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AN ACT concerning public employee benefits.

2 Be it enacted by the People of the State of Illinois, 3 represented in the General Assembly:

4 Section 5. The Illinois Pension Code is amended by 5 changing Section 22-101B as follows:

6 (40 ILCS 5/22-101B)

7 Sec. 22-101B. Health Care Benefits.

8 (a) The Chicago Transit Authority (hereinafter referred to 9 in this Section as the "Authority") shall take all actions 10 lawfully available to it to separate the funding of health 11 care benefits for retirees and their dependents and survivors 12 from the funding for its retirement system. The Authority 13 shall endeavor to achieve this separation as soon as possible, 14 and in any event no later than July 1, 2009.

(b) Effective 90 days after the effective date of this 15 16 amendatory Act of the 95th General Assembly, a Retiree Health 17 Care Trust is established for the purpose of providing health care benefits to eligible retirees and their dependents and 18 19 survivors in accordance with the terms and conditions set forth in this Section 22-101B. The Retiree Health Care Trust 20 21 shall be solely responsible for providing health care benefits 22 to eligible retirees and their dependents and survivors upon the exhaustion of the account established by the Retirement 23

HB1428 Enrolled - 2 - LRB102 03444 RPS 13457 b

Plan for Chicago Transit Authority Employees pursuant to
 Section 401(h) of the Internal Revenue Code of 1986, but no
 earlier than January 1, 2009 and no later than July 1, 2009.

(1) The Board of Trustees shall consist of 7 members 4 5 appointed as follows: (i) 3 trustees shall be appointed by 6 the Chicago Transit Board; (ii) one trustee shall be 7 appointed by an organization representing the highest number of Chicago Transit Authority participants; (iii) 8 9 trustee shall be appointed by an organization one 10 representing the second-highest number of Chicago Transit 11 Authority participants; (iv) one trustee shall be 12 appointed by the recognized coalition representatives of participants who are not represented by an organization 13 14 with the highest or second-highest number of Chicago 15 Transit Authority participants; and (v) one trustee shall 16 be selected by the Regional Transportation Authority Board 17 of Directors, and the trustee shall be a professional fiduciary who has experience in the area of collectively 18 19 bargained retiree health plans. Trustees shall serve until 20 a successor has been appointed and qualified, or until 21 resignation, death, incapacity, or disqualification.

Any person appointed as a trustee of the board shall qualify by taking an oath of office that he or she will diligently and honestly administer the affairs of the system, and will not knowingly violate or willfully permit the violation of any of the provisions of law applicable HB1428 Enrolled - 3 - LRB102 03444 RPS 13457 b

to the Plan, including Sections 1-109, 1-109.1, 1-109.2,
 1-110, 1-111, 1-114, and 1-115 of Article 1 of the
 Illinois Pension Code.

Each trustee shall cast individual votes, and a 4 majority vote shall be final and binding upon all 5 6 interested parties, provided that the Board of Trustees 7 may require a supermajority vote with respect to the 8 investment of the assets of the Retiree Health Care Trust, 9 and may set forth that requirement in the trust agreement 10 or by-laws of the Board of Trustees. Each trustee shall 11 have the rights, privileges, authority and obligations as 12 are usual and customary for such fiduciaries.

13 Board of Trustees shall establish (2)The and 14 administer a health care benefit program for eligible 15 retirees and their dependents and survivors. Any health 16 care benefit program established by the Board of Trustees 17 for eligible retirees and their dependents and survivors effective on or after July 1, 2009 shall not contain any 18 19 plan which provides for more than 90% coverage for 20 in-network services or 70% coverage for out-of-network 21 services after any deductible has been paid, except that 22 coverage through a health maintenance organization ("HMO") 23 may be provided at 100%.

(2.5) The Board of Trustees may also establish and
 administer a health reimbursement arrangement for retirees
 and for former employees of the Authority or the

HB1428 Enrolled - 4 - LRB102 03444 RPS 13457 b

1 Retirement Plan, and their survivors, who have contributed to the Retiree Health Care Trust but do not satisfy the 2 3 years of service requirement of subdivision (b)(4) and the terms of the retiree health care plan; or for those who do 4 5 satisfy the requirements of subdivision (b)(4) and the 6 terms of the retiree health care plan but who decline 7 coverage under the plan prior to retirement. Any such health reimbursement arrangement may provide that: the 8 9 retirees or former employees of the Authority or the 10 Retirement Plan, and their survivors, must have reached 11 65 to be eligible to participate in the health aqe 12 reimbursement arrangement; contributions by the retirees 13 or former employees of the Authority or the Retirement 14 Plan to the Retiree Health Care Trust shall be considered 15 assets of the Retiree Health Care Trust onlv; 16 contributions shall not accrue interest for the benefit of the retiree or former employee of the Authority or the 17 Retirement Plan or survivor; benefits shall be payable in 18 19 accordance with the Internal Revenue Code of 1986; the 20 amounts paid to or on account of the retiree or former 21 employee of the Authority or the Retirement Plan or 22 survivor shall not exceed the total amount which the 23 retiree or former employee of the Authority or the 24 Retirement Plan contributed to the Retiree Health Care 25 Trust; the Retiree Health Care Trust may charge a 26 reasonable administrative fee for processing the benefits.

HB1428 Enrolled - 5 - LRB102 03444 RPS 13457 b

The Board of Trustees of the Retiree Health Care Trust may
 establish such rules, limitations and requirements as the
 Board of Trustees deems appropriate.

4 (3) The Retiree Health Care Trust shall be 5 administered by the Board of Trustees according to the 6 following requirements:

7 (i) The Board of Trustees may cause amounts on deposit in the Retiree Health Care Trust to 8 be 9 invested in those investments that are permitted 10 investments for the investment of moneys held under 11 any one or more of the pension or retirement systems of 12 the State, any unit of local government or school 13 district, or any agency or instrumentality thereof. 14 The Board, by a vote of at least two-thirds of the 15 trustees, may transfer investment management to the 16 Illinois State Board of Investment, which is hereby 17 authorized to manage these investments when SO 18 requested by the Board of Trustees.

(ii) The Board of Trustees shall establish and maintain an appropriate funding reserve level which shall not be less than the amount of incurred and unreported claims plus 12 months of expected claims and administrative expenses.

(iii) The Board of Trustees shall make an annual
assessment of the funding levels of the Retiree Health
Care Trust and shall submit a report to the Auditor

HB1428 Enrolled - 6 - LRB102 03444 RPS 13457 b

General at least 90 days prior to the end of the fiscal year. The report shall provide the following:

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(A) the actuarial present value of projected benefits expected to be paid to current and future retirees and their dependents and survivors;

(B) the actuarial present value of projected contributions and trust income plus assets;

8 (C) the reserve required by subsection 9 (b)(3)(ii); and

10 (D) an assessment of whether the actuarial 11 present value of projected benefits expected to be 12 paid to current and future retirees and their 13 dependents and survivors exceeds or is less than 14 actuarial present value of the projected 15 contributions and trust income plus assets in 16 excess of the reserve required by subsection 17 (b)(3)(ii).

18 Ιf the actuarial present value of projected 19 benefits expected to be paid to current and future 20 retirees and their dependents and survivors exceeds 21 the actuarial present value of projected contributions 22 and trust income plus assets in excess of the reserve 23 required by subsection (b)(3)(ii), then the report 24 shall provide a plan, to be implemented over a period 25 of not more than 10 years from each valuation date, 26 which would make the actuarial present value of

HB1428 Enrolled - 7 - LRB102 03444 RPS 13457 b

1 projected contributions and trust income plus assets equal to or exceed the actuarial present value of 2 3 projected benefits expected to be paid to current and future retirees and their dependents and survivors. 4 5 The plan may consist of increases in employee, 6 retiree, dependent, or survivor contribution levels, 7 decreases in benefit levels, or other plan changes or any combination thereof. If the actuarial present 8 9 value of projected benefits expected to be paid to 10 current and future retirees and their dependents and 11 survivors is less than the actuarial present value of 12 projected contributions and trust income plus assets 13 in excess of the reserve required by subsection 14 (b)(3)(ii), then the report may provide a plan of 15 decreases in employee, retiree, dependent, or survivor 16 contribution levels, increases in benefit levels, or 17 other plan changes, or any combination thereof, to the extent of the surplus. 18

(iv) The Auditor General shall review the report
and plan provided in subsection (b) (3) (iii) and issue
a determination within 90 days after receiving the
report and plan, with a copy of such determination
provided to the General Assembly and the Regional
Transportation Authority, as follows:

(A) In the event of a projected shortfall, ifthe Auditor General determines that the

1 assumptions in the stated report are not 2 unreasonable in the aggregate and that the plan of 3 increases in employee, retiree, dependent, or survivor contribution levels, decreases in benefit 4 5 levels, or other plan changes, or any combination 6 thereof, to be implemented over a period of not 7 more than 10 years from each valuation date, is reasonably projected to make the actuarial present 8 9 value of projected contributions and trust income 10 plus assets equal to or in excess of the actuarial 11 present value of projected benefits expected to be 12 paid to current and future retirees and their 13 dependents and survivors, then the Board of 14 Trustees shall implement the plan. If the Auditor 15 General determines that the assumptions stated in 16 the report are unreasonable in the aggregate, or 17 that the plan of increases in employee, retiree, 18 dependent, or survivor contribution levels, 19 decreases in benefit levels, or other plan changes 20 to be implemented over a period of not more than 10 21 years from each valuation date, is not reasonably 22 projected to make the actuarial present value of 23 projected contributions and trust income plus 24 assets equal to or in excess of the actuarial 25 present value of projected benefits expected to be 26 paid to current and future retirees and their

HB1428 Enrolled

dependents and survivors, then the Board of Trustees shall not implement the plan, the Auditor General shall explain the basis for such determination to the Board of Trustees, and the Auditor General may make recommendations as to an alternative report and plan.

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7 (B) In the event of a projected surplus, if 8 the Auditor General determines that the 9 assumptions stated in the report are not 10 unreasonable in the aggregate and that the plan of 11 decreases in employee, retiree, dependent, or 12 survivor contribution levels, increases in benefit 13 levels, or both, is not unreasonable in the 14 aggregate, then the Board of Trustees shall 15 implement the plan. Ιf the Auditor General 16 determines that the assumptions stated in the 17 report are unreasonable in the aggregate, or that 18 the plan of decreases in employee, retiree, 19 dependent, or survivor contribution levels, 20 levels, or both, increases in benefit is 21 unreasonable in the aggregate, then the Board of 22 Trustees shall not implement the plan, the Auditor 23 shall the basis for General explain such 24 determination to the Board of Trustees, and the 25 Auditor General may make recommendations as to an 26 alternative report and plan.

HB1428 Enrolled

The Board of Trustees shall submit an 1 (C) 2 alternative report and plan within 45 days after 3 receiving a rejection determination by the Auditor General. A determination by the Auditor General on 4 5 any alternative report and plan submitted by the 6 Board of Trustees shall be made within 90 days 7 after receiving the alternative report and plan, and shall be accepted or rejected according to the 8 9 requirements of this subsection (b)(3)(iv). The 10 Board of Trustees shall continue to submit 11 alternative reports and plans to the Auditor 12 necessary, until General, а favorable as determination is made by the Auditor General. 13

14 (4) For any retiree who first retires effective on or 15 after January 18, 2008, to be eligible for retiree health 16 care benefits upon retirement, the retiree must be at 17 least 55 years of age, retire with 10 or more years of 18 continuous service and satisfy the preconditions 19 established by Public Act 95-708 in addition to any rules 20 or regulations promulgated by the Board of Trustees. 21 Notwithstanding the foregoing, any retiree hired on or 22 before September 5, 2001 who retires with 25 years or more 23 of continuous service shall be eligible for retiree health 24 care benefits upon retirement in accordance with any rules 25 or regulations adopted by the Board of Trustees; provided 26 he or she retires prior to the full execution of the 1 successor collective bargaining agreement to the collective bargaining agreement that became effective 2 3 January 1, 2007 between the Authority and the organizations representing the highest and second-highest 4 5 number of Chicago Transit Authority participants. This 6 paragraph (4) shall not apply to a disability allowance.

7 (5) Effective January 1, 2009, the aggregate amount of retiree, dependent and survivor contributions to the cost 8 9 of their health care benefits shall not exceed more than 10 45% of the total cost of such benefits. The Board of 11 Trustees shall have the discretion to provide different 12 contribution levels for retirees, dependents and survivors based on their years of service, level of coverage or 13 14 Medicare eligibility, provided that the total contribution 15 from all retirees, dependents, and survivors shall be not 16 more than 45% of the total cost of such benefits. The term 17 "total cost of such benefits" for purposes of this 18 subsection shall be the total amount expended by the 19 retiree health benefit program in the prior plan year, as 20 calculated and certified in writing by the Retiree Health 21 Care Trust's enrolled actuary to be appointed and paid for 22 by the Board of Trustees.

(6) Effective January 1, 2022 January 18, 2008, all
employees of the Authority shall contribute to the Retiree
Health Care Trust in an amount not less than <u>1%</u> 3% of
compensation.

HB1428 Enrolled - 12 - LRB102 03444 RPS 13457 b

(7) No earlier than January 1, 2009 and no later than 1 2 July 1, 2009 as the Retiree Health Care Trust becomes solely responsible for providing health care benefits to 3 eligible retirees and their dependents and survivors in 4 5 accordance with subsection (b) of this Section 22-101B, the Authority shall not have any obligation to provide 6 7 health care to current or future retirees and their dependents or survivors. Employees, retirees, dependents, 8 9 and survivors who are required to make contributions to the Retiree Health Care Trust shall make contributions at 10 11 the level set by the Board of Trustees pursuant to the 12 requirements of this Section 22-101B.

13 (Source: P.A. 98-1164, eff. 6-1-15.)