

# **City of Boston**

Governmental Accounting Standards Board (GASB) Statement No. 75 Accounting Valuation Report for Reporting Date June 30, 2019

This report has been prepared at the request of the City of Boston to assist in administering the Plan. This valuation report may not otherwise be copied or reproduced in any form without the consent of the City of Boston and may only be provided to other parties in its entirety. The measurements shown in this actuarial valuation may not be applicable for other purposes.

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December 23, 2019

Ms. Maureen Joyce, City Auditor City of Boston City Hall, Room M-4 Boston, MA 02201

Dear Ms. Joyce:

We are pleased to submit this Governmental Accounting Standards Board (GASB) Statement No. 75 Accounting Valuation as of June 30, 2019. It contains the actuarial information that will need to be disclosed in order to comply with GASB 75. Except as otherwise noted, please refer to the City of Boston Actuarial Valuation and Review of Other Postemployment Benefits (OPEB) as of June 30, 2017, dated May 1, 2018, for the data, assumptions and plan of benefits underlying these calculations.

This report is based on information received from the City of Boston and vendors employed by the City of Boston. Segal Consulting does not audit the data provided. The accuracy and comprehensiveness of the data is the responsibility of those supplying the data. Segal, however, does review the data for reasonableness and consistency.

The measurements shown in this actuarial valuation may not be applicable for other purposes. Accordingly, additional determinations may be needed for other purposes, such as judging benefit security at termination of the plan, or determining short-term cash flow requirements.

Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: retiree group benefits program experience or rates of return on assets differing from that anticipated by the assumptions; changes in assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period); and changes in retiree group benefits program provisions or applicable law. Retiree group benefits models necessarily rely on the use of approximations and estimates, and are sensitive to changes in these approximations and estimates. Small variations in these approximations and estimates may lead to significant changes in actuarial measurements. An actuarial valuation is a measurement at a specific date – it is not a prediction of a plan's future financial condition. We have not been retained to perform an analysis of the potential range of financial measurements, except where otherwise noted.

The actuarial valuation has been completed in accordance with generally accepted actuarial principles and practices. The actuarial calculations were directed under our supervision. We are members of the American Academy of Actuaries and collectively meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion herein. To the best of our knowledge, the information supplied in the actuarial valuation is complete and accurate. Further, in our opinion, the assumptions as approved by the City of Boston are reasonably related to the experience of and the expectations for the Plan.

We look forward to discussing this with you at your convenience.

Sincerely,

Segal Consulting, a Member of The Segal Group, Inc.

By:

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Vice President and Consulting Actuary

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## **Section 1: Executive Summary**

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#### **Important Information about Actuarial Valuations**

An actuarial valuation is a budgeting tool with respect to defining future uncertain obligations of a postretirement health plan. As such, it will never forecast the precise future stream of benefit payments. It is an estimated forecast – the actual cost of the plan will be determined by the benefits and expenses paid, not by the actuarial valuation.

In order to prepare a valuation, Segal Consulting ("Segal") relies on a number of input items. These include:

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Plan of benefits	Plan provisions define the rules that will be used to determine benefit payments, and those rules, or the interpretation of them, may change over time. Even where they appear precise, outside factors may change how they operate. For example, a plan may provide health benefits to post-65 retirees that coordinates with Medicare. If so, changes in the Medicare law or administration may change the plan's costs without any change in the terms of the plan itself. It is important for the City of Boston to keep Segal informed with respect to plan provisions and administrative procedures, and to review the plan summary included in our report to confirm that Segal has correctly interpreted the plan of benefits.
Participant data	An actuarial valuation for a plan is based on data provided to the actuary by the plan. Segal does not audit such data for completeness or accuracy, other than reviewing it for obvious inconsistencies compared to prior data and other information that appears unreasonable. It is not necessary to have perfect data for an actuarial valuation: the valuation is an estimated forecast, not a prediction. The uncertainties in other factors are such that even perfect data does not produce a "perfect" result. Notwithstanding the above, it is important for Segal to receive the best possible data and to be informed about any known incomplete or inaccurate data.
Assets	Part of the cost of a plan will be paid from existing assets – the balance will need to come from future contributions and investment income. The valuation is based on the asset values as of the valuation date, typically reported by the City. Some plans include assets, such as private equity holdings, real estate, or hedge funds that are not subject to valuation by reference to transactions in the marketplace. A snapshot as of a single date may not be an appropriate value for determining a single year's contribution requirement, especially in volatile markets. Plan sponsors often use an "actuarial value of assets" that differs from market value to reflect gradually year-to-year changes in the market value of assets in determining the contribution requirements.
Actuarial assumptions	In preparing an actuarial valuation, Segal starts by developing a forecast of the benefits to be paid to existing plan participants for the rest of their lives and the lives of their beneficiaries. To determine the future costs of benefits, Segal collects claims, premiums, and enrollment data in order to establish a baseline cost for the valuation measurement, and then develops short- and long-term health care cost trend rates to project increases in costs in future years. This forecast also requires actuarial assumptions as to the probability of death, disability, withdrawal, and retirement of each participant for each year, as well as forecasts of the plan's benefits for each of those events. The forecasted benefits are then discounted to a present value, typically based on an estimate of the rate of return that will be achieved on the plan's assets or, if there are no assets, a rate of return based on a yield or index rate for 20-year, tax-exempt general obligation municipal bonds with an average rating of AA/Aa or higher (or equivalent quality on another rating scale). All of these factors are uncertain and

unknowable. Thus, there will be a range of reasonable assumptions, and the results may vary materially based on which assumptions the actuary selects within that range. That is, there is no right answer (except with hindsight). It is important for any user of an actuarial valuation to understand and accept this constraint. The actuarial model necessarily uses approximations and estimates that may lead to significant changes in our results but will have no impact on the actual cost of the plan. In addition, the actuarial assumptions may change over time, and while this can have a significant impact on the reported results, it does not mean that the previous assumptions or results were unreasonable

Given the above, the user of Segal's actuarial valuation (or other actuarial calculations) needs to keep the following in mind:

- The actuarial valuation is prepared for use by the City of Boston and the Public Health Commission (PHC). It includes information for compliance with accounting standards and for the plan's auditor. Segal is not responsible for the use or misuse of its report, particularly by any other party.
- If the City of Boston or the PHC is aware of any event or trend that was not considered in this valuation that may materially change the results of the valuation, Segal should be advised, so that we can evaluate it.
- An actuarial valuation is a measurement at a specific date it is not a prediction of a plan's future financial condition. Accordingly, Segal did not perform an analysis of
  the potential range of financial measurements, except where otherwise noted. The actual long-term cost of the plan will be determined by the actual benefits and
  expenses paid and the actual investment experience of the plan.
- Sections of this report include actuarial results that are not rounded, but that does not imply precision.
- Critical events for a plan include, but are not limited to, decisions about changes in benefits and contributions. The basis for such decisions needs to consider many
  factors such as the risk of changes in plan enrollment, emerging claims experience, health care trend, and investment losses, not just the current valuation results.
- Segal does not provide investment, legal, accounting, or tax advice. Segal's valuation is based on our understanding of applicable guidance in these areas and of the
  plan's provisions, but they may be subject to alternative interpretations. The City of Boston and the PHC should look to their other advisors for expertise in these
  areas.
- While Segal maintains extensive quality assurance procedures, an actuarial valuation involves complex computer models and numerous inputs. In the event that an inaccuracy is discovered after presentation of Segal's valuation, Segal may revise that valuation or make an appropriate adjustment in the next valuation.
- Segal's report shall be deemed to be final and accepted by the City of Boston and the PHC upon delivery and review. The City of Boston and the PHC should notify Segal immediately of any questions or concerns about the final content.

As Segal Consulting has no discretionary authority with respect to the management or assets of the Plan, it is not a fiduciary in its capacity as actuaries and consultants with respect to the Plan.

#### **Purpose**

This report presents certain disclosure information for the City of Boston and the Public Health Commission (PHC) (the "Employer") Other Postemployment Benefits (OPEB) plan as of June 30, 2019, required by Governmental Accounting Standards Board (GASB) Statement No. 75, Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions. The actuarial computations made are for purposes of fulfilling plan accounting requirements. Determinations for purposes other than meeting financial accounting requirements may be significantly different from the results reported here.

#### **Highlights of the Valuation**

The following key findings were the result of this actuarial valuation:

- > The Net OPEB Liability (NOL) measured as of June 30, 2019, was determined based upon the results of the actuarial valuation as of June 30, 2017, dated May 1, 2018, completed by Segal Consulting.
- > The measurement date has been changed from the beginning of the fiscal year to the end of the fiscal year.
- > The NOL is equal to the difference between the Total OPEB Liability (TOL) and the Plan's Fiduciary Net Position. The Plan's Fiduciary Net Position is equal to the market value of assets and therefore, the NOL measure is very similar to an Unfunded Actuarial Accrued Liability (UAAL) on a market value basis.
- > The discount rate used for the City to determine the TOL and NOL was 6.75% as of June 30, 2018 and June 30, 2019.
- > The discount rate used for the PHC to determine the TOL and NOL was 4.90% as of June 30, 2018 and 4.58% as of June 30, 2019.
- > The OPEB expense for fiscal 2019 is \$225,635,200 for the City and \$11,773,106 for the PHC.



# Section 2: Valuation Results – Total City (Boston Public Schools and All Other City Departments)

#### **Exhibit 1 - General Information**

At June 30, 2017, City of Boston plan membership consisted of the following:

	June 30, 2017
Retired members of beneficiaries currently receiving benefits	14,863
Active members	<u>14,186</u>
Total	29,049

We have assumed other general information about the Plan will be provided by the City's auditors.

#### **Exhibit 2 - Net OPEB Liability**

The components of the net OPEB liability of the City of Boston are as follows:

	June 30, 2019	June 30, 2018
Total OPEB Liability	\$3,009,584,130	\$2,874,860,498
Plan Fiduciary Net Position	594,248,953	520,629,094
Net OPEB Liability	2,415,335,177	2,354,231,404
Plan Fiduciary Net Position as a percentage of the Total OPEB Liability*	19.75%	18.11%

<sup>\*</sup> These funded percentages are not necessarily appropriate for assessing the sufficiency of Plan assets to cover the estimated cost of settling the Plan's benefit obligation or the need for or the amount of future contributions.

Actuarial assumptions. The total OPEB liability as of June 30, 2019 was measured by an actuarial valuation as of June 30, 2017 using the following actuarial assumptions, applied to all periods included in the measurement, unless otherwise specified:

#### **Actuarial Assumptions:**

Wage inflation:	3.25%
Salary increases:	4.0% per year for Group 1 employees (excluding Teachers), 4.25% per year for Group 2 employees and 4.5% per year for Group 4 employees.  Service related increases for Teachers: 7.5% decreasing over 20 years to an ultimate level of 4.0%.
Discount rate:	6.75%
Investment rate of return:	6.75%
Health care trend rates:	Medical and Prescription Drug: 7.0% decreasing by 0.5% for 5 years to an ultimate level of 4.5% Medicare Part B Premium: 4.5% Contributions: Retiree contributions are expected to increase with medical trend

Mortality rates:	Pre-Retirement (Non-Teachers): RP-2014 Blue Collar Employee Mortality Table projected generationally with Scale MP-2017 set forward 1 year for females
	Healthy (Non-Teachers): RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward 1 year for females
	Disabled (Non-Teachers): RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward 1 year
	Pre-Retirement (Teachers): RP-2014 White Collar Employee Mortality Table projected generationally with Scale MP-2016
	Healthy (Teachers): RP-2014 White Collar Healthy Annuitant Mortality Table projected generationally with Scale MP-2016
	Disabled (Teachers): RP-2014 Healthy Annuitant Mortality Table set forward 4 years projected generationally with Scale BB2D from 2014

#### Exhibit 3 - Determination of Discount Rate and Investment Rate of Return

#### **Development of Long-Term Rate**

The long-term expected rate of return on OPEB plan investments was determined using a building block method in which best estimate ranges of expected future rates of return (expected returns, net of investment expense and inflation) are developed for each major asset class. These returns are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation and subtracting expected investment expenses and a risk margin. The target allocation as of June 30, 2019, and projected arithmetic real rates of return for each major asset class, after deducting inflation, but before investment expenses, used in the derivation of the long-term expected investment rate of return assumption are summarized below:

Asset Class	Target Allocation	Long-Term Expected Real Rate of Return
Domestic equity	25.00%	6.16%
International developed markets equity	20.00%	6.69%
International emerging markets equity	5.00%	9.47%
Core fixed income	23.00%	1.89%
High yield fixed income	7.00%	4.00%
Real estate	6.00%	4.58%
Hedge fund, GTAA, Risk parity	<u>14.00%</u>	3.68%
Total	100.00%	

Note: Some asset classes in the target allocation have been combined.

Nature of Assets: The assets are in an irrevocable OPEB Trust.

#### Determination of Discount Rate

The discount rate has been set equal to the expected return on assets based on the sufficiency of projected assets to make projected benefit payments. The discount rate as of June 30, 2018 and June 30, 2019 is 6.75%.

## **Exhibit 4 - Schedule of Changes in the Net OPEB Liability**

	Total OPEB Liability (a)	Plan Fiduciary Net Position (b)	Net OPEB Liability (a)-(b)
Balances at June 30, 2018	\$2,874,860,498	\$520,629,094	\$2,354,231,404
Changes for the year:			
Service cost	\$69,658,303	\$0	\$69,658,303
Interest	194,459,280	0	194,459,280
Differences between expected and actual experience	6,623,983	0	6,623,983
Changes of assumptions	0	0	0
Contributions - employer	0	176,017,934	-176,017,934
Net investment income	0	33,623,748	-33,623,748
Benefit payments	-136,017,934	-136,017,934	0
Administrative expenses	<u>0</u>	<u>-3,889</u>	<u>3,889</u>
Net changes	\$134,723,632	\$73,619,859	\$61,103,773
Balances at June 30, 2019	\$3,009,584,130	\$594,248,953	\$2,415,335,177

#### **Notes to Schedule:**

Changes in Assumptions:	None.
Changes in Plan Provisions:	None.

#### **Exhibit 5 - Sensitivity**

#### Sensitivity of the net OPEB liability to changes in the discount rate

The following presents the net OPEB liability well as what the net OPEB liability would be if it were calculated using a discount rate that is 1-percentage-point lower or 1-percentage-point higher than the current rate.

Net OPEB liability as of June 30, 2019

1% Decrease	Current Discount Rate	1% Increase	
\$2,835,236,568	\$2,415,335,177	\$2,070,929,603	

#### Sensitivity of the net OPEB liability to changes in the healthcare cost trend rates

The following presents the net OPEB liability as well as what the net OPEB liability would be if it were calculated using healthcare cost trend rates that are 1-percentage-point lower or 1-percentage point higher than the current rates.

Net OPEB liability as of June 30, 2019

1% Decrease	Current Trend Rates	1% Increase
\$1,991,596,684	\$2,415,335,177	\$2,947,903,794

#### **Exhibit 6 - Schedule of Contributions - Last Ten Years**

	Year End June 30,									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Actuarially determined contribution	\$199,399,826	\$190,991,205	\$167,787,497							
Contributions in relation to the actuarially determined contribution	176,017,934	<u>159,965,680</u>	<u>157,463,469</u>							
Contribution deficiency (excess)	\$23,381,892	\$31,025,525	\$10,324,028							
Covered-employee payroll	N/A	N/A	N/A							
Contributions as a percentage of covered-employee payroll	N/A	N/A	N/A		(Historical in	nformation prior to	implementation o	f GASB 74/75 is r	not required)	

Note: Please enter covered payroll for missing years

#### **Notes to Schedule:**

Methods and assumptions used to establish "actuarially determined contribution":

Valuation date:	Actuarially determined contribution for fiscal year ending June 30, 2019 was determined with the June 30, 2017 actuarial valuation.
Actuarial cost method:	Entry Age Normal
Amortization method:	Payments increase at 3.25%
Remaining amortization period:	27 years as of July 1, 2018
Asset valuation method:	Market value
Investment rate of return:	6.75%
Wage inflation:	3.25%
Health care cost trend rates:	Medical and Prescription Drug: 7.0% decreasing by 0.5% for 5 years to an ultimate level of 4.5% Medicare Part B Premium: 4.5% Contributions: Retiree contributions are expected to increase with medical trend

Mortality rates:	Pre-Retirement (Non-Teachers): RP-2014 Blue Collar Employee Mortality Table projected generationally with Scale MP-2017 set forward one year for females
	Healthy (Non-Teachers): RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward one year for females
	Disabled (Non-Teachers): RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward one year
	Pre-Retirement (Teachers): RP-2014 White Collar Employee Mortality Table projected generationally with Scale MP-2016
	Healthy (Teachers): RP-2014 White Collar Healthy Annuitant Mortality Table projected generationally using Scale MP-2016
	Disabled (Teachers): RP-2014 Healthy Annuitant Mortality Table set forward 4 years projected generationally with Scale BB2D from 2014

## Exhibit 7 - OPEB Expense and Deferred Outflows/Inflows of Resources Related to OPEB

A. OPEB expense for the year ended June 30, 2019		June 30, 2019
Service cost		\$69,658,303
Interest		194,459,280
Contributions – employee		0
<ul> <li>Projected earnings on OPEB Trust investments</li> </ul>		-36,492,464
Administrative expenses		3,889
• Recognized portion of current-period difference between expected and actual e	experience	946,283
<ul> <li>Recognized portion of current-period difference between projected and actual einvestments</li> </ul>	earnings on OPEB plan	573,743
<ul> <li>Recognized portion of current year period assumption change</li> </ul>		0
Recognized portion of current year period plan change		0
<ul> <li>Recognition of deferred outflows of resources</li> </ul>		0
Recognition of deferred inflows of resources		<u>-3,513,834</u>
<ul> <li>OPEB expense for fiscal year ended June 30, 2019</li> </ul>		\$225,635,200
B1. Deferred outflows of resources related to OPEBs		
<ul> <li>Differences between expected and actual experience</li> </ul>		\$6,178,052
Changes of assumptions		0
<ul> <li>Net difference between projected and actual earnings on OPEB Trust investment</li> </ul>	ents	<u>0</u>
Total		\$6,178,052
B2. Deferred inflows of resources related to OPEBs		
<ul> <li>Differences between expected and actual experience</li> </ul>		\$981,550
Changes of assumptions		0
<ul> <li>Net difference between projected and actual earnings on OPEB Trust investment</li> </ul>	ents	<u>3,587,900</u>
Total		\$4,569,450
C. Projected recognition of deferred outflows/(inflows)	Year Ended June 30,	Recognition
	2019	N/A
	2020	-\$1,993,808
	2021	-1,993,809
	2022	2,228,868
	2023	1,374,711
	2024	1,046,355
	2025	946,285
	Thereafter	0

Note: Average expected remaining service lives as of June 30, 2017 is 7 years.

**Section 2: Valuation Results for the City of Boston** June 30, 2019 Measurement Under GASB 75



## **Section 3: Valuation Results – Public Health Commission**

#### **Exhibit 1 - General Information**

At June 30, 2017, Public Health Commission's plan membership consisted of the following:

	June 30, 2017
Retired members of beneficiaries currently receiving benefits	251
Active members	<u>904</u>
Total	1,155

We have assumed other general information about the Plan will be provided by the Public Health Commission's auditors.

#### **Exhibit 2 - Net OPEB Liability**

The components of the net OPEB liability of the Public Health Commission are as follows:

	June 30, 2019	June 30, 2018
Total OPEB Liability	\$154,709,976	\$135,568,177
Plan Fiduciary Net Position	24,215,502	20,606,418
Net OPEB Liability	130,494,474	114,961,759
Plan Fiduciary Net Position as a percentage of the Total OPEB Liability*	15.65%	15.20%

<sup>\*</sup> These funded percentages are not necessarily appropriate for assessing the sufficiency of Plan assets to cover the estimated cost of settling the Plan's benefit obligation or the need for or the amount of future contributions.

Actuarial assumptions. The total OPEB liability as of June 30, 2019 was measured by an actuarial valuation as of June 30, 2017 using the following actuarial assumptions, applied to all periods included in the measurement, unless otherwise specified:

#### **Actuarial Assumptions:**

Wage inflation:	3.25%
Salary increases:	4.0% per year for Group 1 employees and 4.5% per year for Group 4 employees
Discount rate:	4.58% as of June 30, 2019 and 4.90% as of June 30, 2018
Investment rate of return:	6.75%
Health care trend rates:	Medical and Prescription Drug: 7.0% decreasing by 0.5% for 5 years to an ultimate level of 4.5% Medicare Part B Premium: 4.5% Contributions: Retiree contributions are expected to increase with medical trend
Mortality rates:	Pre-Retirement: RP-2014 Blue Collar Employee Mortality Table projected generationally with Scale MP-2017 set forward one year for females  Healthy: RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward one year for females  Disabled: RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward one year

#### Exhibit 3 - Determination of Discount Rate and Investment Rate of Return

#### **Development of Long-Term Rate**

The long-term expected rate of return on OPEB plan investments was determined using a building block method in which best estimate ranges of expected future rates of return (expected returns, net of investment expense and inflation) are developed for each major asset class. These returns are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation and subtracting expected investment expenses and a risk margin. The target allocation as of June 30, 2019 and projected arithmetic real rates of return for each major asset class, after deducting inflation, but before investment expenses, used in the derivation of the long-term expected investment rate of return assumption are summarized below:

Asset Class	Target Allocation	Long-Term Expected Real Rate of Return
Domestic equity	25.00%	6.16%
International developed markets equity	20.00%	6.69%
International emerging markets equity	5.00%	9.47%
Core fixed income	23.00%	1.89%
High yield fixed income	7.00%	4.00%
Real estate	6.00%	4.58%
Hedge fund, GTAA, Risk parity	<u>14.00%</u>	3.68%
Total	100.00%	

Note: Some asset classes in the target allocation have been combined.

Nature of Assets: The assets are in an irrevocable OPEB Trust.

#### **Determination of Discount Rate**

The discount rate is a blend of the long-term expected rate of return on OPEB Trust assets and a yield or index rate for 20-year, tax-exempt general obligation municipal bonds with an average rating of AA/Aa or higher (3.87% as of June 30, 2018 and 3.50% as of June 30, 2019). The blending is based on the sufficiency of projected assets to make projected benefit payments. Since assets are not sufficient to cover projected benefit payments, the discount rate used to measure the total OPEB liability was 4.90% as of June 30, 2018 and 4.58% as of June 30, 2019.

## **Exhibit 4 - Schedule of Changes in the Net OPEB Liability**

	Total OPEB Liability (a)	Plan Fiduciary Net Position (b)	Net OPEB Liability (a)-(b)
Balances at June 30, 2018	\$135,568,177	\$20,606,418	\$114,961,759
Changes for the year:			
Service cost	\$7,582,918	\$0	\$7,582,918
• Interest	6,941,476	0	6,941,476
Differences between expected and actual experience	-610,282	0	-610,282
Changes of assumptions	7,630,085	0	7,630,085
Contributions - employer	0	4,652,398	-4,652,398
Net investment income	0	1,358,989	-1,358,989
Benefit payments	-2,402,398	-2,402,398	0
Administrative expenses	<u>0</u>	<u>95</u>	<u>-95</u>
Net changes	\$19,141,799	\$3,609,084	\$15,532,715
Balances at June 30, 2019	\$154,709,976	\$24,215,502	\$130,494,474

#### **Notes to Schedule:**

Changes in Assumptions:	The discount rate decreased from 4.90% as of June 30, 2018 to 4.58% as of June 30, 2019.
Changes in Plan Provisions:	None.

#### **Exhibit 5 - Sensitivity**

#### Sensitivity of the net OPEB liability to changes in the discount rate

The following presents the net OPEB liability well as what the net OPEB liability would be if it were calculated using a discount rate that is 1-percentage-point lower or 1-percentage-point higher than the current rate.

Net OPEB liability as of June 30, 2019

1% Decrease	Current Discount Rate	1% Increase
\$158,272,750	\$130.494.474	\$108.341.484

#### Sensitivity of the net OPEB liability to changes in the healthcare cost trend rates

The following presents the net OPEB liability as well as what the net OPEB liability would be if it were calculated using healthcare cost trend rates that are 1-percentage-point lower or 1-percentage point higher than the current rates.

Net OPEB liability as of June 30, 2019

1% Decrease	<b>Current Trend Rates</b>	1% Increase	
\$102.392.703	\$130.494.474	\$167.646.563	

#### **Exhibit 6 - Schedule of Contributions - Last Ten Years**

	Year End June 30,									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Actuarially determined contribution	\$9,032,761	\$8,609,776	\$10,624,187							
Contributions in relation to the actuarially determined contribution	4,652,398	4,625,538	<u>4,575,990</u>							
Contribution deficiency (excess)	\$4,380,363	\$3,984,238	\$6,048,197							
Covered-employee payroll	N/A	N/A	N/A							
Contributions as a percentage of covered-employee payroll	N/A	N/A	N/A		(Historical in	nformation prior to	implementation o	f GASB 74/75 is r	not required)	

Note: Please enter covered payroll for missing years.

#### **Notes to Schedule:**

Methods and assumptions used to establish "actuarially determined contribution":

Actuarially determined contribution for fiscal year ending June 30, 2019 was determined with the June 30, 2017 actuarial valuation.
Entry Age Normal
Payments increase at 3.25%
30 years as of July 1, 2018
Market value
6.75%
3.25%
Medical and Prescription Drug: 7.0% decreasing by 0.5% for 5 years to an ultimate level of 4.5% Medicare Part B Premium: 4.5% Contributions: Retiree contributions are expected to increase with medical trend
Pre-Retirement: RP-2014 Blue Collar Employee Mortality Table projected generationally with Scale MP-2017 set forward one year for females  Healthy: RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward one year for females  Disabled: RP-2014 Blue Collar Annuitant Mortality Table projected generationally with Scale MP-2017 set forward one year

### Exhibit 7 - OPEB Expense and Deferred Outflows/Inflows of Resources Related to OPEB

A. OPEB expense for the year ended June 30, 2019		June 30, 2019
Service cost		\$7,582,918
• Interest		6,941,476
Contributions – employee		0
Projected earnings on OPEB Trust investments		-1,466,871
Administrative expenses		-95
Recognized portion of current-period difference between expected and actual experience		-50,857
<ul> <li>Recognized portion of current-period difference between projected and actual investments</li> </ul>	earnings on OPEB plan	21,576
Recognized portion of current year period assumption change		635,840
Recognized portion of current year period plan change		0
Recognition of deferred outflows of resources		0
Recognition of deferred inflows of resources		<u>-1,890,881</u>
<ul> <li>OPEB expense for fiscal year ended June 30, 2019</li> </ul>		\$11,773,106
B1. Deferred outflows of resources related to OPEBs		
<ul> <li>Differences between expected and actual experience</li> </ul>		\$0
Changes of assumptions		6,994,245
<ul> <li>Net difference between projected and actual earnings on OPEB Trust investments</li> </ul>		<u>0</u>
Total		\$6,994,245
B2. Deferred inflows of resources related to OPEBs		
Differences between expected and actual experience		\$698,600
<ul> <li>Changes of assumptions</li> </ul>		16,179,689
<ul> <li>Net difference between projected and actual earnings on OPEB Trust investment</li> </ul>	ents	<u>140,762</u>
Total		\$17,019,051
C. Projected recognition of deferred outflows/(inflows)	Year Ended June 30,	Recognition
	2019	N/A
	2020	-\$1,284,322
	2021	-1,284,322
	2022	-1,122,488
	2023	-1,154,686
	2024	-1,176,264
	2025	-1,176,264
	Thereafter	-2,826,460

Note: Average expected remaining service lives as of June 30, 2017 is 12 years.

**Section 3: Valuation Results for the Public Health Commission** 

June 30, 2019 Measurement Under GASB 75



