641 members who have been re-categorized from inactive to active status. This group earned 0.25 or less of a year of service during fiscal year ended 2017. The average annual earnings of these members is \$7,518.

^{*} The deferred vested member headcount reflects a decrease due to the change in vesting requirement from 5 to 10 years



- 2. The statute sets a contribution cap of 24% of payroll; 14% from employers and 10% from employees. Employer contributions in excess of those required to support the basic benefits may be allocated to retiree health care funding. If the funded ratio is less than 70%, the entire 14% employers' contribution shall be allocated to SERS' basic benefits. If the funded ratio is 70% but less than 80%, at least 13.50% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 80% but less than 90%, at least 13.25% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 90% or greater, the Health Care Fund may receive any portion of the employers' contribution that is not needed to fund SERS' basic benefits.
- 3. The enactment of HB 49 changes the cost-of-living adjustment from the fixed 3.00% to a cost-of-living adjustment that is indexed to CPI-W not greater than 2.5% with a floor of 0% beginning January 1, 2018. In addition, with the authority granted the Board under HB 49, the Board has enacted a three-year COLA suspension for benefit recipients in calendar years 2018, 2019 and 2020.
- 4. The valuation balance sheet showing the results of the valuation is given in Schedule A.
- 5. Comments on the valuation results are given in Section IV, comments on the experience and the sources of actuarial gains and losses during the valuation year are given in Section V, and the rates of contribution payable by employers are given in Section VI.
- 6. Schedule B of this report presents the development of the actuarial value of assets. Schedule C details the actuarial assumptions and methods employed. Schedule D gives a summary of the benefit and contribution provisions of the plan.



SECTION II - MEMBERSHIP DATA

Data regarding the membership of the System for use as a basis for the valuation were furnished by the System's staff. The following tables summarize the membership of the system as of June 30, 2017 upon which the valuation was based. Detailed tabulations of the data are given in Schedule E.

Active Members

	Group Averages			
Number	Payroll	Salary	Age	Service
157,981	\$3,302,805,662	\$20,906	46.7	7.5

The total number of active members includes 52,560 vested members and 105,421 non-vested members. Those who reach 25 years of service on or before August 1, 2017 were eligible to retire under the previous age and service credit eligibility requirements.

The following table shows a six-year schedule of active member valuation data.

SCHEDULE OF SERS ACTIVE MEMBER VALUATION DATA

Valuation Date	Number	Annual Payroll	Annual Average Pay	% Increase in Average Pay
6/30/2012	121,811	\$2,788,153,585	\$22,889	0.6%
6/30/2013	121,642	2,746,827,535	22,581	(1.3)
6/30/2014	121,251	2,759,281,606	22,757	0.8
6/30/2015	122,855	2,845,443,802	23,161	1.8
6/30/2016	124,540	2,932,236,551	23,545	1.7
6/30/2017	157,981	3,302,805,662	20,906	(11.2) *

^{*} Average pay has decreased due to addition of 32,641 members who have been re-categorized as active who previously were reported as inactive members. This group earned less than 0.25 of a year of service during fiscal year ending 2017, and had average annual earnings of \$7,518.



The following table shows the number and annual retirement allowances payable to retiree members and their beneficiaries on the roll of the Retirement System as of the valuation date as well as certain group averages.

Retiree Lives

			Group Averages		
Type of Benefit Payment	Number	Annual Benefits	Benefit	Age	
Retirees and Beneficiaries	69,389	\$1,027,577,316	\$14,809	74.8	
Disability	5,474	96,185,333	17,571	65.5	
Survivors	4,294	38,252,866	8,908	72.2	
Total in SERS	79,157	\$1,162,015,515	\$14,680	74.0	

This valuation also includes 267,897 inactive members eligible for a contribution refund only (including 247,358 members reported separately who had completed one or more years of service before terminating). Their contributions totaled \$198,181,965 as of June 30, 2017. There were also 4,735 terminated vested members with annual deferred pension benefits of \$24,428,538. Included in the "Retiree" numbers in the above table are 12,751 re-employed retirees with account balances of \$93,516,256 (including employer contributions and interest), 600 re-retirees receiving only an annuity from their contributions and their employers' matching contributions, and 657 re-retirees receiving such annuities in addition to their regular pension benefits. The sum of the annuity payments attributable to these re-retirees is \$5,259,129.



SECTION III – ASSETS

As of June 30, 2017 the total market value of assets amounted to \$13,995,748,150. All figures
include the combined Pension Trust Fund, Medicare B Fund, Death Benefit Fund, and Health Care
Fund, but exclude the QEBA Fund.

	Asset Summary Based on Market Value						
(1)	Assets at June 30, 2016	\$	12,821,835,338				
(2)	Contributions and Misc. Revenue		950,287,806				
(3)	Investment Gain (Loss)		1,622,113,753				
(4)	Benefit Payments		(1,398,488,747)				
(5)	Assets at June 30, 2017 (1) + (2) + (3) + (4)	\$	13,995,748,150				
(6)	Annualized Rate of Return*		12.88 %				

2. The four-year smoothed market related actuarial value of assets used for the current valuation was \$14,095,197,393. Schedule B shows the development of the actuarial value of assets as of June 30, 2017. Again all figures include the combined Pension Trust Fund, Medicare B Fund, Death Benefit Fund, and Health Care Fund, but exclude the QEBA Fund.

	Asset Summary Based on Actuarial Value								
(1)	Assets at June 30, 2016	\$	13,549,823,117						
(2)	Contributions and Misc. Revenue		950,287,806						
(3)	Investment Gain (Loss)		993,575,217						
(4)	Benefit Payments		(1,398,488,747)						
(5)	Assets at June 30, 2017 Before Application of Corridor (1) + (2) + (3) + (4)	\$	14,095,197,393						
(6)	Annualized Rate of Return*		7.46 %						

*Based on the approximation formula: I / [0.5 x (A + B - I)], where

I = Investment Gain (Loss)

A = Beginning of year asset value

B = End of year asset value



SECTION IV - COMMENTS ON VALUATION

Schedule A of this report contains the valuation balance sheet which shows the present and prospective assets and liabilities of the System as of June 30, 2017.

- 1. The total retirement benefit valuation balance sheet shows that the System has total future retirement benefit liabilities of \$22,149,792,682, of which \$11,467,627,073 is for the future benefits payable for present retiree members and beneficiaries of deceased members; \$503,540,182 is for the future benefits payable for present inactive members; and \$10,178,625,427 is for the future benefits payable for present active members. Against these retirement benefit liabilities the System has a total present actuarial value of assets of \$13,713,087,833 as of June 30, 2017. The difference of \$8,436,704,849 between the total liabilities and the total present actuarial value of assets represents the present value of contributions to be made in the future for retirement benefits. Of this amount, \$2,527,383,701 is the present value of future contributions expected to be made by members, and the balance of \$5,909,321,148 represents the present value of future contributions payable by the employers.
- 2. The employers' contributions to the System on account of retirement benefits consist of normal contributions, accrued liability contributions and contributions for administrative expenses. The valuation indicates that employer normal contributions at the rate of 0.18% of payroll for basic pension benefits, 0.02% of payroll for post-retirement death benefits, and 0.24% of payroll for Medicare Part B benefits are required to provide the benefits of the System for the average member of SERS. Prospective employer normal contributions on account of retirement benefits at the above rates have a present value of \$33,991,294.
- 3. For pension benefits, it is recommended that the unfunded accrued liability contribution rate payable by the employers on account of retirement benefits be set at 10.40% of payroll. For post-retirement death benefits, it is recommended that the unfunded accrued liability contribution rate payable by the employers on account of retirement benefits be set at 0.03% of payroll. Finally, for Medicare Part B benefits, it is recommended that the unfunded accrued liability contribution rate payable by the employers on account of retirement benefits be set at 0.44% of payroll. These rates are sufficient to amortize the unfunded accrued liability of \$5,875,329,854 over 27 years based on the assumption that the aggregate payroll for SERS members will increase by 3.5% each year.
- 4. The present value of the total future contributions to be made by the employers for basic benefits is the sum of the future employer normal contributions and the unfunded accrued liability contributions and equals \$5,909,321,148.



Actual experience will never (except by coincidence) match exactly with assumed experience. It is assumed that gains and losses will be in balance over a period of years, but sizable year-to-year fluctuations are common. Detail on the derivation of the experience gain (loss) for the year ended June 30, 2017 is shown below in \$ millions.

Experience (Gain/Loss)

	Total Basic June 30,	2017	2016	2015	2014	2013	2012
(1)	UAAL from last valuation	\$ 6,591.1	5,901.6	5,851.3	6,121.2	6,357.7	5,811.9
(2)	Normal cost from last valuation	312.5	319.3	313.6	308.9	311.9	334.3
(3)	Contributions	804.4	750.7	701.5	700.7	695.1	696.7
(4)	Interest accrual:	487.6	453.0	450.5	471.2	490.0	449.3
	[(1) + (2) - (3)*.5] x .075						
(5)	Expected UAAL before changes:	\$ 6,586.8	5,923.2	5,913.9	6,200.6	6,464.5	5,898.8
	(1) + (2) - (3) + (4)						
(6)	Change due to plan amendments	998.5	0.0	0.0	0.0	27.8	194.7
(7)	Change due to new actuarial	0.0	(668.2)	0.0	0.0	0.0	0.0
	assumption or methods						
(8)	Expected UAAL after changes:	\$ 5,588.3	6,591.4	5,913.9	6,200.6	6,436.7	5,704.1
	(5) - (6) - (7)						
(9)	Actual UAAL from this valuation	\$ 5,875.3	6,591.1	5,901.6	5,851.3	6,121.2	6,357.7
(10)	Total Gain/(Loss): (8) - (9)	\$ (287.0)	0.3	12.3	349.3	315.5	(653.6)
(11)	Investment Gain/(Loss):	\$ (12.2)	50.6	62.1	403.3	241.0	(692.2)
(12)	Non-Investment Gain/(Loss)	\$ (274.8)	(50.3)	(49.8)	(54.0)	74.4	38.6

	Pension June 30,	2017	2016	2015	2014	2013	2012
(1)	UAAL from last valuation	\$ 6,315.7	5,640.9	5,574.6	5,838.1	6,072.1	5,531.0
(2)	Normal cost from last valuation	305.6	313.3	307.7	303.0	305.9	327.9
(3)	Contributions	778.7	727.0	678.6	677.8	673.0	673.7
(4)	Interest accrual:	467.4	433.3	429.6	449.7	468.2	428.0
	[(1) + (2) - (3)*.5] x .075						
(5)	Expected UAAL before changes:	\$ 6,310.0	5,660.5	5,633.3	5,913.0	6,173.2	5,613.2
	(1) + (2) - (3) + (4)						
(6)	Change due to plan amendments	998.5	0.0	0.0	0.0	27.1	189.0
(7)	Change due to new actuarial	0.0	(643.5)	0.0	0.0	0.0	0.0
	assumption or methods						
(8)	Expected UAAL after changes:	\$ 5,311.5	6,304.0	5,633.3	5,913.0	6,146.1	5,424.2
	(5) - (6) - (7)						
(9)	Actual UAAL from this valuation	\$ 5,611.3	6,315.7	5,640.9	5,574.6	5,838.1	6,072.1
(10)	Total Gain/(Loss): (8) - (9)	\$ (299.8)	(11.7)	(7.6)	338.4	308.0	(647.9)
(11)	Investment Gain/(Loss):	\$ (12.3)	49.6	60.6	398.0	237.9	(683.6)
(12)	Non-Investment Gain/(Loss)	\$ (287.5)	(61.3)	(68.2)	(59.6)	70.1	35.7



SECTION V – DERIVATION OF EXPERIENCE GAINS AND LOSSES (\$ Millions)

	Medicare Part B June 30,	2017	2016	2015	2014	2013	2012
(1)	UAAL from last valuation	\$ 259.7	246.9	262.7	268.3	270.0	266.5
(2)	Normal cost from last valuation	6.4	5.5	5.4	5.4	5.5	5.9
(3)	Contributions	24.1	22.2	21.5	21.5	20.7	21.5
(4)	Interest accrual:	19.0	18.7	19.9	20.4	20.5	20.3
	$[(1) + (2) - (3)*.5] \times .075$						
(5)	Expected UAAL before changes:	\$ 261.0	248.9	266.5	272.6	275.3	271.2
	(1) + (2) - (3) + (4)						
(6)	Change due to plan amendments	0.0	0.0	0.0	0.0	0.6	5.6
(7)	Change due to new actuarial	0.0	(22.4)	0.0	0.0	0.0	0.0
	assumption or methods						
(8)	Expected UAAL after changes:	\$ 261.0	271.3	266.5	272.6	274.7	265.6
	(5) - (6) - (7)						
(9)	Actual UAAL from this valuation	\$ 249.1	259.7	246.9	262.7	268.3	270.0
(10)	Total Gain/(Loss): (8) - (9)	\$ 11.9	11.6	19.6	9.9	6.4	(4.4)
(11)	Investment Gain/(Loss):	\$ 0.1	0.9	1.3	4.5	2.6	(7.3)
(12)	Non-Investment Gain/(Loss)	\$ 11.8	10.7	18.3	5.4	3.8	2.9

	Post-Retirement Death Benefits June 30,		2017	2016	2015	2014	2013	2012
(4)	LIA A L. france land continue	Φ.	45.7	40.0	440	440	45.0	44.4
(1)	UAAL from last valuation	\$	15.7	13.8	14.0	14.8	15.6	14.4
(2)	Normal cost from last valuation		0.5	0.5	0.5	0.5	0.5	0.5
(3)	Contributions		1.6	1.5	1.5	1.4	1.4	1.5
(4)	Interest accrual:		1.2	1.0	1.1	1.1	1.2	1.1
	[(1) + (2) - (3)*.5] x .075							
(5)	Expected UAAL before changes:	\$	15.8	13.8	14.1	15.0	15.9	14.5
	(1) + (2) - (3) + (4)							
(6)	Change due to plan amendments		0.0	0.0	0.0	0.0	0.1	0.1
(7)	Change due to new actuarial		0.0	(2.3)	0.0	0.0	0.0	0.0
	assumption or methods							
(8)	Expected UAAL after changes:	\$	15.8	16.1	14.1	15.0	15.8	14.4
	(5) - (6) - (7)							
(9)	Actual UAAL from this valuation	\$	14.9	15.7	13.8	14.0	14.8	15.6
(10)	Total Gain/(Loss): (8) - (9)	\$	0.9	0.4	0.3	1.0	1.0	(1.2)
(11)	Investment Gain/(Loss):	\$	0.0	0.1	0.2	0.8	0.5	(1.3)
(12)	Non-Investment Gain/(Loss)	\$	0.9	0.3	0.1	0.2	0.5	0.1



ANALYSIS OF FINANCIAL EXPERIENCE

Gains & (Losses) in Accrued Liabilities Resulting from Difference Between Assumed Experience & Actual Experience (\$ Millions)

Type of Activity	Pension	Medicare Part B	Retirement Death Benefit	Total Basic Benefits
Age & Service Retirements. If members retire at older ages, there is a gain. If younger ages, a loss.	\$ (211.0) \$	(0.5) \$	(0.3) \$	(211.8)
Disability Retirements. If disability claims are less than assumed, there is a gain. If more claims, a loss.	(37.0)	(0.7)	(0.1)	(37.7)
Death-in Service Benefits. If survivor claims are less than assumed, there is a gain. If more claims, there is a loss.	(0.5)	(0.1)	(0.0)	(0.6)
Withdrawal From Employment. If more liabilities are released by withdrawals than assumed, there is a gain. If smaller releases, a loss.	21.7	0.2	(0.0)	21.9
Pay Increases. If there are smaller pay increases than assumed, there is a gain. If greater increases, a loss.	(69.2)	(0.0)	(0.0)	(69.2)
New Members. Additional accrued liability attributable to members who entered the plan since the last valuation.	(45.0)	(2.9)	(0.2)	(48.1)
Investment Income. If there is a greater investment income than assumed, there is a gain. If less income, a loss.	(12.1)	0.1	0.0	(12.0)
Death After Retirement. If retired members live longer than assumed, there is a loss. If not as long, a gain.	85.3	14.0	(2.1)	97.3
Other. Miscellaneous gains and losses resulting from changes in valuation software, data adjustments, timing of financial transactions, etc.	(32.1)	1.8	3.6	(26.8)
Gain (or Loss) During Year From Financial Experience	\$ (299.8) \$	11.9 \$	0.9 \$	(287.0)
Non-Recurring Items. Adjustments for plan amendments, assumption changes and method changes	 998.5	0.0	0.0	998.5
Composite Gain (or Loss) During Year	\$ 698.7 \$	11.9 \$	0.9 \$	711.5



SECTION VI – ACTUARIALLY DETERMINED CONTRIBUTION RATES

The valuation balance sheet gives the basis for determining the percentage rates for contributions to be made by employers to the Retirement System. The following tables show the rates of contribution payable by employers.

Actuarially Determined Contribution Rates

			Post-Retirement	Medicare	Total
	Contribution for	Pension	Death Benefits	Part B	Basic Benefits
Α.	Normal Cost:				
	(1) Service retirement benefits	6.50%			
	(2) Disability benefits	0.70			
	(3) Survivor benefits	0.23			
	(4) Refunds	2.75			
	(5) Total	10.18%	0.02%	0.24%	10.44%
В.	Member Contributions	10.00%	0.00%	0.00%	10.00%
C.	Employer Normal Cost: [A(5) - B]	0.18%	0.02%	0.24%	0.44%
D.	Unfunded Actuarial Accrued Liability Contributions	9.93%	0.03%	0.44%	10.40%
E.	Total Recommended Employer Contribution Rate:[C+D]	10.11%	0.05%	0.68%	10.84%

The statute sets a contribution cap of 24% of payroll; 14% from employers and 10% from employees. Employer contributions in excess of those required to support the basic benefits may be allocated to retiree health care funding. If the funded ratio is less than 70%, all 14% of the employers' contribution shall be allocated to SERS' basic benefits. If the funded ratio is 70% but less than 80%, at least 13.50% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 80% but less than 90%, at least 13.25% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 90% or greater, the Health Care Fund may receive any portion of the employers' contribution that is not needed to fund SERS' basic benefits.



SECTION VII – SCHEDULE OF FUNDING PROGRESS (\$ Millions)

r										
Actuarial Valuation Date	Value of Plan Assets (a)	Actuarial Accrued Liability (AAL) Entry Age (b)	Unfunded AAL (UAAL) (b - a)	Funded Ratio (a / b)	Covered Payroll (c)	UAAL as a Percentage of Covered Payroll (b - a)/(c)				
Pension Benefits										
6/30/2012 6/30/2013 6/30/2014 6/30/2015 6/30/2016 6/30/2017	\$ 10,266 10,988 11,882 12,446 13,015 13,537	\$ 16,338 16,826 17,457 18,087 19,331 19,148	6,072 5,838 5,575 5,641 6,316 5,611	62.8% 65.3 68.1 68.8 67.3 70.7	\$ 2,788 2,747 2,759 2,845 2,932 3,303	217.8% 212.5 202.1 198.3 215.4 169.9				
	Medicare Part B									
6/30/2012 6/30/2013 6/30/2014 6/30/2015 6/30/2016 6/30/2017	\$ 113 119 128 134 142 153	\$ 383 387 390 381 402 402	\$ 270 268 262 247 260 249	29.5% 30.6 32.7 35.3 35.4 38.0	\$ 2,788 2,747 2,759 2,845 2,932 3,303	9.7% 9.8 9.5 8.7 8.9 7.5				
	Post-Retirement Death Benefits									
6/30/2012 6/30/2013 6/30/2014 6/30/2015 6/30/2016 6/30/2017	\$ 18 19 21 21 22 23	\$ 34 34 35 35 38 38	\$ 16 15 14 14 16 15	52.9% 55.9 60.0 60.0 57.9 60.5	\$ 2,788 2,747 2,759 2,845 2,932 3,303	0.6% 0.5 0.5 0.5 0.5 0.5				



SCHEDULE A

Valuation Balance Sheet and Solvency Test

The following valuation balance sheet shows the assets and liabilities of the retirement system as of the current valuation date of June 30, 2017 and, for comparison purposes, as of the immediately preceding valuation date of June 30, 2016. The items shown in the balance sheet are present values actuarially determined as of the relevant valuation date.

VALUATION BALANCE SHEETS SHOWING THE ASSETS AND LIABILITIES OF THE SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

	June 30, 2017	June 30, 2016
ASSETS		
Current actuarial value of assets	\$ 13,713,087,833	\$ 13,179,618,602
Prospective contributions		
Member contributions	\$ 2,527,383,701	\$ 2,294,130,697
Employer normal contributions	33,991,294	87,027,326
Unfunded accrued liability contributions	5,875,329,854	6,591,089,519
Total prospective contributions	\$ 8,436,704,849	\$ 8,972,247,542
Total assets	\$ 22,149,792,682	\$ 22,151,866,144
LIABILITIES		
Present value of benefits payable on account of present retired members and beneficiaries	\$ 11,467,627,073	\$ 11,398,451,686
Present value of benefits payable on account of active members	10,178,625,427	10,182,020,819
Present value of benefits payable on account of inactive and deferred vested members	503,540,182	571,393,639
Total liabilities	\$ 22,149,792,682	\$ 22,151,866,144



The following tables provide the solvency test for SERS members.

Solvency Test (\$ Millions)

	Aggreg	Portion of Accrued Liabilities Covered by Reported Asset							
Valuation Date	(1) Active Member Contributions	(2) Retired Members & Beneficiaries	(3) Active Members (Employer Financed Portion)	Actuarial Value of Assets	(1)	(2)	(3)		
Pension Benefits									
6/30/2012 6/30/2013 6/30/2014 6/30/2015 6/30/2016 6/30/2017 6/30/2012 6/30/2013 6/30/2014 6/30/2015 6/30/2016 6/30/2017	\$ 2,826 2,860 2,892 2,979 2,914 3,010 \$ 0 0 0	\$ 9,190 9,796 10,437 11,046 11,689 11,690 \$ 251 255 259 252 251 251	\$ 4,322 4,196 4,128 4,062 4,728 4,448 Medicare Part I \$ 132 132 131 130 151 151	\$ 10,266 10,988 11,882 12,446 13,015 13,537 B \$ 113 119 128 134 142 153	100.0% 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	81.0 83.0 86.1 85.7 86.4 90.0 45.1% 46.5 49.3 53.2 56.6 61.0	0.0% 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0		
0/30/2017			t-Retirement Death		100.0	01.0	0.0		
6/30/2012 6/30/2013 6/30/2014 6/30/2015 6/30/2016 6/30/2017	\$ 0 0 0 0 0	\$ 26 27 27 28 30 30	\$ 8 7 8 7 8 8	\$ 18 19 21 21 22 23	100.0% 100.0 100.0 100.0 100.0 100.0	69.7 72.6 75.9 75.0 73.3 76.7	0.0% 0.0 0.0 0.0 0.0 0.0		





	Valuation date June 30:	2016	2017	2018	2019	2020
A.	Actuarial Value Beginning of Year	\$ 13,010,043,372	\$ 13,549,823,117			
B.	Market Value End of Year	12,821,835,338	13,995,748,150			
C.	Market Value Beginning of Year	13,205,547,628	12,821,835,338			
D.	Cash Flow					
	D1. Contributions	\$ 795,602,838	\$ 852,097,282			
	D2. Other Revenue	113,932,903	98,190,524			
	D3. Benefit Payments	(1,379,752,964)	(1,401,628,622)			
	D4. Net Transfers	2,272,514	3,139,875			
	D5. Net	\$ (467,944,709)	\$ (448,200,941)			
E.	Investment Income					
	E1. Market Total: BCD5.	\$ 84,232,419	\$ 1,622,113,753			
	E2. Assumed Rate (Net of Expenses)	7.75%	7.50%			
	E3. Amount for Immediate Recognition	1,005,297,084	944,830,115			
	E4. Amount for Phased-In Recognition	(921,064,665)	677,283,638			
F.	Phased-In Recognition of Investment Income					
	F1. Current Year: 0.25 * E4.	\$ (230,266,166)	\$ 169,320,910	\$ 0	\$ 0	\$ 0
	F2. First Prior Year	(146,879,637)	(230,266,166)	169,320,910	0	0
	F3. Second Prior Year	256,569,995	(146,879,637)	(230,266,166)	169,320,910	0
	F4. Third Prior Year	123,003,178	256,569,995	(146,879,637)	(230,266,166)	169,320,909
	F5. Total Recognized Investment Gain/(Loss)	\$ 2,427,370	\$ 48,745,102	\$ (207,824,893)	\$ (60,945,256)	\$ 169,320,909
G.	Preliminary Actuarial Value End of Year:					
	A.+D5.+E3.+F5.	\$ 13,549,823,117	\$ 14,095,197,393			
H.	Corridor					
	H1. 80% of Market Value H2. 120% of Market Value	10,257,468,270 15,386,202,406	11,196,598,520 16,794,897,780			
I.	Actuarial Value End of Year:					
	G. Not Less than H1. or Not Greater than H2	\$ 13,549,823,117	\$ 14,095,197,393			
J.	Difference Between Market & Actuarial Values	\$ (727,987,779)	\$ (99,449,243)	\$ 108,375,651	\$ 169,320,907	\$ 0
K.	Health Care Valuation Assets	\$ 370,204,515	\$ 382,109,560			
L.	Basic Benefits Valuation Assets (G - K)	\$ 13,179,618,602	\$ 13,713,087,833			

The Actuarial Valuation of Assets recognizes assumed investment income (line E3) fully each year. Differences between actual and assumed investment income (line E4) are phased in over a closed 4 year period. During periods when investment performance exceeds the assumed rate, Actuarial Value of Assets will tend to be less than market value. During periods when investment performance is less than the assumed rate, Actuarial Value of Assets will tend to be greater than market value. If assumed rates are exactly realized for 4 consecutive years, actuarial value will become equal to market value.



SCHEDULE C

STATEMENT OF ACTUARIAL ASSUMPTIONS AND METHODS

The assumptions and methods used in the valuation were based on the actuarial experience study for the five-year period ending June 30, 2015, adopted by the Board on April 21, 2016

INTEREST RATE: 7.50% per annum, compounded annually (net after all System expenses).

SEPARATIONS FROM ACTIVE SERVICE: Representative values of the assumed rates of separation from active service are as follows:

Service	Annual Rates of Withdrawal
0	45.00%
1	31.00
2	23.00
3	17.00
4	13.00
5	10.50
10	4.00
15	2.00
20	2.00
25	1.50

	Annual Rates of						
	Dea	th *	Disability				
Age	Male	Female	Male	Female			
20	.022%	.013%	.020%	.010%			
25	.053	.018	.038	.010			
30	.063	.019	.068	.026			
35	.059	.024	.122	.055			
40	.068	.032	.212	.102			
45	.081	.044	.311	.170			
50	.126	.074	.411	.300			
55	.218	.124	.530	.450			
60	.361	.188	.590	.450			
65	.607	.274	.550	.300			
70	1.071	.415	.300	.200			
74	1.570	.629	.300	.200			

^{*} Pre-retirement mortality is based on the RP-2014 Blue Collar Mortality Table with fully generational projection and a five year age set-back for both males and females. The above rates represent the base rates used.



Annual Rates of											
	Retirement Eligible prior to 8/1/17 Retirement Eligible after 8/1/17										
Age				Subsequent Unreduced	Reduced	Reduced (60/25)	Subsequent Unreduced				
50			27%	19%							
55		10%	27%	19%							
60	11%	14%	27%	19%		14%	30%	19%			
65			25%	19%	11%	14%	30%	19%			
70			20%	22%			30%	22%			
75			100%	100%			100%	100%			

SALARY INCREASES: Representative values of the assumed annual rates of salary increases are as follows:

	Annual Rates of							
Service	Merit & Seniority (A)	Base (Economy) (B)	Increase Next Year (1+(A))*(1+(B))					
0	14.20%	3.50%	18.20%					
1	5.55	3.50	9.25					
2	3.14	3.50	6.75					
3	2.17	3.50	5.75					
4	1.45	3.50	5.00					
5	1.20	3.50	4.75					
6	0.97	3.50	4.50					
7	0.72	3.50	4.25					
8	0.48	3.50	4.00					
9	0.24	3.50	3.75					
10 & over	0.00	3.50	3.50					

PAYROLL GROWTH: 3.50% per annum, compounded annually.

PRICE INFLATION: 3.00% per annum, compounded annually.

ANNUAL COLA: Increase of 2.50% of initial retirement allowance on anniversary of retirement date.

DEATH AFTER RETIREMENT: The RP-2014 Blue Collar Mortality Table with fully generational projection and Scale BB, 120% of male rates and 110% of female rates is used to evaluate allowances to be paid. The RP-2000 Disabled Mortality Table with 90% for male rates and 100% for female rates set back five years is used for the period after disability retirement. These assumptions are used to measure the probabilities of each benefit payment being made after retirement.

MARRIAGE ASSUMPTION: 80% married with the husband three years older than his wife.



VALUATION METHOD: Entry age normal cost method. Entry age is established on an individual basis.

ASSET VALUATION METHOD: Actuarial value, as developed in Schedule A. The actuarial value of assets recognizes a portion of the difference between the market value of assets and the expected market value of assets, based on the assumed valuation rate of return. The amount recognized each year is 25% of the difference between market value and expected market value. The actuarial value of assets cannot be less than 80% or more than 120% of market value.

FUNDING POLICY: If the funded ratio is less than 70%, the entire 14% employers' contribution shall be allocated to SERS' basic benefits. If the funded ratio is 70% but less than 80%, at least 13.50% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 80% but less than 90%, at least 13.25% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 90% or greater, the Health Care Fund may receive any portion of the employers' contribution that is not needed to fund SERS' basic benefits.



SCHEDULE D

SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO Summary of Benefit and Contribution Provisions

Contributions for Basic Benefits

Members contribute 10% of pay and employers contribute 14% of pay. Employer contributions not required to finance basic benefits are allocated to the health care program.

Final Average Salary

Average annual salary over the member's three highest years of service.

Normal Retirement

Condition for Retirement

Retire before August 1, 2017 or have 25 years of service or more on or before August 1, 2017 Attainment of age 65 with at least five years of creditable service, or completion of 30 years of creditable service, regardless of age.

Members attaining 25 years of service after August 1, 2017

Attainment of age 67 with at least ten years of creditable service, or attainment of age 57 with at least 30 years of creditable service. Buy-up option available.

Amount of Allowance

The annual retirement allowance payable shall not be greater than 100% of final average salary, and is the greater of:

1. Money Purchase - the greater of:

The sum of:

- a. An annuity based on the value of the member's accumulated contributions at retirement
- b. A pension equal to the annuity
- c. For members who have 10 or more years of service credit prior to 10/1/1956, an annual benefit of \$180.
- 2. Defined Benefit the greater of:

The sum of:

- a. 2.2% of final average salary multiplied by the member's years of service up to 30,
- b. 2.5% of final average salary multiplied by the member's years of service in excess of 30,

or:

c. \$86 multiplied by the years of service.



Early Retirement

Condition for Early Retirement

Retire before August 1, 2017 or have 25 years of service or more on or before August 1, 2017 Not eligible for unreduced service retirement but has attained age 55 with at least 25 years of service, or age 60 with five years of service.

Members attaining 25 years of service after August 1, 2017

Attainment of age 62 with at least ten years of creditable service, or attainment of age 60 with at least 25 years of creditable service.

Amount of Allowance

Retire before August 1, 2017 or have 25 years of service or more on or before August 1, 2017 Normal retirement allowance accrued to the date of early retirement. The Defined Benefit amount determined above is adjusted by the following percentages based on attained age or years of service:

Attained <u>Age</u>	Years of Ohio Service Credit	<u>Percentage</u>
58	25	75%
59	26	80
60	27	85
61		88
	28	90
62		91
63		94
	29	95
64		97

Members attaining 25 years of service after August 1, 2017

Actuarial equivalent of the normal retirement allowance accrued to the date of early retirement. The Defined Benefit amount determined above is actuarially adjusted for the years before age 65 (age 67 if after August 1, 2017) or 30 years of service, whichever is shorter, but in no event is the adjusted benefit less than the following percentages of the Defined Benefit amount based on years of service:

Years of Ohio	
Service Credit	<u>Percentage</u>
25	75%
26	80
27	85
28	90
29	95

Disability Retirement

Condition for Retirement

An allowance is paid upon becoming permanently disabled after completion of at least 5 years of total service credit.

Amount of Allowance

1. For those who were active members prior to July 29, 1992 and did not elect the benefit structure outlined below, an allowance based on service to date of disablement, plus, if the age at disablement is less than 60, continuous



service to age 60. The allowance is computed in the same manner as the defined benefit service retirement allowance, subject to a minimum of 30% of FAS and a maximum of 75% of FAS. It is payable for life, unless terminated.

- For those who became active members after July 28, 1992, and for those who were active members prior to July 29, 1992 who so elected, an allowance equal to the greater of (i) 45% of FAS, or (ii) the lesser of 60% of FAS, or the allowance computed in the same manner as the defined benefit service retirement allowance. The allowance will continue until:
 - a. The date the member is granted a service retirement benefit, or
 - b. The date the allowance is terminated, or
 - c. The later of the date the member attains age 65 or the date the disability allowance has been paid for the minimum duration in accordance with the following schedule:

	Minimum Duration
Age at Disability	In Months
60 and earlier	60
61	60
62	48
63	48
64	36
65	36
66	24
67	24
68	24
69 and older	12

Death Benefits Prior to Retirement

Death While Eligible to Retire

If a member dies in service after becoming eligible to retire with a service allowance and leaves a surviving spouse or other sole dependent beneficiary, the survivor may elect to receive the same amount that would have been paid had the member retired the last day of the month of death and elected the 100% joint and survivor form of payment.

Survivor (Death-in-Service) Allowances

Condition for Benefit

Upon the death of a member with at least 1½ years of Ohio service credit and with at least ¼ year of Ohio contributing service credit within 2½ years prior to the date of death, the survivor allowances are payable as follows:

- Qualified Spouse: A monthly allowance commencing at age 62, except that the benefit is payable immediately if:

 (1) the qualified deceased member had 10 or more years of Ohio service credit; or (2) is caring for a surviving child, or (3) is incompetent.
- Qualified Child: For allowances that commenced before January 7, 2013, an allowance is payable to a deceased member's qualified child who is under age 18 and never



been married, under age 22 and in school, or adjudged incompetent prior to the member's death and the child attaining age 18 or age 22 if attending school. For allowances that commence on or after January 7, 2013, an allowance is payable to a deceased member's qualified child who is under age 19 and never been married or adjudged incompetent prior to the member's death and the child attaining age 19.

3. Qualified Parent's Allowance: A monthly allowance is payable to a dependent parent age 65 or more.

Amount of Allowances

Except when survived by a qualified child(ren), upon the death of a member prior to retirement, the accumulated contributions of the member without interest is payable. Alternatively, the beneficiary may elect the following amounts, payable monthly while eligible:

Number of Qualified	Annual Benefit as Percent of	Minimum Monthly			
<u>Survivors</u>	Member's FAS	<u>Allowance</u>			
1	25%	\$96			
2	40	186			
3	50	236			
4	55	236			
5 or more	60	236			

If the deceased member had attained at least 20 years of service, the total benefits payable to all qualified survivors are not less than:

Years of Service	Annual Benefit as Percent of Member's FAS
20	29%
21	33
22	37
23	41
24	45
25	48
26	51
27	54
28	57
29 or more	60

Termination Benefits

Refund of Members' Accumulated Contributions

In the event a member leaves service before any monthly benefits are payable on his behalf, his accumulated contributions, without interest, may be refunded.

Deferred Benefits

Members who retire prior to August 1, 2017 must have at least 5 years of service credit and those members who retire on and after August 1, 2017 must have at least 10 years of service credit and are eligible to draw the benefit the first of the month following their 62nd birthday.



Normal Form of Benefit

Single Life Annuity

Optional Forms of Benefit

A member upon retirement may elect to receive his allowance in one of the following forms that are computed to be actuarially equivalent to the applicable retirement allowance:

Upon the death of a retiree, 50%, 100%, or some other percentage of his reduced retirement allowance shall be continued throughout the life of, and paid to, a designated beneficiary.

A reduced retirement allowance shall be continued throughout the life of the pensioner, but with the further guarantee of payment to the pensioner, his beneficiary or his estate for a specified number of years certain.

A member can select a partial lump-sum option at retirement. Under this option, the partial lump- sum shall not be less than 6 times and not more than 36 times the unreduced monthly benefit, and the monthly benefit will be actuarially reduced. In addition, the monthly benefit payable cannot be less than 50% of the unreduced amount.

Post-Retirement Death Benefit

Regardless of the form of benefit selected, a lump sum benefit of \$1,000 is paid at the death of the retiree.

Post-Retirement Increases

Pre 1/1/2018: On each anniversary of the initial date of retirement, the allowances of all retirees and survivors are increased by 3% of the base benefit.

On and after 1/1/2018: On each anniversary of the initial retirement, the allowance of all retirees and survivors are increased by the annual rate of increase in the CPI-W measured as of the June preceding the beginning of the applicable calendar year. The annual rate of increase shall not be less than 0% nor greater than 2.5%. COLA's shall be suspended for calendar years 2018, 2019, and 2020.

Medicare Part B

Each recipient of a service retirement benefit, a disability benefit, or a survivor benefit who was credited with at least 10 years of service and has paid Medicare Part B premiums and has chosen the health care option, is reimbursed \$45.50 per month for premiums. The reimbursement will continue to the spouse upon the death of the retiree in cases where the retiree elected a Joint and Survivor payment form.

Reemployed Retirants

Eligibility Effective

July 1, 1991, service retirees of SERS, or service or disability retirees of one of the other four Ohio retirement systems who are employed in a SERS-covered position are required to contribute to a money purchase annuity, a type of defined contribution plan.



Amount of Allowance

Upon termination of employment, a reemployed retirant who has attained age 65 is eligible to receive an annuity based on the amount of his/her accumulated contributions, and an equal amount of employer contributions, plus interest to the effective date of retirement. Effective July 1, 2006 the amount of employer contributions will be determined by the Board. Interest is granted on the reemployed retirant's prior fiscal year account balance, calculated using a rate determined by the SERS Board, compounded annually. The benefit is payable as a lump sum or as an annuity if the amount of such annuity is at least \$25. Upon termination of employment, a reemployed retirant who has not attained age 65 may request a lump sum refund of his/her own contributions; there is no payment of employer contributions or interest.

Benefits Payable Upon Death

If a reemployed retirant dies while employed, a lump sum payment of the monthly annuity, discounted to the present value using the current actuarial assumption rate of interest, will be paid to his beneficiary.

If a reemployed retirant dies while receiving a monthly annuity, a lump sum payment will be made to a beneficiary in an amount equal to the excess, if any, of the lump sum payment the reemployed retirant would have received at the effective date of retirement over the sum of the annuity payments received by the reemployed retirant to the date of death.

Member Contributions

Each reemployed retirant is required to contribute 10% of his pay by payroll deductions.

Employer Contributions

Employer contributions are expressed as percents of member covered payroll. Employers are required to contribute 14% of payroll.

Other Benefits

Reemployed retirants of SERS are not eligible to receive any of the other benefits provided to SERS members.

Member Contributions

10% of salary.

SCHEDULE E



DETAILED TABULATIONS OF THE DATA

Schedule of Retiree Members Added to and Removed From Rolls Last Six Fiscal Years

Year Ending June 30	Year Ending June 30 2012		2013	2014	2014 2015		2017		
Number of Retiree Mo	emb	ers							
Beginning of Year		67,221	69,038	70,771	72,605	74,372	76,280		
Added		4,137	4,197	4,144	4,909	4,388	5,499		
Removed		2,320	2,464	2,310	3,142	2,480	2,622		
End of Year		69,038	70,771	70,771 72,605		74,372 76,280			
Annual Retirement Allowances									
Beginning of Year	\$	777,910,918	\$ 838,076,567	\$898,267,601	\$ 958,537,700	\$ 1,020,368,894	\$ 1,083,621,579		
Added		61,519,329	62,841,820	61,331,002	70,608,680	66,860,652	70,973,748		
Removed		1,353,680	2,650,786	1,060,903	8,777,486	3,607,967	(7,420,188)		
End of Year	\$	838,076,567	\$ 898,267,601	\$ 958,537,700	\$1,020,368,894	\$ 1,083,621,579	\$ 1,162,015,515		
% Increase in Allowances		7.73%	7.18%	6.71%	6.45%	6.20%	7.23%		
Average Annual Allowance	\$	12,139	\$ 12,693	\$ 13,202	\$ 13,720	\$ 14,206	\$ 14,680		



Schedule of Retiree Members Receiving a Medicare Part B Reimbursement Added to and Removed From Rolls Last Three Fiscal Years

Year Ending June 30		2015	2016	2017				
Number of Retiree Members								
Beginning of Year		47,298	46,619	46,166				
Added		1,853	2,006	1,853				
Removed		2,532	2,459	3,278				
End of Year		46,619	46,166	44,741				
Annual Retirement Al								
Beginning of Year	\$	25,824,708	\$25,453,974	\$25,206,636				
Added		1,011,738	1,095,276	1,011,738				
Removed		1,382,472	1,342,614	1,789,788				
End of Year	\$	25,453,974	\$25,206,636	\$24,428,586				
% Increase in Allowances		(1.44)%	(0.97)%	(3.09)%				
Average Annual Allowance	\$	546	\$ 546	\$ 546				



Annuity and Pension Reserve Fund Retiree Information as of June 30, 2017 Tabulated by Type of Benefit

		unt / Be	of enefit	Total	Ser	vice	Disa	ability	Surv	ivor
\$ 1	-	\$	250	11,092		10,197		80		815
251	-		500	11,560		10,014		397	,	1,149
501	-		750	10,948		9,441		668		839
751	-		1,000	9,394		7,937		880		577
1,001	-		1,500	13,662		11,757		1,408		497
1,501	-		2,000	8,261		7,177		889		195
Over			2,000	14,266		12,857		1,183		226
				79,183		69,380		5,505	4	4,298
Average Monthly Benefit Average Age					\$	1,232 73.9	\$	1,464 65.5	\$	742 72.2

The 69,380 service retirees shown in the table above are comprised of 64,079 service retirees and 5,301 beneficiaries of deceased retirees. Excluded from the 64,709 service retirees are 600 re-retirees that are receiving a pension-only benefit resulting from the annuitization of the contributions accumulated during active membership. Multiple benefit recipients accounts for the higher total headcount than shown elsewhere in the report.



Annuity and Pension Reserve Fund Retiree Information as of June 30, 2017 Tabulated by Attained Ages

	Retirement			Disabilit	y Retirement	Total		
Attained Age	No.	Annual o. Benefits		No.	Annual Benefits	No.		Annual Benefits
Under 45	-	\$	-	57	\$ 770,052	57	\$	770,052
45-49	22	\$	758,300	158	\$ 2,449,622	180	\$	3,207,922
50-54	369	\$	13,057,980	461	\$ 8,569,623	830	\$	21,627,603
55-59	1,831	\$	59,214,697	969	\$18,946,514	2,800	\$	78,161,211
60-64	8,674	\$	147,922,165	1385	\$26,697,888	10,059	\$	174,620,053
65-69	13,554	\$	219,112,871	824	\$16,506,936	14,378	\$	235,619,807
70-74	12,553	\$	193,220,936	628	\$10,292,587	13,181	\$	203,513,523
75-79	10,473	\$	149,551,258	465	\$ 6,241,079	10,938	\$	155,792,337
80-84	8,028	\$	103,064,486	308	\$ 3,179,937	8,336	\$	106,244,423
85-89	5,319	\$	58,534,696	141	\$ 1,217,734	5,460	\$	59,752,430
90 & Over	3,364	\$	27,250,909	78	\$ 477,094	3,442	\$	27,728,003
Totals	64,187	\$	971,688,298	5,474	\$95,349,066	69,661	\$ 1	,067,037,364

The 64,187 service retirees shown in the table above are comprised of 64,709 unique service retirees, and 600 unique re-retirees. The re-retirees included in the tabulation above are those that are receiving a pension-only benefit resulting from the annuitization of the contributions accumulated during active membership.



Annuity and Pension Reserve Fund Survivors of Annuitants Information as of June 30, 2017 Tabulated by Attained Ages

	Life Annuities		Pe	Periods Certain				Total		
Attained Age	No.	Annual Benefits		No.	Annual No. Benefits			No.	No.	
Under 45	38	\$	227,384		7	\$	107,389	45	\$	334,773
45-49	29	\$	168,535		7	\$	69,223	36	\$	237,758
50-54	37	\$	292,363		4	\$	60,379	41	\$	352,742
55-59	105	\$	1,146,282		1	\$	3,502	106	\$	1,149,784
60-64	213	\$	3,038,119		1	\$	17,829	214	\$	3,055,948
65-69	355	\$	4,108,483		1	\$	21,208	356	\$	4,129,691
70-74	606	\$	6,487,683		1	\$	11,121	607	\$	6,498,804
75-79	876	\$	8,091,978		0	\$	-	876	\$	8,091,978
80-84	1,089	\$	9,722,697		1	\$	11,276	1,090	\$	9,733,973
85-89	1,049	\$	8,424,538		0	\$	-	1,049	\$	8,424,538
90 & Over	881	\$	5,721,459		0	\$	-	881	\$	5,721,459
Totals	5,278	\$	47,429,521	2	:3	\$	301,927	5,301	\$	47,731,448



All Benefit Recipients Male and Female Demographic Breakdown June 30, 2017

Attained	Numb	per of	Total
Age	Males	Females	Number
Under 20	18	23	41
20-24	8	8	16
25-29	2	6	8
30-34	4	8	12
35-39	14	15	29
40-44	27	56	83
45-49	101	184	285
50-54	479	621	1,100
55-59	1,337	1,964	3,301
60-64	3,032	7,930	10,962
65-69	4,225	11,358	15,583
70-74	3,838	10,641	14,479
75-79	3,218	9,243	12,461
80-84	2,462	7,516	9,978
85-89	1,591	5,329	6,920
90-94	683	2,777	3,460
95-99	131	859	990
100	7	50	57
101	5	22	27
102	1	18	19
103	1	13	14
104	0	2	2
105 & Over	0	6	6
Total	21,184	58,649	79,833



Survivor Benefit Fund Survivors of Deceased Active Member Information as of June 30, 2017 Tabulated by Attained Ages

Attained Age	No.	Annual Benefits		
Under 45	93	\$	1,065,078	
45-49	60	\$	784,111	
50-54	154	\$	1,972,658	
55-59	260	\$	3,016,397	
60-64	514	\$	5,324,978	
65-69	666	\$	6,425,647	
70-74	717	\$	6,351,395	
75-79	634	\$	5,214,283	
80-84	553	\$	4,065,301	
85-89	376	\$	2,370,555	
90 & Over	271	\$	1,342,781	
Totals	4,298	\$	37,933,184	



Total Active Members as of June 30, 2017 Tabulated by Attained Ages and Years of Service

			Years of Se	rvice to Valu	uation Date			
Attained Age	0-4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Totals
Under 20	3,383							3,383
Avg Pay	\$8,713							\$29,476,566
20-24	10,646	69						10,715
Avg Pay	\$9,521	\$23,726						\$103,001,982
25-29	9,840	678	45					10,563
Avg Pay	\$13,586	\$27,697	\$38,635					\$154,200,081
30-34	8,791	1,339	462	41				10,633
Avg Pay	\$15,025	\$30,086	\$39,185	\$46,468				\$192,383,717
35-39	9,955	1,995	968	496	32			13,446
Avg Pay	\$14,596	\$27,608	\$38,416	\$43,592	\$54,081			\$260,924,179
40-44	10,570	2,593	1,475	964	287	25		15,914
Avg Pay	\$13,636	\$25,036	\$33,190	\$43,407	\$46,055	\$54,297		\$314,424,396
44-49	10,815	3,730	2,692	2,107	781	303	18	20,446
Avg Pay	\$13,810	\$23,497	\$29,639	\$36,328	\$46,121	\$51,081	\$61,497	\$445,931,542
50-54	8,701	3,629	3,667	3,918	1,769	813	301	22,798
Avg Pay	\$13,842	\$23,310	\$27,941	\$32,626	\$38,298	\$47,455	\$51,050	\$557,017,692
55-59	6,935	3,028	3,367	4,869	3,352	1,504	672	23,727
Avg Pay	\$13,514	\$23,727	\$27,848	\$30,466	\$33,853	\$40,831	\$49,116	\$615,558,864
60-64	4,632	1,880	1,782	2,580	2,252	1,834	931	15,891
Avg Pay	\$12,052	\$23,399	\$28,794	\$32,464	\$34,216	\$36,019	\$41,483	\$416,617,116
65-69	2,576	835	663	749	647	729	682	6,881
Avg Pay	\$9,719	\$20,180	\$26,197	\$31,251	\$34,098	\$34,591	\$37,142	\$155,271,545
70 & over	1,604	485	339	280	183	207	486	3,584
Avg Pay	\$7,395	\$14,222	\$19,524	\$23,844	\$28,154	\$31,719	\$29,785	\$58,248,288
Totals	88,448	20,261	15,460	16,004	9,303	5,415	3,090	157,981
Avg Pay	\$12,915	\$24,309	\$29,579	\$33,237	\$36,167	\$39,643	\$41,394	\$20,908

Averages: Age: Service: 46.7 7.5 Annual Pay: \$20,908



Male Active Members as of June 30, 2017 Tabulated by Attained Ages and Years of Service

			Years of Se	ervice to Valu	uation Date			
Attained Age	0-4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Totals
Under 20 Avg Pay	1,956 \$9,197							1,956 \$17,989,729
20-24 Avg Pay	4,946 \$9,677	39 \$26,559						4,985 \$48,900,159
25-29 Avg Pay	4,078 \$13,898	324 \$31,444	29 \$43,115					4,431 \$68,113,582
30-34 Avg Pay	3,177 \$16,498	610 \$33,994	263 \$43,647	24 \$52,622				4,074 \$85,892,813
35-39 Avg Pay	2,963 \$16,453	682 \$34,254	405 \$47,139	245 \$53,106	13 \$62,722			4,308 \$105,030,542
40-44	3,150	677	366	331	140	14		4,678
Avg Pay	\$14,445	\$31,958	\$46,077	\$56,759	\$51,625	\$55,428		\$110,792,843
44-49	3,556	805	494	439	301	149	6	5,750
Avg Pay	\$14,052	\$30,990	\$45,132	\$51,771	\$60,131	\$55,576	\$70,245	\$146,739,699
50-54	3,135	888	639	574	360	307	137	6,040
Avg Pay	\$14,356	\$29,933	\$40,597	\$49,741	\$55,458	\$55,440	\$55,667	\$170,691,898
55-59	2,635	938	721	703	425	320	294	6,036
Avg Pay	\$15,124	\$28,701	\$38,957	\$45,066	\$51,969	\$55,198	\$56,796	\$182,989,363
60-64	1,944	815	557	521	325	283	249	4,694
Avg Pay	\$13,465	\$27,238	\$37,052	\$45,531	\$49,658	\$50,158	\$54,411	\$136,616,457
65-69	1,223	442	256	177	114	101	107	2,420
Avg Pay	\$10,906	\$21,780	\$31,889	\$39,311	\$44,451	\$51,069	\$50,148	\$53,678,194
70 & over	760	254	167	111	50	38	43	1,423
Avg Pay	\$8,623	\$16,850	\$23,862	\$28,353	\$33,811	\$37,583	\$39,674	\$22,790,232
Totals	33,523	6,474	3,897	3,125	1,728	1,212	836	50,795
Avg Pay	\$13,426	\$29,582	\$40,492	\$47,951	\$52,715	\$53,235	\$54,265	\$22,644

Averages:
Age: 44.6
Service: 5.7
Annual Pay: \$22,644

Female Active Members as of June 30, 2017 Tabulated by Attained Ages and Years of Service



			Years of Se	rvice to Valu	ıation Date			
Attained Age	0-4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Totals
Under 20 Avg Pay	1,427 \$8,050							1,427 \$11,486,837
20-24 Avg Pay	5,700 \$9,386	30 \$20,043						5,730 \$54,101,823
25-29 Avg Pay	5,762 \$13,365	354 \$24,268	16 \$30,515					6,132 \$86,086,499
30-34 Avg Pay	5,614 \$14,192	729 \$26,817	199 \$33,288	17 \$37,781				6,559 \$106,490,904
35-39 Avg Pay	6,992 \$13,810	1,313 \$24,156	563 \$32,140	251 \$34,305	19 \$48,169			9,138 \$155,893,638
40-44	7,420	1,916	1,109	633	147	11		11,236
Avg Pay	\$13,292	\$22,591	\$28,937	\$36,425	\$40,751	\$52,858		\$203,631,554
44-49	7,259	2,925	2,198	1,668	480	154	12	14,696
Avg Pay	\$13,691	\$21,435	\$26,156	\$32,264	\$37,335	\$46,733	\$57,123	\$299,191,843
50-54	5,566	2,741	3,028	3,344	1,409	506	164	16,758
Avg Pay	\$13,553	\$21,164	\$25,271	\$29,688	\$33,913	\$42,611	\$47,193	\$386,325,794
55-59	4,300	2,090	2,646	4,166	2,927	1,184	378	17,691
Avg Pay	\$12,527	\$21,494	\$24,821	\$28,003	\$31,222	\$36,948	\$43,143	\$432,569,501
60-64	2,688	1,065	1,225	2,059	1,927	1,551	682	11,197
Avg Pay	\$11,030	\$20,462	\$25,039	\$29,158	\$31,611	\$33,439	\$36,764	\$280,000,659
65-69	1,353	393	407	572	533	628	575	4,461
Avg Pay	\$8,646	\$18,380	\$22,617	\$28,757	\$31,884	\$31,941	\$34,722	\$101,593,351
70 & over	844	231	172	169	133	169	443	2,161
Avg Pay	\$6,290	\$11,332	\$15,312	\$20,882	\$26,028	\$30,400	\$28,825	\$35,458,055
Totals	54,925	13,787	11,563	12,879	7,575	4,203	2,254	107,186
Avg Pay	\$12,603	\$21,833	\$25,902	\$29,667	\$32,392	\$35,724	\$36,620	\$20,085

Averages:
Age: 47.8
Service: 8.4
Annual Pay: \$20,085



Active Members as of June 30, 2017 Tabulated by Annual Pay

	Numb	er of Active Mem	bers		ion of Number
Annual Pay	Men	Women	Totals	Group	Cumulative
Less than \$1,000	2,153	3,669	5,822	3.7%	3.7%
\$1,000 - 1,999	2,637	3,159	5,796	3.7%	7.4%
2,000 - 2,999	3,472	3,314	6,786	4.3%	11.6%
3,000 - 3,999	3,228	3,212	6,440	4.1%	15.7%
4,000 - 4,999	2,497	3,143	5,640	3.6%	19.3%
F 000 F 000	4 000	2.067	4.040	2 40/	22.40/
5,000 - 5,999	1,882	3,067	4,949	3.1%	22.4%
6,000 - 6,999	1,601	3,077	4,678	3.0%	25.4%
7,000 - 7,999	1,269	3,023	4,292	2.7%	28.1%
8,000 - 8,999	1,117	3,102	4,219	2.7%	30.8%
9,000 - 9,999	1,045	3,177	4,222	2.7%	33.4%
10,000 - 11,999	2,212	6,549	8,761	5.5%	39.0%
12,000 - 13,999	2,014	6,003	8,017	5.1%	44.1%
14,000 - 15,999	1,850	5,836	7,686	4.9%	48.9%
16,000 - 17,999	1,552	6,490	8,042	5.1%	54.0%
18,000 - 19,999	1,452	6,484	7,936	5.0%	59.0%
20,000 - 24,999	2,970	12,994	15,964	10.1%	69.2%
25,000 - 29,999	2,277	8,660	10,937	6.9%	76.1%
30,000 - 35,999	3,009	7,270	10,279	6.5%	82.6%
36,000 and over	12,558	14,957	27,515	17.4%	100.0%
Totals	50,795	107,186	157,981		



SCHEDULE F

GAIN/LOSS ANALYSIS DETAILS

COMMENTS

Regular actuarial valuations measure the Retirement System's present financial position and contributions adequacy by calculating and financing the liabilities created by the present benefit program. This process involves discounting to present values the future benefit payments on behalf of present active and Retiree members and their survivors. However, valuations do not produce information regarding the amount of increases or decreases in unfunded actuarial accrued liabilities (UAAL) -- gain/loss analyses do.

The overall gain/loss to the Retirement System is the difference between the actual UAAL and the expected UAAL. A gain/loss analysis shows the breakdown of the overall system gain/loss by economic and non-economic risk areas. The economic risk areas are investment return and pay increases. The non-economic risk areas are service retirement, disability retirement, death in active service, termination (vested and non-vested), retiree mortality, and new members. Gains and losses resulting from data adjustments, timing of financial transactions, etc. are included separately as a miscellaneous item.

It is expected that actual experience will not coincide with assumed experience. It is assumed that gains and losses will be in balance over a period of years, but sizable year-to-year fluctuations are common. Changes in actuarial assumptions should be made for risk areas when the differences between actual and expected experience are consistently sizable over a period of years. Differences over a relatively short period of time may or may not be indicative of long-term trends, which are the basis of actuarial assumptions.

The actuarial assumptions used in this analysis were adopted by the Board in April 21, 2016.



School Employees Retirement System of Ohio Experience Gains & Losses By Risk Area Comparative Schedule (\$ Millions)

				Gain (Loss) by Ris	k Area					
	Ecor	nomic				Non-Economi	C				
Year			Age &		Death						
Ending	Pay		Service		ln		New	Retiree			
June 30	Increases	Investment	Retirement	Disability	Service	Withdrawal	Members	Mortality	Other +	\$	% of AAL
2008	95.8	(6.6)	(96.1)	(3.5)	(0.6)	8.1	(51.3)	72.4	81.2	99.4	6.1
2009	107.5	(2,265.2)	(50.8)	(28.7)	(0.6)	(11.9)	(50.4)	51.8	200.1	(2,048.2)	(14.0)
2010	182.5	390.5	(40.6)	(23.4)	(0.5)	11.0	(38.1)	46.5	(29.6)	498.3	3.4
2011	198.4	(1,082.9)	(59.2)	(28.1)	(0.7)	15.4	(36.4)	(1.0)	(10.0)	(1,004.5)	(6.2)
2012	178.7	(692.0)	(154.8)	(47.7)	(0.2)	46.5	(29.8)	51.9	(6.2)	(653.6)	(3.9)
2013	219.2	241.0	(121.9)	(53.6)	0.0	61.1	(35.1)	2.9	1.9	315.5	1.8
2014	103.4	403.3	(122.6)	(56.0)	0.1	48.3	(28.2)	3.1	(2.1)	349.3	2.0
2015	53.3	62.1	(123.0)	(53.1)	0.0	65.1	(47.7)	55.8	(0.2)	12.3	0.1
2016	70.0	50.6	(140.9)	(50.6)	(28.5)	30.4	(44.0)	113.9	(0.6)	0.3	0.0
2017	(69.2)	(12.0)	(211.8)	(37.7)	(0.6)	21.9	(48.1)	97.3	(26.8)	(287.0)	(1.5)

⁺ Includes effect of changes in data, timing of financial transactions, etc.

The market related actuarial value of assets is based on a four-year average of adjusted market value returns. The difference between the actual returns at market value for the year and expected returns is determined. Twenty-five percent (25%) of that difference is added to the expected value along with corresponding amounts from each of the prior three years.

The actuarial value of assets for the basic benefits as of June 30, 2017 was \$13,713,087,833. The value for the previous year was \$13,179,618,602.

School Employees Retirement System of Ohio Development of Gain (Loss) for Basic Benefits From Investment Return For the Year Ended June 30, 2017 (\$ Millions)

			\$ Millions
1.	Actuarial va	alue of assets as of June 30, 2016	\$ 13,179.6
2.	Actuarial va a.	alue of assets as of June 30, 2017 Actual	13,713.1
	b.	If 7.50% assumed investment return were achieved for all phased-in years recognized in the asset method	13,725.1
3.	Gain (Loss)): 2a minus 2b	<u>\$ (12.0)</u>



Pay Increases During the FY2017 Valuation Year To Members Active at Beginning and End of Year

Central Age Group Beginning		Pay Inc	creases
of Year	Number	Actual	Expected
Under 25	3,249	(3.78)%	14.94%
25	5,278	4.41	11.35
30	6,022	5.35	8.87
35	8,251	6.61	7.59
40	10,328	6.5	6.78
45	14,702	6.35	5.72
50	17,791	5.32	4.94
55	19,887	4.28	4.46
60	14,423	4.6	4.34
65 & Over	9,057	4.01	4.45
Total	108,988	5.09	5.66



Members Who Became Age & Service Retirees During the FY2017 Valuation Year (Retirement With Allowance Beginning Immediately)

			Yea	rs of Service	to Valuation [Date		
Attained Age	0-4	5-9	10-14	15-19	20-24	25-29	30 plus	Total
Under 50		9	10	5	2	2	15	43
50			2	4	1		11	18
51		1	2	4			19	26
52		4	2	3	3		24	36
53		1		4	2	1	19	27
54		3	2	5	3		25	38
55		3	8	3	3	35	36	88
56		2	3	3	6	26	30	70
57		3	5	2		27	31	68
58		1	3	5	7	31	37	84
59		4	5	8	4	42	30	93
60		34	106	178	232	57	49	656
61		34	53	96	116	49	40	388
62		45	59	127	118	62	46	457
63		37	47	78	87	48	51	348
64		30	52	65	69	51	35	302
65		44	82	112	134	112	86	570
66		26	37	55	42	43	38	241
67		20 27	33	35 35	24	29	39	187
68		11	25	20	18	29	24	118
69		14	23	15	14	23	31	120
70 & Over		52	90	59	44	47	104	396
Totals	0	385	649	886	929	705	820	4,374

	Years of Service to Valuation Date													
	0-4		5-9		10-14		15-19		20-24		25-29	3	30 plus	Total
Avg. Monthly Benefit	\$ 0	\$	312	\$	607	\$	818	\$	1,081	\$	1,522	\$	2,409	\$ 1,210
Avg. FAS	\$ 0	\$	19,817	\$	25,910	\$	27,507	\$	29,245	\$	34,298	\$	41,563	\$ 30,692
Number of Retirees	0		385		649		886		929		705		820	4,374

Average Age: 63.1 Average Service: 20.5



Members Who Died in the FY2017 Valuation Year With a Death-in-Service Allowance Payable

Central Age Group Beginning of Year	Number
Under 25 25	
30	1
35	1
40	1
45	5
50	9
55	9
60	10
65	14
70 & Over	11
Total	61

Average Age: 61.0 Average Service: 17.5



Members Who Died in the FY2017 Valuation Year and Received a Refund of Contributions

Central Age Group Beginning of Year	Number
Under 25	
25	1 1
30	·
35	1
40	
45	2
50	
55	1
60	1
65	1
70 & Over	1
Total	8

Average Age: 55.2 Average Service: 3.6



Members Who Became Disability Retirees During the FY2017 Valuation Year

Central Age Group Beginning of Year	Number
Under 25 25 30 35 40	7
40 45	10
50	43
55	76
60	95
65	25
70 & Over	5
Total	261

Average Age: 56.3 Average Service: 16.0 Average FAS: \$26,973



Members Receiving a Refund of Contributions or Becoming Inactive Without a Refund in the FY2017 Valuation Year (Non-vested Terminations)

Central Age Group Beginning of Year	Number
Under 25 25 30 35 40	1,392 1,740 912 730 739
45 50 55 60 65	797 561 363 183 81
70 & Over	57
Total	7,555

Average Age: 36.1 Average Service: 1.9



Members Who Became Inactive in the FY2017 Valuation Year with a Deferred Allowance (Vested Terminations)

Central Age Group Beginning of Year	Number
Under 25	0
25	0
30	4
35	13
40	31
45	68
50	99
55	118
60	60
65	13
70 & Over	13 419

Average Age: 51.8 Average Service: 14.9



SCHEDULE G

GLOSSARY

<u>Actuarial Accrued Liability.</u> The difference between (i) the actuarial present value of future plan benefits, and (ii) the actuarial present value of future normal cost. Sometimes referred to as "accrued liability" or "past service liability".

<u>Accrued Service</u>. The service credited under the plan which was rendered before the date of the actuarial valuation.

<u>Actuarial Assumptions</u>. Estimates of future plan experience with respect to rates of mortality, disability, turnover, retirement, rate or rates of investment income and salary increases. Decrement assumptions (rates of mortality, disability, turnover and retirement) are generally based on past experience, often modified for projected changes in conditions. Economic assumptions (salary increases and investment income) consist of an underlying rate in an inflation-free environment plus a provision for a long-term average rate of inflation.

<u>Actuarial Cost Method</u>. A mathematical budgeting procedure for allocating the dollar amount of the "actuarial present value of future plan benefits" between the actuarial present value of future normal cost and the actuarial accrued liability. Sometimes referred to as the "actuarial funding method".

<u>Actuarial Equivalent</u>. A series of payments is called an actuarial equivalent of another series of payments if the two series have the same actuarial present value.

<u>Actuarial Present Value</u>. The amount of funds presently required to provide a payment or series of payments in the future. It is determined by discounting the future payments at a predetermined rate of interest, taking into account the probability of payment.

<u>Amortization</u>. Paying off an interest-bearing liability by means of periodic payments of interest and principal, as opposed to paying it off with a lump sum payment.

<u>Experience Gain (Loss)</u>. A measure of the difference between actual experience and that expected based upon a set of actuarial assumptions during the period between two actuarial valuation dates, in accordance with the actuarial cost method being used.

Normal Cost. The annual cost assigned, under the actuarial funding method, to current and subsequent plan years. Sometimes referred to as "current service cost". Any payment toward the unfunded actuarial accrued liability is not part of the normal cost.

<u>Plan Termination Liability</u>. The actuarial present value of future plan benefits based on the assumption that there will be no further accruals for future service and salary. The termination liability will generally be less than the liabilities computed on a "going concern" basis and is not normally determined in a routine actuarial valuation.

Reserve Account. An account used to indicate that funds have been set aside for a specific purpose and are not generally available for other uses.

<u>Unfunded Actuarial Accrued Liability</u>. The difference between the actuarial accrued liability and valuation assets. Sometimes referred to as "unfunded accrued liability".

<u>Valuation Assets</u>. The value of current plan assets recognized for valuation purposes. Generally based on book value plus a portion of unrealized appreciation or depreciation.



APPENDIX A

ACTUARIAL ACCRUED LIABILITIES AS OF JUNE 30, 2017

Present Value of:	Pension Benefits	Medicare Part B	Post-Retirement Death Benefit	Total Basic Benefits
Future benefits to present				
retirees and survivors	\$11,201,278,846	\$236,968,254	\$29,379,973	\$11,467,627,073
Devette and refunde to				
Benefits and refunds to				
present inactive members	488,987,265	13,765,799	787,118	503,540,182
Allowances to present				
active members				
Service	7,130,211,575	136,024,952	7,445,236	7,273,681,763
Disability	236,588,232	3,835,426	440,642	240,864,300
Survivor benefits	126,423,295	2,176,643	0	128,599,938
Withdrawal	(35,210,321)	9,057,393	<u>257,359</u>	(25,895,569)
Total Active AAL	7,458,012,781	151,094,414	8,143,237	7,617,250,432
Total AAL	<u>\$19,148,278,892</u>	<u>\$401,828,467</u>	<u>\$38,310,328</u>	<u>\$19,588,417,68</u>



APPENDIX B

BREAKDOWN OF TOTAL AND ACCRUED LIABILITIES AS OF JUNE 30, 2017

	Total Liability	Accrued Liability
Active Members	Liability	Liability
Retirement	\$8,720,983,151	\$7,130,211,575
Death	179,345,744	126,423,295
Disability	414,570,218	236,588,232
Termination	650,725,339	(35,210,321)
Medicare Part B	201,619,644	151,094,414
Death after Retirement	<u>11,381,331</u>	<u>8,143,237</u>
Total	\$10,178,625,427	\$7,617,250,432
Retirees		
Retirement/Survivor/Disability	\$11,201,278,846	\$11,201,278,846
Medicare Part B	236,968,254	236,968,254
Death after Retirement	29,379,973	<u>29,379,973</u>
Total	\$11,467,627,073	\$11,467,627,073
Deferred Vested Members	211,841,961	211,841,961
Inactive Members	291,698,221	<u>291,698,221</u>
Total Actuarial Values	\$22,149,792,682	\$19,588,417,687
Actuarial Value of Assets		13,713,087,833
Unfunded Actuarial Accrued Liability		\$5,875,329,854



APPENDIX C

COMPARATIVE SCHEDULE AS OF JUNE 30, 2017

					Retired Lives						
Valuation	Active Members			Numl	Number			Accrued	Valuation		
Date	Payroll		Payroll Average			Active /	Annual	Benefits	Liability	Assets	UAAL
June 30	Number \$ Millions		\$	% Increase	Retired	Retired	\$ Millions % of Payroll			\$ Millions	
2008	124,370	2,652	21,322	0.8	64,818	1.9	652.4	24.6	14,062	11,372	2,689
2009	125,465	2,787	22,216	4.2	65,757	1.9	693.8	24.9	14,582	9,836	4,746
2010	126,015	2,843	22,558	1.5	66,127	1.9	729.9	25.7	15,222	10,909	4,312
2011	125,337	2,852	22,758	0.9	67,221	1.9	777.9	27.3	16,325	10,513	5,812
2012	121,811	2,788	22,889	0.6	69,038	1.8	838.1	30.1	16,755	10,397	6,358
2010		0 7 17	00 504	(4.6)	-0 1	4 -	222.2	20.7	47.047	44.400	0.404
2013	121,642	2,747	22,581	(1.3)	70,771	1.7	898.3	32.7	17,247	11,126	6,121
2014	121,251	2,759	22,757	0.8	72,605	1.7	958.5	34.7	17,882	12,030	5,851
2015	122,855	2,845	23,161	1.8	74,372	1.7	1,020.4	35.9	18,503	12,602	5,902
2016	124,540	2,932	23,545	1.7	76,280	1.6	1,083.6	37.0	19,771	13,180	6,591
2017	157,981	3,303	20,906	(11.2) *	79,157	2.0	1,162.0	35.2	19,588	13,713	5,875



The experience and dedication you deserve



Report on the Retiree Health Care Valuation of the School Employees Retirement System of Ohio

Prepared as of June 30, 2017





The experience and dedication you deserve

November 7, 2017

Board of Trustees School Employees Retirement System Of Ohio 300 East Broad Street Suite 100 Columbus, OH 43215-3746

Dear Members of the Board:

We have submitted the results of the annual actuarial valuation of the Retiree Health Care Valuation of the School Employees Retirement System of Ohio (SERS) prepared as of June 30, 2017. While not verifying the data at source, the actuary performed tests for consistency and reasonability. The valuation indicates that an actuarially determined contribution of 5.31% of active payroll payable for the fiscal year ending June 30, 2018 is required to fund the benefits.

On June 2, 2015, GASB Statement No. 74 and GASB Statement No. 75 (GASB 74 and 75) were unanimously adopted by the GASB Board. The disclosure requirements of GASB 74 and 75 will be similar to the disclosure requirements for pension benefits under GASB Statement No. 67 and GASB Statement No. 68. GASB 74 relates to accounting disclosures for plan sponsors and, as such, replaces GASB 43 beginning with fiscal years ending September 30, 2017. GASB 75 relates to accounting disclosures for contributing employers and, as such, replaces GASB 45 beginning with fiscal years ending September 30, 2018. GASB 74 and 75 will require applicable OPEB plan sponsors and contributing employers to disclose the net OPEB liability on the statement of financial position and book an accounting expense based upon the entry age normal actuarial cost method. Beyond the use of a specified actuarial cost method, GASB's new disclosure standards will also require the discount rate used to calculate liabilities to be based upon the yield of 20-year, tax-exempt municipal bonds and the expected rate of return on plan assets, to the extent plan assets are projected to be available for the payment of future benefits. Additionally, GASB 74 and 75 will bring about many other changes in the liability valuation and accounting disclosure processes currently in place which are expected to significantly impact data collection, timing, and effort. As details for the new GASB OPEB disclosure standards emerge, planning and coordination between plan sponsors, contributing employers, actuaries, and auditors is recommended. Separate reports will be prepared to provide accounting information under Governmental Accounting Standards Board Statements No. 74 and 75, when applicable.

The medical and drug benefits of the Plan are included in the actuarially calculated contribution rates which are developed using the entry age normal cost method with the normal cost rate determined as a level percentage of payroll. GASB requires the discount rate used to value a plan be based on the likely return of the assets held in trust to pay benefits. The discount rate used in this valuation is 5.25%. Gains and losses are reflected in the unfunded accrued liability that is amortized by regular annual contributions as a level percentage of payroll within a 30-year period, on the assumption that payroll will increase by 3.50% annually. The assumptions recommended by the actuary are, in the aggregate, reasonably related to the experience under the Plan and to reasonable expectations of anticipated experience under the Plan.



November 7, 2017 Board of Trustees Page 2

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

To the best of our knowledge, this report is complete and accurate. The valuation was performed by, and under the supervision of, independent actuaries who are members of the American Academy of Actuaries with experience in performing valuations for public retirement systems. The undersigned are members of the American Academy of Actuaries and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

The valuation was prepared in accordance with the principles of practice prescribed by the Actuarial Standards Board.

Future actuarial results may differ significantly from the current results presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period or additional cost or contribution requirements based on the plan's funded status); and changes in plan provisions or applicable law. Since the potential impact of such factors is outside the scope of a normal annual actuarial valuation, an analysis of the range of results is not presented herein.

The actuarial calculations were performed by qualified actuaries according to generally accepted actuarial procedures and methods. The calculations are based on the current provisions of the system, and on actuarial assumptions that are, in the aggregate, internally consistent and reasonably based on the actual experience of the system.

Respectfully submitted,

Alisa Bennett, FSA, FCA, EA, MAAA Principal and Consulting Actuary

AB/JJG:bvb

John J. Garrett, ASA, FCA, MAAA Principal and Consulting Actuary

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TABLE OF CONTENTS

<u>Section</u>	<u>Item</u>	Page No.
I	Summary of Principal Results	1
II	Membership Data	4
III	Assets	6
IV	Comments on Valuation	7
V	Derivation of Experience Gains and Losses	8
VI	Required Contribution Rates	10
VII	Accounting Information	11
<u>Schedule</u>		
Α	Valuation Balance Sheet	13
В	Statement of Actuarial Assumptions and Methods	16
С	Summary of Plan Provisions	23
D	Detailed Tabulations of the Data	35
Е	Glossary	41



REPORT ON THE ANNUAL VALUATION OF THE SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

PREPARED AS OF JUNE 30, 2017

SECTION I – SUMMARY OF PRINCIPAL RESULTS

 This report, prepared as of June 30, 2017, presents the results of the annual actuarial valuation of retiree health care offered to SERS members. For convenience of reference, the principal results of the valuation and a comparison with the preceding valuation results are summarized in the following table.

	June 30, 2017	June 30, 2016
Active members included in valuation		
Number *	157,981	124,540
Annual Compensation	\$3,303,055,969	\$2,932,236,551
Service Retirees		
Number	32,085	32,006
Disability Retirees		
Number	3,208	3,362
Spouses of Retirees		
Number	5,566	5,704
Spouses of Deceased Retirees		
Number	1,808	1,916
Survivor Benefit Recipients		
Number	803	849
Children		
Number	388	440
Deferred Vesteds		
Number	4,860	4,943
Assets		
Market Value	\$382,109,560	\$370,204,515
Unfunded Accrued Liability	\$2,014,376,745	\$2,037,076,321
Actuarial Accrued Liability	\$2,396,486,305	\$2,407,280,836
Funded Ratio (MVA/AAL)	15.94%	15.38%
Employer Contribution Rate		
Normal	2.76%	2.48%
Accrued Liability	<u>2.55%</u>	<u>2.91%</u>
Total	5.31%	5.39%
Employer Contribution Toward Health Care**	2.00%	1.50%
Accrued liability amortization period	30	30

^{*} The active member headcount reflects 32,641 members who have been re-categorized as active who previously were reported as inactive members. This group earned less than 0.25 of a year of service during fiscal year ending 2017, and had average annual earnings of \$7,518.

^{**} Includes 1.50% of payroll surcharge



- 2. The valuation assumes an allocation of 13.50% allocated to the basic benefits and 0.50% allocated to health care consistent with SERS' funding policy. The funding policy requires at least 13.50% of the employers' contributions be allocated to SERS' basic benefits when the funded ratio is 70% but less than 80%, with the remainder allocated to the health care fund. Therefore, the employer health contribution rate is set at 1.50% plus 0.50%, or 2.00%. This rate includes the anticipated revenue from the minimum surcharge level for FY2018 of \$23,700.
- 3. The valuation balance sheet showing the results of the valuation is given in Schedule A.
- 4. Comments on the valuation results are given in Section IV, comments on the experience and actuarial gains during the valuation year are given in Section V, and the rates of contribution payable by the employer are given in Section VI.
- 5. There were no changes in interest rate, or age related morbidity assumptions since the last valuation. The following changes were reflected in this valuation:

Medicare Eligible

Premiums

Premiums will remain the same in 2018 for Aetna Medicare Plan (PPO) enrollees. There will be a premium increase for enrollees in the Paramount Elite Medicare and PrimeTime plans.

Emergency Room Co-Pay

The emergency room co-pay for all plans will be increasing to \$100 from \$75. The co-pay will be waived if you are admitted to the hospital.

Outpatient Surgery/Procedures

Outpatient surgery/procedures will change from a \$200 co-pay to a 15% coinsurance, up to a \$200 maximum under the Aetna and Paramount Elite Medicare plans. As a result, plan enrollees undergoing less costly procedures will pay less than the maximum amount.

This change does not apply to the PrimeTime plan, which remains at a \$200 co-pay for outpatient surgery/procedures.

Non-Medicare Eligible

Premiums

Aetna Choice POS II plan participants will see an increase in premiums. AultCare premiums will remain the same. Premium information for Marketplace plans will not be available until October.



Out-of-Pocket Maximum

The combined medical and prescription drug out-of-pocket maximums will increase under the Aetna Choice POS II and AultCare PPO plans.

Payments made toward the deductible, co-insurance, and co-pays count toward the out-of-pocket maximum.

The out-of-pocket maximum limits how much members pay for covered expenses each year. Once the member has met the out-of-pocket maximum for a calendar year, the medical and prescription plans pay the covered expenses in full.

Maintenance Medication Refills Require Home Delivery Express Scripts and AultCare Pharmacy enrollees who take maintenance medications <u>must</u>use home delivery for refills beginning January 1, 2018. Refills requested at a retail pharmacy will <u>not</u> be covered. The switch to exclusive home delivery will lower SERS' costs and retirees will pay less overall in co-pays.

Maintenance medications are prescriptions used to treat chronic or long-term conditions. Some examples are medications used to treat high blood pressure, heart disease, asthma, and diabetes.

A prescription for a new maintenance medication may be filled for the first time at retail, but after that, home delivery must be used in order to be covered.

6. The statute sets a contribution cap of 24% of payroll; 14% from employers and 10% from employees. The funding policy states that employer contributions in excess of those required to support the basic benefits may be allocated to retiree health care funding. If the funded ratio is less than 70%, the entire 14% employers' contribution shall be allocated to SERS' basic benefits. If the funded ratio is 70% but less than 80%, at least 13.50% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 80% but less than 90%, at least 13.25% of the employers' contribution shall be allocated to SERS' basic benefits, with the remainder (if any) allocated to the Health Care Fund. If the funded ratio is 90% or greater, the Health Care Fund may receive any portion of the employers' contribution that is not needed to fund SERS' basic benefits.



SECTION II – MEMBERSHIP DATA

Data regarding the membership of the System for use as a basis for the valuation were furnished by the System's office. The following tables summarize the membership of the system as of June 30, 2017 upon which the valuation was based. Detailed tabulations of the data are given in Schedule D.

Active Members

		Group Averages						
Number	Payroll	Salary	Age	Service				
157,981	\$3,303,055,969	\$20,908	46.7	7.5				

The following table shows a six-year schedule of active member valuation data.

SCHEDULE OF SERS ACTIVE MEMBER VALUATION DATA

Valuation Date	Number	Annual Payroll	Annual Average Pay	% Increase in Average Pay
6/30/2012	121,811	2,788,153,585	22,889	0.6%
6/30/2013	121,642	2,746,827,535	22,581	(1.3)
6/30/2014	121,251	2,759,281,606	22,757	0.8
6/30/2015	122,855	2,845,443,802	23,161	1.8
6/30/2016	124,540	2,932,236,551	23,545	1.7
6/30/2017	157,981	3,303,055,969	20,908	(11.2) *

^{*} Average pay has decreased due to addition of 32,641 members who have been re-categorized as active who previously were reported as inactive members. This group earned less than 0.25 of a year of service during fiscal year ending 2017, and had average annual earnings of \$7,518.



The following table shows the number of retiree members and their beneficiaries receiving health care as of the valuation date as well as average ages.

Retiree Lives

		Average
Type of Benefit Recipient	Number	Age
Service Retirees	32,085	75.9
Disability Retirees	3,208	68.0
Spouses	8,177	78.3
Children	388	29.2
Total	43,858	75.4

This valuation also includes 4,860 inactive members eligible for health care.



SECTION III - ASSETS

As of June 30, 2017 the total market value of assets amounted to \$382,109,560. 1.

Asset Summary Based on Market Value						
(1)	Assets at June 30, 2016	\$	370,204,515			
(2)	Contributions and Misc. Revenue		145,863,410			
(3)	Investment Gain (Loss)		33,148,543			
(4)	Benefit Payments		(167,106,908)			
(5)	Assets at June 30, 2017 (1) + (2) + (3) + (4)	\$	382,109,560			
(6)	Annualized Rate of Return*		9.2 %			

*Based on the approximation formula: I/[0.5 x (A + B - I)], where

I = Investment Gain (Loss)
A = Beginning of year asset value
B = End of year asset value



SECTION IV - COMMENTS ON VALUATION

Schedule A of this report contains the valuation balance sheet which shows the present and prospective assets and liabilities of the System as of June 30, 2017.

- 1. The total health care valuation balance sheet shows that the System has total future health care liabilities of \$3,275,404,923 of which \$902,506,385 is for the future benefits payable for present retiree members and beneficiaries of deceased members; \$13,470,154 is for the future benefits payable for current deferred vested members; and \$2,359,428,384 is for the future benefits payable for present active members. Against these health care liabilities the System has a total market value of assets of \$382,109,560 as of June 30, 2017. The difference of \$2,893,295,363 between the total liabilities and the total present actuarial value of assets represents the present value of contributions to be made in the future for health care. Of this amount, no future contributions are expected to be made by members, and the balance of \$2,893,295,363 represents the present value of future contributions payable by SERS.
- 2. SERS' contributions on account of health care consists of normal contributions and accrued liability contributions. The valuation indicates that employer normal contributions at the rate of 2.76% of payroll are required to provide the benefits of the System for the average new member of SERS.
- 3. Prospective employer normal contributions on account of health care at the above rates have a present value of \$878,918,618. When this amount is subtracted from \$2,893,295,363 which is the present value of the total future contributions to be made by the employer, there remains \$2,014,376,745 as the amount of future accrued liability contributions.
- 4. It is recommended that the accrued liability contribution rate payable by SERS on account of health care be set at 2.55% of payroll. This rate is sufficient to liquidate the unfunded accrued liability of \$2,014,376,745 over 30 years on the assumption that the aggregate payroll for members will increase by 3.50% each year.



SECTION V - DERIVATION OF EXPERIENCE GAINS AND LOSSES

Actual experience will never (except by coincidence) coincide exactly with assumed experience. It is assumed that gains and losses will be in balance over a period of years, but sizable year to year fluctuations are common. Detail on the derivation of the experience gain (loss) for the year ended June 30, 2017 is shown below.

Experience Gain/(Loss) (\$ Thousands)

(1)		UAAL* as of 6/30/16	\$ 2,037,076
(2)		Normal cost from last valuation	73,084
(3)		Expected employer contributions	178,035
(4)		Interest accrual: [(1) + (2)] x .0525- (3) x .0525/2	<u>106,110</u>
(5)		Expected UAAL before changes: (1) + (2) - (3) + (4)	\$ 2,038,235
(6)		Change due to claims and retiree premiums	123,966
(7)		Expected UAAL after changes: (5) - (6)	\$ 1,914,269
(8)		Actual UAAL* as of 6/30/17	\$ 2,014,377
(9)		Total gain/(loss): (7) - (8)	\$ (100,108)
	(a)	Contribution shortfall	(115,988)
	(b)	Investment Gain/(Loss)	14,270
	(c)	Experience Gain/(Loss) (9) - (9a) - (9b)	\$ 1,610
(10)		Accrued Liabilities as of 6/30/17	\$ 2,396,486
(11)		Experience Gain/(Loss) as percent of actuarial accrued liabilities at start of year (9c) / (10)	0.1%

^{*} unfunded actuarial accrued liability



ANALYSIS OF FINANCIAL EXPERIENCE

Gains & Losses in Accrued Liabilities Resulting from Difference Between Assumed Experience & Actual Experience (\$ Millions)

Type of Activity		ess) For 6/30/17
Age & Service Retirements. If members retire at older ages, there is a gain. If younger ages, a loss.	;	\$ (4.8)
Disability Retirements. If disability claims are less than assumed, there is a gain. If more claims, a loss.		(5.1)
Death-in Service Benefits. If survivor claims are less than assumed, there is a gain. If more claims, there is a loss.		(2.4)
Withdrawal From Employment. If more liabilities are released by withdrawals than assumed, there is a gain. If smaller releases, a loss.		3.4
Claims Increases (Including Wrap Plan). If there are sma claims increases than assumed creates a gain; larger, a los		124.0
New Members. Additional accrued liability attributable to members who entered the plan since the last valuation.		(39.0)
Investment Income. If there is a greater investment income than assumed, there is a gain. If less income, a loss.		14.3
Contribution Shortfall. If there are more contributions than the ARC, there is a gain. If less contributions, a loss.		(116.0)
Death After Retirement. If retiree members live longer than assumed, there is a loss. If not as long, a gain.		18.4
Other. Miscellaneous gains and losses resulting from changes in valuation software, data adjustments, timing of financial transactions, etc.		 31.1
Gain (or Loss) During Year From Financial Experience	;	\$ 23.9
Non-Recurring Items. Adjustments for plan amendments, assumption changes and method changes		0.0
Composite Gain (or Loss) During Year		\$ 23.9



SECTION VI – REQUIRED CONTRIBUTION RATES

The valuation balance sheet gives the basis for determining the percentage rates for contributions to be made by employers to the Retirement System. The following tables show the rates of contribution payable by employers as determined from the present valuation for FY2018.

Required Contribution Rates

Contribution for	Amount	% of Payroll	
A. Normal Cost	\$ 93,840,809	2.76%	
B. Member Contributions*	\$ 0	0.00%	
C. Employer Normal Cost: [A - B]	\$ 93,840,809	2.76%	
D. Unfunded Actuarial Accrued Liability**	\$ 86,954,949	2.55%	
E. Total Recommended Employer Contribution Rate: [C+D]	\$ 180,795,758	5.31%	
F. Employer Contribution Toward Health Care ⁺	\$ 68,085,656	2.00%	

^{*} The liabilities are net of retiree contributions towards their health care.

Ten-Year History of Employer Contribution Rates

Fiscal Year Ending June 30	Employer Health Care Contribution Rate	Surcharge Percentage	Total Health Care Contribution Rate
2007	3.32%	1.50%	4.82%
2008	4.18	1.50	5.68
2009	4.16	1.50	5.66
2010	0.46	1.50	1.96
2011	1.43	1.50	2.93
2012	0.55	1.50	2.05
2013	0.16	1.50	1.66
2014	0.14	1.50	1.64
2015	0.82	1.50	2.32
2016	0.00	1.50	1.50
2017	0.00	1.50	1.50

^{**} Based on 30-year amortization of the UAAL from June 30, 2017.

⁺ Includes 1.50% payroll surcharge.



SECTION VII - ACCOUNTING INFORMATION

Governmental Accounting Standards Board Statement 45 sets forth certain items of required supplementary information to be disclosed in the financial statements of the System and the employer. The information presented in the required supplementary schedules was determined as part of the actuarial valuation at June 30, 2017. Additional information as of the latest actuarial valuation follows.

Valuation date	6/30/2017
Actuarial cost method	Entry Age
Amortization	Level Percent Open
Remaining amortization period	30 years
Asset valuation method	Market Value
Actuarial assumptions	
Investment rate of return*	5.25%
* Includes price inflation at	3.00%
Wage increases	3.50%
Medical Trend Assumption	
Pre-Medicare	7.50% - 5.00%
Medicare	5.50% - 5.00%
Year of Ultimate Trend	2019 - 2022

Another required item of disclosure is the Schedule of Funding Progress shown in the following table.



Schedule of Funding Progress (\$ Millions)

Actuarial Valuation Date	Value of Plan Assets (a)	Actuarial Accrued Liability (AAL) Entry Age (b)	Unfunded AAL (UAAL) (b - a)	Funded Ratio (a/b)	Covered Payroll (c)	UAAL as a Percentage of Covered Payroll ((b-a)/(c)
6/30/2012	355	2,691	2,336	13.2%	2,788	83.8%
6/30/2013	379	2,918	2,539	13.0	2,747	92.4
6/30/2014	414	2,476	2,062	16.7	2,759	74.7
6/30/2015	408	2,425	2,016	16.8	2,845	70.9
6/30/2016	370	2,407	2,037	15.4	2,932	69.5
6/30/2017	382	2,396	2,014	15.9	3,303	61.0

Schedule of Employer Contributions

Year Ended	Annual Required Contribution (ARC) (a)	Employer Contribution (b)	Federal Subsidies and Other Receipts (c)	Total Contribution (d) = (b)+(c)	Percentage of ARC Contributed (e) = (d)/(a)
June 30, 2012	\$155,857,785	\$56,476,230	\$0	\$56,476,230	36.2%
June 30, 2013	171,402,038	45,489,443	0	45,489,443	26.5
June 30, 2014	190,390,431	46,097,206	29,200,200	75,297,406	39.5
June 30, 2015	164,182,107	68,904,867	20,084,826	88,989,693	54.2
June 30, 2016	161,566,234	44,855,441	32,493,250	77,348,691	47.9
June 30, 2017	178,034,717	47,672,886	17,341,005	65,013,891	36.5



SCHEDULE A

Valuation Balance Sheet

The following valuation balance sheet shows the assets and liabilities of the retirement system as of the current valuation date of June 30, 2017 and, for comparison purposes, as of the immediately preceding valuation date of June 30, 2016.

VALUATION BALANCE SHEETS SHOWING THE ASSETS AND LIABILITIES OF THE SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

	June 30, 2017		June 30, 2016
\$	382,109,560	\$	370,204,515
	878,918,618		740,055,998
	2,014,376,745		2,037,076,321
\$	2,893,295,363	\$	2,777,132,319
\$	3,275,404,923	\$	3,147,336,834
\$	902,506,385	\$	903,199,693
:	2,359,428,384		2,229,459,796
	13,470,154		14,677,345
\$	3,275,404,923	\$	3,147,336,834
•	\$ \$ \$	878,918,618 2,014,376,745 \$ 2,893,295,363 \$ 3,275,404,923 \$ 902,506,385 2,359,428,384 13,470,154	878,918,618 2,014,376,745 \$ 2,893,295,363 \$ 3,275,404,923 \$ 902,506,385 \$ 2,359,428,384 13,470,154



The following table provides the solvency test for SERS members.

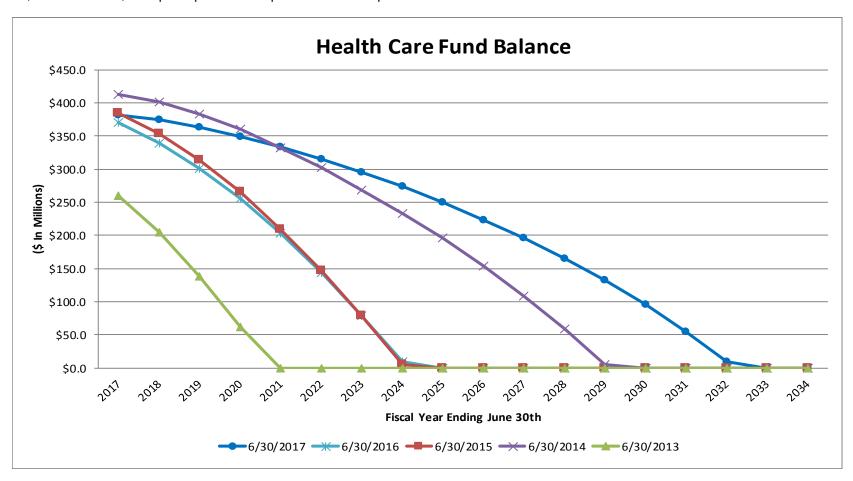
Solvency Test (\$ Millions)

Aggregate Accrued Liabilities For						of Accrued I	
Valuation Date	(1) Active Member Contributions	(2) Retiree Members & Beneficiaries	(3) Active Members (Employer Financed Portion)	Actuarial Value of Assets	(1)	(2)	(3)
6/30/2012	\$0	\$1,074	\$1,617	\$355	100.0%	33.1%	0.0%
6/30/2013	0	1,157	1,761	379	100.0	32.8	0.0
6/30/2014	0	968	1,508	414	100.0	42.8	0.0
6/30/2015	0	979	1,507	408	100.0	41.7	0.0
6/30/2016	0	918	1,489	370	100.0	40.3	0.0
6/30/2017	0	916	1,480	382	100.0	41.7	0.0



Solvency Chart

The following chart shows the projected Health Care Fund Balances from the five most recent valuations. The prior year projections were based on the funding policy and assumptions in effect on the prior year valuation dates. The projections are based on a 7.75% future asset rate of return assumption for 2012-2015 and 7.50% starting June 30, 2016 and assumed health care contribution rates based on the pension valuation and the surcharge calculation. Starting with the June 30, 2015 valuation, the new funding policy was taken into account. Starting with the June 30, 2016 valuation, 10% participation in the pre-Medicare Wraparound Plan is assumed.





SCHEDULE B

STATEMENT OF ACTUARIAL ASSUMPTIONS AND METHODS

The decremental assumptions used in the valuation were adopted by the Board in April, 2016.

INTEREST RATE: 5.25% per annum, compounded annually (net after all System expenses).

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

Calendar Year	Non-Medicare	Medicare
2017	7.50%	5.50%
2018	6.75	5.25
2019	6.25	5.00
2020	5.75	5.00
2021	5.25	5.00
2022 and beyond	5.00	5.00

AGE RELATED MORBIDITY: Per capita costs are adjusted to reflect expected cost changes related to age. The increase to the net incurred claims was assumed to be:

	Annual Increase			
Participant Age	Medical	Prescription Drug		
Under 41	0.00%	0.00%		
41 – 45	2.50	1.25		
46 – 50	2.60	1.30		
51 – 55	3.20	1.60		
56 – 60	3.40	1.70		
61 – 65	3.70	1.85		
66 – 70	3.20	1.60		
71 – 75	2.40	1.20		
76 – 80	1.80	0.90		
81 – 85	1.30	0.65		
85 and over	0.00	0.00		

ANTICIPATED PLAN PARTICIPATION: The assumed annual rates of retiree participation and spouse coverage are as follows:

Retiree Gender	Spouse Coverage	Dependent Child Coverage
Male	50.0%	0.0%
Female	30.0%	0.0%

Wives are assumed to be three years younger than husbands.



ANTICIPATED PLAN PARTICIPATION (continued):

Years of Service	Service Retiree Participation	Disabled Retiree Participation	Deferred Vested Retiree Participation	Death in Service Surviving Spouse Participation
1.5 – 5	N/A	N/A	N/A	100.0%
5 – 9	N/A	50.0%	N/A	100.0
10 – 14	25.0%	50.0	50.0%	100.0
15 – 19	45.0	70.0	50.0	100.0
20 – 24	70.0	75.0	50.0	100.0
25 – 29	75.0	75.0	50.0	100.0
30 – 34	80.0	80.0	50.0	100.0
35 and over	90.0	90.0	50.0	100.0

ANTICIPATED PLAN ELECTIONS: The assumed annual rates of member plan elections are as follows:

	Future Retirees		
Plan Type	Non-Medicare	Medicare	
PPO	90.0%	94.0%	
HMO	0.0%	6.0%	
Wraparound Plan	10.0%	N/A	

Anticipated plan elections within the above plan types are further expanded below:

	Future Retirees*		
Plan Type	Non-Medicare	Medicare	
PPO			
Aetna Choice POS II	95.8%	0.0%	
Aetna Medicare ^{s™} Plan	0.0%	100.0%	
AultCare PPO	4.2%	0.0%	
<u>HMO</u>			
PrimeTime	N/A	69.5%	
Paramount HMO	N/A	30.5%	

^{*} Future disabled retirees assumed 85% Non-Medicare coverage and 15% Medicare coverage before age 65.

ANTICIPATED MEDICARE COVERAGE AT AGE 65: The assumed annual rates of future retirees obtaining Medicare coverage at age 65 are as follows:

Medicare Coverage	Percent Covered
No Medicare at age 65	1.0%
Medicare Part A	98.0%
Medicare Part B Only	1.0%

Current service retirees, disabled benefit recipients, spouses and dependent children under age 65 were assumed to have similar Medicare coverage at age 65 as their post-Medicare counterparts.



HEALTH CARE PREMIUM DISCOUNT PROGRAM PARTICIPATION: Current Medicare-eligible service retirees, disabled benefit recipients, spouses and dependent children reported as qualifying for the health care Premium Discount Program were assumed to continue participating in the program for their lifetime. The Health Care premium Discount Program is being discontinued for non-Medicare participants.

MONTHLY EXPECTED MEDICAL/PRESCRIPTION DRUG CLAIMS COSTS (INCLUDES ADMINISTRATIVE EXPENSES): Following are charts detailing expected claims for the year following the valuation date. For the Medicare Advantage plans, the Health Insurance Provider Fee under the Affordable Care Act has been included since the 2017 moratorium is temporary:

	Retiree Costs					
Medicare Status	Aetna Choice POS II and Aetna Medicare SM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount HMO		
Non-Medicare	\$1,286	n/a	\$924	N/A		
Medicare A	\$190	\$782	\$244	\$263		
Medicare B Only	\$523	n/a	\$924	\$574		

Spouse Costs				
Medicare Status	Aetna Choice POS II and Aetna Medicare sm	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount HMO
Non-Medicare	\$1,157	n/a	\$738	N/A
Medicare A	\$190	\$782	\$244	\$263
Medicare B Only	\$523	n/a	\$738	\$574

Children Costs				
Medicare Status	Aetna Choice POS II and Aetna Medicare SM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount HMO
Non-Medicare Medicare A	\$385 \$190	n/a \$782	\$163 \$244	N/A \$263

The above amounts are shown as average costs and represent premiums paid to insurers.



ANNUAL EXPECTED MEDICAL/PRESCRIPTION DRUG COSTS (INCLUDES ADMINISTRATIVE EXPENSES) (continued): In the valuation, the premium costs are converted to age 65 amounts, age adjusted and blended based on actual elections for current retirees, current disabled retirees, current retiree spouses and current dependent children, and based on projected elections for future retirees and future spouses. For this valuation, we have assumed 10% participation in the SERS Marketplace Wraparound Plan for non-disabled pre-Medicare retirees. The age adjusted and blended amounts are as follows:

Annual Pre-65 Bler	Annual Pre-65 Blended Costs Age Adjusted to 65						
Pre-65 Cost Type	Future Service Retirees	Future Disabled Retirees	Future Spouses	Current Service Retires	Current Disabled Retirees	Current Retiree Spouses	Current Dependent Children
Medical	\$12,540	\$10,735	\$11,220	\$12,996	\$9,952	\$7,368	\$6,060
Prescription Drug	2,736	2,565	2,472	2,748	2,404	2,124	1,236

Annual 65 & Older Blended Costs Age Adjusted to 65						
65 & Older Cost Type	Future Service Retirees	Future Disabled Retirees	Future Spouses	Current Service Retires	Current Disabled Retirees	Current Retiree Spouses
Medical	\$504	\$504	\$480	\$504	\$660	\$420
Prescription Drug	1,596	1,596	1,560	1,560	1,572	1,524



SEPARATIONS FROM ACTIVE SERVICE: Representative values of the assumed rates of separation from active service are as follows:

Service	Annual Rates of Withdrawal
0	45.00%
1	31.00
2	23.00
3	17.00
4	13.00
5	10.50
10	4.00
15	2.00
20	2.00
25	1.50

		Annual R	ates of	
	Dea	th *	Disal	oility
Age	Male	Female	Male	Female
20	.022%	.013%	.020%	.010%
25	.053	.018	.038	.010
30	.063	.019	.068	.026
35	.059	.024	.122	.055
40	.068	.032	.212	.102
45	.081	.044	.311	.170
50	.126	.074	.411	.300
55	.218	.124	.530	.450
60	.361	.188	.590	.450
65	.607	.274	.550	.300
70	1.071	.415	.300	.200
74	1.570	.629	.300	.200

^{*} Pre-retirement mortality is based on the RP-2014 Blue Collar Mortality Table with fully generational projection and a five year age set-back for both males and females. The above rates represent the base rates used.



	Annual Rates of							
	Re	etirement Eli	gible prior to 8	3/1/17	R	Retirement E	ligible after 8/	1/17
Age	Reduced	Reduced (55/25)	First Eligible Unreduced	Subsequent Unreduced	Reduced	Reduced (60/25)	First Eligible Unreduced	Subsequent Unreduced
50			27%	19%				
55		10%	27%	19%				
60	11%	14%	27%	19%		14%	30%	19%
65			25%	19%	11%	14%	30%	19%
70			20%	22%			30%	22%
75			100%	100%			100%	100%

SALARY INCREASES: Representative values of the assumed annual rates of salary increases are as follows:

		Annual Rates of	
Service	Merit & Seniority (A)	Base (Economy) (B)	Increase Next Year (1+(A))*(1+(B))
0	14.20%	3.50%	18.20%
1	5.55	3.50	9.25
2	3.14	3.50	6.75
3	2.17	3.50	5.75
4	1.45	3.50	5.00
5	1.20	3.50	4.75
6	0.97	3.50	4.50
7	0.72	3.50	4.25
8	0.48	3.50	4.00
9	0.24	3.50	3.75
10 & over	0.00	3.50	3.50

PAYROLL GROWTH: 3.50% per annum, compounded annually.

PRICE INFLATION: 3.00% per annum, compounded annually.

DEATH AFTER RETIREMENT: The RP-2014 Blue Collar Mortality Table with fully generational projection and Scale BB, 120% of male rates and 110% of female rates is used to evaluate allowances to be paid. The RP-2000 Disabled Mortality Table with 90% for male rates and 100% for female rates set back five



years is used for the period after disability retirement. These assumptions are used to measure the probabilities of each benefit payment being made after retirement.

VALUATION METHOD: Entry age normal cost method. Entry age is established on an individual basis.

ASSET VALUATION METHOD: Market value.



SCHEDULE C

SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO Summary of Main Plan Provisions as of June 30, 2017

ELIGIBILITY FOR ACCESS TO RETIREE HEALTH CARE:

Normal Retirement:

Retire before August 1, 2017 or have 25 years of service or more on or before August 1, 2017: Attainment of age 65 with at least ten years of creditable service, or completion of 30 years of creditable service, regardless of age.

Members attaining 25 years of service after August 1, 2017: Attainment of age 67 with at least ten years of creditable service, or attainment of age 57 with at least 30 years of creditable service. Buy-up option available.

Early Retirement:

Retire before August 1, 2017 or have 25 years of service or more on or before August 1, 2017: Not eligible for unreduced service retirement but has attained age 55 with at least 25 years of service, or age 60 with ten years of service.

Members attaining 25 years of service after August 1, 2017: Attainment of age 62 with at least ten years of creditable service, or attainment of age 60 with at least 25 years of creditable service.

Disability Retirement: Permanently disabled after completion of at least 5 years of total service credit.

Survivor Allowances: Beneficiary must be receiving monthly benefits due to the death of a member, age and service retiree or disability benefit recipient.

Termination: Members that terminated with at least ten years of creditable service and have attained age 60 (age 62 for those retiring after August 1, 2017).

PREMIUM PAYMENTS:

Retirees, spouses and dependent children pay either all or a portion of the cost of health care and prescription drug coverage as well as a \$35 monthly surcharge. The remainder of the cost is paid by SERS.

Medicare-eligible retirees, spouses and dependent children may qualify for the health care Premium Discount Program if their household income falls at or below a specified level. Income limits are updated annually and those wishing to participate in the program must apply every year. Retirees, spouses and dependent children qualifying for the program will receive a 25% discount in their monthly health care premiums.



PREMIUM PAYMENTS (Continued):

The following schedule lists the percentage of the retiree premium paid by service retirees:

	Retirement Date on or before July 1, 1989	Retirement Date August 1, 1989 through July 1, 2008	Retirement Date on or after August 1, 2008
Years of Service	Service Re	tiree Premium Contribution	on Percentage
5 – 9	50.0%	N/A	N/A
10 – 14	17.5	100.0%	100.0%
15 – 19	17.5	50.0	100.0
20 – 24	17.5	25.0	50.0
25 – 29	17.5	17.5	30.0
30 – 34	17.5	17.5	20.0
35 and over	17.5	17.5	15.0*

^{*} Additional 1% reduction for each year over 35.

The following schedule lists the percentage of the retiree premium paid by disability benefit recipients:

Years of Service	Disabled Benefit Recipient Premium Contribution Percentage
5 – 9	50.0%
10 – 24	33.0
25 and over	17.5

The following schedule lists the percentage of the spouse premium paid by spouses of retirees:

Service Retiree, Disability Recipient, or Member's Qualified Service	Spouse Premium Contribution Percentage
1.5 – 24	100.0%
25 – 29	90.0
30 and over	80.0

Dependent children pay 70.0% of the child premium.

In addition, SERS offers a new coverage option beginning in 2017, the Marketplace Wraparound Plan. This option is only available to healthcare participants who are not eligible for Medicare and who are not enrolled in Medicaid. Participants will be able to choose insurance from any insurer offering coverage in the federal Marketplace, and if eligible, receive a federal subsidy to lower the premium and cost-sharing amounts. The SERS Marketplace Wraparound Plan will offer additional benefits to help pay for deductibles, co-pays, and other costs.



OTHER POST-EMPLOYMENT BENEFITS: Health care and prescription drug coverage is provided in all post-employment group health care plan options. Dental and vision coverage are made available to retirees, spouses and dependent children at the full cost.

2018 RETIREE GROUP HEALTH CARE PLAN OPTIONS:

Options available to members without Medicare

- ♦ Aetna Choice POS II with Express Scripts prescription drug coverage
- AultCare PPO with AultCare prescription drug coverage

Options available to members with Medicare:

- ♦ Aetna MedicareSM Plan (PPO) with Express Scripts Medicare Part D Prescription Drug Plan
- Aetna Indemnity Plan with Express Scripts Medicare Part D Prescription Drug Plan (only available to members with special circumstances)
- AultCare PPO with AultCare prescription drug coverage (only available to members with Part B Only)
- Paramount Elite Medicare Advantage with Express Scripts Medicare Part D Prescription Drug Plan
- ♦ PrimeTime Health Plan through AultCare with PrimeTime Medicare Part D prescription drug coverage

The following pages contain information that was provided by SERS in the 2018 Open Enrollment Guide and the 2018 Member Health Care Guide.



2018 Contribution Rates

Years of Service	Aetna Choice POS II and Aetna Medicare SM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount Elite HMO
Service Retirement Date on	or before July	i, 1969 Preilliui	IIS	
5-9.999 years			\$ 500	NI/A
Without Medicare	\$678		\$500	N/A
With Medicare A & B	\$144	\$426	\$157	\$167
With Medicare B Only	\$297		\$500	\$322
10-24.999 years & over				
Without Medicare	\$260		\$198	N/A
With Medicare A & B	\$73	\$172	\$78	\$81
With Medicare B Only	\$127		\$198	\$135
25 years & over				
Without Medicare	\$260		\$198	N/A
With Medicare A & B	\$73	\$172	\$78	\$81
With Medicare B Only	\$73		\$78	\$81

Years of Service	Aetna Choice POS II and Aetna Medicare SM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount HMO
Service Retirement Date Au	igust 1, 1989 th	rough July 1, 2	008 Premiums	
10-14.999 years				
Without Medicare	\$1,321		\$965	N/A
With Medicare A & B	\$253	\$817	\$280	\$298
With Medicare B Only	\$558		\$965	\$609
15-19.999 years				
Without Medicare	\$678		\$500	N/A
With Medicare A & B	\$144	\$426	\$157	\$167
With Medicare B Only	\$297		\$500	\$322
20-24.999 years				
Without Medicare	\$357		\$267	N/A
With Medicare A & B	\$89	\$231	\$96	\$101
With Medicare B Only	\$166		\$267	\$178
25 years & over				
Without Medicare	\$260		\$198	N/A
With Medicare A & B	\$73	\$172	\$78	\$81
With Medicare B Only	\$73		\$78	\$81



2018 Contribution Rates (continued)

Years of Service	Aetna Choice POS II and Aetna Medicare sM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount Elite HMO
Service Retirement Date on	or after Augus		ıms*	
10-19.999 years		·		
Without Medicare	\$1321		\$965	N/A
With Medicare A & B	\$253	\$817	\$280	\$298
With Medicare B Only	\$558		\$965	\$609
20-24.999 years				
Without Medicare	\$678		\$500	N/A
With Medicare A & B	\$144	\$426	\$157	\$167
With Medicare B Only	\$297		\$500	\$322
25-29.999 years				
Without Medicare	\$421		\$314	N/A
With Medicare A & B	\$100	\$270	\$108	\$114
With Medicare B Only	\$100		\$108	\$114
30-34.999 years*				
Without Medicare	\$292		\$221	N/A
With Medicare A & B	\$79	\$191	\$84	\$88
With Medicare B Only	\$79		\$84	\$88

^{*} Further reductions for each year over 35.

Years of Service	Aetna Choice POS II and Aetna Medicare sM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount Elite HMO
Disability Benefit Recipient	Premiums			
5-9.999 years				
Without Medicare	\$678		\$500	N/A
With Medicare A & B	\$144	\$426	\$157	\$167
With Medicare B Only	\$297		\$500	\$322
10-24.999 years & over				
Without Medicare	\$459		\$342	N/A
With Medicare A & B	\$107	\$293	\$116	\$122
With Medicare B Only	\$208		\$342	\$244
25 years & over				
Without Medicare	\$260		\$198	N/A
With Medicare A & B	\$73	\$172	\$78	\$81
With Medicare B Only	\$73		\$78	\$81



2018 Contribution Rates (continued)

	Aetna Choice			
	POS II and		AultCare PPO	
	Aetna	Aetna	and	Paramount
Years of Service	Medicare ^{sм}	Indemnity	PrimeTime	Elite HMO
Spouse Premiums (Servi	ce Retiree, Disal	bility Recipient,	or Member's Qu	ıalified
Service)				
Up to 25 years				
Without Medicare	\$1,192		\$778	N/A
With Medicare A & B	\$253	\$817	\$280	\$298
With Medicare B Only	\$558		\$778	\$609
25-29.999 years				
Without Medicare	\$1,076		\$703	N/A
With Medicare A & B	\$231	\$739	\$255	\$272
With Medicare B Only	\$231		\$255	\$272
30 years & over				
Without Medicare	\$961		\$629	N/A
With Medicare A & B	\$209	\$661	\$231	\$245
With Medicare B Only	\$209		\$231	\$245

Years of Service Child Premiums	Aetna Choice POS II and Aetna Medicare SM	Aetna Indemnity	AultCare PPO and PrimeTime	Paramount Elite HMO
Child w/o Medicare A	\$305		\$150	N/A
Child with Medicare A & B	\$187	\$583	\$206	\$219



SERS' Non-Medicare Plans

Non-Medicare plans are available to benefit recipients and dependents under age 65 and not Medicare eligible.

Aetna Choice POS II

This is a Preferred Provider Organization (PPO) plan with prescription drug coverage by Express Scripts. The plan is available throughout the United States.

To enroll in this plan, a member must:

• Be under age 65 and not eligible for Medicare

Use of out-of-network providers will increase out-of-pocket costs.

AultCare PPO

This is a Preferred Provider Organization (PPO) plan with prescription drug coverage by AultCare. To enroll in this plan, a member must:

- Be under age 65 and not eligible for Medicare.
- Live in one of the Ohio counties listed on the map in the 2018 Open Enrollment Guide.

Use of out-of-network providers will increase out-of-pocket costs.

2017 SERS Marketplace Wraparound Plan

The SERS Marketplace Wraparound Plan is available to participants who are not eligible for Medicare and who are not enrolled in Medicaid. Participants will be able to choose insurance from any insurer offering coverage in the federal Marketplace. If eligible, participants will receive a federal subsidy to lower the premium and cost-sharing amounts. The SERS Market place Wraparound Plan will offer additional benefits to help pay for deductibles, co-pays, and other costs.



SERS' Medicare Plans

Aetna Medicare Plan (PPO)

This is a Medicare Advantage plan with Medicare Part D prescription drug coverage administered by Express Scripts.

Ohio Residents: Aetna has a preferred provider network. Use of out-of-network providers will increase out-of-pocket costs.

Non-Ohio Residents: Can use any medical provider that accepts Medicare patients and agrees to file claims with Aetna.

This plan is available throughout the United States. To enroll, members must have:

- Medicare Part B
- Medicare Part A, if eligible

Aetna Indemnity Plan

This plan is NOT available for optional enrollment. It is only available in special circumstances. SERS determines when enrollment is appropriate. Medicare Part D prescription drug coverage is administered through Express Scripts.

Paramount Elite Medicare Advantage

This is a Medicare Advantage plan with Medicare Part D prescription drug coverage administered by Express Scripts. Members must use Paramount providers or pay the full cost for services.

To enroll in this plan, members must:

- Have Medicare Part B.
- Have Medicare Part A, if eligible.
- Live in one of the Ohio counties listed or live in the Michigan counties of Lenawee or Monroe.

PrimeTime Health Plan

This is a Medicare Advantage plan with Medicare Part D prescription drug coverage by PrimeTime. Members must use PrimeTime providers or pay the full cost for services.

To enroll in this plan, members must:

- Have Medicare Part A and Part B.
- Live in one of the Ohio counties listed on the map in the 2018 Open Enrollment Guide.

AultCare PPO

This plan is available to individuals who do not have Medicare Part A but have Medicare Part B only. Prescription drug coverage is administered by AultCare.

To enroll in this plan, members must:

- Have Medicare Part B only.
 - Live in one of the Ohio counties listed on the map in the 2018 Open Enrollment Guide.



Prescription Drug Coverage

Prescription drug coverage is included in SERS health care coverage and does not require a separate premium. Express Scripts provides the prescription drug coverage for Aetna and Paramount. PrimeTime and AultCare provide their own prescription coverage. All prescription plans have a formulary of covered medications. These are referred to as preferred medications. Medications not on the formulary are referred to as non-preferred. The amount members are responsible for paying, known as the co-pay, is based on the medication's preferred status. Members pay the least for generic medications. Members pay the most for brand-name medications that are not preferred. Members can get prescriptions at retail pharmacies or through the mail. Members save money by having prescriptions for maintenance medications mailed to their homes.

The following is a partial list of situations or types of medications that are not covered.

- Prescriptions or medications dispensed in a hospital. These are typically covered under the medical plan.
- Prescriptions covered by Workers' Compensation.
- Prescriptions for fertility, erectile dysfunction, or cosmetic drugs.
- Over-the-counter drugs and herbal preparations, including homeopathic preparations.

With the exception of insulin, Express Scripts does not cover non-preferred medications. Members pay the full amount for non-preferred medications, and these costs do not count toward any out-of-pocket maximum or the Medicare coverage gap.

All prescription plans include these common coverage rules:

- Prior Authorization For some medications, the doctor must contact the drug plan before certain
 prescriptions can be filled. The prescription is only covered if the doctor is able to confirm that the
 medication is necessary.
- Quantity Limits Limits how much of a specific medication members can get at a time.
- Step Therapy A process where certain medications that have proven to be safe and effective are tried as the first choice rather than starting with a more expensive prescribed medication.

Medicare Part D Prescription Drugs

SERS' health plan participants enrolled in a Medicare plan are automatically covered under a Medicare Part D prescription drug plan through SERS and should not enroll in a separate Medicare Part D plan. Enrolling in another Part D plan would cause cancellation of SERS coverage for both medical and prescription drug benefits per federal law.



Non-Medicare Plan Benefits

Aetna Choice POS II (In-Network)

	Aetna Choice POS II	AultCare DDO
Annual Combined	(In-Network)	AultCare PPO
Medical & Prescription Drug Out-of-Pocket Maximum	\$7,350/person \$14,700/family	\$7,350/person \$14,700/family
Deductible	\$2,000/person \$4,000/family	\$2,000/person \$4,000/family
Primary Care Office Visit	\$20 co-pay	\$20 co-pay
Specialist Office Visit	\$40 co-pay	\$40 co-pay
Outpatient Diagnostic X-Ray and Lab	20% coinsurance	20% coinsurance
Retail Walk-In Clinic	\$20 co-pay	Not covered
Urgent Care	\$40 co-pay	\$40 co-pay
Emergency Room	20% coinsurance	20% coinsurance
Ambulance	20% coinsurance	20% coinsurance
Inpatient Hospital	20% coinsurance after \$250 co-pay	20% coinsurance after \$250 co-pay
Outpatient Surgery	20% coinsurance	20% coinsurance
Skilled Nursing Facility (100-day max)	20% coinsurance	20% coinsurance
Home Health Care	20% coinsurance	20% coinsurance
Hospice Health Care	100% coverage	Inpatient: 100% coverage (30-day lifetime limit) Outpatient: 20% coinsurance
Outpatient Short- Term Rehab	20% coinsurance	20% coinsurance
Chiropractic	20% coinsurance	20% coinsurance
Durable Medical Equipment	20% coinsurance	20% coinsurance
Prescription Drugs	Express Scripts Retail 30-day max: \$7.50 generic, 25% preferred brand (\$25 min,\$100 max) Mail order 90-day max: \$15 generic, 25% preferred brand (\$45 min, \$200 max) Insulin Retail 25% or \$30 max preferred brand, 25% or \$45 max non-preferred brand Insulin Mail Order 25% or \$60 preferred brand, 25% or \$115 max non-preferred brand	AultCare Retail 30-day max: \$7.50 generic, 25% preferred brand (\$25 min, \$100 max) Mail order 90-day max: \$15 generic, 25% preferred brand (\$45 min, \$200 max) Non- preferred at 100% Insulin Retail \$30 preferred brand, \$45 non-preferred brand Insulin Mail Order \$60 preferred brand, \$115 non-preferred brand



Non-Medicare Plan Benefits (continued)

2018 Wraparound Benefits	Maximum Reimbursement
Deductible	Up to \$2,000*
Covered Prescription Drugs co- payment/coinsurance	50% of the Marketplace plan's prescription drug co-payment/coinsurance (up to \$200 per prescription)*
Physician Office Visit co-payment	Up to \$50 per visit*
Inpatient Hospital Admission co- payment/coinsurance	Up to \$300 per admission*
Imaging (X-rays, CT/PET scans, MRI) copayment or coinsurance	Up to \$100 per service*
Hearing Aid	One hearing aid per year; up to \$1,500**

*This is the maximum amount that the Wraparound Plan will reimburse each participant for each benefit category. Reimbursement is limited to cost-sharing after the participant's Marketplace plan has adjudicated any claim(s). Actual reimbursement may vary according to the participant's Marketplace plan's terms, but will in no event exceed the participant's actual out-of-pocket expenses under the applicable Marketplace plan.

The 2018 SERS Marketplace Wraparound Plan benefits noted above only apply to covered services under your Marketplace plan. Claims for non-covered services are not eligible for reimbursement, except for hearing aids.

^{**}The Wraparound Plan will reimburse each participant on a first dollar basis up to this limit



Medicare Plan Benefits

	Aetna Medicare SM Plan (PPO)	PrimeTime Health Plan	Paramount Elite Medicare Advantage
Annual Out-of- Pocket Maximum	\$3,000 per person	\$3,000 per person	\$3,000 per person
Deductible	None	None	None
Primary Care Office Visit	\$20 co-pay	\$20 co-pay	\$20 co-pay
Specialist Office Visit	\$40 co-pay	\$40 co-pay	\$40 co-pay
Outpatient Diagnostic X-Ray	\$25 co-pay	100% coverage	100% coverage
Outpatient Diagnostic Lab	100% coverage	100% coverage	100% coverage
Urgent Care	\$40 co-pay	\$40 co-pay	\$40 co-pay
Emergency Room	\$100 co-pay	\$100 co-pay	\$100 co-pay
Ambulance	20% coinsurance	\$75 co-pay	100% coverage
Inpatient Hospital	\$150 co-pay per day 1-5, then 100%	\$150 co-pay per day 1-5, then 100%	\$150 co-pay per day 1-5, then 100%
Outpatient Surgery / Procedures	15% coinsurance up to \$200 max	\$200 co-pay	20% coinsurance up to \$200 max
Skilled Nursing Facility (100-day max)	Co-pay: \$0 per day 1- 10, \$25 per day 11- 20, \$50 per day 21- 100	Co-pay: \$0 per day 1- 15, \$20 per day 16- 30, \$0 per day 31-100	Co-pay: \$0 per day 1- 20, \$95 per day 21- 100
Home Health Care	100% coverage	100% coverage	100% coverage
Hospice	Covered per Medicare	Covered per Medicare	Covered per Medicare
Outpatient Short- Term Rehab	\$20 co-pay	\$5 co-pay (cardiac at 100% coverage)	\$20 co-pay(\$10 co- pay for cardiac/pulmonary rehab)
Chiropractic	\$15 co-pay limited to Medicare coverage	\$15 co-pay limited to Medicare coverage	\$20 co-pay limited to Medicare coverage
Durable Medical Equipment	20% coinsurance	20% coinsurance	20% coinsurance
Prescription Drugs	Express Scripts Medicare D PDP Retail 30-day max: \$7.50 generic, 25% preferred brand (\$25 min,\$100 max) Mail order 90-day max: \$15 generic, 25% preferred brand (\$45 min, \$200 max) Insulin Retail 25% or \$30 max preferred brand, 25% or \$45 max non-preferred brand Insulin Mail Order 25% or \$60 preferred brand, \$115 max non- preferred brand	PrimeTime Retail 30-day max: \$7.50 generic, 25% preferred brand (\$25 min, \$100 max), 50% non-preferred brand Mail order 90-day max: \$15 generic, 25% preferred brand (\$45 min, \$200 max), 50% non-preferred brand Insulin Retail \$30 preferred brand, \$45 non-preferred brand Insulin Mail Order \$60 preferred brand, \$115 non-preferred brand	Express Scripts Medicare D PDP Retail 30-day max: \$7.50 generic, 25% preferred brand (\$25 min,\$100 max) Mail order 90-day max: \$15 generic, 25% preferred brand (\$45 min, \$200 max) Insulin Retail 25% or \$30 max preferred brand, \$45 max non- preferred brand Insulin Mail Order 25% or \$60 preferred brand, \$115 max non- preferred brand



SCHEDULE D

DETAILED TABULATIONS OF THE DATA

All Retirees, Spouses and Dependents Receiving Health Care Male and Female Demographic Breakdown As of June 30, 2017 Tabulated by Attained Ages

Attained	Numi	Total	
Age	Males	Males Females	
Under 20	49	45	94
20-24	67	87	154
25-29	34	20	54
30-34	0	4	4
35-39	6	1	7
40-44	2	7	9
45-49	24	33	57
50-54	147	162	309
55-59	598	777	1,375
60-64	1,311	2,380	3,691
65-69	2,024	4,811	6,835
70-74	2,126	5,414	7,540
75-79	2,408	5,679	8,087
80-84	2,075	4,901	6,976
85-89	1,272	3,606	4,878
90-94	555	2,220	2,775
95-99	133	752	885
100	10	42	52
101	4	29	33
102	0	20	20
103	1	13	14
104	0	4	4
105 & Over	0	5	5
Total	12,846	31,012	43,858



Schedule of Retiree Members Added to and Removed From Rolls Last Six Fiscal Years

	Adde	d to Rolls	Remove	d from Rolls*	Rolls	at Year-End	% Increase	Average
Year Ended	Number	Projected Benefits	Number	Projected Benefits	Number	Projected Benefits	in Projected Benefits	Projected Benefits
Lilueu	Number	Deficitio	Number	Deficitio	Nullibel	Dellellis	Deficitio	Dellellis
6/30/2012	2,073	9,280,779	3,785	5,391,796	46,439	90,708,513	11.49%	1,953
6/30/2013	2,110	8,977,566	3,217	4,370,993	45,332	100,514,730	10.81%	2,217
6/30/2014	2,251	8,658,731	2,873	4,834,922	44,710	87,007,272	(13.44)%	1,946
6/30/2015	2,329	8,897,861	2,932	4,682,901	44,107	90,855,858	4.42%	2,060
6/30/2016	2,820	10,209,470	2,650	4,258,016	44,277	90,484,518	(0.41)%	2,044
6/30/2017	2,355	10,099,985	2,774	4,834,866	43,858	91,554,056	1.18%	2,088

^{*} The benefits removed from rolls do not include subsidies that were changed due to premium changes, plan election changes or reductions due to members obtaining Medicare eligibility.

Terminated Vested Members Eligible for Health Care Male and Female Demographic Breakdown As of June 30, 2017 Tabulated by Attained Ages

Attained	Numk	Total	
Age	Males	Females	Number
Under 35 35-39	11 51	7 92	18 143
40-44 45-49	77 155	204 440	281 595
50-54 55-59	214 270	866 1,392	1,080 1,662
60 & Over	180	901	1,081
Total	958	3,902	4,860



Total Active Members as of June 30, 2017 Tabulated by Attained Ages and Years of Service

	Years of Service to Valuation Date							
Attained Age	0-4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Totals
Under 20 Avg Pay	3,383 \$8,713							3,383 \$29,476,566
20-24 Avg Pay	10,646 \$9,521	69 \$23,726						10,715 \$103,001,982
25-29 Avg Pay	9,840 \$13,586	678 \$27,697	45 \$38,635					10,563 \$154,200,081
30-34 Avg Pay	8,791 \$15,025	1,339 \$30,086	462 \$39,185	41 \$46,468				10,633 \$192,383,717
35-39 Avg Pay	9,955 \$14,596	1,995 \$27,608	968 \$38,416	496 \$43,592	32 \$54,081			13,446 \$260,924,179
40-44	10,570	2,593	1,475	964	287	25		15,914
Avg Pay	\$13,636	\$25,036	\$33,190	\$43,407	\$46,055	\$54,297		\$314,424,396
44-49	10,815	3,730	2,692	2,107	781	303	18	20,446
Avg Pay	\$13,810	\$23,497	\$29,639	\$36,328	\$46,121	\$51,081	\$61,497	\$445,931,542
50-54	8,701	3,629	3,667	3,918	1,769	813	301	22,798
Avg Pay	\$13,842	\$23,310	\$27,941	\$32,626	\$38,298	\$47,455	\$51,050	\$557,017,692
55-59	6,935	3,028	3,367	4,869	3,352	1,504	672	23,727
Avg Pay	\$13,514	\$23,727	\$27,848	\$30,466	\$33,853	\$40,831	\$49,116	\$615,558,864
60-64	4,632	1,880	1,782	2,580	2,252	1,834	931	15,891
Avg Pay	\$12,052	\$23,399	\$28,794	\$32,464	\$34,216	\$36,019	\$41,483	\$416,617,116
65-69	2,576	835	663	749	647	729	682	6,881
Avg Pay	\$9,719	\$20,180	\$26,197	\$31,251	\$34,098	\$34,591	\$37,142	\$155,271,545
70 & over	1,604	485	339	280	183	207	486	3,584
Avg Pay	\$7,395	\$14,222	\$19,524	\$23,844	\$28,154	\$31,719	\$29,785	\$58,248,288
Totals	88,448	20,261	15,460	16,004	9,303	5,415	3,090	157,981
Avg Pay	\$12,915	\$24,309	\$29,579	\$33,237	\$36,167	\$39,643	\$41,394	\$20,908

Averages:
Age: 46.7
Service: 7.5
Annual Pay: \$20,908



Male Active Members as of June 30, 2017 Tabulated by Attained Ages and Years of Service

Attained Age	0-4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Totals
Under 20	1,956							1,956
Avg Pay	\$9,197							\$17,989,729
20-24	4,946	39						4,985
Avg Pay	\$9,677	\$26,559						\$48,900,159
25-29	4,078	324	29					4,431
Avg Pay	\$13,898	\$31,444	\$43,115					\$68,113,582
30-34	3,177	610	263	24				4,074
Avg Pay	\$16,498	\$33,994	\$43,647	\$52,622				\$85,892,813
35-39	2,963	682	405	245	13			4,308
Avg Pay	\$16,453	\$34,254	\$47,139	\$53,106	\$62,722			\$105,030,542
40-44	3,150	677	366	331	140	14		4,678
Avg Pay	\$14,445	\$31,958	\$46,077	\$56,759	\$51,625	\$55,428		\$110,792,843
44-49	3,556	805	494	439	301	149	6	5,750
Avg Pay	\$14,052	\$30,990	\$45,132	\$51,771	\$60,131	\$55,576	\$70,245	\$146,739,699
50-54	3,135	888	639	574	360	307	137	6,040
Avg Pay	\$14,356	\$29,933	\$40,597	\$49,741	\$55,458	\$55,440	\$55,667	\$170,691,898
55-59	2,635	938	721	703	425	320	294	6,036
Avg Pay	\$15,124	\$28,701	\$38,957	\$45,066	\$51,969	\$55,198	\$56,796	\$182,989,363
60-64	1,944	815	557	521	325	283	249	4,694
Avg Pay	\$13,465	\$27,238	\$37,052	\$45,531	\$49,658	\$50,158	\$54,411	\$136,616,457
65-69	1,223	442	256	177	114	101	107	2,420
Avg Pay	\$10,906	\$21,780	\$31,889	\$39,311	\$44,451	\$51,069	\$50,148	\$53,678,194
70 & over	760	254	167	111	50	38	43	1,423
Avg Pay	\$8,623	\$16,850	\$23,862	\$28,353	\$33,811	\$37,583	\$39,674	\$22,790,232
Totals	33,523	6,474	3,897	3,125	1,728	1,212	836	50,795
Avg Pay	\$13,426	\$29,582	\$40,492	\$47,951	\$52,715	\$53,235	\$54,265	\$22,644

Averages: Age: Service: 44.6 5.7 Annual Pay: \$22,644



Female Active Members as of June 30, 2017 Tabulated by Attained Ages and Years of Service

	Years of Service to Valuation Date							
Attained Age	0-4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Totals
Under 20 Avg Pay	1,427 \$8,050							1,427 \$11,486,837
20-24 Avg Pay	5,700 \$9,386	30 \$20,043						5,730 \$54,101,823
25-29 Avg Pay	5,762 \$13,365	354 \$24,268	16 \$30,515					6,132 \$86,086,499
30-34 Avg Pay	5,614 \$14,192	729 \$26,817	199 \$33,288	17 \$37,781				6,559 \$106,490,904
35-39 Avg Pay	6,992 \$13,810	1,313 \$24,156	563 \$32,140	251 \$34,305	19 \$48,169			9,138 \$155,893,638
40-44	7,420	1,916	1,109	633	147	11		11,236
Avg Pay	\$13,292	\$22,591	\$28,937	\$36,425	\$40,751	\$52,858		\$203,631,554
44-49	7,259	2,925	2,198	1,668	480	154	12	14,696
Avg Pay	\$13,691	\$21,435	\$26,156	\$32,264	\$37,335	\$46,733	\$57,123	\$299,191,843
50-54	5,566	2,741	3,028	3,344	1,409	506	164	16,758
Avg Pay	\$13,553	\$21,164	\$25,271	\$29,688	\$33,913	\$42,611	\$47,193	\$386,325,794
55-59	4,300	2,090	2,646	4,166	2,927	1,184	378	17,691
Avg Pay	\$12,527	\$21,494	\$24,821	\$28,003	\$31,222	\$36,948	\$43,143	\$432,569,501
60-64	2,688	1,065	1,225	2,059	1,927	1,551	682	11,197
Avg Pay	\$11,030	\$20,462	\$25,039	\$29,158	\$31,611	\$33,439	\$36,764	\$280,000,659
65-69	1,353	393	407	572	533	628	575	4,461
Avg Pay	\$8,646	\$18,380	\$22,617	\$28,757	\$31,884	\$31,941	\$34,722	\$101,593,351
70 & over	844	231	172	169	133	169	443	2,161
Avg Pay	\$6,290	\$11,332	\$15,312	\$20,882	\$26,028	\$30,400	\$28,825	\$35,458,055
Totals	54,925	13,787	11,563	12,879	7,575	4,203	2,254	107,186
Avg Pay	\$12,603	\$21,833	\$25,902	\$29,667	\$32,392	\$35,724	\$36,620	\$20,085

Averages: Age: Service: 47.8 8.4 Annual Pay: \$20,085



Active Members as of June 30, 2017 Tabulated by Annual Pay

	Numb	er of Active Mem	Portion of Total Number		
Annual Pay	Men	Women	Totals	Group	Cumulative
Less than \$1,000	2,153	3,669	5,822	3.7%	3.7%
\$1,000 - 1,999	2,637	3,159	5,796	3.7%	7.4%
2,000 - 2,999	3,472	3,314	6,786	4.3%	11.6%
3,000 - 3,999	3,228	3,212	6,440	4.1%	15.7%
4,000 - 4,999	2,497	3,143	5,640	3.6%	19.3%
5,000 - 5,999	1,882	3,067	4,949	3.1%	22.4%
6,000 - 6,999	1,601	3,077	4,678	3.0%	25.4%
7,000 - 7,999	1,269	3,023	4,292	2.7%	28.1%
8,000 - 8,999	1,117	3,102	4,219	2.7%	30.8%
9,000 - 9,999	1,045	3,177	4,222	2.7%	33.4%
40.000 44.000	0.040	0.540	0.704	= =0/	00.00/
10,000 - 11,999	2,212	6,549	8,761	5.5%	39.0%
12,000 - 13,999	2,014	6,003	8,017	5.1%	44.1%
14,000 - 15,999	1,850	5,836	7,686	4.9%	48.9%
16,000 - 17,999	1,552	6,490	8,042	5.1%	54.0%
18,000 - 19,999	1,452	6,484	7,936	5.0%	59.0%
20,000 - 24,999	2,970	12,994	15,964	10.1%	69.2%
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25,000 - 29,999	2,277	8,660	10,937	6.9%	76.1%
30,000 - 35,999	3,009	7,270	10,279	6.5%	82.6%
36,000 and over	12,558	14,957	27,515	17.4%	100.0%
Totals	50,795	107,186	157,981		



SCHEDULE E

GLOSSARY

<u>Actuarial Accrued Liability.</u> The difference between (i) the actuarial present value of future plan benefits, and (ii) the actuarial present value of future normal cost. Sometimes referred to as "accrued liability" or "past service liability".

<u>Accrued Service</u>. The service credited under the plan which was rendered before the date of the actuarial valuation.

<u>Actuarial Assumptions</u>. Estimates of future plan experience with respect to rates of mortality, disability, turnover, retirement, rate or rates of investment income and salary increases. Decrement assumptions (rates of mortality, disability, turnover and retirement) are generally based on past experience, often modified for projected changes in conditions. Economic assumptions (salary increases and investment income) consist of an underlying rate in an inflation-free environment plus a provision for a long-term average rate of inflation.

<u>Actuarial Cost Method</u>. A mathematical budgeting procedure for allocating the dollar amount of the "actuarial present value of future plan benefits" between the actuarial present value of future normal cost and the actuarial accrued liability. Sometimes referred to as the "actuarial funding method".

<u>Actuarial Equivalent</u>. A series of payments is called an actuarial equivalent of another series of payments if the two series have the same actuarial present value.

<u>Actuarial Present Value</u>. The amount of funds presently required to provide a payment or series of payments in the future. It is determined by discounting the future payments at a predetermined rate of interest, taking into account the probability of payment.

Age-Related Morbidity. Assumed increase to the net incurred claims related to increase in age.

<u>Amortization</u>. Paying off an interest-bearing liability by means of periodic payments of interest and principal, as opposed to paying it off with a lump sum payment.

<u>Experience Gain (Loss)</u>. A measure of the difference between actual experience and that expected based upon a set of actuarial assumptions during the period between two actuarial valuation dates, in accordance with the actuarial cost method being used.

<u>Health Care Cost Trend Rates.</u> The annual assumed rate of increase for both claims and contributions.

<u>Normal Cost</u>. The annual cost assigned, under the actuarial funding method, to current and subsequent plan years. Sometimes referred to as "current service cost". Any payment toward the unfunded actuarial accrued liability is not part of the normal cost.

<u>Plan Termination Liability</u>. The actuarial present value of future plan benefits based on the assumption that there will be no further accruals for future service and salary. The termination liability will generally be less than the liabilities computed on a "going concern" basis and is not normally determined in a routine actuarial valuation.

<u>Reserve Account</u>. An account used to indicate that funds have been set aside for a specific purpose and are not generally available for other uses.



<u>Unfunded Actuarial Accrued Liability</u>. The difference between the actuarial accrued liability and valuation assets. Sometimes referred to as "unfunded accrued liability".

<u>Valuation Assets</u>. The value of current plan assets recognized for valuation purposes. Generally based on book value plus a portion of unrealized appreciation or depreciation.