



## TriMet Other Postemployment Benefit Plan

GASB 74/75 Report as of January 1, 2022

Produced by Cheiron May 2022

### TABLE OF CONTENTS

<u>Section</u>	$\underline{Pc}$	<u>age</u>
Section I	Executive Summary	.1
Section II	Certification	.7
Section III	Determination of Discount Rate	.9
Section IV	GASB 74 Reporting Information	13
Section V	GASB 75 Reporting Information	16
<u>Appendices</u>		
Appendix A	Membership Information	20
Appendix B	Actuarial Assumptions and Methods	23
Appendix C	Summary of Plan Provisions	34
Appendix D	Glossary of Terms	<b>1</b> 1



#### SECTION I – EXECUTIVE SUMMARY

The purpose of this report is to provide accounting and financial disclosure information under Governmental Accounting Standards Board (GASB) Statement Nos. 74 and 75 for the Other Postemployment Benefits Plan provided by the Tri-County Metropolitan Transportation District of Oregon. This information includes:

- Determination of the discount rate as of January 1, 2021 and January 1, 2022;
- Sensitivity of the Net OPEB Liability to changes in discount rates and health care cost trend rates;
- Note disclosures and required supplementary information under GASB 74 for the Plan; and.
- Note disclosures and required supplementary information under GASB 75 for the employer.

### **Highlights**

The Other Postemployment Benefit Plan (OPEB Plan) provided by the Tri-County Metropolitan Transportation District of Oregon (TriMet) is currently funded on a pay-as-you-go basis, but there is an OPEB trust with a small amount of assets. As a result, this report contains disclosures required by GASB 74 as well as GASB 75. The measurement date is January 1, 2022, which is used for the Plan's GASB 74 reporting and for TriMet's GASB 75 reporting as of June 30, 2022. Measurements are based on the Total OPEB Liability and the fair value of assets as of January 1, 2022.



#### SECTION I – EXECUTIVE SUMMARY

Table I-1 below summarizes the January 1, 2022 and January 1, 2021 actuarial valuation results.

Summary of	Table l f Key Va	-1 aluation Resu	lts	
		GAS	B 75	
Valuation Date		01/01/2022		01/01/2021
Discount Rate		2.06%		2.12%
Total OPEB Liability				
<u>Union</u>				
Active	\$	336,989,112	\$	418,357,627
Inactive	\$	391,371,093	\$	422,996,371
Total Union	\$	728,360,205	\$	841,353,998
Non-Union				
Active	\$	36,804,313	\$	54,499,087
Inactive	\$	33,835,477	\$	48,851,315
Total Non-Union	\$	70,639,790	\$	103,350,402
Total	\$	798,999,995	\$	944,704,400
Market Value of Assets	\$	427,985	\$	431,073
Net OPEB Liability	\$	798,572,010	\$	944,273,327

The Total OPEB Liability decreased from \$944.7 million to \$799.0 million. The expected liability for this year, reflecting an additional year of service and interest offset by the benefits paid, was \$976.3 million. The lower actual liability represents a decrease of \$177.3 million compared to the expected liability. Premium experience, including a 53% reduction to the UHC Medicare Advantage Plan premiums, accounted for \$168.0 million of the decrease. In addition, there was a demographic experience gain that further reduced the liability by \$13.9 million and the change in Union mortality decreased the liability by \$4.2 million. These decreases were offset by a \$6.6 million increase due to the reduction in the discount rate and a \$2.1 million increase due to changes to the inflation assumption and updating the medical trend rates.



#### **SECTION I – EXECUTIVE SUMMARY**

Table I-2 below summarizes the actuarial valuation results for union members split between Streetcar and Non-Streetcar employees.

	Summ	Table		uation Results	5	
		Streetcar	N	lon-Streetcar		Total
Total OPEB Liabili	ty					
Active	\$	11,193,310	\$	325,795,802	\$	336,989,112
Inactive	\$	6,710,294	\$	384,660,799	\$	391,371,093
Total	\$	17,903,604	\$	710,456,601	\$	728,360,205
Service Cost	\$	839,154	\$	23,294,435	\$	24,133,589

Table I-3 below provides a summary of the key GASB 75 results during this measurement period. Contributions between the measurement date of January 1, 2022 and the fiscal year-end are reported as a deferred outflow of resources.

Tab Summary o	ole I-3 of Key l	Results	
Reporting Date Measurement Date		6/30/2022 1/1/2022	6/30/2021 1/1/2021
Net OPEB Liability Deferred Outflows Deferred Inflows	\$	798,572,010 164,361,160 270,529,343	\$ 944,273,327 197,508,328 143,825,397
Net Impact on Statement of Net Position	\$	904,740,193	\$ 890,590,396
Contributions Subsequent to Measurement Dat Explicit Subsidy	e		
Union Non-Union	\$	10,105,615 863,966	\$ 10,335,144 1,091,364
Implicit Subsidy Union		1,490,486	1,317,565
Non-Union Total	\$	144,896 12,604,963	\$ 137,481 12,881,554
OPEB Expense (\$ Amount) OPEB Expense (% of Payroll)	\$	39,768,314 16.38%	\$ 67,216,233 28.70%



#### SECTION I – EXECUTIVE SUMMARY

At the June 30, 2022 reporting date, TriMet will report a Net OPEB Liability (NOL) of \$798,572,010, deferred outflows of resources of \$164,361,160, and deferred inflows of resources of \$270,529,343 related to the Plan. Consequently, the net impact on TriMet's statement of net position due to the Plan would be \$904,740,193 [\$904,740,193 = \$798,572,010 – \$164,361,160 + \$270,529,343]. In addition, any contributions between the measurement date and the reporting date are to be reported as deferred outflows of resources to offset the cash outflows reported. We estimate explicit subsidy payments of \$11.0 million and implicit subsidy payments of \$1.6 million between January 1, 2022 and June 30, 2022. The estimated explicit subsidy payments shown in Table I-3 should be replaced with actual amounts when those amounts are known after the fiscal year-end.

The NOL decreased approximately \$145.7 million during the measurement period. The change in NOL due to actuarial gains and losses as well as assumption changes is recognized over the average remaining service life, determined at the beginning of each measurement period, which is seven years as of both the current and prior measurement period for the Plan. The change in NOL due to investment gains and losses is recognized in OPEB expense over five years, beginning in the year of occurrence. Unrecognized amounts are reported as deferred outflows of resources and deferred inflows of resources.

For the reporting year ending June 30, 2022, the annual OPEB expense is \$39,768,314 or 16.38% of covered-employee payroll. This amount reflects TriMet's contributions to the Plan during the measurement period, \$25,618,517, plus the change in the net impact on TriMet's statement of net position [\$39,768,314 = \$25,618,517 + \$904,740,193 - \$890,590,396]. Volatility in OPEB expense from year to year is to be expected. A breakdown of the components of the net OPEB expense is shown in Section V of this report.

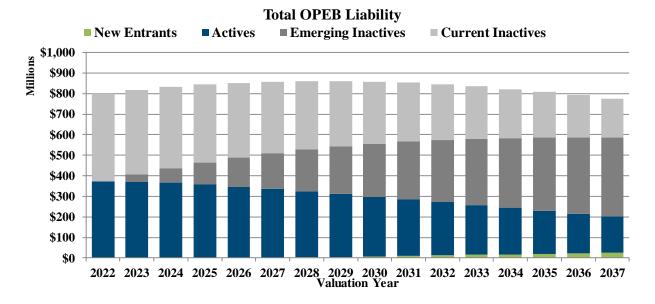


#### SECTION I – EXECUTIVE SUMMARY

The chart below shows the projection of the Total OPEB Liability (TOL) for the combination of union and non-union members assuming the discount rate remains constant and all other assumptions are met. Each year, the TOL increases with interest and the accrual of additional benefits and decreases for the benefits that are paid.

The small green bars on the bottom represent the projected liability for new hires after the valuation date. Because new hires earn benefits under Tier 3, the liability for these members is much lower than for Tiers 1 and 2. The dark blue bars represent the liability for current active members while they remain active employees, and the dark gray bars represent the liability for current active members as they retire. The light gray bars represent the liability for participants currently receiving benefits.

The Total OPEB Liability is projected to grow until 2029 when it is expected to start declining, as Tier 3 becomes more dominant.



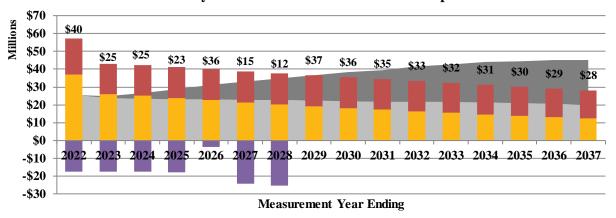
The chart on the following page shows a projection of benefit payments and OPEB expense for the next 15 years assuming the discount rate remains constant, all assumptions are met, and contributions are equal to the benefit payments each year.

The light gray area in the background represents projected benefit payments for participants currently receiving benefits. The dark gray area in the background represents projected benefit payments for participants who are currently active employees. Benefit payments (also TriMet contributions) are expected to grow significantly as current employees retire, increasing from \$25.6 million in 2022 to over \$45 million by the end of the projection period.



#### SECTION I – EXECUTIVE SUMMARY

#### **Benefit Payments/Contributions and OPEB Expense**



■ Current Inactives ■ Emerging Inactives ■ Operating Expenses ■ Financing Expenses ■ Change Recognition

The annual OPEB expense under GASB 75 is shown by its key components assuming there are no changes in the discount rate and all assumptions are met. The gold bars represent the operating expenses of the OPEB Plan. These expenses are primarily due to the benefits for active employees attributed to additional years of service. As Tier 2 employees retire and are replaced with Tier 3 employees, the operating expenses of the OPEB plan are expected to decline over the projection period from approximately \$37 million to approximately \$12 million.

The red bars represent the financing expenses of the OPEB Plan, which are largely interest on the TOL. If the OPEB Plan were prefunded, the interest costs would be offset by the expected return on assets. Assuming the discount rate remains at 2.06% and all other assumptions are met, the financing expense is expected to remain relatively stable over the projection period decreasing from approximately \$20 million to approximately \$16 million.

Assumption changes and experience gains and losses are also recognized over time as a component of OPEB expense. These amounts, represented by the purple bars, represent an offset to expense for the next seven years due primarily to the experience gains this year. As experience emerges, these changes are likely to be the most volatile component of OPEB expense.

The numbers at the top of the stacked bars represent the annual OPEB expense projected for each year. Over the period, the OPEB expense is expected to drop from \$40 million in the current year to \$25 million in 2023 before spiking to \$36 million in 2026 and dropping to \$12 million in 2028. Once the assumption changes and experience gains and losses are fully recognized, OPEB expense is expected to be \$37 million in 2029 and then decline gradually to about \$28 million by 2037.



#### **SECTION II - CERTIFICATION**

The purpose of this report is to provide accounting and financial disclosure information under Governmental Accounting Standards Board (GASB) Statement Nos. 74 and 75 for the Other Postemployment Benefits (OPEB) Plan provided by the Tri-County Metropolitan Transportation District of Oregon (TriMet). This report is for the use of TriMet and their auditors in preparing financial reports in accordance with applicable law and accounting requirements. This report is not appropriate for other purposes, including the measurement of funding requirements for the Plan.

In preparing our report, we relied on information (some oral and some written) supplied by TriMet. This information includes, but is not limited to, the plan provisions, employee data, and financial information. We performed an informal examination of the obvious characteristics of the data for reasonableness and consistency in accordance with Actuarial Standard of Practice No. 23.

Cheiron utilizes ProVal, an actuarial valuation software leased from Winklevoss Technologies (WinTech) to calculate the liabilities, normal costs, and projected benefit payments. We have relied on WinTech as the developer of ProVal. We have reviewed ProVal and have a basic understanding of it and have used ProVal in accordance with its original intended purpose. We have not identified any material inconsistencies in assumptions or output of ProVal that would affect this actuarial valuation.

Projections in this report were developed using *H-Scan*, our proprietary tool for developing deterministic projections of the future financial status of the plan. The *H-Scan* projection uses standard roll-forward techniques that implicitly assume a stable active population. Changes in the demographic characteristics of the active population will lead to different results.

Future actuarial measurements may differ significantly from the current measurements 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; and, changes in plan provisions or applicable law.

This report does not contain any adjustment for the potential future impact of COVID-19. We anticipate the virus may impact both mortality and claims in the short term, as well as potentially other demographic experiences. However, the net impact is not determinable at this time.

This report and its contents have been prepared in accordance with generally recognized and accepted actuarial principles and practices and our understanding of the Code of Professional Conduct and applicable Actuarial Standards of Practice set out by the Actuarial Standards Board as well as applicable laws and regulations. Furthermore, as credentialed actuaries, we collectively meet the Qualification Standards of the American Academy of Actuaries to render the opinion contained in this report. This report does not address any contractual or legal issues. We are not attorneys and our firm does not provide any legal services or advice.



#### SECTION II – CERTIFICATION

This report was prepared for TriMet for the purposes described herein and for the use by the auditors in completing an audit related to the matters herein. Other users of this report are not intended users as defined in the Actuarial Standards of Practice, and Cheiron assumes no duty or liability to any such other user.

Margaret A. Tempkin, FSA, EA, MAAA

Principal Consulting Actuary

Michael W. Schionning, FSA, MAAA

Principal Consulting Actuary

William R. Hallmark, ASA, EA, FCA, MAAA

Tillier R. Hall whe

**Consulting Actuary** 



#### SECTION III – DETERMINATION OF DISCOUNT RATE

The discount rate used to measure the Total OPEB Liability as of January 1, 2021 was 2.12%. The discount rate used to measure the Total OPEB Liability as of January 1, 2022 was 2.06%. Additional information about these rates are provided in Appendix B.

In developing the projection of cash flows used to determine the discount rate, we assumed that employer contributions to the Plan will continue to follow the pay-as-you-go contribution policy. Based on the assumptions of a pay-as-you-go plan, the discount rate used at the January 1, 2021 and 2022 measurement dates is equal to the yield on the Bond Buyer 20-Bond GO Index as of December 26, 2020 and December 31, 2021, respectively.



### SECTION III – DETERMINATION OF DISCOUNT RATE

Table III-1 below summarizes the total expected net benefit payments for the next 30 years.

	Expect		Table III-1 Benefit Payme	ents	- Total		
Measurement Yea Ending December 31			Explicit Medical		Retiree Life Insurance		Total
				ф		ф	
2022	\$ 3,233,47 3,512,94		21,133,614	\$	•	\$	24,923,440
2023 2024			22,543,158		582,300 608,361		26,638,402
2024	3,764,43 4,274,61		24,246,228 26,200,295		636,272		28,619,019 31,111,179
2023	4,505,66		20,200,293		664,145		32,943,788
2020	4,303,00	1	21,113,962		004,143		32,943,766
2027	4,664,76		29,363,062		692,577		34,720,399
2028	4,904,77		30,965,981		721,813		36,592,567
2029	5,052,52		32,420,827		750,979		38,224,331
2030	5,094,58		33,735,351		779,551		39,609,486
2031	5,548,35	0	35,337,044		806,614		41,692,008
2032	5,455,63	0	36,359,841		830,841		42,646,312
2033	5,702,89	1	37,510,919		852,212		44,066,022
2034	5,423,90	9	38,035,089		870,689		44,329,687
2035	5,293,52	8	38,542,711		886,482		44,722,721
2036	4,994,30	9	38,786,943		899,369		44,680,621
2037	5,108,86	2	39,080,228		909,251		45,098,341
2038	4,873,73		38,909,013		915,866		44,698,618
2039	4,661,05		38,652,958		919,508		44,233,525
2040	4,861,09		38,707,654		919,877		44,488,621
2041	4,533,54		38,177,254		917,059		43,627,860
					·		
2042	4,416,48		37,828,139		911,268		43,155,889
2043	4,338,49		37,323,812		902,751		42,565,056
2044	4,191,99		36,637,714		891,587		41,721,296
2045	4,116,85		35,900,454		878,035		40,895,343
2046	3,963,84	D	35,057,174		862,420		39,883,440
2047	4,036,56	5	34,376,326		844,981		39,257,872
2048	3,906,25	1	33,443,884		825,957		38,176,092
2049	3,656,38	0	32,440,960		805,443		36,902,783
2050	3,419,04	8	31,244,955		783,845		35,447,848
2051	3,136,24	3	29,875,384		761,310		33,772,937



### SECTION III – DETERMINATION OF DISCOUNT RATE

Table III-2 below summarizes the Union expected net benefit payments for the next 30 years.

		Ermostad	Not	Table III-2	n t a	Union	
Measurement Yea	ır	Expected	mei	Benefit Payme	nts	- Official	
Ending	*1	Implicit		Explicit		Retiree Life	
December 31		Medical		Medical		Insurance	Total
2022	\$	2,942,245	\$	19,446,779	\$	506,489	\$ 22,895,513
2023		3,193,453		20,768,591		529,511	24,491,555
2024		3,425,755		22,351,282		552,683	26,329,720
2025		3,902,998		24,176,611		577,659	28,657,268
2026		4,106,219		25,645,446		602,568	30,354,233
2027		4,226,451		27,111,736		627,958	31,966,145
2028		4,404,901		28,585,302		654,075	33,644,278
2029		4,580,987		29,992,442		680,070	35,253,499
2030		4,599,960		31,228,406		705,495	36,533,861
2031		5,007,545		32,716,743		729,352	38,453,640
2032		4,922,504		33,668,277		750,378	39,341,159
2033		5,124,430		34,776,856		768,601	40,669,887
2034		4,788,628		35,222,917		784,011	40,795,556
2035		4,711,895		35,723,417		796,839	41,232,151
2036		4,369,842		35,864,497		806,899	41,041,238
2037		4,445,440		36,088,633		814,123	41,348,196
2038		4,228,219		35,909,066		818,383	40,955,668
2039		4,043,100		35,637,116		819,955	40,500,171
2040		4,186,013		35,631,925		818,648	40,636,586
2041		3,904,387		35,136,667		814,580	39,855,634
2042		3,805,353		34,819,407		808,048	39,432,808
2043		3,709,994		34,311,198		799,265	38,820,457
2044		3,525,232		33,676,426		788,407	37,990,065
2045		3,473,522		33,030,858		775,741	37,280,121
2046		3,373,630		32,280,036		761,555	36,415,221
2047		3,448,267		31,659,691		746,025	35,853,983
2048		3,364,239		30,828,106		729,368	34,921,713
2049		3,167,739		29,905,344		711,622	33,784,705
2050		2,926,563		28,798,771		693,098	32,418,432
2051		2,663,340		27,512,151		673,892	30,849,383



### SECTION III – DETERMINATION OF DISCOUNT RATE

Table III-3 below shows the Non-Union expected net benefit payments for the next 30 years.

		Expected No	et B	Table III-3 enefit Payments	1 - 2	Non Union	
Measurement Yea	r	Zipectea I (		0110110 1 <b>u</b> j 1110110.	, -		
Ending		Implicit		Explicit		Retiree Life	
December 31		Medical		Medical		Insurance	Total
2022	\$	291,230	\$	1,686,835	\$	49,862	\$ 2,027,927
2023		319,491		1,774,567		52,789	2,146,847
2024		338,675		1,894,946		55,678	2,289,299
2025		371,614		2,023,684		58,613	2,453,911
2026		399,442		2,128,536		61,577	2,589,555
2027		438,309		2,251,326		64,619	2,754,254
2028		499,872		2,380,679		67,738	2,948,289
2029		471,538		2,428,385		70,909	2,970,832
2030		494,624		2,506,945		74,056	3,075,625
2031		540,805		2,620,301		77,262	3,238,368
2032		533,126		2,691,564		80,463	3,305,153
2033		578,461		2,734,063		83,611	3,396,135
2034		635,281		2,812,172		86,678	3,534,131
2035		581,633		2,819,294		89,643	3,490,570
2036		624,467		2,922,446		92,470	3,639,383
2037		663,422		2,991,595		95,128	3,750,145
2038		645,520		2,999,947		97,483	3,742,950
2039		617,959		3,015,842		99,553	3,733,354
2040		675,077		3,075,729		101,229	3,852,035
2041		629,160		3,040,587		102,479	3,772,226
2042		611,129		3,008,732		103,220	3,723,081
2043		628,499		3,012,614		103,486	3,744,599
2044		666,763		2,961,288		103,180	3,731,231
2045		643,332		2,869,596		102,294	3,615,222
2046		590,216		2,777,138		100,865	3,468,219
2047		588,298		2,716,635		98,956	3,403,889
2048		542,012		2,615,778		96,589	3,254,379
2049		488,641		2,535,616		93,821	3,118,078
2050		492,485		2,446,184		90,747	3,029,416
2051		472,903		2,363,233		87,418	2,923,554



#### SECTION IV – GASB 74 REPORTING INFORMATION

#### **Note Disclosures**

The tables below show the changes in the Total OPEB Liability (TOL), the Plan fiduciary net position (i.e., fair value of Plan assets) (FNP), and the Net OPEB Liability (NOL) during the measurement period ending on January 1, 2022.

	Change	Table IV - 1			
		In	crease (Decreas	se)	
	To	tal OPEB Liabil	ity	Plan Fiduciary	Net OPEB
	Union	Non Union	Total	<b>Net Position</b>	Liability
<b>Balances at 1/1/2021</b>	\$ 841,353,998	\$ 103,350,402	\$ 944,704,400	\$ 431,073	\$ 944,273,327
Changes for the year:				•	
Service cost	34,608,389	2,502,575	37,110,964		37,110,964
Interest	17,956,921	2,191,993	20,148,914		20,148,914
Changes of benefits	0	0	0		0
Differences between					
expected and actual	(147,244,240)	(34,658,909)	(181,903,149)		(181,903,149)
experience					
Changes of assumptions	4,892,594	(335,211)	4,557,383		4,557,383
Contributions - employer				25,618,517	(25,618,517)
Contributions - member				0	0
Net investment income				(3,088)	3,088
Benefit payments					0
Explicit subsidy	(20,775,750)	(2,164,178)	(22,939,928)	(22,939,928)	
Implicit subsidy	(2,431,707)	(246,882)	(2,678,589)	(2,678,589)	
Administrative expense				0	0
Net changes	(112,993,793)	(32,710,612)	(145,704,405)	(3,088)	(145,701,317)
Balances at 1/1/2022	\$ 728,360,205	\$ 70,639,790	\$ 798,999,995	\$ 427,985	\$ 798,572,010

During the measurement year, the NOL decreased by approximately \$145.7 million. The service cost and interest cost increased the NOL by approximately \$57.3 million while contributions plus investment gains decreased the NOL by approximately \$25.6 million.

There were no changes in benefits during the year. There were changes in assumptions during the measurement year, which increased the TOL by approximately \$4.6 million. There was a liability gain during the year due to experience (population and health claims experience), which decreased the TOL by approximately \$181.9 million.



#### SECTION IV – GASB 74 REPORTING INFORMATION

Changes in the discount rate affect the measurement of the TOL. Lower discount rates produce a higher TOL and higher discount rates produce a lower TOL. The table below shows the sensitivity of the NOL to the discount rate.

Sensitivity of NC		able IV - 2 o Changes in	Di	scount Rate		
		1% Decrease 1.06%		Discount Rate 2.06%		1% Increase 3.06%
Total OPEB Liability Plan Fiduciary Net Position Net OPEB Liability	\$ <u>\$</u>	922,974,287 427,985 922,546,302	\$ <u>\$</u>	798,999,995 427,985 798,572,010	\$ <u>\$</u>	698,096,098 427,985 697,668,113
Plan Fiduciary Net Position as a Percentage of the Total OPEB Liability		0.0%		0.1%		0.1%

A one percent decrease in the discount rate increases the TOL by approximately 16% and increases the NOL by approximately 16%. A one percent increase in the discount rate decreases the TOL by approximately 13% and decreases the NOL by approximately 13%.

Changes in healthcare trends also affect the measurement of the TOL. Lower healthcare trends produce a lower TOL and higher healthcare trends produce a higher TOL. The table below shows the sensitivity of the NOL to healthcare trends.

Sensitivity of NOL to Cl		able IV - 3 ges in Healtho	car	e Cost Trend	Ra	ntes
		1% Decrease		Healthcare Trend		1% Increase
Total OPEB Liability Plan Fiduciary Net Position Net OPEB Liability	\$ <u>\$</u>	691,546,904 427,985 691,118,919	\$	798,999,995 427,985 798,572,010	\$	933,310,754 427,985 932,882,769
Plan Fiduciary Net Position as a Percentage of the Total OPEB Liability		0.1%		0.1%		0.0%

A one percent decrease in the healthcare trends decreases the TOL by approximately 13% and decreases the NOL by approximately 13%. A one percent increase in the healthcare trends increases the TOL by approximately 17% and increases the NOL by approximately 17%.



### **SECTION IV – GASB 74 REPORTING INFORMATION**

### **Required Supplementary Information**

The schedules of Required Supplementary Information start with information as of the implementation of GASB 74 and eventually will build up to 10 years of information. The schedules below show the changes in NOL and related ratios required by GASB.

Schedule (	of.	Changes ir	. N	Table IV -		ahility and	I R	Pelated Rat	tio	g
Schedule (		FYE 2022		FYE 2021		FYE 2020		FYE 2019		FYE 2018
Total OPEB Liability						11112020		1112017		1 11 2010
Service cost (MOY)	\$	37,110,964	\$	34,523,816	\$	27,058,839	\$	33,512,062	\$	34,417,175
Interest	Ψ	20,148,914	Ψ	24,849,490	Ψ	29,810,733	Ψ	27,235,927	Ψ	28,332,896
Changes of benefit terms		0		0		0		0		0
Differences between										
expected and actual										
experience		(181,903,149)		(83,329,443)		(22,271,619)		(32,503,320)		1,528,926
Changes of assumptions		4,557,383		91,128,110		165,525,233		(66,328,099)		1,192,225
Benefit payments	_	(25,618,517)	_	(24,311,699)	_	(23,714,966)	_	(23,022,074)	_	(22,646,628)
Net change in TOL	\$	(145,704,405)	\$	42,860,274	\$	176,408,220	\$	(61,105,504)	\$	42,824,594
TOL - beginning	_	944,704,400		901,844,126	_	725,435,906		786,541,410	_	743,716,816
TOL - ending	\$	798,999,995	\$	944,704,400	\$	901,844,126	\$	725,435,906	\$	786,541,410
Plan fiduciary net position										
Contributions - employer	\$	25,618,517	\$	24,311,699	\$	23,714,966	\$	23,022,074	\$	22,646,628
Contributions - member		0		0		0		0		0
Net investment income		(3,088)		6,488		13,468		7,777		1,914
Benefit payments		(25,618,517)		(24,311,699)		(23,714,966)		(23,022,074)		(22,646,628)
Administrative expense		0		0		0		0		0
Net change in plan fiduciary net position	\$	(3,088)	\$	6,488	\$	13,468	\$	7,777	\$	1,914
Plan fiduciary net		431,073		424,585		411,117		403,340		401,426
position - beginning	_	<del>,</del>	_	, , , , , , , , , , , , , , , , , , ,			_		_	
Plan fiduciary net position - ending	\$	427,985	\$	431,073	\$	424,585	\$	411,117	\$	403,340
NOL - ending	\$	798,572,010	\$	944,273,327	\$	901,419,541	\$	725,024,789	\$	786,138,070
Plan fiduciary net position as a percentage of the TOL		0.05%		0.05%		0.05%		0.06%		0.05%
Covered employee payroll	\$	242,736,619	\$	234,229,741	\$	236,032,015	\$	219,239,977	\$	198,559,646
NOL as a percentage of covered employee payroll		329.0%		403.1%		381.9%		330.7%		395.9%



#### SECTION V – GASB 75 REPORTING INFORMATION

The schedules in this section provide the information TriMet needs to report under GASB 75. The impact of experience gains or losses and assumption changes on the TOL are recognized in expense over the average expected remaining service life of all active and inactive members of the Plan. As of the measurement date, this recognition period was seven years.

The table below summarizes the current balances of deferred outflows and deferred inflows of resources related to the Plan along with the net recognition over the next five years and the total recognition thereafter if any. Amounts are split between the union and non-union groups, but only the total applies to TriMet's financial statements. For this purpose, the assets in the Trust were allocated to the union and non-union groups in proportion to the TOL at the beginning and end of the year, and the actual earnings for each group also include the impact of any change in proportion during the year.

		Deferred	O	utflows of l	Res	sources		Deferred	Inflows of F	Res	ources
		Union	N	lon-Union		Total		Union	Non-Union		Total
Differences between expected and actual experience	\$	0	\$	481,604	\$	436,836	\$	197,151,709	\$ 44,987,710	\$	242,094,65
Changes in assumptions		148,436,967		17,437,408		163,924,324		24,350,009	6,026,369		28,426,32
Net difference between projected and actual earnings on OPEB plan investments		0		9,640		0		18,005	0		8,36
Total	\$	148,436,967	\$	17,928,652	Ф	164 261 160	Φ	221,519,723	\$ 51,014,079	Ф	270,529,34
10001	Ψ	110,120,207	Ψ	17,920,032	φ	164,361,160	Φ	221,319,723	Ψ 51,014,075	φ	
	utflo	<u> </u>		inflows of reso	ourc	· · · · · · · · · · · · · · · · · · ·					Total
	utflo	<u> </u>		inflows of reso	ourc	ces will be reco		ed in OPEB ex	spense as follows	s:	Total
	outflo	<u> </u>		inflows of reso	ourc	ces will be reco		ed in OPEB ex	spense as follows  Non-Union	s:	Total (17,491,18
	utflo	<u> </u>		inflows of reso	ourc	nded June 30: 2023		ed in OPEB ex <b>Union</b> (11,296,965)	Non-Union (6,194,219)	s:	Total (17,491,18 (17,489,62
	utflo	<u> </u>		inflows of reso	ourc	ces will be reco nded June 30: 2023 2024		ed in OPEB ex  Union (11,296,965) (11,295,238)	Non-Union (6,194,219) (6,194,388)	S:	
Amounts reported as deferred o	outflo	<u> </u>		inflows of reso	ourc	nded June 30: 2023 2024 2025		Union (11,296,965) (11,295,238) (12,272,329)	Non-Union (6,194,219) (6,194,388) (5,603,339)	S:	Total (17,491,18 (17,489,62 (17,875,66

During the year, the actual experience differed from the assumed experience decreasing the TOL by approximately \$181.9 million. Approximately \$26.0 million of that decrease was recognized as a reduction in OPEB expense in the current year and an identical amount will be recognized in each of the next six years.

Assumption changes (the decrease in the discount rate, the change in price inflation, the change in Union mortality and the update of healthcare trends) increased the TOL by approximately \$4.6 million. Approximately \$0.7 million of that decrease was recognized as an increase in OPEB expense in the current year and an identical amount will be recognized in each of the next six years.



#### SECTION V – GASB 75 REPORTING INFORMATION

The impact of investment gains or losses is recognized over a period of five years. Because the OPEB trust holds so few assets, we have assumed no investment income. As a result, all actual investment income is treated as a gain. During the measurement year, there was an investment loss of \$3,088. Of that loss, \$618 was recognized in the current year as a reduction in OPEB expense and an identical amount will be recognized in each of the next four years.

### **Annual OPEB Expense**

The annual OPEB expense can be calculated in two different ways. First, it is the change in the amounts reported on TriMet's Statement of Net Position that relate to the Plan and are not attributable to employer contributions. That is, it is the change in the NOL minus the change in deferred outflows plus the change in deferred inflows plus employer contributions during the year.

Alternatively, annual OPEB expense can be calculated by its individual components. While GASB does not require or suggest the organization of the individual components shown in the table on the next page, we believe it helps to understand the level and volatility of the OPEB expense.

In the calculation of OPEB expense by individual components, there are three separate sections: operating expenses, financing expenses, and changes. Operating expenses are items directly attributable to the operation of the Plan during the measurement year. Service cost less employee contributions represents the increase in employer-provided benefits attributable to the measurement year, and administrative expenses are the cost of operating the Plan for the year.

Financing expenses equal the interest on the TOL less the expected return on assets.

The final category is changes. This category drives most of the volatility in OPEB expenses from year to year. It includes any changes in benefits made during the year and the recognized amounts due to assumption changes, gains or losses on the TOL, and investment gains or losses.



### SECTION V – GASB 75 REPORTING INFORMATION

The table shows the development of OPEB expenses through both of these methodologies. In addition to the information shown below, any contributions between the measurement date and the reporting date would be reported as deferred outflows of resources to offset the cash outflows reported.

Cal	Table V - 2 Calculation of OPEB Expense Measurement Year Ending 2022							
		Union	l	Non-Union		Total		2021
Change in Net OPEB Liability Change in Deferred Outflows Change in Deferred Inflows Employer Contributions OPEB Expense	\$ · · · · · · · · · · · · · · · · · · ·	(113,000,026) 29,270,886 101,789,116 23,207,457 <b>41,267,433</b>	_	(32,701,291) 4,436,456 24,354,656 2,411,060 (1,499,119)		(145,701,317) 33,147,168 126,703,946 25,618,517 <b>39,768,314</b>	\$ -	42,853,786 (54,074,613) 54,125,361 24,311,699 <b>67,216,233</b>
Operating Expenses								
Service cost	\$	34,608,389	\$	2,502,575	\$	37,110,964	\$	34,523,816
Employee contributions		0		0		0		0
Administrative expenses	_	0		0	_	0	_	0
Total	\$	34,608,389	\$	2,502,575	\$	37,110,964	\$	34,523,816
Financing Expenses								
Interest cost	\$	17,956,921	\$	2,191,993	\$	20,148,914	\$	24,849,490
Expected return on assets		0		0		0		0
Total	\$	17,956,921	\$	2,191,993	\$	20,148,914	\$	24,849,490
Changes								
Benefit changes	\$	0	\$	0	\$	0	\$	0
Recognition of assumption changes		26,046,810		1,963,880		28,010,690		27,359,636
Recognition of liability gains and losses		(37,336,305)		(8,160,638)		(45,496,943)		(19,510,779)
Recognition of investment gains and		(8,382)		3,071		(5,311)		(5,930)
losses Total	\$	(11,297,877)	\$	(6,193,687)	\$	(17,491,564)	\$	7,842,927
OPEB Expense	\$	41,267,433	\$	(1,499,119)	\$	39,768,314	\$	67,216,233



#### **SECTION V – GASB 75 REPORTING INFORMATION**

The table below shows the projection of OPEB expense for the 2023 measurement year assuming that all assumptions are exactly met and that the discount rate, which is based on a municipal bond index, remains at 2.06%. This expense amount would be different if TriMet starts contributing to the Trust fund.

Table V - 3 Projection of OPEB Expense at 2.06%								
Measurement Year Ending 2023								
		Union		Non-Union		Total		
Change in Net OPEB Liability	\$	16,504,143	\$	1,116,243	\$	17,620,386		
Change in Deferred Outflows		34,163,480		4,445,245		38,608,725		
Change in Deferred Inflows		(45,460,445)		(10,639,464)		(56,099,908)		
Employer Contributions		22,896,192		2,027,958		24,924,150		
OPEB Expense	\$	28,103,370	\$	(3,050,017)	\$	25,053,352		
Operating Expenses								
Service cost	\$	24,380,900	\$	1,692,460	\$	26,073,359		
Employee contributions		0		0		0		
Administrative expenses		0		0		0		
Total	\$	24,380,900	\$	1,692,460	\$	26,073,359		
Financing Expenses								
Interest cost	\$	15,019,435	\$	1,451,742	\$	16,471,177		
Expected return on assets		0		0		0		
Total	\$	15,019,435	\$	1,451,742	\$	16,471,177		
Changes								
Benefit changes	\$	0	\$	0	\$	0		
Recognition of assumption changes		26,046,810		1,963,880		28,010,690		
Recognition of liability gains and losses		(37,336,305)		(8,160,638)		(45,496,943)		
Recognition of investment gains and losses		(7,470)		2,539		(4,931)		
Total	\$	(11,296,965)	\$	(6,194,219)	\$	(17,491,184)		
OPEB Expense	\$	28,103,370	\$	(3,050,017)	\$	25,053,352		



#### **APPENDIX A – MEMBERSHIP INFORMATION**

The census data used to develop the Total OPEB Liability (TOL) as of January 1, 2022 was provided by TriMet.

Union Membership	Summary		
Valuation Date	1/1/2021	1/1/2022	% Change
Actives with coverage			
Kaiser Permanente	1,290	1,227	-4.9%
Regence HSA	198	170	-14.1%
Regence PPO 80/20	628	597	-4.9%
Regence Union PPO 90/10	468	411	-12.2%
Total Actives with medical coverage	2,584	2,405	-6.9%
Actives without medical coverage, with Dental	72	57	-20.8%
Actives above with medical coverage, without Dental	8	6	-25.0%
Actives without medical coverage, without Dental	0	0	-
Total Actives	2,656	2,462	-7.3%
Active Employees by Tier			
Tier 1	0	0	0.0%
Tier 2	1,544	1,229	-20.4%
Tier 3	1,112	1,233	10.9%
Total Actives	2,656	2,462	-7.3%
Retirees with coverage			
Kaiser	109	110	0.9%
Regence	170	165	-2.9%
Kaiser Senior Advantage	586	595	1.5%
UnitedHealthcare PPO	764	848	11.0%
Total Retirees with medical and dental coverage	1,629	1,718	5.5%
Total Retirees with Life Insurance	1,530	1,613	5.4%
Total Retirees with Stipend	51	56	9.8%
Inactive Population Distribution			
Retirees	1,385	1,402	1.2%
Disableds	145	211	45.5%
Survivors	182	201	10.4%
Total Inactive Population	1,712	1,814	6.0%



#### **APPENDIX A – MEMBERSHIP INFORMATION**

Non-Union Membersh	nip Summary	y	
Valuation Date	1/1/2021	1/1/2022	% Change
Actives with coverage			
Kaiser Permanente	214	210	-1.9%
Regence HSA	47	50	6.4%
Regence PPO 80/20	253	247	-2.4%
Total Actives with medical coverage	514	507	-1.4%
Actives without medical coverage, with Dental	4	2	-50.0%
Actives above with medical coverage, without Dental	0	0	-100.0%
Actives without medical coverage, without Dental	23	25	8.7%
Total Actives	541	534	-1.3%
Active Employees by Tier			
Tier 1	110	98	-10.9%
Tier 2	61	52	-14.8%
Tier 3	370	384	3.8%
Total Actives	541	534	-1.3%
Retirees with coverage			
Kaiser Retiree - Open	8	9	12.5%
Kaiser Permanente	0	0	-100.0%
Regence HSA-Retiree	1	2	100.0%
Regence Retiree - Closed	2	1	-50.0%
Regence Retiree 80/20	21	19	-9.5%
Kaiser Senior Advantage	52	51	-1.9%
UnitedHealthcare PPO	134	145	8.2%
Total Retirees with medical and dental coverage	218	227	4.1%
Total Retirees with Life Insurance	220	230	4.5%
Inactive Population Distribution			
Retirees	217	226	4.1%
Disableds	3	4	33.3%
Survivors	13	13	0.0%
Total Inactive Population	233	243	4.3%



### **APPENDIX A – MEMBERSHIP INFORMATION**

### Active Member Data as of January 1, 2022:

A	ACTIVE I	U <b>NION</b> I	EMPL(	YEES V	VITH M	<b>EDICA</b>	L COUN	TS BY A	AGE/SE	RVICE	
					Ser	vice					
Age	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up	Total
Under 25	11	31	0	0	0	0	0	0	0	0	42
25 to 29	16	74	18	0	0	0	0	0	0	0	108
30 to 34	18	96	83	5	0	0	0	0	0	0	202
35 to 39	10	115	100	37	3	0	0	0	0	0	265
40 to 44	8	96	100	44	13	9	1	0	0	0	271
45 to 49	8	99	121	52	27	31	5	0	0	0	343
50 to 54	7	90	127	51	37	55	45	4	1	0	417
55 to 59	6	91	117	43	44	46	37	18	4	0	406
60 to 64	3	50	99	41	24	32	27	8	4	2	290
65 to 69	2	12	35	9	7	14	6	2	10	2	99
70 & up	0	1	7	1	2	4	2	1	1	0	19
Total	89	755	807	283	157	191	123	33	20	4	2,462

AC	TIVE NO	N-UNIO	N EMP	LOYEE	S WITH	I MEDIO	CAL CO	UNTS B	Y AGE/	SERVIC	E
					Ser	vice					
Age	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up	Total
Under 25	0	0	0	0	0	0	0	0	0	0	0
25 to 29	7	13	1	0	0	0	0	0	0	0	21
30 to 34	5	25	5	0	0	0	0	0	0	0	35
35 to 39	16	37	16	3	1	0	0	0	0	0	73
40 to 44	9	28	21	9	2	4	0	0	0	0	73
45 to 49	12	37	12	8	13	11	2	0	0	0	95
50 to 54	8	23	16	10	7	13	8	1	0	0	86
55 to 59	4	22	10	8	9	10	11	5	1	0	80
60 to 64	5	16	9	1	1	4	6	3	1	0	46
65 to 69	1	2	6	2	3	2	2	1	0	1	20
70 & up	0	1	2	1	0	0	1	0	0	0	5
Total	67	204	98	42	36	44	30	10	2	1	534



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

The discount rate, price inflation and per person health care cost trend assumptions were updated as described below. The demographic assumptions are the same as those used in the pension valuations. Please refer to the pension valuation reports for the rationale for these assumptions. Other OPEB-specific assumptions were selected based on recent experience and expectations for the future. We believe the assumptions to be reasonable.

### **Economic Assumptions**

1. Expected Return on Assets 0.00% per year. There is a very small amount of assets in

an OPEB trust that if used to pay benefits would not last a month. The assets are invested in short-term fixed-income securities. For simplicity, we have assumed no investment

earnings on these assets.

**2. Municipal Bond Yield** 2.12% as of January 1, 2021

2.06% as of January 1, 2022

Bond Buyer 20-Bond GO Index, December 26, 2020 and

December 31, 2021

**3. Discount Rate:** 2.12% as of January 1, 2021

2.06% as of January 1, 2022

**4. Wage Inflation:** 2.75% per year for purposes of attributing individual costs

under the Entry Age Actuarial Cost Method

**5. Price Inflation**: 2.50% per year. The assumption was increased based on

20-year break-even inflation rates and the first quarter of 2022 survey of professional economic forecasters published

by the Philadelphia Federal Reserve.

**6. Dental Trends:** Dental premiums and costs are assumed to increase at 3.5%

per year in all years.

**7. Stipend Trends:** The monthly stipend are assumed to increase at 2.50% per

year (same as inflation). Tier 3 stipend does not increase

until 2025.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### 8. Per Person Health Care Cost Trends:

Medical Trend assumptions were developed using the Society of Actuaries (SOA) Long-Run Medical Cost Trend Model version 2022. The following assumptions were input into this model:

Trend Assumption Inputs	
Variable	Rate
Rate of Inflation	2.50%
Rate of Growth in Real Income/GDP per capita 2031+	1.40%
Extra Trend due to Taste/Technology 2031+	1.00%
Expected Health Share of GDP 2031	19.00%
Health Share of GDP Resistance Point	20.00%
Year for Limiting Cost Growth to GDP Growth	2042

The SOA Long-Run Medical Cost Trend Model and its baseline projection are based on an econometric analysis of historical U.S. medical expenditures and the judgments of experts in the field. The long-run baseline projection and input variables have been developed under the guidance of the SOA Project Oversight Group.

We have reviewed the baseline assumptions for the model and found them to be reasonable and consistent with the other economic assumptions used in the valuation with the exceptions discussed below.

The trends selected from 2022 to 2025 were based on plan design, population weighting, renewal projections from the current health care actuary, and market analysis.

Health care expenditures as a percentage of GDP have been relatively flat since 2009; between 2009 and 2019, the percentage has increased from 17.3% to 17.7% and has been flat at 17.7% since 2016. Given this historical pattern, we expect that health care costs as a percentage of GDP will increase moderately through 2042 when it reaches 19.8% of GDP, at which point it will remain constant and grow at the same rate as GDP. The continued pressure on constraining health care costs, the continuing focus on preventive care and disease management, and improvements in diagnosing and treating chronic illness earlier are expected to keep the excess growth relatively low and limit the growth of health care expenditures over the next 20 years.

We have relied on the Society of Actuaries as the developer of the Model. We have reviewed the Model and have a basic understanding of the Model and have used the Model in accordance with its original intended purpose. We have not identified any material inconsistencies in assumptions or output of the Model that would affect this report.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

Medicare Part B Trends are developed from the published 2020 Medicare Trustees Report. The trend rates from 2021 through 2026 are the short-term trends stated in the report. The Trustee report then grades the trend down to an assumption of GDP plus 0.2% by 2044 and GDP plus 0.1% by 2094. The Trustee report is based on a long-term GDP assumption of between 3.7% and 3.6%, which is lower than our assumption of 3.78%, which is between the two assumption points from the Trustee report (3.9% in 2044 and 3.7% in 2094). We have used our 3.78% assumption in place of the Trustee report assumption so that the trend grades down from 7.28% in 2026 to 3.78% by 2040.

Deductibles, Co-payments, and Out-of-Pocket Maximums are assumed to increase at the above trend rates. The ultimate trend rate reflects an assumed nominal per capita GDP growth.

#### **Per Person Health Care Cost Trends:**

	$\mathbf{U}$	nion Plans Trend	1	I	Non Union Plans Tr	end
	Medical and Pre	scription Drug	Medicare	Med	lical and Prescriptio	n Drug
Year	Pre-Medicare	Medicare	Part B	Year	Pre-Medicare	Medicare
2022	9.00%	3.00%	3.98%	2022	3.00%	3.00%
2023	8.50%	6.00%	5.74%	2023	6.00%	6.00%
2024	8.00%	5.50%	5.62%	2024	5.50%	5.50%
2025	7.50%	5.00%	4.79%	2025	5.00%	5.00%
2026	7.08%	5.00%	7.28%	2026	5.00%	5.00%
2027	6.66%	4.99%	7.03%	2027	4.99%	4.99%
2028	6.24%	4.99%	6.78%	2028	4.99%	4.99%
2029	5.82%	4.98%	6.53%	2029	4.98%	4.98%
2030	5.40%	4.98%	6.28%	2030	4.98%	4.98%
2031	4.97%	4.97%	6.03%	2031	4.97%	4.97%
2032	4.97%	4.97%	5.78%	2032	4.97%	4.97%
2033	4.63%	4.63%	5.53%	2033	4.63%	4.63%
2034	4.46%	4.46%	5.28%	2034	4.45%	4.46%
2035	4.35%	4.35%	5.03%	2035	4.35%	4.35%
2036	4.28%	4.28%	4.78%	2036	4.28%	4.28%
2037	4.23%	4.23%	4.53%	2037	4.23%	4.23%
2038	4.20%	4.20%	4.28%	2038	4.19%	4.20%
2039	4.17%	4.17%	4.03%	2039	4.17%	4.17%
2040	4.14%	4.14%	3.78%	2040	4.14%	4.14%
2041	4.04%	4.04%	3.60%	2041	4.04%	4.04%
2042+	3.94%	3.94%	3.60%	2042+	3.94%	3.94%

#### 9. Changes Since the Last Valuation

The discount rate decreased from 2.12% to 2.06% as of January 1, 2021. The price inflation assumption increased from 2.25% to 2.50%. The per person health care cost trends rates were updated to reflect the current marketplace.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

### **Demographic Assumptions**

#### 1. Retirement Rates

	Retirement Assumptions							
	<u>Union</u>							
	Male	Male	Female	Female				
Age	< 20 yos	20+ yos	< 20 yos	20+ yos	Non-Union			
55	3.00%	4.00%	4.00%	6.00%	2.00%			
56	3.00%	4.00%	6.00%	6.00%	2.00%			
57	3.00%	7.50%	8.00%	8.00%	2.00%			
58	4.00%	15.00%	15.00%	20.00%	7.00%			
59	6.00%	7.00%	15.00%	15.00%	7.00%			
60	8.00%	11.00%	15.00%	15.00%	7.00%			
61	10.00%	15.00%	25.00%	25.00%	15.00%			
62	20.00%	35.00%	35.00%	35.00%	35.00%			
63	17.50%	20.00%	25.00%	25.00%	30.00%			
64	22.50%	25.00%	20.00%	25.00%	30.00%			
65	27.50%	30.00%	35.00%	35.00%	30.00%			
66	35.00%	35.00%	40.00%	40.00%	30.00%			
67	35.00%	35.00%	40.00%	40.00%	100.00%			
68	35.00%	35.00%	40.00%	40.00%	100.00%			
69	35.00%	35.00%	40.00%	40.00%	100.00%			
70 +	100.00%	100.00%	100.00%	100.00%	100.00%			

#### 2. Rates of Termination/Withdrawal

	<b>Termination Assumptions</b>					
	Uı	nion	Non-	Union		
Service	Male	Female	Male	Female		
0	2.00%	3.00%	12.00%	12.00%		
1 - 2	2.00%	3.00%	12.00%	12.00%		
3 - 4	2.00%	3.00%	9.00%	9.00%		
5 - 6	2.00%	3.00%	5.00%	5.00%		
7 - 9	2.00%	3.00%	3.50%	3.50%		
10	5.00%	5.00%	3.50%	3.50%		
11	3.50%	3.50%	2.50%	2.50%		
12	3.00%	3.00%	2.50%	2.50%		
13	2.50%	2.75%	2.50%	2.50%		
14	2.25%	2.60%	2.50%	2.50%		
15	2.00%	2.50%	2.50%	2.50%		
16	1.90%	2.40%	1.00%	1.00%		
17	1.80%	2.30%	1.00%	1.00%		
18	1.70%	2.20%	1.00%	1.00%		
19	1.60%	2.10%	1.00%	1.00%		
20 +	1.50%	2.00%	1.00%	1.00%		



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### 3. Rates of Mortality

Union Employees

Employee Mortality: 2016 Cheiron ATU employee mortality table with generational

projection using SOA Scale MP-2020.

Healthy Retiree Mortality: 2016 Cheiron ATU retiree mortality table with generational

projection using SOA Scale MP-2020.

Disabled Mortality: 2016 Cheiron ATU disabled mortality table with generational

projection using SOA Scale MP-2020.

Non-Union Employees

*Employee Mortality:* None.

Healthy Retiree Mortality: PubG-2010(A) Healthy Retiree projected fully generational with

SOA Scale MP-2019.

Disabled Mortality: PubG-2010(A) Healthy Retiree projected fully generational with

SOA Scale MP-2019.

#### 4. Disability Rates

Sample rates of disability for Union employees are shown in the following table.

Disabil	ity Assumption	ns - Union E	mployees
	Disability		Disability
Age	Rate	Age	Rate
20	0.10%	45	0.57%
25	0.14%	50	0.85%
30	0.21%	55	1.47%
35	0.30%	60	2.17%
40	0.41%	62 +	0.00%

No disability was assumed for Non-Union employees.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### 5. Percent of Retirees Electing Coverage

All active union members are assumed to elect coverage at retirement. All active non-union members hired before May 1, 2009, and 50% of active non-union members hired on or after May 1, 2009, are assumed to elect coverage at retirement.

Non-union members hired on or after May 1, 2009 are assumed to decline renewal of coverage after retirement at a rate of 3% per year.

#### 6. Medical and Dental Plan Elections

Below is a summary of medical plan election rates for future union retirees by Medicare status.

Medical Plan Elections for Future Union Retirees							
Plan	Pre-Medicare	Plan	Medicare Eligible				
Kaiser	48%	Kaiser	44%				
Regence HSA	7%	UHC	54%				
Regence PPO	45%	Stipend	2%				

Below is a summary of medical plan election rates for future non-union retirees by Medicare status.

Medical Plan Elections for Future Non Union Retirees										
Plan	Pre-Medicare	Medicare Eligible								
Kaiser	30%	30%								
UHC	0%	70%								
Regence PPO	70%	0%								

Below is a summary of dental plan election rates for future union and non-union retirees.

Dental Elections for Future Retirees								
Gender	Union	Non-Union						
Moda	80%	95%						
Kaiser	20%	5%						

These weights were used to blend premium and claims cost for pre-Medicare medical plan, Medicare plan, and dental plan.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### 7. Spousal Coverage:

The table below shows the percentage of future retirees who are assumed to elect to cover a spouse at retirement.

Retiree Gender	Union	Non-Union Tier 2	Non-Union Tier 3
Male	65%	79%	70%
Female	30%	56%	35%

#### 8. Dependent Age:

For current retirees, the actual spouse date of birth was used when available.

- For future union retirees, male retirees are assumed to be three years older than their partner, and female retirees are assumed to be two years younger than their partner.
- For future non-union retirees, male retirees are assumed to be two years older than their partner, and female retirees are assumed to be two years younger than their partner.

#### 9. Administrative Expenses

Administrative expenses for the Trust and operation of the OPEB plan are assumed to be \$0.

#### 10. Changes Since the Last Valuation

Union member mortality was updated to the 2016 Cheiron ATU mortality tables projected generationally using SOA scale MP-2020.

#### 11. New Entrant Assumptions

The following new entrant assumptions were used for the projections shown in the Executive Summary.

- Union: The new entrant profile consists of 10 equally weighted individuals based on actual recent new entrants. The individuals range in age from 26 to 51 with an average age of 40 and 60% of the individuals are male.
- Non-Union: The new entrant profile consists of 10 equally weighted individuals based on actual recent new entrants. The individuals range in age from 26 to 51 with an average age of 40 and 50% of the individuals are male



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### Claim and Expense Assumptions

Different methods are used to develop the claims and expense assumptions for the self-insured plans and the fully insured plans.

Self-Insured Plans: The claims costs were developed based on actual medical, prescription drug, and dental claims paid from January 1, 2018 to December 31, 2020. The claims analysis combined plans offered to Union Retirees (Regence PPO plans, Regence HSA plan, and Regence Closed Retiree plan for medical and prescription drug, and Moda dental). As well, 85% of enrollees and claims paid from the Regence / Moda Open Retiree plan were assumed to be of Union Retirees, since separate Union and Non-Union claims data was not available for these plans. An adjustment is made to the claims to account for the children of retirees and 2021 contractual administrative expenses are added. The resulting per person per month (PPPM) cost is then adjusted using age curves. Claims were brought forward to January 1, 2022 based on actual premium increases for calendar year 2021.

Fully Insured Plans: The claims costs are based on the fully insured Kaiser premiums charged to TriMet in 2022. For pre-Medicare retirees, this is solely based on Kaiser's medical/dental plans. An adjustment is made to the premiums to account for the children of retirees. For Medicare retirees, the premiums of Kaiser Senior Advantage and United Healthcare's plan were blended based on enrollment data for the 2022 calendar year for eligible members. The resulting per person per month (PPPM) costs are then adjusted using age curves.

#### 1. Average Annual Claims and Expense Assumptions

The following claims costs were developed based on actuarial experience paid from January 1, 2018 to December 31, 2020 for the self-insured plans, and based on the premiums in effect on January 1, 2022 for the fully-insured plans.

#### **Union Members**

	Regence Medical		Kaiser Medical		<b>Moda Dental</b>			<b>Kaiser Dental</b>				
Age	Male	Female	Male	Female	N	<b>Iale</b>	Fe	male	M	lale	Fe	male
40	\$ 7,266	\$10,397	\$ 7,860	\$11,248	\$	620	\$	709	\$	551	\$	631
45	8,864	11,282	9,589	12,205		688		774		612		689
50	10,947	12,913	11,842	13,970		791		855		703		761
55	13,813	15,200	14,943	16,443		909		936		809		833
60	17,858	17,380	19,320	18,802		996		990		886		880
64	22,272	18,088	24,094	19,568		1,049		1,020		933		907



APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

	Kaiser Medicare		UHC M	<u> Iedicare</u>	Moda	<b>Dental</b>	<b>Kaiser Dental</b>		
Age	Male	Female	Male Female		Male	Female	Male	Female	
65	\$ 4,434	\$ 3,911	\$ 1,777	\$ 1,568	\$ 1,068	\$ 1,032	\$ 950	\$ 918	
70	4,708	3,988	1,887	1,599	1,135	1,070	1,010	952	
75	5,411	4,485	2,169	1,798	1,009	956	898	850	
80	6,145	5,086	2,463	2,039	884	841	786	748	
85	6,636	5,558	2,660	2,228	758	726	674	646	
90	6,741	5,750	2,702	2,305	633	611	563	544	

#### Non-Union Members

	Regence Medical		Kaiser Medical		Moda	Dental	<b>Kaiser Dental</b>		
Age	Male	Female	Male	Female	Male	Female	Male	Female	
40	\$ 6,048	\$ 8,654	\$ 6,413	\$ 9,177	\$ 646	\$ 740	\$ 740	\$ 847	
45	7,378	9,391	7,824	9,958	717	807	821	924	
50	9,112	10,749	9,662	11,398	825	892	944	1,021	
55	11,498	12,652	12,192	13,417	948	976	1,086	1,118	
60	14,865	14,467	15,763	15,341	1,039	1,032	1,190	1,182	
64	18,539	15,057	19,659	15,966	1,094	1,064	1,253	1,218	

	Kaiser Medicare		UHC M	<u> Iedicare</u>	Moda	<b>Dental</b>	<b>Kaiser Dental</b>		
Age	Male	Female	Male	Female	Male	Female	Male	Female	
65	\$ 4,434	\$ 3,911	\$ 1,777	\$ 1,568	\$ 1,106	\$ 1,069	\$ 1,266	\$ 1,224	
70	4,708	3,988	1,887	1,599	1,175	1,108	1,345	1,269	
75	5,411	4,485	2,169	1,798	1,045	989	1,197	1,133	
80	6,145	5,086	2,463	2,039	915	871	1,048	997	
85	6,636	5,558	2,660	2,228	785	752	899	861	
90	6,741	5,750	2,702	2,305	655	633	750	725	

Health plan administrative expenses are included in the average monthly premiums. For Union Regence plans, we assumed \$25.40 per member per month, for Non-Union Regence plans, we assumed \$23.70 per member per month and for Moda dental plans, we assumed \$2.95 per member per month.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### 2. Average Annual Premium Assumptions

The following table shows the blended premium for pre-Medicare medical, Medicare, and dental plans. We used the composite premium (per-employee-per-month) for each plan and weighted based on TriMet retirees' enrollment.

Union Plans	Empl Ret	oyee/ iree	\$ Spouse	Weights Used for Blending
Medical	\$ 1,0	77.64	\$ 1,077.64	PPO 90 / PPO 80 / HSA / Kaiser: 20% / 25% / 7% / 48%
Dental	\$	68.67	\$ 68.67	80% / 20% for all
Medicare	\$ 2	276.14	\$ 276.14	Kaiser / UHC / Stipend: 44% / 54% / 2%

Non Union Plans	Non Union Employee/ Plans Retiree Spouse		pouse	Weights Used for Blending	
Medical	\$	887.84	\$	887.84	PPO 80 / HSA / Kaiser: 70% / 0% / 30%
Dental	\$	77.91	\$	77.91	95% / 5% for all
Medicare	\$	236.30	\$	236.30	Kaiser / UHC: 30% / 70%

#### 3. Medicare Part D Subsidy

Per GASB guidance, the Part D Subsidy has not been reflected in this valuation.

#### 4. Medicare Stipend

Tier	Stipend
Tier 3 Retiree	\$800.00
Tier 2 Retiree	\$499.12
Tier 2 Surviving Spouse	\$491.65

#### 5. Medicare Part B

All Union Medicare eligible retirees in Tier 1 and 2 are assumed to participate in Medicare Part B and receive monthly premium reimbursement.

#### 6. Medicare Eligibility

All retirees who turn age 65 are assumed to be eligible for Medicare.

#### 7. Geography

Implicitly assumed to remain the same as current retirees.



#### APPENDIX B – ACTUARIAL ASSUMPTIONS AND METHODS

#### 8. Changes Since the Last Valuation

There was no change to the claims costs process. The claim costs were updated to reflect the most recent premiums. Health plan administrative expenses were updated to reflect the current market experience. The blended percentages for the average annual premiums for the pre-Medicare Union plan were updated based on current enrollment.

#### **Contribution Allocation Procedure**

Contributions to the Plan are made on a pay-as-you-go basis.

Pursuant to GASB 75, the Entry Age Actuarial Cost Method is used, and assumption changes and experience gains and losses are recognized over the average future working life of Plan participants. For this valuation, the average future working life is seven years.



#### APPENDIX C – SUMMARY OF PLAN PROVISIONS

#### **Summary of Key Substantive Plan Provisions – Union Members**

Eligibility: Retirees who were employees immediately prior to retirement after attaining age

55 and 10 years of continuous service or who became disabled after 10 years of

continuous service are eligible for the benefit.

#### **Healthcare Benefit:**

#### Tier 1 – Retirees who retired prior to February 1, 1992

Medical, prescription drug, and dental benefits are provided to all covered retirees, spouses, and domestic partners. Dependents receive all benefits except for dental. Retirees also are reimbursed for Medicare Part B premiums.

Benefits are payable over the life of the retiree and spouse or domestic partner while both are alive. Following the retiree's death, benefits continue to the surviving spouse or domestic partner until the earlier of the survivor's death or 16 years after the retiree's death.

Retirees and their dependents under age 65 may continue to receive the same healthcare coverage received prior to retirement, subject to plan changes made by insurers from time to time.

# Tier 2 – Retirees who retire on or after February 1, 1992 and were hired on or before October 24, 2014

Medical, prescription drug, and dental benefits are provided to all covered retirees, spouses, and domestic partners until the age of 65. Dependents receive all benefits except for dental.

Benefits are payable over the life of the retiree and spouse or domestic partner while both are alive. Following the retiree's death, benefits continue to the surviving spouse or domestic partner until the earlier of the survivor's death or 16 years after the retiree's death.

Upon attaining Medicare eligibility, retirees and dependents may enroll in a Medicare Advantage plan and dental plan or elect to receive a monthly stipend. But he/she must maintain Medicare Parts A & B. Once the stipend option is selected, the retiree may not opt back to the Medicare Advantage plan and dental plan option. Retirees who maintain Medicare Part B are reimbursed for the premiums.



#### APPENDIX C – SUMMARY OF PLAN PROVISIONS

Retirees and their dependents under age 65 may continue to receive the same healthcare coverage received prior to retirement. Retirees under age 65 and are non-Medicare eligible, and who do not elect a stipend, will pay a monthly contribution according to the schedule shown in the previous section.

#### Tier 3 – Retirees hired on or after October 25, 2014

A monthly stipend is provided to retirees until the age of 65. Retiree health benefits cease when the employee turns 65. There are no benefits for the spouse, domestic partner, or dependents.

#### **Retiree Contributions**

Tier 1 retirees do not contribute to coverage. Tier 2 retirees who are not Medicare eligible and do not elect the stipend option to contribute according to the following schedule:

Union Plans	Premium Contribution
Regence 90/10	Retirees pay the difference between Regence 90/10 premium and TriMet's employer contribution for the Regence PPO 80/20
Regence 80/20	Retirees pay 5% of the premium cost
Regence HSA	Retirees receive HSA deposit from TriMet equal to the difference between the HSA premium and TriMet's employer contribution for the Regence PPO 80/20
All other Medical and Dental	Retirees pay 5% of the premium cost

#### **Life Insurance Benefits:**

Eligible retirees in all tiers are provided a \$10,000 whole life insurance fully paid by TriMet.



#### APPENDIX C – SUMMARY OF PLAN PROVISIONS

#### **Summary of 2022 Benefit Plans:**

TriMet Medical Plan - Union										
Plan	Regence PPO 90/10	Regence PPO 80/20	Regence HSA	Kaiser HMO						
In-Network (INN) Benefits										
Deductible (Individual / Family)	\$150 / \$450	\$300 / \$900	\$1,500 / \$3,000	None						
Coinsurance	90%	80%	80%	100%						
Out-of-Pocket Max (Individual / Family)	\$1,650 / \$4,950	\$2,300 / \$6,900	\$5,000 / \$10,000 <sup>1</sup>	\$600 / \$1,200						
Coverages										
Preventive Care	Fully Covered	Fully Covered	Fully Covered	Fully Covered						
Well Woman (Mamm / Annual GYN / Pap)	Fully Covered	Fully Covered	Fully Covered	Fully Covered						
Office Visit (OV)-Primary Care (PCP)	Deduct + Coinsurance	Deduct + Coinsurance	Deduct + Coinsurance	\$10 Copay						
OV - Specialist Care Provider (SCP)	Deduct + Coinsurance	Deduct + Coinsurance	Deduct + Coinsurance	\$10 Copay						
Hospital Emergency Room (ER)	\$50 Copay <sup>2</sup>	\$50 Copay <sup>2</sup>	Deduct + Coinsurance	\$100 Copay <sup>2</sup>						
Ambulance	Fully Covered up to 500 Miles	\$50 Copay; 500 Mile annual limit	Deduct + Coinsurance	\$75 Copay						
Outpatient Surgery	Deduct + Coinsurance	Deduct + Coinsurance	Deduct + Coinsurance	\$20 Copay						
Hospital Inpatient	Deduct + Coinsurance	Deduct + Coinsurance	Deduct + Coinsurance	\$50 Copay/day, up to \$250/admission						
Lifetime Max	No Limit	No Limit	No Limit	No Limit						
Out-of-Network (OON) Benefits										
Deductible (Individual / Family)	\$450 / \$1,350	\$900 / \$2,700	Combined with INN							
Coinsurance	70%	60%	60%							
Office Visits (PCP) & (SCP)	Deduct + Coinsurance	Deduct + Coinsurance	Deduct + Coinsurance							
Out-of-Pocket Max (Individual / Family)	\$3,450 / \$10,350	\$4,900 / \$14,700	Combined with INN							
Lifetime Max	No Limit	No Limit	No Limit							
Prescription Drugs										
Out-of-Pocket Max (Individual / Family)	\$1,000 / \$3,000	\$2,000 / \$5,000	Combined with Medical	N/A						
Retail (30 Days)	20% with \$5 min / 20% with \$15 min / 50% <sup>3</sup>	\$10 / 20% with \$25 min / 50% <sup>3</sup>	Deduct + Coinsurance <sup>3</sup>	\$10 Copay						
Mail Order (90 Days)	20% with \$5 min / 20% with \$15 min / 50% <sup>3</sup>	\$10 / 20% with \$25 min / 50% <sup>3</sup>	Deduct + Coinsurance <sup>3</sup>	\$20 Copay						
Mental Health and Substance Abuse										
Mental Health and Substance Abuse Inpatient	Deduct + Coinsurance	Deduct + Coinsurance	Deduct + Coinsurance	\$50 Copay/day, up to						
Mental Health and Substance Abuse Outpatient	Coinsurance only (no Deduct)	Coinsurance only (no Deduct)	Deduct + Coinsurance Deduct + Coinsurance	\$250/admission \$10 Copay						
Vision Care Services	Comsulance only (no Deduct)	Comstraince only (no Deduct)	Deduct + Comsulance	ф10 Copay						
<u>vision Care Services</u> Exam	Fully Covered	\$10 Copay	Fully Covered	\$10 Copay						
	rully Covered		_	Up to \$150 allowance every two						
Frames / Lens	Hardware: Up to \$200 allowance	Hardware: Up to \$200 allowance	Hardware: Up to \$200 allowance	calendar years <sup>4</sup>						

<sup>&</sup>lt;sup>1</sup> For the family out-of-pocket maximum, an individual's out-of pocket expenses won't exceed \$6,850 (2021)



<sup>&</sup>lt;sup>2</sup> Copay waived if admitted

<sup>3</sup> No deductible for preferred brand-name insulin or preventive medications; coinsurance for preferred brand-name insulin not to exceed \$100 for retail and \$300 for mail

<sup>&</sup>lt;sup>4</sup> If you are age 18 years or younger, there is no charge for one pair of standard frames and lenses (or contact lenses) every 12 months

### APPENDIX C – SUMMARY OF PLAN PROVISIONS

TriMet Medicare Plans - Union					
Plan	United Healthcare	Kaiser Senior Advantage			
In-Network (INN) Benefits	In- / Out-of-Network	In-Network Only			
Deductible	None	None			
Coinsurance	N/A	N/A			
Out-of-Pocket Max	\$1,500	\$600 / \$1200			
Coverages					
Preventive Care	Fully Covered	Fully Covered			
Office Visit (OV)-Primary Care (PCP)	\$10 Copay	\$10 Copay			
OV - Specialist Care Provider (SCP)	\$20 Copay	\$10 Copay			
Hospital Emergency Room (ER)	\$65 Copay <sup>1</sup>	\$100 Copay <sup>1</sup>			
Outpatient Surgery	\$100 Copay	\$20 Copay			
Hospital Inpatient	\$250 Copay	\$50 Copay/day, up to \$250/admission			
Prescription Drugs					
Out-of-Pocket Max	None	None			
Retail (30 Days)	\$10 / \$25 / 50% up to \$95 / 33% up to \$95	\$10 Copay			
Mail Order (90 Days)	\$30 / \$75 / 50% up to \$95 / 33% up to \$95	\$20 Copay			
Vision Care Services					
Exam	\$20 Copay every 12 months	\$10 Copay			
Frames / Lens	Up to \$130 allowance (\$175 for contacts) every 2 years	Up to \$150 allowance every 2 years			

<sup>&</sup>lt;sup>1</sup> Copay waived if admitted



#### APPENDIX C – SUMMARY OF PLAN PROVISIONS

#### **Summary of Key Substantive Plan Provisions – Non-Union Members**

**Eligibility:** Retirees who were employees immediately prior to retirement are eligible for OPEB benefit if the following requirements are met:

Tier 1 (hired prior to April 27, 2003): Age 55 and 5 years of credited service as a Non-Union employee

Tier 2 (hired on or after April 2017, 2003 and before May 1, 2009): Age 55 and 10 years of credited service as a Non-Union employee

Tier 3 (hired on or after May 1, 2009): Age 62 and 3 years of credited service as a Non-Union employee

#### **Healthcare Benefit:**

Medical, prescription drug, dental, and vision benefits are provided to all covered retirees, spouses, and domestic partners. Dependents receive all benefits.

Benefits are payable over the life of the retiree and spouse or domestic partner while both are alive. Following the retiree's death, benefits continue to the surviving spouse or domestic partner, and qualified dependent(s) until the earlier of the survivor's death or 10 years after the retiree's death.

Retirees and their dependents under age 65 and non-Medicare eligible may continue to receive the same healthcare coverage received prior to retirement. Upon Medicare eligibility, retirees must enroll in a Medicare Advantage plan.

Retiree health benefits cease for Tier 3 retirees when the employee becomes Medicare eligible

#### **Retiree Contributions**

Retirees pay a portion of the health care premium according to the following schedule:

	Premium
Non-Union Tiers	Contribution
Grandfathered (retired prior to January 1, 1988)	0%
Tier 1 and Tier 2 (hired before May 1, 2009)	
Full Time	6%
Part Time (over 30 hours / week)	6%
Part Time (less than 30 hours / week)	25%
Tier 3	100%



#### APPENDIX C – SUMMARY OF PLAN PROVISIONS

#### **Life Insurance Benefits:**

Grandfathered retirees and eligible retirees in Tiers 1 and 2 are provided a \$10,000 whole life insurance fully paid by TriMet.

#### **Summary of 2022 Benefit Plans:**

TriMet Medical Plan - Non Union					
Plan	Regence PPO 80/20	Regence HSA	Kaiser HMO		
In-Network (INN) Benefits					
Deductible (Individual / Family)	\$300 / \$900	\$1,500 / \$3,000	None		
Coinsurance	80%	80%	100%		
Out-of-Pocket Max (Individual / Family)	\$2,300 / \$6,900	\$5,000 / \$10,000 <sup>1</sup>	\$600, \$1,200		
Coverages					
Preventive Care	Fully Covered	Fully Covered	Fully Covered		
Well Woman (Mamm / Annual GYN / Pap)	Fully Covered	Fully Covered	Fully Covered		
Office Visit (OV)-Primary Care (PCP)	Deduct + Coinsurance	Deduct + Coinsurance	\$10 Copay		
OV - Specialist Care Provider (SCP)	Deduct + Coinsurance	Deduct + Coinsurance	\$10 Copay		
Hospital Emergency Room (ER)	\$50 Copay <sup>2</sup>	Deduct + Coinsurance	\$100 Copay <sup>2</sup>		
Ambulance	\$50 Copay; 500 Mile annual limit	Deduct + Coinsurance	\$75 Copay		
Outpatient Surgery	Deduct + Coinsurance	Deduct + Coinsurance	\$20 Copay		
Hospital Inpatient	Deduct + Coinsurance	Deduct + Coinsurance	\$50 Copay/day, up to \$250/admission		
Lifetime Max	No Limit	No Limit	No Limit		
Out-of-Network (OON) Benefits					
Deductible (Individual / Family)	\$900 / \$2,700	Combined with INN			
Coinsurance	60%	60%			
Office Visits (PCP) & (SCP)	Deduct + Coinsurance	Deduct + Coinsurance			
Out-of-Pocket Max (Individual / Family)	\$4,900 / \$14,700	Combined with INN			
Lifetime Max	No Limit	No Limit			
Prescription Drugs					
Out-of-Pocket Max (Individual / Family)	\$2,000 / \$5,000	Combined with Medical	N/A		
Retail (30 Days)	\$10 / 20% with \$25 min / 50% <sup>3</sup>	Deduct + Coinsurance <sup>3</sup>	\$10 Copay		
Mail Order (90 Days)	\$10 / 20% with \$25 min / 50% <sup>3</sup>	Deduct + Coinsurance <sup>3</sup>	\$20 Copay		
Mental Health and Substance Abuse					
Mental Health and Substance Abuse Inpatient	Deduct + Coinsurance	Deduct + Coinsurance	\$50 Copay/day, up to \$250/admission		
Mental Health and Substance Abuse Outpatient	Coinsurance only (no Deduct)	Deduct + Coinsurance	\$10 Copay		
Vision Care Services	,				
Exam	Fully Covered	Fully Covered	\$10 Copay		
Frames / Lens	Up to \$200 allowance every 24 months	Up to \$200 allowance every 24 months	Up to \$150 allowance every two		

<sup>&</sup>lt;sup>1</sup> For the family out-of-pocket maximum, an individiual's out-of pocket expenses won't exceed \$6,850 (2021)



<sup>&</sup>lt;sup>2</sup> Copay waived if admitted

<sup>&</sup>lt;sup>3</sup> No deductible for preferred brand-name insulin or preventive medications; coinsurance for preferred brand-name insulin not to exceed \$100 for retail and \$300 for mail

<sup>&</sup>lt;sup>4</sup> If you are age 18 years or younger, there is no charge for one pair of standard frames and lenses (or contact lenses) every 12 months

#### APPENDIX C – SUMMARY OF PLAN PROVISIONS

TriMet Medicare Plans - Non Union					
Plan	United Healthcare	Kaiser Senior Advantage			
In-Network (INN) Benefits	In- / Out-of-Network	In-Network Only			
Deductible	None	None			
Coinsurance	N/A	N/A			
Out-of-Pocket Max	\$1,500	\$600			
Coverages					
Preventive Care	Fully Covered	Fully Covered			
Office Visit (OV)-Primary Care (PCP)	\$10 Copay	\$10 Copay			
OV - Specialist Care Provider (SCP)	\$20 Copay	\$10 Copay			
Hospital Emergency Room (ER)	\$65 Copay <sup>1</sup>	\$50 Copay <sup>1</sup>			
Outpatient Surgery	\$100 Copay	\$20 Copay			
Hospital Inpatient	\$250 Copay	\$50 Copay/day, up to \$250/admission			
Prescription Drugs					
Out-of-Pocket Max	None	None			
Retail (30 Days)	\$10 / \$25 / 50% up to \$95 / 33% up to \$95	\$10 Copay			
Mail Order (90 Days)	\$30 / \$75 / 50% up to \$95 / 33% up to \$95	\$20 Copay			
Vision Care Services					
Exam	\$20 Copay every 12 months	\$10 Copay			
Frames / Lens	Up to \$130 allowance (\$175 for contacts) every 2 years	Up to \$150 allowance			

<sup>&</sup>lt;sup>1</sup> Copay waived if admitted



#### APPENDIX D – GLOSSARY OF TERMS

#### 1. Actuarially Determined Contribution

A target or recommended contribution for the reporting period, determined in conformity with Actuarial Standards of Practice based on the most recent measurement available when the contribution for the reporting period was adopted.

#### 2. Actuarial Valuation Date

The date as of which an actuarial valuation is performed. This date may be up to 24 months prior to the measurement date and up to 30 months prior to the employer's reporting date.

#### 3. Deferred Inflow of Resources

An acquisition of net assets by a government employer that is applicable to a future reporting period. In the context of GASB 75, these are experience gains on the Total OPEB Liability, assumption changes reducing the Total OPEB Liability, or investment gains that are recognized in future reporting periods.

#### 4. Deferred Outflow of Resources

A consumption of net assets by a government employer that is applicable to a future reporting period. In the context of GASB 75, these are experience losses on the Total OPEB Liability, assumption changes increasing the Total OPEB Liability or investment losses that are recognized in future reporting periods.

#### 5. Entry Age Actuarial Cost Method

The actuarial cost method required for GASB 74 and 75 calculations. Under this method, the actuarial present value of the projected benefits of each individual included in an actuarial valuation is allocated on a level basis over the earnings of the individual between entry age and assumed exit ages. The portion of this actuarial present value allocated to a valuation year is called the service cost. The portion of this actuarial present value not provided for at a valuation date by the actuarial present value of future service costs is called the Total OPEB Liability.

#### 6. Measurement Date

The date as of which the Total OPEB Liability and plan fiduciary net position are measured. The Total OPEB Liability may be projected from the actuarial valuation date to the measurement date. The measurement date must be the same as the reporting date for the plan.



#### APPENDIX D – GLOSSARY OF TERMS

#### 7. Net OPEB Liability

The liability of employers and nonemployer contributing entities for employees for benefits provided through a defined benefit OPEB plan. It is calculated as the Total OPEB Liability less the plan fiduciary net position.

#### 8. Plan Fiduciary Net Position

The fair or Market Value of Assets.

#### 9. Reporting Date

The last day of the plan or employer's fiscal year.

#### 10. Service Cost

The portion of the actuarial present value of projected benefit payments that is attributed to the current period of employee service in conformity with the requirements of GASB 74 and 75. The service cost is the normal cost calculated under the Entry Age Actuarial Cost Method.

#### 11. Total OPEB Liability

The portion of the actuarial present value of projected benefit payments that is attributed to past periods of employee service in conformity with the requirements of GASB 74 and 75. The Total OPEB Liability is the Actuarial Liability calculated under the Entry Age Actuarial Cost Method.





Classic Values, Innovative Advice