

City of West Allis

Postretirement Benefit Valuation Report Under GASB 74/75

Expense Development for Fiscal Year Beginning January 1, 2016

July 24, 2017



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Executive Summary

This report has been prepared by Willis Towers Watson for the City of West Allis for the following purposes:

- To provide the January 1, 2016 reporting and disclosure information for financial statements, governmental agencies, and other interested parties as required in the Statement of Governmental Accounting Standards No. 74 (SGAS 74) and Statement of Governmental Accounting Standards No. 75 (SGAS 75)
- To present the SGAS 75 expense for the year beginning January 1, 2016.
- To summarize the actuarial methods, assumptions, and data used in the valuation.

The City of West Allis is providing a retiree medical program for employees who meet the eligibility requirements upon retirement. Under SGAS 75 retiree benefits are viewed as a form of deferred compensation. As such, the benefits are treated as being earned over the working lifetime of the employee so that the cost is fully charged to operations by the earliest date of eligibility under the plan.

Changes Since Prior Valuation

The accounting has been updated to comply with the Statement of Governmental Accounting Standards No. 74 and the Statement of Governmental Accounting Standards No. 75 (SGAS 75)

There have been no substantive plan changes since the prior valuation except that the post-65 benefit has been eliminated for Police and Fire personnel hired on or after 3/1/2016.

The discount rate has been changed from 4.0% to 4.52%.

The census has been updated to reflect the current population.

Other assumptions are consistent with those used in the prior valuation.

Section 1: Accounting Information

SGAS 74/75 requires that certain information regarding postretirement benefits other than pension benefits be disclosed in the sponsor's financial statements. The disclosures include a statement of the change in the net OPEB liability, the OPEB expense, deferred inflows and outflows, historical changes in the net OPEB liability and the annual contributions and a statement of assumptions and the amortization method.

Presented in this section is an illustration of this information:

Section 1.1: Net OPEB Liability as of 1/1/2016

Section 1.2: OPEB Liability as of 1/1/2016 by Source

Section 1.3: OPEB Expense for the Fiscal Year Beginning 1/1/2016

Section 1.4: Deferred Outflows of Resources and Inflows of Resources

Section 1.5: Historical Changes in the Net OPEB Liability

Section 1.6: Annual Contributions

Section 1.7: Sensitivity of the Net OPEB Liability

Section 1.8: OPEB Expense Projection

Section 1.1: Net OPEB Liability as of 1/1/2016

	Total OPEB	Plan Fiduciary	Net OPEB Liabili
	Liability (a)	Position (b)	(a) - (b)
Balances at 1/1/2015	\$164,412,666	\$0	\$164,412,666
Changes for the Year			
Service Cost	\$4,763,909		\$4,763,909
Interest	\$7,535,230		\$7,535,230
Changes of benefit terms	\$0		
Differences between expected and actual experience	\$0		\$0
Changes of assumptions or other inputs	(\$30,833,407)		
Contributions-employer		\$4,935,880	(\$4,935,880)
Net investment income		\$0	\$0
Benefit payments	(\$4,935,880)	(\$4,935,880)	\$0
Administrative expense		\$0	\$0
Net Changes	(\$23,470,148)	\$0	(\$23,470,148)
Balances at 1/1/2016	\$140,942,518	\$0	\$140,942,518

Section 1.2: OPEB Liability as of 1/1/2016 by Source

Inactive employees or beneficiaries currently receiving benefit payments	\$79,087,173
Inactive employees entitled to but not yet receiving benefit payments	\$0
Active Employees	\$61,855,345
Total	\$140,942,518

Section 1.3: OPEB Expense for the Fiscal Year Beginning 1/1/2016

Service cost	\$4,258,286
Interest	\$6,456,326
Expected return on investments	\$0
Recognition of difference between expected and actual experience	\$0
Recognition of changes in assumptions or other inputs	(\$2,046,012)
OPEB Expense	\$8,668,600

Section 1.4: Deferred Outflows of Resources and Inflows of Resources

	Deferred Outflows of Resources	Deferred Inflows of Resources
Differences between expected and actual experience		
Changes of assumptions	\$30,833,407	\$0
Net difference between projected and actual earnings on OPEB plan		
investments		
Total	\$30,833,407	\$0

	Deferred Outflows of Resources	Deferred Inflows of Resources
Year ended December 31		
2016	\$2,046,012	\$0
2017	\$2,046,012	\$0
2018	\$2,046,012	\$0
2019	\$2,046,012	\$0
2020	\$2,046,012	\$0
Thereafter	\$20,603,345	\$0

Deferred outflow resulted from increase in discount rate from 4.0% to 4.52% and change to Entry Age Actuarial Cost Method.

Recognition period of deferred outflows of resources and deferred inflows of resource is 15.07 years.

Changes in the liability resulting from differences between expected and actual experience due to economic or demographic factors or changes of assumptions about future economic or demographic factors or other inputs are recognized over a closed period equal to the average of the expected remaining service lives of all employees provided with benefits through the OPEB plan.

Changes in the liability resulting from benefit plan changes are recognized immediately.

Section 1.5: Historical Changes in the Net OPEB Liability

Year ending January 1	2017
Total OPEB Liability	*
Service Cost	\$4,258,286
Interest	\$6,456,326
Changes of benefit terms	\$0
Differences between expected and actual experience	\$0
Changes of assumptions or other inputs	\$0
Benefit payments	(\$4,723,474)
Net Change in total OPEB liability	\$5,991,138
Total OPEB liability-beginning	\$140,942,518
Total OPEB liability-ending (a)	\$146,933,656
Plan fiduciary net position	
Contributions-employer	\$4,723,474
Net investment income	\$0
Benefit payments	(\$4,723,474)
Administrative expense	\$0
Net Change in plan fiduciary net position	\$0
Plan fiduciary net position-beginning	\$0
Plan fiduciary net position-ending (b)	\$0
Net OPEB liability-ending (a) - (b)	\$146,933,656
Plan fiduciary net position as a percentage of the total OPEB liability	100.0%
Covered employee payroll	\$38,838,197
Net OPEB liability as a percentage of covered employee payroll	378.3%

Section 1.6: Annual Contributions

Year ending January 1	2017
Actuarially determined contribution	\$8,668,600
Contributions in relation to the actuarially determined contribution	\$4,723,474
Contribution deficiency (excess)	\$3,945,126
Covered employee payroll	\$38,838,197
Contribution as a percentage of covered employee payroll	22.3%

Section 1.7: Sensitivity of the Net OPEB Liability

Discount Rate Sensitivity	1% Decrease	Discount Rate	1% Increase
	(3.52%)	(4.52%)	(5.52%)
Net OPEB Liability (Asset)	\$160,412,402	\$140,942,518	\$124,905,046

		Healthcare Cost	
Healthcare Trend Rate Sensitivity	1% Decrease	Trend Rates	1% Increase
	(8% decreasing to	(9% decreasing to	(10% decreasing to
	4%)	5%)	6%)
Net OPEB Liability (Asset)	\$129,306,601	\$140,942,518	\$156,123,689

Section 1.8: OPEB Expense Projection

Fiscal Year					
Ending	OPEB Liability			Deferred	OPEB
12/31	(BOY)	Normal Cost	Interest	Outflow/Inflow	Expense
2016	\$140,942,518	\$4,258,286	\$6,399,987	(\$2,046,012)	\$8,612,260
2017	\$144,387,211	\$4,204,330	\$6,550,875	(\$2,046,012)	\$8,709,193
2018	\$147,824,010	\$4,149,232	\$6,703,395	(\$2,046,012)	\$8,806,614
2019	\$151,343,665	\$4,082,191	\$6,855,338	(\$2,046,012)	\$8,891,517
2020	\$154,766,277	\$4,001,475	\$7,003,167	(\$2,046,012)	\$8,958,629
2021	\$158,113,419	\$3,935,877	\$7,147,165	(\$2,046,012)	\$9,037,029
2022	\$161,347,521	\$3,865,535	\$7,288,617	(\$2,046,012)	\$9,108,140
2023	\$164,584,243	\$3,807,768	\$7,429,533	(\$2,046,012)	\$9,191,288
2024	\$167,781,414	\$3,743,602	\$7,567,578	(\$2,046,012)	\$9,265,167
2025	\$170,894,754	\$3,681,076	\$7,704,801	(\$2,046,012)	\$9,339,864
2026	\$174,053,140	\$3,613,400	\$7,843,244	(\$2,046,012)	\$9,410,632
2027	\$177,226,728	\$3,542,840	\$7,981,578	(\$2,046,012)	\$9,478,405
2028	\$180,383,163	\$3,458,742	\$8,123,125	(\$2,046,012)	\$9,535,855
2029	\$183,715,543	\$3,377,405	\$8,272,832	(\$2,046,012)	\$9,604,224
2030	\$187,238,448	\$3,278,034	\$8,423,185	(\$2,046,012)	\$9,655,207
2031	\$190,618,576	\$3,178,987	\$8,567,418	(\$143,221)	\$11,603,184
2032	\$193,863,893	\$3,061,820	\$8,701,838	\$0	\$11,763,658
2033	\$196,817,962	\$2,937,860	\$8,821,622	\$0	\$11,759,482
2034	\$199,408,050	\$2,805,843	\$8,923,465	\$0	\$11,729,308
2035	\$201,558,229	\$2,668,923	\$9,005,041	\$0	\$11,673,964
2036	\$203,236,351	\$2,525,499	\$9,065,562	\$0	\$11,591,061
Total		\$74,178,725	\$164,379,366	(\$30,833,407)	\$207,724,684

Section 2: Supporting Documentation

Number of Participants in Valuation as of 12/31/2015	
Inactive employees or beneficiaries currently receiving benefit payments	516
Inactive employees entitled to but not yet receiving benefit payments	0
Active Employees	480
Total	996

Weighted Average Assumptions as of 12/31/2015	
Discount Rate	4.52%
Expected Long-Term Rate of Return on Assets	0.00%

Assumed Health Care Cost Trend		
2017	9.0%	
2018	6.5%	
2019	6.4%	
2020	6.2%	
2021	6.1%	
2022	6.0%	
2023	5.9%	
2024	5.8%	
2025	5.7%	
2026	5.6%	
2027	5.5%	
2028	5.4%	
2029	5.3%	
2030	5.2%	
2031	5.1%	
2032 and later	5.0%	

Section 3: Basis of Valuation

Section 3.1: Plan Participants

Section 3.2: Actuarial Basis

Section 3.3: Assumptions

Section 3.1: Plan Participants

The valuation includes all active employees and current retirees and their spouses who are currently receiving benefits under the retiree medical plan.

Exhibit 3.1a: Count of Active Participants

Exhibit 3.1b: Count of Inactive Participants

Exhibit 3.1a: Count of Active Participants

				Years o	f Service			
Age	0 - 4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30+	Total
Under 20	1	0	0	0	0	0	0	1
20 - 24	8	0	0	0	0	0	0	8
25 - 29	53	7	0	0	0	0	0	60
30 - 34	39	15	11	0	0	0	0	65
35 - 39	18	13	19	6	0	0	0	56
40 - 44	16	7	12	31	6	0	0	72
45 - 49	4	3	9	13	17	8	0	54
50 - 54	12	7	2	11	21	28	3	84
55 - 59	4	3	3	15	10	15	5	55
60 - 64	0	3	0	3	5	3	4	18
65 - 69	0	0	0	1	1	2	2	6
70+	0	0	0	0	1	0	0	1
Total	155	58	56	80	61	56	14	480

Statistics for Active Participants

Average Age 43.5 Average Service 12.9 Percent Male 74.8%

Exhibit 3.1b: Count of Inactive Participants

_			
Age	Single	Married	Total
Under 50	1	0	1
50 - 54	8	26	34
55 - 59	24	71	95
60 - 64	37	38	75
65 - 69	28	29	57
70 - 74	25	30	55
75- 79	19	24	43
8 0+	113	43	156
Total	255	261	516

Section 3.2: Actuarial Basis

A. Funding Policy

There are no assets that have been segregated and restricted to provide for retiree medical benefits.

B. Valuation of Assets

In order to be considered as an asset under GASB45, the resource (stock, cash etc) must be segregated and restricted in a trust or equivalent arrangement. Employer contributions to the plan must be irrevocable, dedicated to providing retiree benefits and protected from creditors

C. Actuarial Cost Method

Entry Age Actuarial Cost Method.

Section 3.3: Assumptions

Discount Rate: 4.52% (Citi Pension Liability Index 20 year rate as of 12/31/2015.

Mortality Rates				
Age	Male	Female		
20	0.000155	0.000089		
25	0.000184	0.000097		
30	0.000229	0.000129		
35	0.000398	0.000230		
40	0.000540	0.000329		
45	0.000717	0.000519		
50	0.000966	0.000765		
55	0.002228	0.001345		
60	0.003147	0.001935		
65	0.004814	0.002974		
70	0.007979	0.005057		
75	0.013576	0.009155		
80	0.024949	0.017103		

	Retirement Rates			
		General Pattern		
	No	rmal	Ea	ırly
Age	Male	Female	Male	Female
55			8.0%	6.1%
56			8.0%	6.4%
57	20%	17%	4.3%	4.2%
58	20%	17%	5.3%	5.5%
59	20%	17%	5.5%	5.3%
60	20%	20%	7.5%	8.1%
61	20%	20%	8.0%	7.0%
62	27%	27%	14.0%	15.0%
63	32%	28%	16.0%	15.0%
64	24%	25%	17.0%	15.0%
65	100%	100%	100.0%	100.0%

Retirement Rates			
	Protective Pattern		
	Normal	& Early	
Age	Male	Female	
50	6%	4%	
51	7%	4%	
52	8%	5%	
53	23%	17%	
54	18%	25%	
55	17%	21%	
56	16%	27%	
57	16%	30%	
58	16%	30%	
59	16%	30%	
60	18%	26%	
61	18%	15%	
62	22%	20%	
63	29%	40%	
64	16%	40%	
65	100%	100%	

	Termination	on Rates			
	General				
Age	Service	Male	Female		
	0	17.5%	19.5%		
	1	13.0%	13.5%		
	2	8.5%	10.0%		
	3	6.8%	8.0%		
	4	6.0%	7.4%		
	5	4.5%	6.0%		
	6	4.0%	5.0%		
	7	3.5%	4.5%		
	8	3.0%	4.0%		
	9	2.5%	3.8%		
25	10 & over	2.5%	3.8%		
30		2.5%	3.3%		
35		2.1%	2.8%		
40		1.6%	2.2%		
45		1.3%	1.8%		
50		1.1%	1.6%		
55		1.1%	1.5%		
60		1.1%	1.5%		

	Termination	on Rates	
	Prote	ctive	
Age	Service	Male	Female
	0	15.0%	4.0%
	1	7.0%	3.5%
	2	4.3%	2.1%
	3	3.8%	1.3%
	4	3.4%	1.2%
	5	2.6%	1.1%
	6	2.5%	1.0%
	7	2.3%	0.9%
	8	2.0%	0.8%
	9	1.7%	0.7%
25	10 & over	1.7%	0.7%
30		1.6%	0.7%
35		1.4%	0.7%
40		1.2%	0.6%
45		1.1%	0.6%
50		1.0%	0.5%
55		1.0%	0.5%
60		1.0%	0.5%

		Disablement Rates	;	
	Prot	ective	Ger	neral
Age	Male	Female	Male	Female
20	0.01%	0.04%	0.01%	0.01%
25	0.01%	0.04%	0.01%	0.01%
30	0.01%	0.04%	0.01%	0.03%
35	0.02%	0.04%	0.01%	0.04%
40	0.03%	0.07%	0.04%	0.05%
45	0.05%	0.13%	0.07%	0.07%
50	0.08%	0.74%	0.15%	0.11%
55	1.21%	0.54%	0.29%	0.20%
60	2.04%	0.16%	0.51%	0.29%

Monthly Claim Cost		
Age		
50	\$495.06	
55	\$582.32	
60	\$698.98	
65+	\$623.00	

Claim cost increased by annual trend.

Medical Trend		
2017	9.0%	
2018	6.5%	
2019	6.4%	
2020	6.2%	
2021	6.1%	
2022	6.0%	
2023	5.9%	
2024	5.8%	
2025	5.7%	
2026	5.6%	
2027	5.5%	
2028	5.4%	
2029	5.3%	
2030	5.2%	
2031	5.1%	
2032 and later	5.0%	

Monthly Rates		
	2016	2017
Active		
PPO		
Employee	\$591	\$646
EE + 1	\$1,158	\$1,265
Family	\$1,696	\$1,853
HDHP		
Employee	\$761	\$825
EE + 1	\$1,491	\$1,617
Family	\$2,183	\$2,367
,	+ ,	* /
Retirees Pre-65 (after 2013) PPO		
Employee	\$625	\$683
EE + 1	\$1,226	\$1,339
Family	\$1,795	\$1,961
· •,	+ 1,1 5 5	+ 1,000
HDHP		
Employee	\$805	\$891
EE + 1	\$1,578	\$1,711
Family	\$2,310	\$2,505
·		
Retirees Pre-65 (before 2013) PPO		
Employee	\$768	\$833
EE + 1	\$1,506	\$1,633
Family	\$2,204	\$2,390
r arring	Ψ2,204	Ψ2,000
Medicare Plans		
1 under 65	\$623	\$676
1 under, 1 over	\$1,377	\$1,493
2 over	\$1,274	\$1,381

New Employees: None

Annual Salary Increase: 3%

Assumed Rate of Return on Plan Assets: N/A

Attribution Period:

The attribution period is the portion of a participant's service to which the expected postretirement benefit obligation is assigned. The beginning of the attribution period is the date of hire and the end of the attribution period is the earliest eligibility date.

Valuation Date: December 31, 2015

Plan Participation of Future Retirees: 100%

Plan Participation of Future Spouses: 100%

Percentage of Future Retirees Who are Married: 80%

Age Difference in Spouses: Husband is 3 years older

AFSCME: Local 80 Public Works & Clerical Union, Non-Represented, Department Head (Includes City Attorney) & Mayor

Eligibility

- If hired prior to April 1, 2008, eligible under WRS with a minimum of 10 years of continuous service with the City as a benefitted employee.
- If hired on or after April 1, 2008, eligible under WRS with a minimum of 15 years of continuous service with the City as a benefitted employee.

Hired Prior to April 1, 2008

OPEB

Medical Insurance: The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or

Upon attaining Medicare age, or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B, the City's contributions will be adjusted to 50% of the City's Medicare supplemental plans.

Coverage/contributions will continue until the retiree stops paying his/her portion of the premiums or voluntarily cancels coverage. Upon death of the retiree, the surviving spouse and/or eligible dependents may continue health insurance following the guidelines named above; however, if the surviving spouse remarries or is employed by another employer providing 'more comprehensive or equivalent insurance' (applicable to retirees prior to 3-1-12), the City's health insurance obligation would permanently cease. (Note: If retired prior to 3-1-12, a retiree must be enrolled in health insurance in order for his/her spouse and/or eligible dependents to be enrolled; the only exception is upon a retiree's death or enrollment in Medicaid/Title 19.)

Hired On or After April 1, 2008

OPEB

Medical Insurance: The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

Aldermen & Municipal Judge

Eligibility

- If elected prior to April 1, 2008, eligible under WRS and completed a minimum of 2 four-year terms.
- If elected on or after April 1, 2008, eligible under WRS with a minimum of 15 years of continuous service with the City.

Elected Prior to April 1, 2008

OPEB

<u>Medical Insurance:</u> The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

Upon attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B, the City's contributions will be adjusted to 50% of the City's Medicare supplemental plans.

Coverage/contributions will continue until the retiree stops paying his/her portion of the premiums or voluntarily cancels coverage. Upon death of the retiree, the surviving spouse and/or eligible dependents may continue health insurance following the guidelines named above; however, if the surviving spouse remarries or is employed by another employer providing 'more comprehensive or equivalent insurance' (applicable to retirees prior to 3-1-12), the City's health insurance obligation would permanently cease. (Note: If retired prior to 3-1-12, a retiree must be enrolled in health insurance in order for his/her spouse and/or eligible dependents to be enrolled; the only exception is upon a retiree's death or enrollment in Medicaid/Title 19.)

Elected On or After April 1, 2008

OPEB

<u>Medical Insurance:</u> The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

West Allis Federation of Nurses

Eligibility

- If hired prior to July 1, 2008, eligible under WRS with a minimum of 10 years of continuous service with the City as a benefitted employee.
- If hired on or after July 1, 2008, eligible under WRS with a minimum of 15 years of continuous service with the City as a benefitted employee.

Hired Prior to March 1, 2012

OPEB

<u>Medical Insurance:</u> The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or R

Upon attaining Medicare age, or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B, the City's contributions will be adjusted to 50% of the City's Medicare supplemental plans.

Coverage/contributions will continue until the retiree stops paying his/her portion of the premiums or voluntarily cancels coverage. Upon death of the retiree, the surviving spouse and/or eligible dependents may continue health insurance following the guidelines named above; however, if the surviving spouse remarries or is employed by another employer providing 'more comprehensive or equivalent insurance' (applicable to retirees prior to 3-1-12), the City's health insurance obligation would permanently cease. (Note: If retired prior to 3-1-12, a retiree must be enrolled in health insurance in order for his/her spouse and/or eligible dependents to be enrolled; the only exception is upon a retiree's death or enrollment in Medicaid/Title 19.)

Hired On or After March 1, 2012

OPEB

Medical Insurance: The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

Engineering Technicians & Aides Association

Eligibility

- If hired prior to August 1, 2008, eligible under WRS with a minimum of 10 years of continuous service with the City as a benefitted employee.
- If hired on or after August 1, 2008, eligible under WRS with a minimum of 15 vears of continuous service with the City as a benefitted employee.

Hired Prior to March 1, 2012

OPEB

<u>Medical Insurance:</u> The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or R

Upon attaining Medicare age, or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B, the City's contributions will be adjusted to 50% of the City's Medicare supplemental plans.

Coverage/contributions will continue until the retiree stops paying his/her portion of the premiums or voluntarily cancels coverage. Upon death of the retiree, the surviving spouse and/or eligible dependents may continue health insurance following the guidelines named above; however, if the surviving spouse remarries or is employed by another employer providing 'more comprehensive or equivalent insurance' (applicable to retirees prior to 3-1-12), the City's health insurance obligation would permanently cease. (Note: If retired prior to 3-1-12, a retiree must be enrolled in health insurance in order for his/her spouse and/or eligible dependents to be enrolled; the only exception is upon a retiree's death or enrollment in Medicaid/Title 19.)

Hired On or After March 1, 2012

OPEB

Medical Insurance: The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B

West Allis Professional Police Association

Eligibility

- If hired prior to April 1, 2008, eligible under WRS with a minimum of 10 years of continuous service with the City as a benefitted employee.
- If hired on or after April 1, 2008, eligible under WRS with a minimum of 15 years of continuous service with the City as a benefitted employee.

Hired Prior to March 1, 2016

OPEB

Medical Insurance: The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

Upon attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B, the City's contributions will be adjusted to 50% of the City's Medicare supplemental plans.

Coverage/contributions will continue until the retiree stops paying his/her portion of the premiums or voluntarily cancels coverage. Upon death of the retiree, the surviving spouse and/or eligible dependents may continue health insurance following the guidelines named above; however, if the surviving spouse remarries or is employed by another employer providing 'more comprehensive or equivalent insurance' (applicable to retirees prior to 3-1-16), the City's health insurance obligation would permanently cease. (Note: If retired prior to 3-1-16, a retiree must be enrolled in health insurance in order for his/her spouse and/or eligible dependents to be enrolled; the only exception is upon a retiree's death or enrollment in Medicaid/Title 19.)

Hired On or After March 1, 2016

OPEB

<u>Medical Insurance:</u> The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

West Allis Professional Fire Fighter's Association

Eligibility

- If hired prior to February 1, 2009, eligible under WRS with a minimum of 10 years of continuous service with the City as a benefitted employee.
- If hired on or after February 1, 2009, eligible under WRS with a minimum of 15 years of continuous service with the City as a benefitted employee.

Hired Prior to March 1, 2016

OPEB

Medical Insurance: The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

Upon attaining Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B, the City's contributions will be adjusted to 50% of the City's Medicare supplemental plans.

Coverage/contributions will continue until the retiree stops paying his/her portion of the premiums or voluntarily cancels coverage. Upon death of the retiree, the surviving spouse and/or eligible dependents may continue health insurance following the guidelines named above; however, if the surviving spouse remarries, or

- is employed by another employer providing 'more comprehensive or equivalent insurance', the City's health insurance obligation would permanently cease (applicable to individuals who retired prior to 3-1-13); or
- is employed by another employer providing 'any' health coverage, the City's insurance obligation would cease (applicable to individuals who retired 3-1-13 to 2-29-16); or

(Note: if retired 3-1-13 through 2-19-16: upon an individual's (i.e. the retiree, spouse and/or dependent) eligibility for other health insurance coverage, the coverage with the City for that individual would cease. If the individual is the retiree, then coverage with the City for all members (i.e. the retiree, spouse and/or dependent) would cease. Upon loss of other insurance coverage, the individual (i.e. the retiree, spouse and/or dependent) may be eligible to reenroll in the City's coverage provided they meet the eligibility requirements contained within this Policy and/or the City's insurance plan(s).)

 is employed by another employer providing 'any' health coverage, the City's insurance obligation would <u>permanently</u> cease (applicable to individuals who retired on or after 3-1-16).

(**Note:** If retired prior to 3-1-13, a retiree must be enrolled in health insurance in order for his/her spouse and/or eligible dependents to be enrolled; the only exception is upon a retiree's death or enrollment in Medicaid/Title 19.)

Hired On or After March 1, 2016

OPEB

<u>Medical Insurance:</u> The City will continue its contributions towards an eligible retiree's medical premiums at the same contribution amount as was made at the time of their retirement. Thereafter, the retiree will be responsible for any and all increases in premium costs (in addition to their initial required premium share). The City's contributions (frozen amount) will continue in this manner until attaining

Medicare age or becoming eligible for Medicaid/Title 19/Medicare Parts A and/or B.

Section 3.4: Description of GASB 74/75 Terms

Actuarially Determined Contribution: A target or recommended contribution to a defined benefit OPEB plan 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.

Entry Age Actuarial Cost Method: A method under which 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 of the individual between entry age and assumed exit age.

OPEB Liability: That portion, as determined by a particular Actuarial Cost Method, of the Actuarial Present Value of OPEB benefits and expenses which is not provided for by future Normal Costs.

Service Cost: That portion of the Actuarial Present Value of OPEB benefits and expenses which is allocated to a valuation year by the Actuarial Cost Method.

Certification

I have prepared the attached actuarial valuation of the City of West Allis Postretirement Medical Benefit Programs in accordance with Statements of Governmental Accounting Standards No. 74/75.

We have based the valuation on financial and census data which were provided to us by the City of West Allis. We have not audited the data beyond a check for reasonableness.

All costs, liabilities, and other factors associated with the valuation of this plan have been determined in accordance with generally accepted actuarial principles and procedures, and are consistent with the provisions of SGAS 74/75, including the Actuarial Standard of Practice No. 6 for Measuring Retiree Group Benefit Obligations (American Academy of Actuaries).

The actuarial computations under Statements of Governmental Accounting Standards contained in this report are for the sole purpose of fulfilling employer accounting requirements. The use of the results of this report for other purposes may lead to inappropriate conclusions.

Sheryl Henry, FSA, MAAA

Slay Henry

July 24, 2017

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