OP&F’s Pre-Retirement Seminars are scheduled for Aug. 9-23 at six locations around the state. The seminars are earlier than normal this year due to special retiree health care meetings which will be in September (see Page 3).

The Pre-Retirement Seminars are designed to assist members who are approaching retirement eligibility or considering enrolling in the Deferred Retirement Option Plan (DROP). Active members who are eligible for retirement or DROP within the next five years will be mailed an invitation with additional seminar information. Members may also go online to RSVP to the seminars at www.op-f.org.

In addition to information on benefits and the retirement process, representatives from OP&F’s health care partner, Aon, will attend the Pre-Retirement Seminars to answer questions.

**PRE-RETIREMENT SEMINAR DATES SET FOR AUGUST THIS YEAR**

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MESSAGE FROM THE EXECUTIVE DIRECTOR

Dear Members,

We realize that changes like the health care plan transition that will take effect Jan. 1, 2019, causes a great deal of anxiety. We sincerely apologize for that. However, as you have read in the pages on this newsletter in recent years, we had no choice but to make changes to how we support a retiree health care plan. It is our goal that this new plan will extend our health care funding to 15 years and still provide our retirees and eligible dependents with valuable resources to select a health care plan best fitting their needs.

As we approach the transition date, we want to make sure you have all the information you want to make informed decisions and put the stipend OP&F is providing to the best use. Our health care partner, Aon, has launched a website dedicated to OP&F retirees and also has a dedicated toll-free phone number to answer your questions. Retirees and active OP&F members who are approaching retirement all should have received information in the mail outlining the new OP&F health care plan model. Please pay attention to items in the mail from Aon. They will be co-branded with the OP&F logo.

Additional mailings will be coming in September and again later in the year. Aon and OP&F will host meetings around Ohio in September that will explain the plan and your choices. Most importantly, retirees will have individual calls with trained Aon representatives who will take all the time needed to review your health care options and assist in enrolling in a plan for 2019.

Of course, OP&F will also be here. Our regular Pre-Retirement Seminars have been moved to August this year and in addition to reviewing your pension benefits, an Aon representative will attend each seminar and be available to answer questions.

We are working to provide additional resources for members to learn and ask about our health care plan changes. You are not alone in these important changes and the decisions you will make. Thank you for your understanding throughout this process.

Sincerely,

John J. Gallagher, Jr.
Executive Director

OP&F’s Investment Portfolio Value

As of May 31 ......................... $15.65 billion (estimated)
End of April value ......................... $15.62 billion
End of March value ......................... $15.50 billion
RETIREE HEALTH CARE MEETINGS SCHEDULED FOR SEPTEMBER

Join the Aon Retiree Health Exchange in person or online to learn more about individual and family health care plan options available with the new OP&F retiree health care plan model. Information will be available about your OP&F stipend, how to verify your personal Aon Retiree Health Exchange account, when to make decisions and how to enroll.

If you live nearby, plan to attend one of the seminars listed below. Please reserve your seat in advance. Please RSVP online at myexchangeconnection.com/OP-F (a link to this page is available at op-f.org) or call 844-290-3674 (TTY 711), Monday through Friday, 8 a.m.–9 p.m. Eastern Time. Each meeting will include information applicable to both Medicare-eligible and Pre-Medicare retirees.

**DAYTON**
- **SEPT 10th**
  - Monday, Sept. 10
  - 10 a.m.-12 p.m. and 1 p.m.-3 p.m.
  - Hilton Garden Inn Beavercreek, 3520 Pentagon Park Blvd., Dayton

**CINCINNATI**
- **SEPT 11th**
  - Tuesday, Sept. 11
  - 10 a.m.-12 p.m. and 1 p.m.-3 p.m.
  - Hilton Garden Inn
  - 5300 Cornell Road, Blue Ash

**COLUMBUS**
- **SEPT 12th & 13th**
  - Wednesday, Sept. 12 and Thursday Sept. 13
  - 10 a.m.-12 p.m. and 1 p.m.-3 p.m. each day
  - Sheraton Columbus Capitol Square, 75 E. State Street, Columbus

**AKRON**
- **SEPT 18th**
  - Tuesday Sept. 18
  - 10 a.m.-12 p.m. and 1 p.m.-3 p.m.
  - John S. Knight Center, 77 E. Mill St., Akron

**CLEVELAND**
- **SEPT 19th & 20th**
  - Wednesday Sept. 19 and Thursday, Sept. 20
  - 10 a.m.-12 p.m. and 1 p.m.-3 p.m. each day
  - Public Auditorium, Little Theatre, 500 Lakeside Ave., Cleveland

**TOLEDO/FINDLAY**
- **SEPT 21st**
  - Friday, Sept. 21
  - 10 a.m.-12 p.m. and 1 p.m.-3 p.m.
  - Hilton Garden Inn Findlay, 1050 Interstate Dr., Findlay

CONTINUED ON PAGE 7
Both the Ohio Senate and House of Representatives have introduced bills that would increase the benefits received by survivors of law enforcement officers and firefighters killed in the line of duty.

Changes to the administration of the Ohio Public Safety Officers Death Benefit Fund by Senate Bill 296 were introduced May 10 by Senator Frank LaRose and Senator Jay Hottinger. The House version (HB 621) was introduced May 15 by Rep. Jim Hughes. The changes would include:

• Extending payment of the initial death benefit to the date the officer would have been eligible to retire with the maximum age and service pension, instead of the date the officer would first have been eligible to retire;

• Increasing the transitional benefit paid after the officer’s maximum pension eligibility date to 75 percent of the officer’s salary, rather than 50 percent; and

• Eliminating a requirement that the death benefit amount be reduced by any survivor benefits payable by the officer’s retirement system.

If passed as written the bills would permit Death Benefit Fund recipients to elect to participate in any health care plan that the Ohio Department of Administrative Services (DAS) contracts for or provides for state employees. The survivor would be responsible for paying the same rate for the health care plan as the state employee enrolled in that plan.

Senator Sherrod Brown of Ohio is urging the U.S. House of Representatives to approve a bill that would create a voluntary database of firefighters across the country who are diagnosed with cancer. The bill, HR 931, was passed in May by the Senate.

It is hoped that by collecting data on firefighters, health officials can determine how to reduce or prevent cancer rates among firefighters.

The bill would require the Centers for Disease Control and Prevention to develop and maintain the registry. The House passed a similar bill last year, but minor changes made means that the House must approve the amended version.

Brown co-sponsored the bill with Republican Lisa Murkowski of Alaska. The House of Representatives also had its version of the bill and it was co-sponsored by Rep. Steve Stivers and Rep. Jim Renacci of Ohio, among others.
The stipend-based health care model OP&F is implementing Jan. 1, 2019 will be a change in how eligible retirees select and pay for their health care. The stipend amount a member is eligible for will be deposited annually in a Health Reimbursement Account (HRA). The process of paying for your coverage and being reimbursed is explained below. Please remember that the stipend amount deposited into an HRA may not cover all your health care premiums, copays and deductibles. Retirees must be aware of the balance of their HRA as the year progresses.

The HRA reimbursement process is two-fold. The OP&F retiree always needs to pay the premium directly to the insurance carrier, and then they will be reimbursed. How the retiree pays the insurance carrier (paper check or direct debit) is separate from how they are reimbursed (paper check or direct deposit).

For Medicare-eligible retirees, the Aon Retiree Health Exchange Benefits Advisor will talk with the retirees about this process during a special pre-arranged telephone call. For those not eligible for Medicare, an Aon advisor can help answer questions and assist with the reimbursement process. The advisor will also be available in the future should the retiree have questions or concerns.

**Paying the insurance carrier:**

During the enrollment process, the advisor will ask the retiree how they would like to pay the premium. Depending on the plan, the retiree may pay by sending a check to the insurance carrier, have a direct debit from their checking or savings account, or even have the premium deducted from their Social Security check.

- If the retiree enrolls in a Medicare Supplement Plan (Medigap), the advisor will be able to take the checking/savings account information over the phone to set up direct debit, or the retiree can send a paper check.
- If the retiree enrolls in a Medicare Advantage plan or a Medicare prescription drug plan, the advisor is not allowed to take checking/savings information over the phone, according to Medicare rules. The retiree can either pay by check, or set up direct debit directly with the insurance carrier. In most cases the insurance carrier will include a direct debit form in a welcome kit sent to the retiree shortly after enrollment, usually within two weeks.
- The retiree has a third option to pay their premium if enrolling in a Medicare Advantage plan or a Medicare prescription drug plan. That option is to have the premium deducted from their Social Security check. The advisor can set this up during the enrollment process. The initial Social Security deduction may take up to three months to occur. The retiree will still have coverage as of Jan. 1, 2019, however, reimbursement may take longer.

**Receiving premium reimbursement (for Medicare-eligible members):**

- Once the insurance carrier receives the premium payment from the retiree, the carrier will send a file to Aon Retiree Health Exchange with notification of the payment, and the retiree will be reimbursed. This is referred to as automatic reimbursement.
- A few smaller insurance carriers do not support this automatic reimbursement process. In these cases, the Aon Retiree Health Exchange advisor will send the retiree a one-time claim form.
THE HEALTH REIMBURSEMENT ACCOUNT PROCESS FOR OP&F RETIREES (CON’T)

CONTINUED FROM PAGE 5

the retiree needs to fill out. The retiree only needs to fill out this claim form once per year. The rest of the year the retiree will be automatically reimbursed for their premiums every month. This type of reimbursement is infrequent, as most insurance carriers support automatic reimbursement.

• The reimbursement will be in the form of a paper check unless the retiree takes action. Starting Jan. 1, 2019, the retiree may set up direct deposit of their reimbursement. They can do this by either going online or by calling Aon Retiree Health Exchange. Instructions to set up direct deposit via online will be sent to the retirees in their welcome kit mailed toward the end of December, or they may speak with their advisor. If the retiree is happy receiving a paper check, there is nothing they need to do. The retiree can change the method of reimbursement at any time throughout the year.

• The reimbursement occurs on or around the sixth business day of every month. Retirees who opt for direct deposit should allow two-to-three days for bank processing time. Retirees who receive a paper check should allow seven-10 days mailing time.

• Initial auto reimbursement for all methods of payment may take six-to-eight weeks, as we are waiting for the insurance carrier to notify them of the payment. After that initial delay, the retiree will be reimbursed on or around the sixth business day of the month. For example, the retiree pays their initial premium payment for January and February. Auto reimbursement can take up to eight weeks so in that case, retiree receives first reimbursement in March. That payment in March will include reimbursement for January, February and March. Ongoing reimbursements would occur on or around the sixth business day of every month.

• If a retiree does not want to wait up to eight weeks for the initial reimbursement, they can submit a claim form to start the process.

The retiree will need to submit proof of payment along with the claim form.

• A welcome kit will be mailed toward the end of December explaining this process.

Reimbursement process (for non-Medicare members):

Aon is not able to provide auto reimbursement for pre-Medicare retirees. However, pre-Medicare retirees can fill out the one-time claim form and proof of payment to be set up with recurring reimbursements. Once set up, the retiree can expect the reimbursement on or around the sixth of each month.

Catastrophic Health Reimbursement process (Medicare members only):

• Once the retiree meets the threshold for the annual out of pocket maximum of their Medicare Part D prescription plan they become eligible for the catastrophic reimbursement level. This secondary account will reimburse retirees for prescription expenses purchased through their Part D plan after they have exhausted all of the funds in their standard HRA.

• The retiree would submit the Explanation of Benefits (EOB) from their insurance carrier showing they have reached the catastrophic coverage level. The EOB is automatically sent to the retiree by the carrier.

• The retiree would need to fill out a CAT HRA claim form as well. The CAT HRA claim form is available on the HRA website or by calling the Aon Retiree Health Exchange.

• The retiree will either fax or mail the claim form and supporting documentation to the Aon Retiree Health Exchange. The fax number and address will be on the claim form.

OP&F FINANCIAL REPORTS AVAILABLE BY END OF JUNE

OP&F’s financial reporting documents will be available at op-f.org by June 30. Both the Comprehensive Annual Financial Report (CAFR) and the Popular Annual Report have been completed and submitted to the required reporting agencies.

The CAFR is prepared so that interested parties can assess the financial condition of OP&F for the most recent fiscal year (Jan. 1-Dec. 31, 2017). The CAFR was produced by OP&F staff and reviewed by an independent auditor. The Popular Annual Report reviews accomplishments by OP&F throughout the year in addition to financial data.

The reports can be found online at op-f.org by clicking the information link, then OP&F reports.
MEMBER’S REPORT / SUMMER 2018

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If you’re unable to attend a seminar in person, consider joining an online webinar. Please plan to join the webinar 15 minutes before start time, and simply follow these steps:

1. Visit webex.com
2. Select Join from the upper right area of the screen
3. Enter the meeting number, your name and email
4. If a meeting password is requested, enter OPF

To access the webinar conference line:
• Call: 866-692-5721
• When prompted, enter the participant passcode: 254 367 24.
• Please do not select “Join Video” when prompted.

THURSDAY, SEPT. 27, 10 A.M.–12 P.M. EASTERN TIME
Meeting number: 747 015 863
Meeting password: OPF
Phone passcode: 254 367 24

WEDNESDAY, OCT. 3, 4 P.M.–6 P.M. EASTERN TIME
Meeting number: 742 027 866
Meeting password: OPF
Phone passcode: 254 367 24

2019 HEALTH CARE TRANSITION
KEY DATES AND MAILINGS

JUNE 8 AND 12:
Transition guide and letter mailed to retirees and actives approaching retirement (co-branded with OP&F logo).
Aon toll-free number activated (1-844-290-3674).
Aon website and educational videos available (see link on op-f.org).

AUG. 9-23:
OP&F Pre-Retirement Seminars, where an Aon Retiree Health Exchange representative will attend.

SEPTEMBER:
Sept. 4-7:
Medicare education kits mailed with telephone appointment date and times.
Pre-Medicare letters and education packets mailed.

SEPT. 10-21:
Aon and OP&F will host health care meetings around the state.

SEPT. 27 AND OCT. 3:
Aon will host two webinars for those not able to attend a health care meeting in person.

OCT. 15-DEC. 7
Open enrollment for Medicare retirees
Appointments begin for members to speak with an Aon advisor.

NOV. 1-DEC. 15:
Open enrollment for pre-Medicare retirees.
Members can speak to an Aon advisor and log-in to review plans.

DEC. 17-21:
HRA/stipend welcome letters mailed.

DEC. 31:
OP&F’s group health care plan ends.

JAN. 1:
New OP&F health care plan model begins and OP&F stipends available.
DO WE HAVE YOUR EMAIL ADDRESS?

If your email address is not on file, please send it to us at questions@op-f.org, or contact OP&F Customer Service at 1-888-864-8363. Members can also update their information securely online from the secure Member Self Serve web portal.

SUSPECT DISABILITY FRAUD? CALL 844-FRAUD HOTLINE (844-372-8345)