

145-4-01 **Health care definitions.**

As used in this chapter:

- (A) "Wellness retiree medical account" means the public employees retirement system of Ohio retiree medical account plan established on January 1, 2007 by the former versions of rules 145-4-40, 145-4-42, and 145-4-44 of the Administrative Code, funded by the 115 trust, and integrated with the pre-medicare health care coverage sponsored by the retirement system.
- (B) "115 trust" means the Ohio public employees retirement system trust agreement for funding employee benefit plans, the assets of which qualify for exclusion from federal income taxation under section 115 of the Internal Revenue Code of 1986, 26 U.S.C.A. 115.
- (C) "Age and service retirant" means a former member who is receiving a retirement allowance pursuant to section 145.33, 145.331, 145.332, 145.37 or 145.46 of the Revised Code or section 9.03 of the combined plan document.
- (D) "Benefit recipient" means the primary benefit recipient who is eligible for health care coverage or the health reimbursement arrangement, if living. If the member or primary benefit recipient is deceased, "benefit recipient" shall mean the survivor benefit recipient who is eligible for health care coverage.
- (E) "Disability benefit recipient" has the same meaning as in section 145.01 of the Revised Code and includes a member or former member who is receiving a disability benefit pursuant to article X of the combined plan document.
- (F) "Health care coverage" means the coverage authorized under sections 145.58 and 145.584 of the Revised Code, excluding the reimbursement of the medicare part A and B premiums, the and dental and vision coverage, and the health reimbursement arrangement.
- (G) "Health reimbursement arrangement" or "HRA" means the public employees retirement system of Ohio health reimbursement arrangement plan, effective October 1, 2015, funded by the 115 trust or such other funding vehicle or mechanism established by the retirement system, from which the reimbursement of qualifying medical expenses may be made. The text of the HRA public employees retirement system of Ohio health reimbursement arrangement plan shall not be incorporated into this or any other rule of the Administrative Code. The current version of ~~the HRA~~ is available at www.opers.org.
- (H) "Initial benefit payment" has the same meaning as in rule 145-1-65 of the Administrative Code.

- (I) "Monthly health care allowance" or "monthly allowance" means the monthly amount that is allocated to each individual enrolled in health care coverage or health reimbursement arrangement. For health care coverage, this allowance shall be used to purchase health care coverage sponsored by the board and is based on the self-supporting rate, as determined by the board, and as adjusted by the member or primary benefit recipient's qualified years of employer contributions. For a medicare-eligible benefit recipient who is not subject to rule 145-4-62 of the Administrative Code, the monthly allowance shall be determined by the board and offered in the form of a notional credit to the health reimbursement arrangement consistent with the provisions of that plan. For effective dates of retirement on and after January 1, 2015, the monthly health care allowance shall also be based on the member or primary benefit recipient's attained age at the time of initial enrollment in the coverage.
- (J) "Ohio retirement system" means the public employees retirement system, state teachers retirement system, school employees retirement system, Ohio police and fire pension fund, or highway patrol retirement system.
- (K) "Primary benefit recipient" means an age and service retiree or disability benefit recipient is eligible for health care coverage or the health reimbursement arrangement.
- (L) "Qualified medical expense" means medical care, as defined in section 213(d) of the Internal Revenue Code of 1986, 26 U.S.C.A. 213(d), and applicable regulations thereunder and are excludable from income in accordance with sections 105 and 106 of the Internal Revenue Code.
- (M) "Qualified years of employer contributions" means years of employer contributions and the years purchased or transferred under section 145.295, 145.2911, or 145.37 of the Revised Code that, if earned or obtained in the public employees retirement system, would be the equivalent of the years of employer contributions. Qualified years of employer contributions do not include the contributions that are the basis of a lump sum payment or refund pursuant to ~~division (I)(2)(b) or (I)(3)(b) of section 145.332~~ paragraph (B) of 145-2-49 of the Revised Administrative Code, unless the payment or refund are issued pursuant to division (N)(3) of section 145.332 of the Revised Code.
- (N) "Retiree medical account" means the group health plan described in the document entitled the "public employees retirement system of Ohio retiree medical account" that was effective on January 1, 2003, and includes amendments adopted through June 30, 2016. The text of the public employees retirement system of Ohio retiree medical account shall not be incorporated into this or any other rule of the Administrative Code. The current version is available at www.opers.org.

- (O) "Self-supporting rate" means the adjusted per capita cost for providing health care coverage for any given year, as determined by the board.
- (P) "Service manager" means the individual or entity appointed by the public employees retirement system to administer the retiree medical accounts or the wellness retiree medical accounts.
- (Q) "Survivor benefit recipient" means a qualified spouse or child who is eligible for health care coverage and receiving a benefit pursuant to section 145.45 or 145.46 of the Revised Code or section 9.03 of the combined plan document.
- (R) "Years of employer contributions" means the years or portions of a year for which the member's employer contributed to the public employees retirement system under section 145.302, 145.48, or 145.483 of the Revised Code, section 3.02 of the combined plan document, or article VI of the combined or member-directed plan document. Beginning January 1, 2014, "years of employer contributions" means the years or portions of a year described in this paragraph for which the member's monthly earnable salary on and after January 1, 2014, is one thousand dollars or greater.

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Certification

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