City of Copperas Cove
Information Item No. 2
December 6, 2011
Actuarial Valuation Report

Contact – Velia Key Director of Financial Services, 547-4221
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SUBJECT: **Actuarial Valuation Report as of December 31, 2010.**

1. PROJECT DESCRIPTION

Attached is the Actuarial Valuation report as of December 31, 2010. The report is submitted to the City Council for review. The report presents the annual expense required by the plan sponsor for purposes of complying with the accounting requirements of Government Accounting Standards Board Statement No. 45.

2. BACKGROUND/HISTORY

The actuarial calculations were prepared for the purposes of complying with the requirements of Statements No. 45 of the Governmental Accounting Standards Board (GASB).

3. FINDINGS/CURRENT ACTIVITY

In FY 2008, the City had a total of six retirees; however, that number increased to ten retirees in FY 2010. Also, six of the ten retirees are under age 55 and are likely to be covered by the retiree health plan well into the future.

4. FINANCIAL IMPACT

As a result of the changes in retiree counts, the percentage has been increased from 10% to 15% for the current valuation.

GRS Gabriel Roeder Smith & Company
Consultants & Actuaries

CITY OF COPPERAS COVE RETIREE HEALTH CARE PLAN

ACTUARIAL VALUATION REPORT

AS OF DECEMBER 31, 2010

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GRS

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October 18, 2011

Ms. Velia Key
Director of Financial Services
City of Copperas Cove
507 S. Main St.
Copperas Cove, TX 76522

Dear Ms. Key:

Submitted in this report are the results of an Actuarial Valuation of the assets and benefit values associated with the employer financed retiree health benefits provided by the City of Copperas Cove. The date of the valuation was December 31, 2010. The annual required contribution has been calculated for the fiscal year beginning October 1, 2010.

The actuarial calculations were prepared for purposes of complying with the requirements of Statements No. 43 and No. 45 of the Governmental Accounting Standards Board (GASB). The calculations reported herein have been made on a basis consistent with our understanding of these accounting standards. Determinations of the liability associated with the benefits described in this report for purposes other than satisfying City of Copperas Cove's financial reporting requirements may produce significantly different results. This report may be provided to parties other than City of Copperas Cove only in its entirety and only with the permission of City of Copperas Cove.

The valuation was based upon information, furnished by City of Copperas Cove, concerning retiree health benefits and individual employees, and financial data. Data was checked for internal consistency but was not otherwise audited.

To the best of our knowledge, this report is complete and accurate and was made in accordance with generally recognized actuarial methods. One or more of the undersigned are members of the American Academy of Actuaries and meet the Qualification Standards of the Academy of Actuaries to render the actuarial opinion herein.

Respectfully submitted,

Jack L. Beam

Jack L. Beam, ASA, EA, MAAA

Mehdi Riazi

Mehdi Riazi, ASA, EA, MAAA

EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

Annual Required Contribution

This report presents the annual expense required to be recognized by the plan sponsor for purposes of complying with the accounting requirements of Government Accounting Standards Board Statement No. 45. In addition, the plan may also need to comply with GASB Statement No. 43. Please consult with legal counsel and the auditors to determine whether you have a plan for GASB Statement No. 43 purposes.

The Annual Required Contribution (ARC) for the fiscal year beginning October 1, 2010 has been calculated under the two different interest rate assumptions. Below is a summary of the Annual Required Contribution. In the first year GASB Statement No. 45 is adopted, the annual OPEB cost required to be disclosed on the employer's financial statements is equal to the ARC. Actual claims/premiums paid on behalf of retirees may be treated as employer contributions in relation to the ARC and act to reduce the Net OPEB Obligation (NOO).

Annual Required Contribution	Unfunded PAYGO	Funding Policy
Fiscal Year Beginning 2010	$78,934	$68,053

For additional details please see Section B of the report.

Additional OPEB Reporting Requirements

In addition to the annual OPEB cost described above, employers will have to disclose a Net OPEB Obligation (or asset). The Net OPEB Obligation is the cumulative difference between annual OPEB costs and annual employer contributions in relation to the ARC, accumulated from the implementation of Statement No. 45. The Net OPEB Obligation is zero as of the beginning of the fiscal year that Statement No. 45 is implemented, unless the employer chooses to recognize a beginning balance. The requirements for determining the employer's contributions in relation to the ARC are described in paragraph 13 g. of Statement No. 45. Additional information required to be disclosed in the employer's financial statements is detailed in paragraphs 24 through 27 of Statement No. 45.

Liabilities and Assets

Unfunded PAYGO Assumption

This scenario assumes the current pay-as-you-go (PAYGO) funding policy will continue, i.e., the annual employer contributions each year are equal to the benefits that are paid on behalf of the retirees. Under this funding policy, GASB 45 requires the use of a discount rate consistent with the investment return earned on the employer's general assets. In this valuation, the discount rate is 4.50%.

The present value of all benefits expected to be paid to current plan members as of December 31, 2010 is $1,205,172. The actuarial accrued liability, which is the portion of the $1,205,172 attributable to service accrued by plan members as of December 31, 2010, is $829,152. As of December 31, 2010, there is $0 in valuation assets available to offset the liabilities of the plan.

The funded status of the plan, which is the ratio of plan assets to actuarial accrued liability, as of December 31, 2010 is 0.00%.

Funding Policy Assumption

This scenario assumes the employer will set up an irrevocable trust and change the funding policy so that the annual employer contributions are equal to the ARC. Under this funding policy, GASB 45 allows the use of a discount rate consistent with the investment return earned on the plan's assets. Dependent on the asset allocation of the investment pool, this rate should be based on longer term investments. In this valuation, the discount rate is 7.50%.

The present value of all benefits expected to be paid to current plan members as of December 31, 2010 is $854,416. The actuarial accrued liability, which is the portion of the $854,416 attributable to service accrued by plan members as of December 31, 2010, is $639,887. As of December 31, 2010, there is $0 in valuation assets available to offset the liabilities of the plan.

The funded status of the plan, which is the ratio of plan assets to actuarial accrued liability, as of December 31, 2010 is 0.00%.

SECTION A
OVERVIEW

GASB BACKGROUND

The purpose of this valuation is to provide information on the cost associated with providing postemployment benefits other than pensions, or OPEB, to current and former employees. OPEB benefits are most often associated with postemployment health care, but cover almost any benefit not provided through a pension plan, including life insurance, dental and vision benefits. It is important to note that OPEB benefits, by definition, do not include benefits *currently* being provided to active employees – however, this report includes the liabilities for benefits expected to be paid to current active employees when they terminate employment at a future date.

The rising cost of health care has been a cause of concern to both individuals and employers who sponsor health care plans. The accounting community became concerned that many sponsors of public plans were accounting for the cost of their OPEB plans solely on the basis of benefits paid and that this method did not accurately reflect the ultimate cost of benefits promised to current and former employees. In 1988, the Governmental Accounting Standards Board (GASB) began working on a project to develop comprehensive standards for financial reporting of OPEB plans.

The GASB determined that an OPEB plan was similar to a pension plan in that benefits are earned during an active employee's working lifetime but paid out at a future date. In the GASB's view, accounting for OPEB should follow the same basic principle as accounting for public plan pension cost: these benefits are compensation for employees' services and should be accounted for during the period of time that services are performed.

GASB BACKGROUND (CONCLUDED)

The GASB worked on comprehensive standards for OPEB accounting for more than a decade, culminating with the release of GASB Statements No. 43 and No. 45 in the Spring of 2004. GASB Statement No. 43 covers the accounting rules for OPEB *plans* while GASB Statement No. 45 describes the rules for *employers* sponsoring OPEB plans. The effective dates of the Statements are based on the implementation of GASB Statement No. 34, based on the sponsor's annual revenue for the first fiscal year ending on or after June 15, 1999, and follow the schedule below:

Total Annual Revenue In the First Fiscal Year Ending After June 15, 1999	**GASB No. 43 OPEB Standards for the Plan's Financial Statements will be Effective for Periods Beginning After**	**GASB No. 45 OPEB Standards for the Employer's Financial Statements will be Effective for Periods Beginning After**
Phase 1 Govts. - $100 million or more	December 15, 2005	December 15, 2006
Phase 2 Govts. - $10 million or more, But less than $100 million	December 15, 2006	December 15, 2007
Phase 3 Govts. - Less than $10 million	December 15, 2007	December 15, 2008

GASB STANDARDS

Unlike pension plans, OPEB plans often do not have a formal document detailing the specific terms of the plan. Under GASB No. 43 and No. 45 the benefits to be accounted for are those provided by the *substantive plan* – loosely defined as the benefits covered by the plan as understood by the employer and plan members at the time of each actuarial valuation. The substantive plan provisions used in this valuation are summarized in Section D.

GASB also requires that the calculations assume the terms of the substantive plan continue indefinitely. It has been argued that there is a likelihood future OPEB plan provisions would be different than the current substantive plan (due to rising health care costs or social changes) and therefore liabilities based on the current substantive plan may overstate what will actually occur. However, the GASB Statement is designed to measure liabilities for the plan as it currently exists. While it may be reasonable to assume future changes in the OPEB plan for other purposes, recognition of anticipated changes is not allowed for purposes of accounting for OPEB.

The specific items required to be disclosed on an OPEB sponsor's financial statements are described in detail in GASB No. 43 and No. 45. In general terms, though, the plan sponsor is required to disclose an annual OPEB cost, the funded status of the plan and the funding progress on the valuation date. Although GASB does not require OPEB contributions, it has chosen to call the base component of the annual OPEB cost the Annual Required Contribution, or ARC. The ARC consists of the cost of benefits accruing in a year plus an amount calculated to amortize any unfunded actuarial accrued liability over a period of not more than 30 years.

The funded status of the plan is a ratio of the plan's assets (if any) to the actuarial accrued liability on the valuation date. The plan is also required to disclose the cumulative difference between the ARC and the employer's actual contribution to the plan. This amount is known as the Net OPEB Obligation (NOO). Each year, the NOO accumulates with interest, plus the difference between the ARC and actual contributions for the year, plus some technical adjustments. **For most plans the NOO is set to zero as of the effective date of the GASB OPEB standard. It is the NOO, and not the actuarial accrued liability, that will be disclosed on the employer's Statement of Net Assets.**

OPEB SPECIFIC ASSUMPTIONS

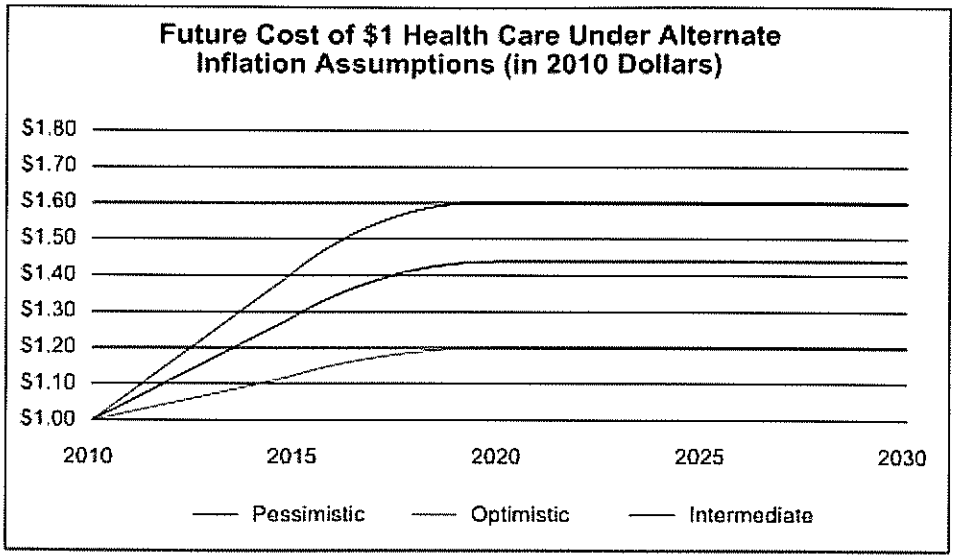
In any long-term actuarial valuation (such as for pensions and OPEB) certain demographic, economic and behavioral assumptions must be made concerning the population, investment discount rates, and the benefits provided. These actuarial assumptions form the basis for the actuarial model which is used to project the future population, benefits to be provided, and contributions to be collected. The investment return rate assumption is used to discount the future benefits to a present value on the valuation date. While assumptions such as future rates of retirement and mortality are similar for both OPEB and pension plans, there are some additional assumptions required when projecting benefits for a health care plan.

The cost of providing medical services has been increasing more rapidly than prices in general for many years. During the period from 1955 to 2005 general inflation averaged 4.0%, while health expenditures increased by an average of about 10% per year. If this trend is projected to continue for years to come, it implies that years from now virtually all our expenditures will be for health care. The seemingly more reasonable alternative is that in the not too distant future medical expense inflation will stabilize at a level at or near general inflation. It is on this basis that we project that retiree health care costs will continue to exceed general inflation in the near term, but by less each year until leveling off at an ultimate rate that is similar to general price increases.

Health care increase rates used in this valuation lie within a range of reasonable assumptions, and are described in Section G of this report. The health care increase rate assumption has a major effect on the calculation of plan liabilities. To illustrate the effect of differing future medical inflation rates, the following chart projects the growth of $1 of health care benefit under three sets of assumptions.

In this illustration, each set of assumptions trends smoothly to an assumed long term rate of inflation over the next ten years: The assumption set labeled "Pessimistic" begins at a rate of 8% in excess of general inflation, the "Intermediate" assumption begins at a rate of 6% in excess of general inflation, while the "Optimistic" assumption begins at a rate of 3% in excess of general inflation.

OPEB Specific Assumptions (Concluded)



The chart above shows that the cost of providing health care is expected to increase over 40% in inflation-adjusted dollars over the next 20 years, using the "Intermediate" health care increase assumption set. To put this in perspective, assuming health care increases are brought under control almost immediately, as in the "Optimistic" assumption set, implies future per capita health care costs will be expected to increase less than 20% over current levels. In addition to the per capita health care inflation, costs are expected to rise as the retiree population increases.

The selection of an investment return rate also has a major impact on the calculation of the reported GASB OPEB expense.

It is important to note that GASB Statements No. 43 and No. 45 require the selection of an interest rate assumption to be based on the expected long-term rate of return on the assets expected to pay the OPEB when due. GASB states that the return should be based on expected returns of:

- Plan assets – if the sponsor has been contributing the ARC on a regular basis;
- The employer's general assets – where no OPEB assets have been accumulated;
- A blend of plan and employer assets – in cases where OPEB assets exist but the plan is contributing amounts less than the ARC.

ACTUARIAL COST METHOD

GASB Statement No. 45 provides some flexibility to governmental employers (and their actuaries) in the use of various actuarial cost methods. It should be noted that an actuarial cost method determines a contribution or expense by assigning portions of the present value of projected benefits to various years with the general goal of accruing the cost of benefits over the working lifetime of the employees. The choice of a particular method does not change the ultimate cost of the promised benefits.

The Projected Unit Credit, Level Percent of Payroll actuarial cost method has been used to calculate the GASB ARC for this valuation. Using the plan benefits, the present health premiums and a set of actuarial assumptions, the anticipated future payments are projected. The projected unit credit method then provides for a systematic funding for these anticipated payments. The yearly ARC is computed to cover the cost of benefits being earned by covered members as well as to amortize a portion of the unfunded accrued liability. If experience is in accordance with the assumptions used, the ARC will increase at approximately the same rate as active member payroll, and the ARC as a percentage of payroll will remain basically level on a year to year basis. This is both an acceptable and reasonable cost method. The use of another actuarial cost method would produce different results.

OPEB PREFUNDING

Many employers fund retiree health care benefits using the pay-as-you-go (or cash disbursement) method. The employer's annual contribution for these benefits is equal to the actual disbursements during the year for health care benefits for retired employees. This method of funding will result in increasing contributions over time. First, per capita cash disbursements will tend to increase from year to year as the cost of health care services, or the utilization of these services, increases. Second, the number of retired members is likely to increase for years to come. The more retirees there are, the greater the disbursements as a percentage of employee payroll.

A retiree health care plan is similar to a defined benefit pension plan, in that promises are made to employees to provide them with a benefit payable at some future date. For defined benefit pension plan sponsors a common funding objective is to contribute annual amounts to a fund which will i) remain level as a percentage of active member payroll, and ii) when combined with present assets and future investment return will be sufficient to meet the financial obligations of the Plan to current and future retirees.

The ultimate determination as to the level of pre-funding will be the result of decisions made in an attempt to reconcile the often conflicting needs of benefit security for members and fiscal responsibility for the employer. The GASB accounting standards noted in the previous section of the report can factor into decisions concerning the level of pre-funding.

SECTION B
VALUATION RESULTS

CITY OF COPPERAS COVE
DEVELOPMENT OF THE ANNUAL REQUIRED CONTRIBUTION

Contributions for	Development of the Annual Required Contribution		
	Fiscal Year Beginning 2010		Fiscal Year Beginning 2008
	Unfunded PAYGO	Funding Policy	Unfunded PAYGO
Employer Normal Cost	$44,620	$29,919	$31,602
Amortization of UAAL*	$34,314	$38,134	$21,675
Annual Required Contribution (ARC)	$78,934	$68,053	$53,277
ARC Per Active Participant	$288	$248	$191

* Unfunded Actuarial Accrued Liabilities (UAAL) were amortized over 30 years.

The ARC shown in this report has been calculated to increase at the same rate as the projected increase in active member payroll (3.00% per year). The unfunded actuarial accrued liabilities were amortized as a level percent of active member payroll over a period of 30 years. A 30-year amortization period for unfunded actuarial accrued liabilities is the maximum period that complies with the GASB requirements.

CITY OF COPPERAS COVE
DETERMINATION OF UNFUNDED ACTUARIAL ACCRUED LIABILITY
AS OF DECEMBER 31, 2010

	Fiscal Year Beginning 2010		Fiscal Year Beginning 2008
	Unfunded PAYGO	Funding Policy	Unfunded PAYGO
A. Present Value of Future Benefits			
i) Retirees and Beneficiaries	$465,975	$389,649	$280,275
ii) Vested Terminated Members	$0	$0	$0
iii) Active Members	$739,197	$464,767	$512,573
Total Present Value of Future Benefits	$1,205,172	$854,416	$792,848
B. Present Value of Future Normal Costs	$376,020	$214,529	$269,094
C. Actuarial Accrued Liabilities (A.-B.)	$829,152	$639,887	$523,754
D. Actuarial Value of Assets	$0	$0	$0
E. Unfunded Actuarial Accrued Liability (C.-D.)	$829,152	$639,887	$523,754
F. Funded Ratio (D./C.)	0.00%	0.00%	0.00%

The Unfunded Actuarial Accrued Liability (UAAL) is not booked as an expense all in one year and does not appear in the Employer's Statement of Net Assets. Nevertheless, it is reported in the Notes to the Financial Statements and in the Required Supplementary Information. These are information sections within the employer's financial statements.

COMMENTS

COMMENT A: One of the key assumptions used in any valuation of the cost of post-employment benefits is the rate of return on Plan assets. Higher assumed investment returns will result in a lower ARC. Lower returns will tend to increase the computed ARC. Under the first scenario (Unfunded PAYGO) the discount rate is based on the employer's general assets (short term bonds and cash) and the assumed rate is 4.50%. Under the pre-funded scenario, the assumed asset allocation is a mix of equities and bonds and therefore a 7.50% discount rate is assumed.

COMMENT B: Based on the number of plan members as of this valuation, the plan sponsor is required by GASB to perform actuarial valuations at least biennially.

COMMENT C: The contribution rates shown include amortization of the unfunded actuarial accrued liability over 30 years. This is the maximum time period permitted by the Governmental Accounting Standards Board Statement No. 43 and No. 45. A shorter amortization period would result in a higher ARC.

COMMENT D: Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements; and changes in plan provisions or applicable law.

SECTION C
SENSITIVITY ANALYSIS

POSTEMPLOYMENT HEALTH INSURANCE -- SENSITIVITY TESTS

Actuarial valuations deal with the cost of benefits to be paid in the future. The payments considered will range from one month in the future to decades from the valuation date (for a young, newly hired employee who may retire many years from now and live many years after that). In order to establish a present day cost for these future benefit obligations, the actuary bases the valuation on a number of assumptions about future occurrences. The occurrences that must be considered include employee turnover, pay increases, disablement, retirements, deaths and investment income on anticipated plan assets.

When the benefits being valued are health care benefits, a key factor is the future cost of the medical benefits being promised. This is projected using the current cost of the System's health care benefits and assumed future health care cost increases. The final cost of providing retiree health care benefits will depend upon how the charges for health care services actually increase in the future.

In order to demonstrate how the cost of these benefits can vary depending upon future health care cost increases, we have performed additional valuations based upon alternative health care cost increase assumptions. The schedules on page C-2 compare (i) the computed cost of the retiree health care benefits using the valuation (Intermediate) assumptions to (ii) results of alternate valuations. One of the alternate valuations is based upon a pessimistic health care cost increase assumption. The other is based upon a more optimistic health care cost increase assumption. The schedule on page C-3 exhibits the health care cost increase assumptions used in each of the valuations.

CITY OF COPPERAS COVE
SENSITIVITY ANALYSIS

The selection of future health care cost increases is one of the key assumptions in determining plan liabilities. If the health care cost trend rates upon which the calculation of the Annual Required Contribution is based were changed to either the pessimistic or optimistic trends noted on page C-3, the annual contribution for the combined groups (illustrated using the projected unit credit method) would change as follows.

Contributions for	Development of the Annual Required Contribution		
	Fiscal Year Beginning 2010		
	Pessimistic	Intermediate	Optimistic
Employer Normal Cost	$54,202	$44,620	$36,881
Amortization of UAAL*	$39,248	$34,314	$30,087
Annual Required Contribution (ARC)	$93,450	$78,934	$66,968
ARC Per Active Participant	$341	$288	$244

* Unfunded Actuarial Accrued Liabilities (UAAL) were amortized over 30 years.
All three scenarios above based on an unfunded 4.50% discount rate

	Determination of Unfunded Actuarial Accrued Liability		
	Pessimistic	Intermediate	Optimistic
A. Present Value of Future Benefits			
i) Retirees and Beneficiaries	$514,590	$465,975	$422,071
ii) Vested Terminated Members	$0	$0	$0
iii) Active Members	$914,659	$739,202	$600,107
Total Present Value of Future Benefits	$1,429,249	$1,205,177	$1,022,178
B. Present Value of Future Normal Costs	$480,869	$376,022	$295,155
C. Actuarial Accrued Liabilities (A.-B.)	$948,380	$829,155	$727,023
D. Actuarial Value of Assets	$0	$0	$0
E. Unfunded Actuarial Accrued Liability (C.-D.)	$948,380	$829,155	$727,023
F. Funded Ratio (D./C.)	0.00%	0.00%	0.00%

CITY OF COPPERAS COVE
SENSITIVITY ANALYSIS

Health care trend rates used in the sensitivity analysis are shown below.

Year	Medical and Prescription Drugs		
	Pessimistic	Intermediate	Optimistic
2011	11.50%	9.00%	6.50%
2012	10.75	8.50	6.25
2013	10.00	8.00	6.00
2014	9.25	7.50	5.75
2015	8.50	7.00	5.50
2016	7.75	6.50	5.25
2017	7.00	6.00	5.00
2018	6.50	5.50	4.50
2019	6.00	5.00	4.00
2020	5.50	4.50	3.50
2021	5.50	4.50	3.50
2022	5.50	4.50	3.50
2023	5.50	4.50	3.50
2024	5.50	4.50	3.50
2025	5.50	4.50	3.50
2026 & Later	5.50	4.50	3.50

SECTION D

RETIREE PREMIUM RATE DEVELOPMENT

RETIREE PREMIUM RATE DEVELOPMENT

The costs were based on age-rated Fiscal Year 2011 premiums and are used for both current and future retirees for all plans combined. An inherent assumption in this methodology is that the projected future retirees will have a similar distribution by plan type as the current retirees.

Age graded and sex distinct premiums are utilized by this valuation. These costs are appropriate for the unique age and sex distribution currently existing. Over the future years covered by this valuation, the age and sex distribution will most likely change. Therefore, our process "distributes" the average premium over all age/sex combinations and assigns a unique premium for each combination. The age/sex specific costs more accurately reflect the health care utilization and cost at that age.

The monthly one-person premium including medical and prescription drug benefits at select ages are shown below:

FOR THOSE NOT ELIGIBLE FOR MEDICARE		
AGE	MALE	FEMALE
40	$266.51	$417.55
50	489.89	555.08
60	804.37	773.18
64	936.25	867.82

We assume coverage lapses when retiree becomes eligible for Medicare.

RETIREE PREMIUM RATE DEVELOPMENT

Based on the guidance provided by GASB on issues related to Medicare Part D payments to State and Local Governments effective June 30, 2006, an employer should apply the measurement requirements of GASB Statement No. 45 to determine the actuarial accrued liabilities, the annual required contribution of the employer, and the annual OPEB cost without reduction for Retiree Drug Subsidy (RDS) payments. Therefore, the impact of the RDS that is part of the Medicare Prescription Drug Improvement and Modernization Act of 2003 is not reflected in this report.

SECTION E
SUMMARY OF BENEFITS

CITY OF COPPERAS COVE
RETIREE HEALTH CARE PLAN
SUMMARY OF BENEFITS AS OF DECEMBER 31, 2010

PLAN PARTICIPANTS

Regular full-time employees of the City who retire are eligible to participate in the retiree health care plan.

NORMAL RETIREMENT BENEFITS

Employees are eligible with 20 years of service in TMRS or at age 60 with five years of service. Essentially if an employee is TMRS eligible, they are eligible for health care benefits as long as the health care benefits begin immediately upon retirement from the City. There is no option to opt out and get the health benefits reinstated at a later time.

DEFERRED RETIREMENT BENEFITS

Employees who terminate employment are not eligible for retiree health care benefits.

DUTY AND NON- DUTY DEATH IN SERVICE RETIREMENT BENEFITS

Survivors of employees who die while actively employed are not eligible for retiree health benefits.

DUTY AND NON-DUTY DISABLED RETIREMENT BENEFITS

Employees who retire under a disability retirement are immediately eligible for retiree health care benefits. Same benefit requirements as a normal retirement.

BENEFITS FOR SPOUSES / CHILDREN OF RETIRED EMPLOYEES

Spouses/children of retired employees are eligible to receive retiree health care benefits as long as the spouse/children were covered immediately prior to the employee retirement. No coverage options exist for surviving spouses of deceased retirees.

NON-MEDICARE AND MEDICARE– ELIGIBLE PROVISIONS

Retirees are required to enroll in Medicare once eligible. Retiree pays full Medicare premiums. City coverage ceases when retiree becomes eligible for Medicare coverage.

DENTAL AND VISION COVERAGE

The City does not offer dental or vision coverage for retirees or their dependents. COBRA benefits are available if the employee elects.

CITY OF COPPERAS COVE
RETIREE HEALTH CARE PLAN
SUMMARY OF BENEFITS AS OF DECEMBER 31, 2010 (CONTINUED)

LIFE INSURANCE COVERAGE

The City does not offer life insurance coverage for retirees or their dependents. Employees may choose to work directly with provider to convert any existing coverage.

RETIREE OPT-OUT

Retirees who decide to opt-out of health care plan will not be eligible to opt back in if coverage from another entity ceases.

PREMIUMS

Premiums effective 10/01/2010 thru 9/30/2011				
Plan Name	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Option I	274.84	673.88	481.92	824.38
Option II	346.10	848.66	606.90	1,038.18
Option III	386.50	947.68	677.72	1,159.34

SECTION F
SUMMARY OF PARTICIPANT DATA

CITY OF COPPERAS COVE
TOTAL ACTIVE MEMBERS AS OF DECEMBER 31, 2010
BY ATTAINED AGE AND YEARS OF SERVICE

Attained Age	Years of Service to Valuation Date							Total
	0-4	5-9	10-14	15-19	20-24	25-29	30 Plus	
Under 20	1							1
20-24	27							27
25-29	17	8						25
30-34	13	16	7	2				38
35-39	10	7	11	6	1			35
40-44	7	14	7	4	5			37
45-49	7	4	9	4	4	4	1	33
50-54	5	6	5	7	7	3	11	44
55-59	2	3	4	3		1	6	19
60-64	1	3	1	2	1	3		11
65 & Over	1			2			1	4
Totals	**91**	**61**	**44**	**30**	**18**	**11**	**19**	**274**

While not used in the financial computations, the following group averages are computed and shown because of their general interest.

Age:	41.6	years
Service:	11.2	years

CITY OF COPPERAS COVE
TOTAL RETIRED MEMBERS AS OF DECEMBER 31, 2010
BY ATTAINED AGE

Attained Age	Number of Retirees		
	Male	Female	Total
Under 55	6	0	6
55-59	2	0	2
60-64	1	0	1
65 & Over	0	1	1
Totals	**9**	**1**	**10**

The number counts above only include those retirees who have elected to receive retiree health care coverage through the City of Copperas Cove Retiree Health Care Plan.

SECTION G

ACTUARIAL COST METHOD AND ACTUARIAL ASSUMPTIONS

VALUATION METHODS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010

Actuarial Cost Method. The **Projected Unit Credit Cost Method** was used in the valuation. The actuarial present value of benefits allocated to the valuation year is the Normal Cost. The actuarial present value of benefits allocated to all prior periods is the Actuarial Accrued Liability. Actuarial gains (losses), as they occur, reduce (increase) the Unfunded Actuarial Accrued Liability.

Financing of Unfunded Actuarial Accrued Liabilities. Unfunded actuarial accrued liabilities (UAAL) (full funding credit if assets exceed liabilities) were amortized by level (principal & interest combined) percent-of-payroll contributions. The UAAL was determined using the funding value of assets and actuarial accrued liability calculated as of the valuation date. The UAAL amortization payment (one component of the contribution requirement), is the level percent-of-payroll required to fully amortize the UAAL over a 30 year period.

Actuarial Value of System Assets. The Actuarial Value of Assets is set equal to the reported market value of assets. The assets are allocated among the divisions based on liabilities valued at 4.50%. The assets may not be allowed for consideration as GASB assets, but are shown for illustrative purposes.

ACTUARIAL ASSUMPTIONS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010

General inflation is assumed to be 3.00% per year.

The rate of investment return for the Unfunded PAYGO run was 4.50% a year, compounded annually net after investment expenses. For the Funding Policy run, we assumed a 7.50% rate of investment return. The assumed real return is the rate of return in excess of price inflation. Considering other assumptions used in the valuation, the nominal rates translate to a net real return of 1.50% a year on the Unfunded PAYGO basis and 4.50% on the Funding Policy basis.

The rates of salary increase used for individual members are in accordance with the following table. This assumption is used to project a member's current salary to the salaries upon which future contributions will be based.

Years of Service	% Increase in Salary at Sample Ages		
	Service Based Rates	Sample Ages	Age Based Rates
0	12.00%	20	5.25%
1	9.00	25	5.25
2	7.00	30	5.25
3	7.00	35	5.00
4	6.00	40	4.50
5	6.00	45	4.50
6	5.50	50	4.00
7	5.50	55	4.00
8	5.50	60	3.75
9	5.50	65	3.50

The number of active members is assumed to remain constant in the future.

The payroll growth rate for financing Unfunded Actuarial Accrued Liabilities was assumed to be 3.00% per year.

ACTUARIAL ASSUMPTIONS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010 (CONTINUED)

The rates of post retirement mortality used for individual members are in accordance with the following tables.

For normal retirees, the probabilities of dying at sample attained ages were as follows:

Sample Attained Ages	Probability of Dying Next Year (Healthy)		Future Life Expectancy (years)	
	Men	Women	Men	Women
50	0.21%	0.19%	30.80	32.65
55	0.36	0.31	26.18	27.99
60	0.67	0.58	21.74	23.50
65	1.27	1.10	17.61	19.32
70	2.22	1.86	13.88	15.50
75	3.78	3.10	10.57	12.09
80	6.44	5.08	7.75	9.12

For disabled retirees, the probabilities of dying at sample attained ages were as follows:

Sample Attained Ages	Probability of Dying Next Year	
	Men	Women
50	2.38%	1.15%
55	3.03	1.65
60	3.67	2.18
65	4.35	2.80
70	5.22	3.76
75	6.58	5.22
80	8.70	7.23

These assumptions are used to measure the probabilities of each benefit payment being made after retirement.

ACTUARIAL ASSUMPTIONS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010 (CONTINUED)

The rates of mortality for active members are in accordance with the following tables.

Sample Attained Ages	Probability of Ordinary Death Next Year	
	Men	Women
20	0.03%	0.02%
25	0.04	0.02
30	0.04	0.03
35	0.07	0.05
40	0.10	0.07
45	0.14	0.11
50	0.20	0.17
55	0.32	0.27
60	0.59	0.51
65	1.13	0.97

The rates of retirement are the rates used in the TMRS valuation without adjustment.

	Male			Female		
	Entry Age Groups			Entry Age Groups		
Age	Ages 32 & Under	Ages 33-47	Ages 48 & Over	Ages 32 & Under	Ages 33-47	Ages 48 & Over
40-44	*.060*	-	-	*.060*	-	-
45-49	*.060*	-	-	*.060*	-	-
50-52	*.080*	-	-	*.080*	-	-
53	*.080*	*.100*	-	*.080*	*.100*	-
54	*.080*	*.100*	-	*.110*	*.100*	-
55-59	*.140*	*.100*	-	*.110*	*.100*	-
60	*.200*	*.150*	*.100*	*.140*	*.150*	*.100*
61	*.250*	*.300*	*.200*	*.280*	*.260*	*.200*
62	*.320*	*.250*	*.120*	*.280*	*.170*	*.120*
63	*.320*	*.230*	*.120*	*.280*	*.170*	*.120*
64	*.320*	*.350*	*.200*	*.280*	*.220*	*.200*
65	*.320*	*.320*	*.200*	*.280*	*.270*	*.200*
66-69	*.220*	*.220*	*.170*	*.220*	*.220*	*.170*
70-74	*.200*	*.220*	*.250*	*.220*	*.220*	*.250*
75 and over	1.000	1.000	1.000	1.000	1.000	1.000

ACTUARIAL ASSUMPTIONS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010 (CONTINUED)

Rates of separation from active membership were as shown below (rates do not apply to members eligible to retire and do not include separation on account of death or disability). This assumption measures the probabilities of members remaining in employment.

Years of Service	% of Active Members Separating Within Next Year	
	Male	Female
0	40.30%	40.80%
1	27.60%	30.40%
2	21.20%	25.70%
3	18.40%	20.70%
4	15.80%	17.60%
5	18.80%	22.50%
6	17.00%	20.20%
7	15.40%	18.20%
8	13.70%	16.20%
9	12.20%	14.60%
10	10.80%	12.90%
11	9.50%	11.40%
12	8.40%	9.90%
13	7.30%	8.30%
14	6.50%	7.40%
15	6.10%	6.50%
16	5.20%	5.60%
17	4.40%	4.60%
18	3.90%	3.90%
19	3.60%	3.30%

ACTUARIAL ASSUMPTIONS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010 (CONTINUED)

Rates of disability among active members.

Ordinary Disability		
	% Becoming Disabled within Next Year	
Sample Ages	Male	Female
20	0.00%	0.00%
25	0.00	0.00
30	0.01	0.00
35	0.03	0.01
40	0.07	0.04
45	0.13	0.08
50	0.21	0.13
55	0.31	0.22
60	0.38	0.30
65	0.38	0.30

Health cost increases are displayed in the following table:

Year	Medical and Drug
2011	9.00%
2012	8.50
2013	8.00
2014	7.50
2015	7.00
2016	6.50
2017	6.00
2018	5.50
2019	5.00
2020 and Later	4.50

MISCELLANEOUS AND TECHNICAL ASSUMPTIONS FOR CITY OF COPPERAS COVE AS OF DECEMBER 31, 2010

Administrative Expenses	No explicit assumption has been made for administrative expenses.
Decrement Operation	Disability and mortality decrements do operate during retirement eligibility.
Decrement Timing	Decrements of all types are assumed to occur mid-year.
Eligibility Testing	Eligibility for benefits is determined based upon the age nearest birthday and service nearest whole year on the date the decrement is assumed to occur.
Medicare Coverage	Assumed to be available for all covered employees on attainment of age 65. Disabled retirees were assumed to be eligible for Medicare coverage at age 65.
Election Percentage	It was assumed that 15% of retirees would choose to receive retiree health care benefits through the City. Of those assumed to elect coverage, 0% were assumed to elect two-person coverage.
Demographic Assumptions	This report has used the same demographic assumptions used to value the defined benefit retirement plan(s) in which the members participate. We are reliant upon the retirement plan actuary to develop the demographic assumptions. Based on our experience, the assumptions appear reasonable

APPENDIX

GLOSSARY

Accrued Service. The service credited under the plan which was rendered before the date of the actuarial valuation.

Actuarial Accrued Liability. The difference between (i) the actuarial present value of future plan benefits, and (ii) the actuarial present value of future normal cost. Sometimes referred to as "accrued liability" or "past service liability."

Actuarial Assumptions. Estimates of future plan experience with respect to rates of mortality, disability, turnover, retirement, rate or rates of investment income and salary increases. Decrement assumptions (rates of mortality, disability, turnover and retirement) are generally based on past experience, often modified for projected changes in conditions. Economic assumptions (salary increases and investment income) consist of an underlying rate in an inflation-free environment plus a provision for a long-term average rate of inflation.

Actuarial Cost Method. A mathematical budgeting procedure for allocating the dollar amount of the "actuarial present value of future plan benefits" between the actuarial present value of future normal cost and the actuarial accrued liability. Sometimes referred to as the "actuarial funding method."

Actuarial Equivalent. A single amount or series of amounts of equal value to another single amount or series of amounts, computed on the basis of the rate(s) of interest and mortality tables used by the plan.

Actuarial Present Value. The amount of funds presently required to provide a payment or series of payments in the future. It is determined by discounting the future payments at a predetermined rate of interest, taking into account the probability of payment.

Amortization. Paying off an interest-bearing liability by means of periodic payments of interest and principal, as opposed to paying it off with a lump sum payment.

GLOSSARY (CONCLUDED)

Annual Required Contribution (ARC). The ARC is the normal cost plus the portion of the unfunded actuarial accrued liability to be amortized in the current period. The ARC is an amount that is actuarially determined in accordance with the requirements so that, if paid on an ongoing basis, it would be expected to provide sufficient resources to fund both the normal cost for each year and the amortized unfunded liability.

Governmental Accounting Standards Board (GASB). GASB is the private, nonpartisan, nonprofit organization that works to create and improve the rules U.S. state and local governments follow when accounting for their finances and reporting them to the public.

Medical Trend Rate (Health Care Inflation). The increase in the cost of providing health care benefits over time. Trend includes such elements as pure price inflation, changes in utilization, advances in medical technology, and cost shifting.

Normal Cost. The annual cost assigned, under the actuarial funding method, to current and subsequent plan years. Sometimes referred to as "current service cost." Any payment toward the unfunded actuarial accrued liability is not part of the normal cost.

Other Post-Employment Employee Benefits (OPEB). OPEB are post-employment benefits other than pensions. OPEB generally takes the form of health insurance and dental, vision, prescription drugs or other health care benefits.

Reserve Account. An account used to indicate that funds have been set aside for a specific purpose and are not generally available for other uses.

Unfunded Actuarial Accrued Liability. The difference between the actuarial accrued liability and valuation assets. Sometimes referred to as "unfunded accrued liability."

Valuation Assets. The value of current plan assets recognized for valuation purposes.