



Ohio Administrative Code

Rule 145-4-60 Plans offered to medicare-eligible benefit recipients.

Effective: January 1, 2019

(A) Rules 145-4-60 to 145-4-68 of the Administrative Code apply to the plans sponsored by the public employees retirement system and offered to medicare-eligible benefit recipients and their dependents.

(B) Public employee and public employer have the same meanings as in section 145.01 of the Revised Code.

(C) Upon a benefit recipient or dependent becoming eligible for medicare, the system may provide an eligible benefit recipient with access to a monthly allowance through a health reimbursement arrangement account. A benefit recipient who is a public employee shall not participate in the health reimbursement arrangement sponsored by the system during any month that the recipient is a public employee.

(D) The system may provide to a medicare-eligible benefit recipient who is a public employee health care coverage that pays secondary to medicare as described in rules 145-4-62 to 145-4-68 of the Administrative Code. In its sole discretion, the system may also make this coverage available on a temporary basis to eligible benefit recipients who are not public employees until such time as the benefit recipient : (1) begins participation in the health reimbursement arrangement or (2) becomes medicare-eligible following a medicare coordination period.

(E) Medicare-eligible benefit recipients are not eligible for coverage or allowances described in paragraph (C) or (D) of this rule during any period of benefit suspension or forfeiture.

(F) The retirement system shall offer continuation coverage, as applicable, in accordance with the requirements of the Consolidated Omnibus Budget and Reconciliation Act of 1985 (COBRA), 42 United States Code 300gg-1.
