



State of Alaska

Public Employees' Retirement System

Actuarial Valuation Report
As of June 30, 2020

May 2021



May 20, 2021

State of Alaska
The Alaska Retirement Management Board
The Department of Revenue, Treasury Division
The Department of Administration, Division of Retirement and Benefits
P.O. Box 110203
Juneau, AK 99811-0203

Certification of Actuarial Valuation

Dear Members of The Alaska Retirement Management Board, The Department of Revenue and The Department of Administration:

This report summarizes the annual actuarial valuation results of the State of Alaska Public Employees' Retirement System (PERS) as of June 30, 2020 performed by Buck Global, LLC (Buck). This report is an update to the draft report dated January 22, 2021, reflecting minor wording changes.

The actuarial valuation is based on financial information provided in the financial statements audited by KPMG LLP, member data provided by the Division of Retirement and Benefits, and medical enrollment data provided by the healthcare claims administrator (Aetna), as summarized in this report. The benefits considered are those delineated in Alaska statutes effective June 30, 2020. The actuary did not verify the data submitted, but did perform tests for consistency and reasonableness.

All costs, liabilities and other factors under PERS were determined in accordance with generally accepted actuarial principles and procedures. An actuarial cost method is used to measure the actuarial liabilities which we believe is reasonable. Buck is solely responsible for the actuarial data and actuarial results presented in this report. This report fully and fairly discloses the actuarial position of PERS as of June 30, 2020.

PERS is funded by Employer, State, and Member Contributions in accordance with the funding policy adopted by the Alaska Retirement Management Board (Board) and as required by Alaska state statutes. The funding objective for PERS is to pay required contributions that remain level as a percent of total PERS compensation. The Board has also established a funding policy objective that the required contributions be sufficient to pay the Normal Costs of active plan members, plan expenses, and amortize the Unfunded Actuarial Accrued Liability (UAAL) as a level percentage of total PERS compensation over a closed 25-year period as required by Alaska state statutes. The closed 25-year period was originally established effective June 30, 2014. Effective June 30, 2018, the Board adopted a 25-year layered UAAL amortization method as described in Section 5.2. The UAAL amortization continues to be on a level percent of pay basis. The compensation used to determine required contributions is the total compensation of all active members in PERS, including those hired after July 1, 2006 who are members of the Defined Contribution Retirement (DCR) Plan. This objective is currently being met and is projected to continue to be met. Absent future gains/losses, actuarially determined contributions are expected to remain level as a percent of pay and the overall funded status (on a combined pension/healthcare basis) is expected to increase to 100% in FY38.

The Board and staff of the State of Alaska may use this report for the review of the operations of PERS. Use of this report, for any other purpose or by anyone other than the Board or staff of the State of Alaska may not be appropriate and may result in mistaken conclusions because of failure to understand applicable assumptions, methods, or inapplicability of the report for that purpose. Because of the risk of misinterpretation of actuarial results, you should ask Buck to review any statement you wish to make on the results contained in this report. Buck will not accept any liability for any such statement made without the review by Buck.

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions or applicable law. In particular, 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 analysis of the potential range of such future differences is beyond the scope of this valuation.

In our opinion, the actuarial assumptions used are reasonable, taking into account the experience of the plan and reasonable long-term expectations, and represent our best estimate of the anticipated long-term experience under the plan. The actuary performs an analysis of plan experience periodically and recommends changes if, in the opinion of the actuary, assumption changes are needed to more accurately reflect expected future experience. The last full experience analysis was performed for the period July 1, 2013 to June 30, 2017. Based on that experience study, the Board adopted new assumptions effective beginning with the June 30, 2018 valuation to better reflect expected future experience. Based on our annual analysis of recent claims experience, changes were made to the per capita claim cost rates effective June 30, 2020 to better reflect expected future healthcare experience. A summary of the actuarial assumptions and methods used in this actuarial valuation is shown in Sections 5.2 and 5.3. We certify that the assumptions and methods described in Sections 5.2 and 5.3 of this report meet the requirements of all applicable Actuarial Standards of Practice.

Governmental Accounting Standards Board (GASB) Statement No. 67 (GASB 67) was effective for PERS beginning with fiscal year ending June 30, 2014, and Statement No. 74 (GASB 74) was effective for PERS beginning with fiscal year ending June 30, 2017. Separate GASB 67 and GASB 74 reports as of June 30, 2020 have been prepared. We have also prepared the member data tables shown in Section 4 of this report for the Statistical Section of the CAFR, as well as the summary of actuarial assumptions and analysis of financial experience for the Actuarial Section of the CAFR. Please see our separate GASB 67 and GASB 74 reports for other information needed for the CAFR.

Assessment of Risks

Actuarial Standard of Practice No. 51 (ASOP 51) applies to actuaries performing funding calculations related to a pension plan. ASOP 51 does not apply to actuaries performing services in connection with other post-employment benefits, such as medical benefits. Accordingly, ASOP 51 does not apply to the healthcare portion of PERS. See Section 6 of this report for further details regarding ASOP 51.

Use of Models

Actuarial Standard of Practice No. 56 (ASOP 56) provides guidance to actuaries when performing actuarial services with respect to designing, developing, selecting, modifying, using, reviewing, or evaluating models. Buck uses third-party software in the performance of annual actuarial valuations and projections. The model is intended to calculate the liabilities associated with the provisions of the plan using data and assumptions as of the measurement date under

the funding methods specified in this report. The output from the third-party vendor software is used as input to internally developed models that apply applicable funding methods and policies to the derived liabilities and other inputs, such as plan assets and contributions, to generate many of the exhibits found in this report. Buck has an extensive review process in which the results of the liability calculations are checked using detailed sample life output, changes from year to year are summarized by source, and significant deviations from expectations are investigated. Other funding outputs and the internal models are similarly reviewed in detail and at a higher level for accuracy, reasonability, and consistency with prior results. Buck also reviews the third-party model when significant changes are made to the software. This review is performed by experts within Buck who are familiar with applicable funding methods, as well as the manner in which the model generates its output. If significant changes are made to the internal models, extra checking and review are completed. Significant changes to the internal models that are applicable to multiple clients are generally developed, checked, and reviewed by multiple experts within Buck who are familiar with the details of the required changes.

Additional models used in valuing health benefits are described later in the report.

COVID-19

The potential impact of the ongoing COVID-19 pandemic on costs and liabilities was considered and an adjustment was made in setting the medical per capita claims cost assumption. FY20 medical claims were adjusted for a COVID-19 related decline in claims during the last four months (March – June) of FY20. A more detailed explanation on these adjustments is shown in Section 5.2.

This report was prepared under my supervision and in accordance with all applicable Actuarial Standards of Practice. I am a Fellow of the Society of Actuaries, an Enrolled Actuary, a Fellow of the Conference of Consulting Actuaries, and a Member of the American Academy of Actuaries. I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinions contained herein.

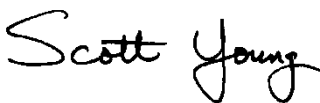
I am available to discuss this report with you at your convenience. I can be reached at 602-803-6174.

Respectfully submitted,



David J. Kershner, FSA, EA, MAAA, FCA
Principal
Buck

The undersigned actuary is responsible for all assumptions related to the average annual per capita health claims cost and the health care cost trend rates, and hereby affirms his qualification to render opinions in such matters in accordance with the Qualification Standards of the American Academy of Actuaries.



Scott Young, FSA, EA, MAAA, FCA
Director
Buck

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Executive Summary

Overview

The State of Alaska Public Employees' Retirement System (PERS) provides pension and postemployment healthcare benefits to eligible participants. The Commissioner of the Department of Administration is responsible for administering the plan. The Alaska Retirement Management Board has fiduciary responsibility over the assets of the plan. This report presents the results of the actuarial valuation of PERS as of the valuation date of June 30, 2020.

Purpose

An actuarial valuation is performed on the plan annually as of the end of the fiscal year. The main purposes of the actuarial valuation detailed in this report are:

1. To determine the Employer/State contribution necessary to meet the Board's funding policy for the plan;
2. To disclose the funding assets and liability measures as of the valuation date;
3. To review the current funded status of the plan and assess the funded status as an appropriate measure for determining future actuarially determined contributions;
4. To compare actual and expected experience under the plan during the last fiscal year; and
5. To report trends in contributions, assets, liabilities, and funded status over the last several years.

The actuarial valuation provides a "snapshot" of the funded position of PERS based on the plan provisions, membership data, assets, and actuarial methods and assumptions as of the valuation date.

Actuarial projections are also performed to provide a long-term view of the expected future funded status and contribution patterns (see Section 3). The future funded status and contribution patterns would be different than those shown in Section 3 if future experience does not match the actuarial assumptions used in the projections.

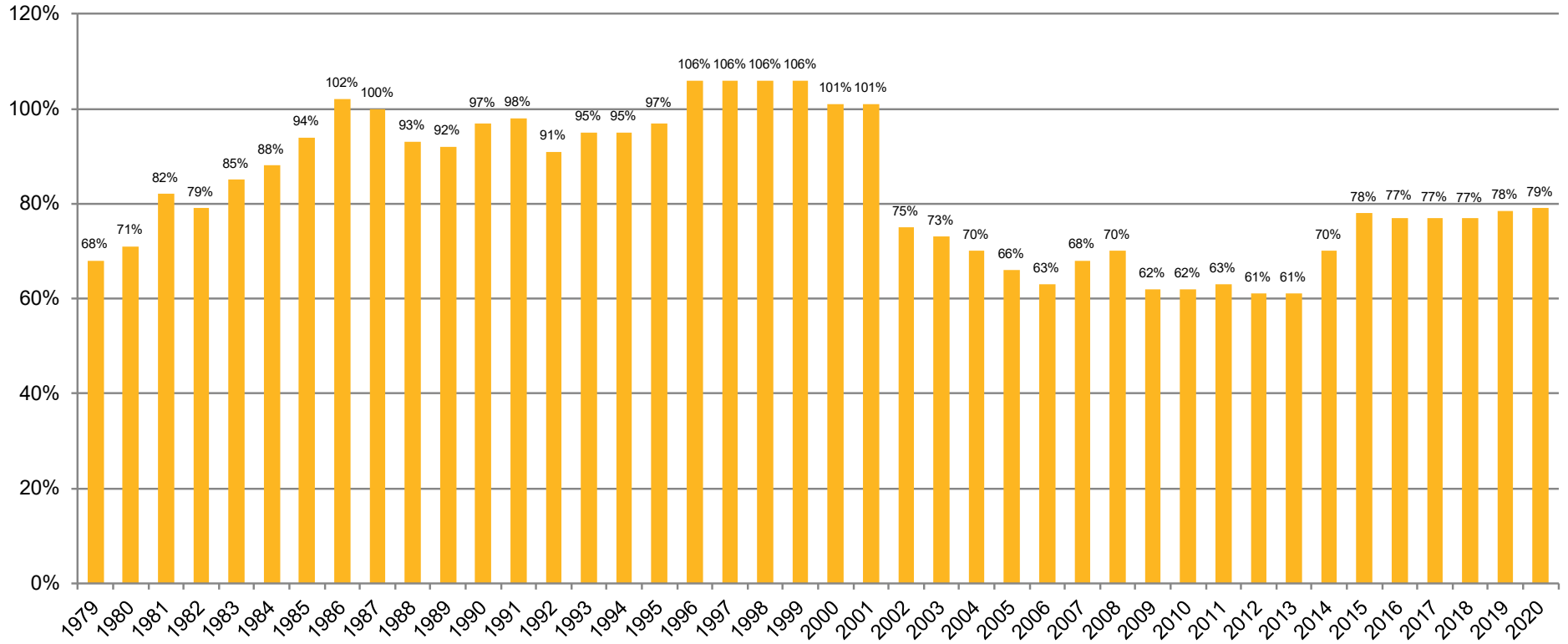
Retiree group benefits models necessarily rely on the use of approximations and estimates, and are sensitive to changes in these approximations and estimates. Small variations in these approximations and estimates may lead to significant changes in actuarial measurements.

Funded Status

Where presented, references to "funded ratio" and "unfunded actuarial accrued liability" typically are measured on an actuarial value of assets basis. It should be noted that the same measurements using market value of assets would result in different funded ratios and unfunded accrued liabilities. Moreover, the funded ratio presented is appropriate for evaluating the need and level of future contributions but makes no assessment regarding the funded status of the plan if the plan were to settle (i.e. purchase annuities) for a portion or all of its liabilities.

Funded Status as of June 30 (\$'s in 000's)	2019	2020
Pension		
a. Actuarial Accrued Liability	\$ 15,039,180	\$ 15,279,525
b. Valuation Assets	9,576,693	9,713,710
c. Unfunded Actuarial Accrued Liability, (a) - (b)	\$ 5,462,487	\$ 5,565,815
d. Funded Ratio based on Valuation Assets, (b) ÷ (a)	63.7%	63.6%
e. Fair Value of Assets	\$ 9,489,405	\$ 9,469,161
f. Funded Ratio based on Fair Value of Assets, (e) ÷ (a)	63.1%	62.0%
Healthcare		
a. Actuarial Accrued Liability	\$ 7,151,694	\$ 7,036,550
b. Valuation Assets	7,810,491	7,989,358
c. Unfunded Actuarial Accrued Liability, (a) - (b)	\$ (658,797)	\$ (952,808)
d. Funded Ratio based on Valuation Assets, (b) ÷ (a)	109.2%	113.5%
e. Fair Value of Assets	\$ 7,767,692	\$ 7,813,511
f. Funded Ratio based on Fair Value of Assets, (e) ÷ (a)	108.6%	111.0%
Total		
a. Actuarial Accrued Liability	\$ 22,190,874	\$ 22,316,075
b. Valuation Assets	17,387,184	17,703,068
c. Unfunded Actuarial Accrued Liability, (a) - (b)	\$ 4,803,690	\$ 4,613,007
d. Funded Ratio based on Valuation Assets, (b) ÷ (a)	78.4%	79.3%
e. Fair Value of Assets	\$ 17,257,097	\$ 17,282,672
f. Funded Ratio based on Fair Value of Assets, (e) ÷ (a)	77.8%	77.4%

Funded Ratio History (Based on Valuation Assets)



The key reasons for the change in the funded status are explained below. The funded status for healthcare benefits is not necessarily an appropriate measure to confirm that assets are sufficient to settle health plan obligations as there are no available financial instruments for purchase. Future experience is likely to vary from assumptions, so there is potential for actuarial gains or losses.

1. Investment Experience

The actuarial asset value was reinitialized to equal fair value of assets as of June 30, 2014. Beginning in FY15, the asset valuation method recognizes 20% of the investment gain or loss each year, for a period of five years. The FY20 investment return based on fair value of assets was approximately 4.1% compared to the expected investment return of 7.38% (net of investment expenses of approximately 0.29%). This resulted in a market asset loss of approximately \$556 million. Due to the recognition of investment gains and losses over a 5-year period, the FY20 investment return based on actuarial value of assets was approximately 5.8%, which resulted in an actuarial asset loss of approximately \$275 million.

2. Salary Increases

Salary increases for continuing active members during FY20 were less than expected based on the valuation assumptions, resulting in a liability gain of approximately \$11 million.

3. Demographic Experience

Section 4 provides statistics on active and inactive participants. The number of active participants decreased 9.2% from 12,152 at June 30, 2019 to 11,033 at June 30, 2020 due to active members exiting the plan during the year (due to retirement, termination, death, and disability) and the closure of the plan to new entrants as of July 1, 2006. The average age of active participants increased from 52.84 to 53.21 and average credited service increased from 17.80 to 18.38 years.

The number of benefit recipients increased 2.2% from 36,310 to 37,106 and their average age increased from 70.29 to 70.77. The number of vested terminated participants decreased 3.1% from 5,499 to 5,327. Their average age increased from 53.06 to 53.52.

The overall effect of the demographic experience during FY20 was a liability loss of approximately \$13.5 million (pension) and a liability gain of approximately \$27.6¹ million (healthcare).

4. COLA / PRPA Experience

The cost-of-living increases (COLA) for benefit recipients during FY20 were less than expected based on the valuation assumptions, resulting in a liability gain of approximately \$5 million. The postretirement pension adjustments (PRPA) were also less than expected, resulting in a liability gain of approximately \$74 million.

5. Retiree Medical Claims Experience

As described in Section 5.2, recent medical claims experience and changes in healthcare enrollment data provided to us for the June 30, 2020 valuation generated a liability gain of approximately \$280 million. The decrease in retired member contributions from CY20 to CY21 generated a liability loss of approximately \$1 million. Reduced claims during FY20, largely attributable to COVID-19, generated a liability gain of approximately \$26 million.

6. Changes in Methods Since the Prior Valuation

There were no changes in actuarial methods since the prior valuation.

¹ Includes the effects of changes in dependent coverage elections and Medicare Part B only experience.

7. Changes in Assumptions Since the Prior Valuation

Healthcare claim costs are updated annually as described in Section 5.2. Retired member contributions were updated to reflect the 5% decrease from CY20 to CY21. The amounts included in the Normal Cost for administrative expenses were updated based on the last two years of actual administrative expenses paid from plan assets. There were no other changes in actuarial assumptions since the prior valuation.

8. Changes in Benefit Provisions Since the Prior Valuation

There have been no changes in benefit provisions valued since the prior valuation.

Comparative Summary of Contribution Rates

Pension	Actual FY 2022	Estimated FY 2023
a. Normal Cost Rate Net of Member Contributions	2.58%	2.37%
b. Past Service Cost Rate	<u>18.31%</u>	<u>18.53%</u>
c. Total Employer/State Contribution Rate, (a) + (b), not less than (a) ¹	20.89%	20.90%

Healthcare	Actual FY 2022	Estimated FY 2023
a. Normal Cost Rate	3.12%	2.84%
b. Past Service Cost Rate	<u>(1.80%)</u>	<u>(2.95%)</u>
c. Total Employer/State Contribution Rate, (a) + (b), not less than (a) ¹	3.12%	2.84%

Total	Actual FY 2022	Estimated FY 2023
a. Normal Cost Rate Net of Member Contributions	5.70%	5.21%
b. Past Service Cost Rate	<u>18.31%</u>	<u>18.53%</u>
c. Total Employer/State Contribution Rate, (a) + (b) ¹	24.01%	23.74%
d. Board Adopted Total Employer/State Contribution Rate	24.01%	TBD
e. Defined Contribution Retirement (DCR) Rate Paid by Employers	<u>6.10%</u>	<u>6.41%</u>
f. Board Adopted Total Rate, Including DCR Rate Paid by Employers, (d) + (e)	30.11%	TBD

Contribution rates are based on total (DB and DCR) payroll. The contribution rates shown above for FY23 are estimated assuming no actuarial gains/losses during FY21 and FY22. Actual FY23 contribution rates will be adopted by the Board in September 2021 reflecting FY21 asset experience.

Contribution rates include Employer contribution rates as limited by Alaska state statutes and the Additional State Contribution required under SB 125.

¹ Beginning with the June 30, 2014 valuation, contribution rates for FY17 and beyond are determined using new methodology in accordance with 2014 legislation under HB 385 and SB 119, 2014 Alaska Laws, which changed the amortization methodology to a closed 25-year period as a level percentage of pay, and eliminated the time lag on the contribution rate calculation by using a 2-year "roll-forward" approach assuming 0% population growth. Investment gains and losses are recognized over a 5-year period beginning in FY15. Beginning with the June 30, 2018 valuation, the UAAL amortization was changed as described in Section 5.2.

Summary of Actuarial Accrued Liability Gain/(Loss) and Other Changes During the Year

The following table summarizes the sources of change in the total Employer/State contribution rate as of June 30, 2019 and June 30, 2020 based on DB and DCR payroll combined:

	Pension	Healthcare	Total
1. Total Employer/State Contribution Rate as of June 30, 2019	20.17%	3.91%	24.08%
2. Change due to:			
a. Health Claims Experience	N/A	(0.87)%	(0.87)%
b. Salary Increases	(0.03)%	N/A	(0.03)%
c. Investment Experience	0.44%	0.31%	0.75%
d. Demographic Experience and Miscellaneous ¹	(0.19)%	0.38%	0.19%
e. Actual vs Expected Contributions	0.15%	(0.16)%	(0.01)%
f. Assumption Changes	<u>0.00%</u>	<u>0.00%</u>	<u>0.00%</u>
g. Total Change, (a) + (b) + (c) + (d) + (e) + (f)	0.37%	(0.34)%	0.03%
3. Total Employer/State Contribution Rate as of June 30, 2020, (1) + (2)(g)	20.54%	3.57%	24.11%

The following table shows the FY20 gain/(loss) on actuarial accrued liability as of June 30, 2020 (\$'s in 000's):

	Pension	Healthcare	Total
Retirement Experience	\$ (1,285)	\$ 4,857	\$ 3,572
Termination Experience	(4,857)	(8,049)	(12,906)
Disability Experience	(901)	867	(34)
Active Mortality Experience	4,182	(1,942)	2,240
Inactive Mortality Experience	(10,603)	2,098	(8,505)
Salary Increases	11,228	N/A	11,228
Rehires (Net of Rehire Load)	8,418	15,996	24,414
COLA Increases	4,618	N/A	4,618
PRPA Increases	74,177	N/A	74,177
Per Capita Claims Cost	N/A	278,796	278,796
COVID-19 Experience ²	N/A	25,856	25,856
Medicare Part B Only Experience	N/A	6,345	6,345
Changes in Dependent Coverage Elections	N/A	23,400	23,400
Programming Changes ³	1,406	N/A	1,406
Miscellaneous ⁴	<u>4,429</u>	<u>1,735</u>	<u>6,164</u>
Total	\$ 90,812	\$ 349,959	\$ 440,771

¹ Includes the effects of census data changes between the two valuations.

² Difference between actual and expected claims, largely attributable to COVID-19.

³ Includes adjustments to (a) the 75% PRPA for occupational disabilities to commence immediately, and (b) the mortality applied during the COLA deferral period for Tier 2 and Tier 3 members.

⁴ Includes the effects of various data changes that are typical when new census data is received for the annual valuation, the effects of the differences between expected and actual benefit payments, and other items that do not fit neatly into any of the other categories.

The rehire gain/(loss) amount shown on the previous page is the difference between (i) the increase in Actuarial Accrued Liability at June 30, 2020 due to rehires during the most recent plan year, and (ii) the load that was added to the June 30, 2019 Normal Cost based on the rehire load assumption used in the June 30, 2019 valuation. The development of the FY20 rehire gain/(loss) amount is shown in the table below (\$'s in 000's):

	Pension	Healthcare	Total
1. Increase/(Decrease) in Actuarial Accrued Liability at June 30, 2020 due to Rehires	\$ 15,604	\$ (2,208)	\$ 13,396
2. June 30, 2019 Normal Cost Rehire Load, with interest to June 30, 2020	\$ 24,022	\$ 13,788	\$ 37,810
3. Rehire Gain/(Loss), (2) - (1)	\$ 8,418	\$ 15,996	\$ 24,414

Section 3: Projections

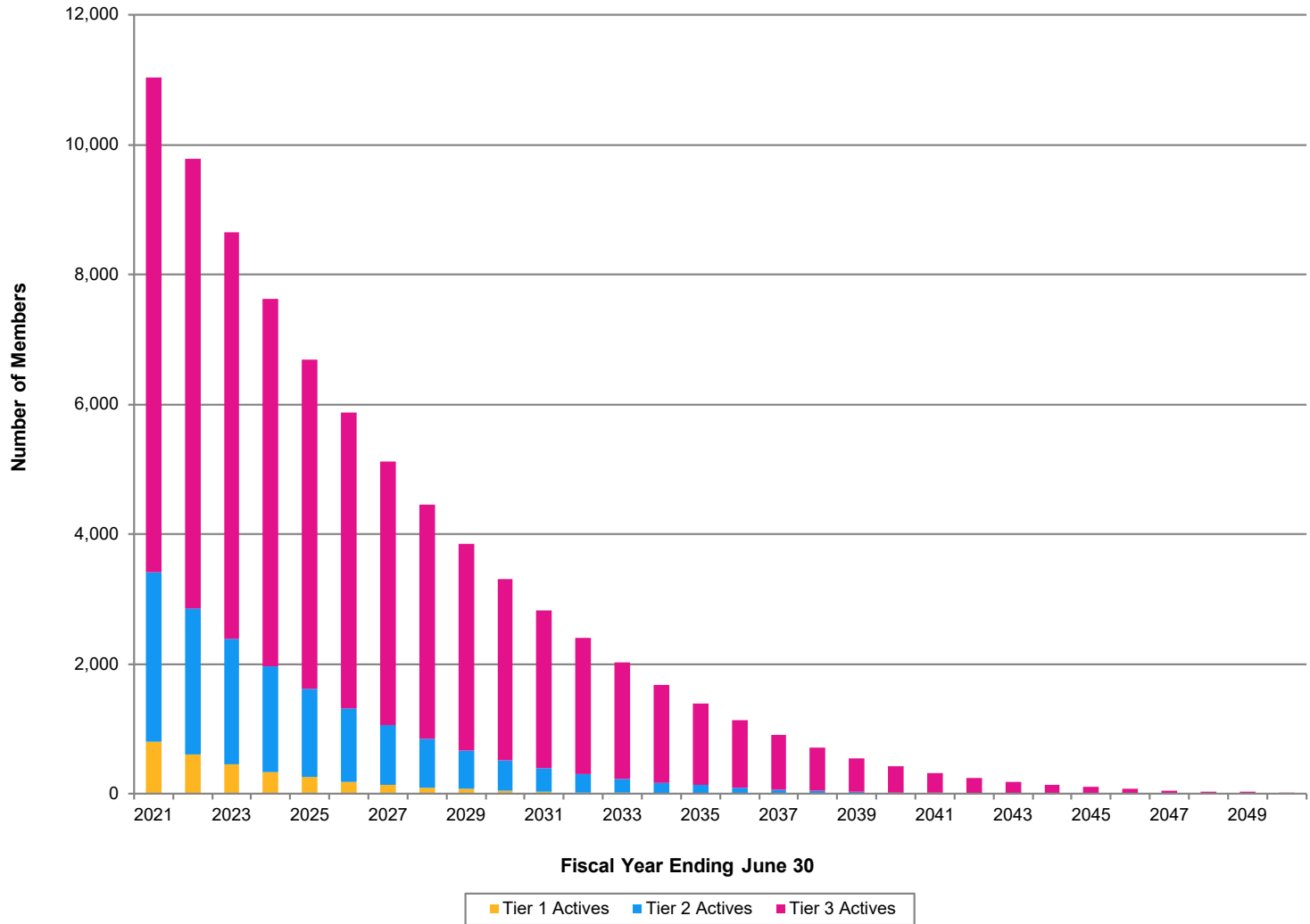
Section 3.1: Projection Assumptions and Methods

Key Assumptions

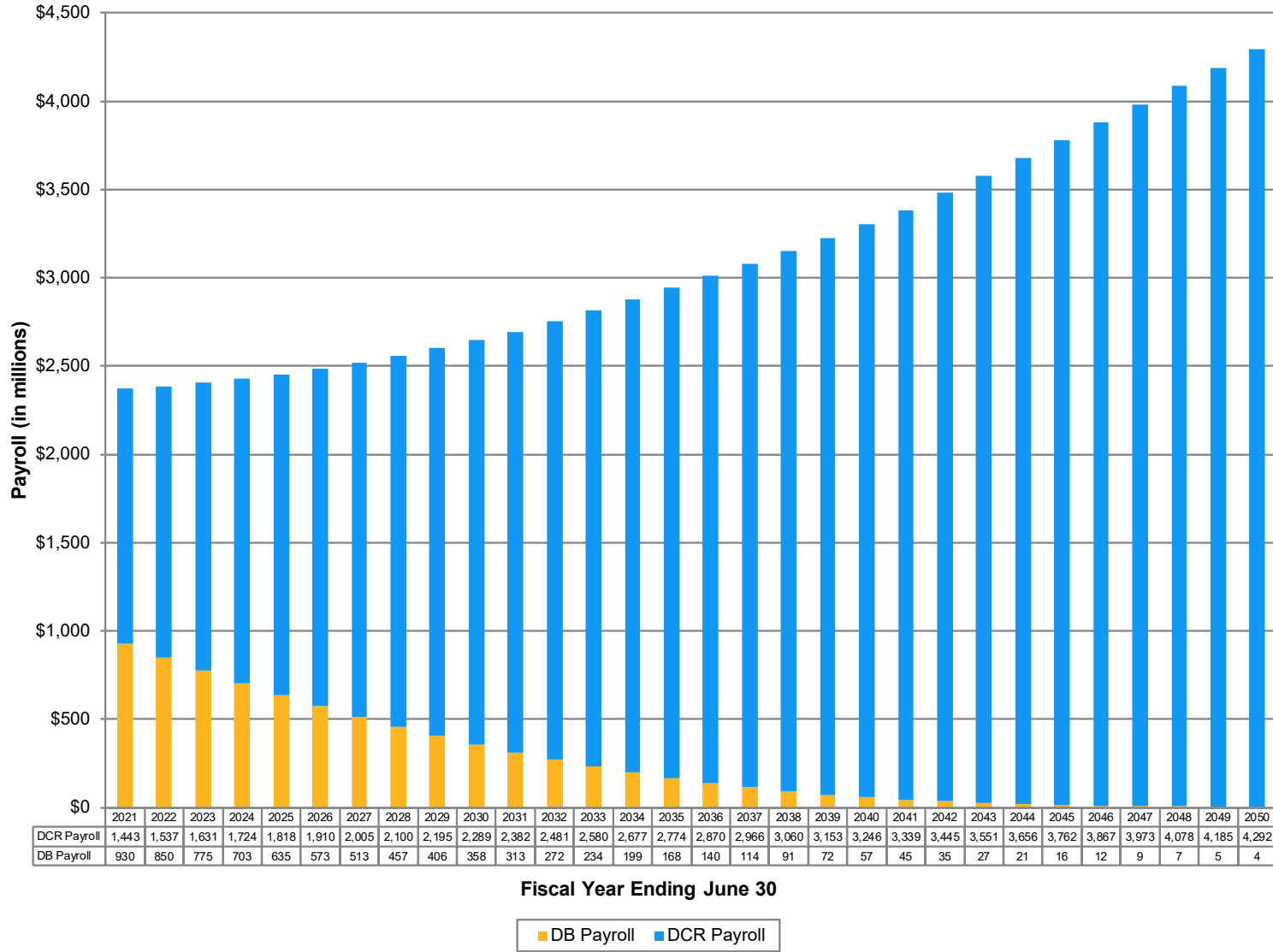
- 7.38% investment return (net of investment expenses) on the Fair Value of Assets in all future years.
- The Actuarial Value of Assets was re-initialized to Fair Value as of June 30, 2014. The Actuarial Value of Assets after June 30, 2014 reflects the deferred gains and losses generated by the smoothing method. The current deferred amount is recognized in the first four years of the projections.
- Actuarial assumptions and methods as described in Section 5. No actuarial gains/losses are assumed after June 30, 2020.
- The actuarially calculated contribution rate using a two-year roll-forward approach is adopted each year.
- Projections assume a 0% increase in the total active member population. All new members are expected to enter the DCR plan.
- Contribution rates are determined as a percent of total DB and DCR payroll.
- The DCR contribution rate determined as of June 30, 2020 is assumed to remain constant in all future years.
- The active rehire assumption shown in Section 5 is assumed to grade to zero on a uniform basis over 20 years.
- The Normal Cost is increased by the administrative expenses shown in Section 5. For future years, the percent increase is assumed to remain constant.

Section 3.2: Membership Projection

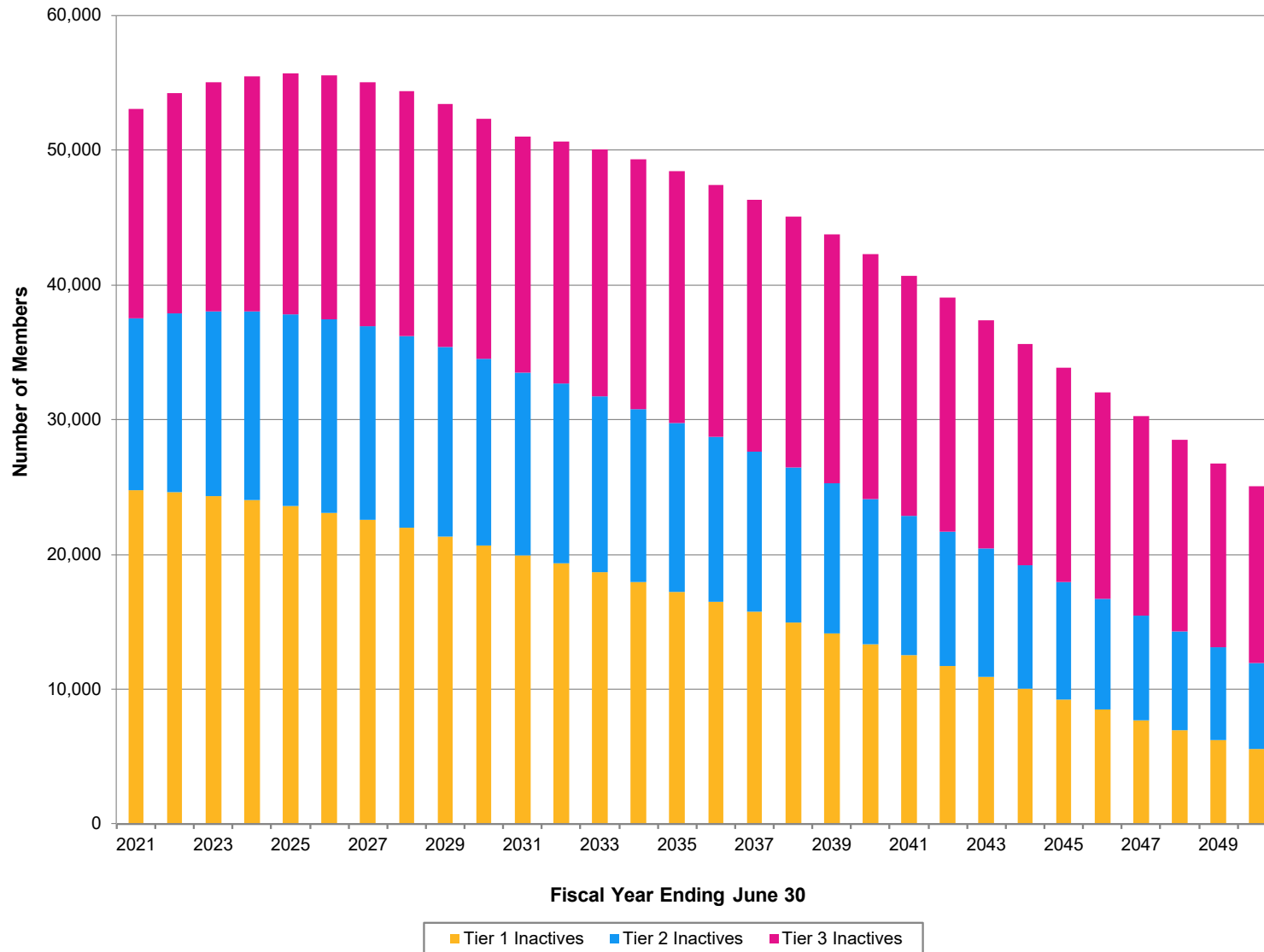
Projected Active Member Count



Projected DB and DCR Payroll

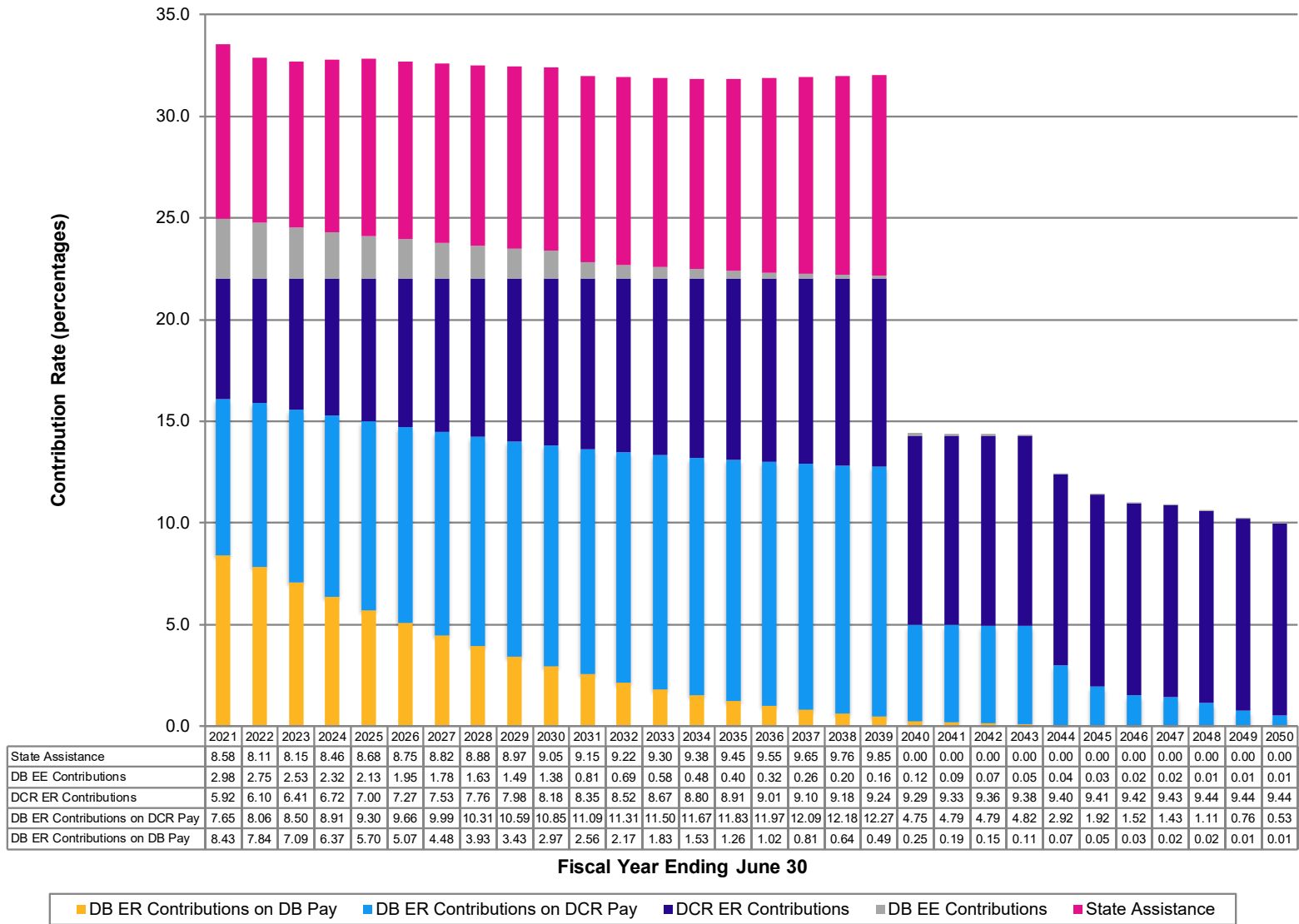


Projected Inactive Member Count

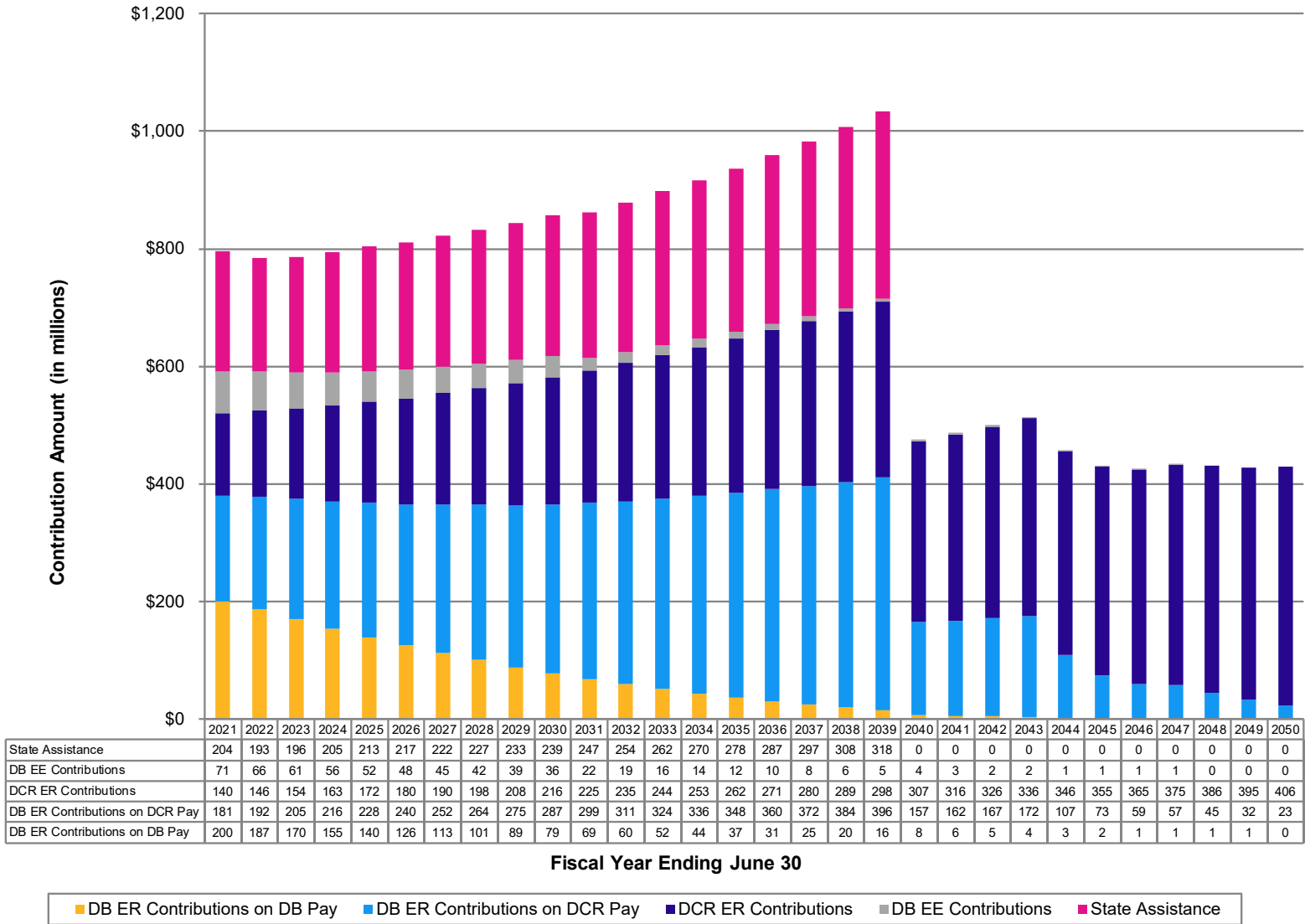


Section 3.3: Projected Employer/State Contribution Rates

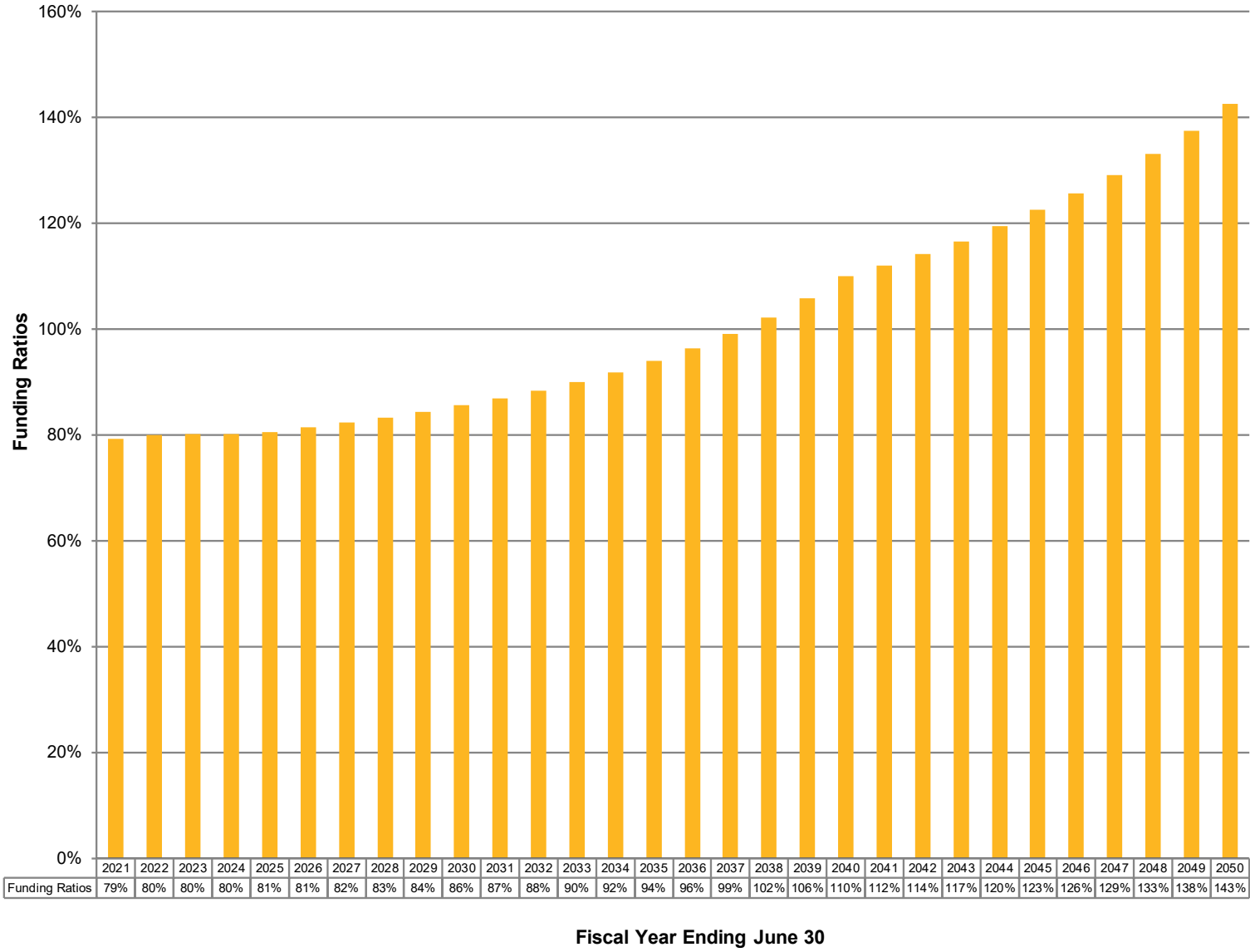
Based on Total DB and DCR Payroll



Section 3.4: Projected Employer/State Contribution Amounts



Section 3.5: Projection of Funded Ratios



Section 3.6: Table of Projected Actuarial Results (\$'s in 000's)

Fiscal Year End	Valuation Amounts on July 1 (Beginning of FY)				Cash Flow Amounts during Following 12 Months								Deferred Asset Gain / (Loss)	
	Actuarial Assets	Accrued Liability	Funding Ratio	Unfunded Liability / (Surplus)	Total Salaries	Contribution Rates			DB Contributions					Benefit Payments
						Employer / State	DCR	Total	Employer	State Assistance	Employee	Total		
2021	\$ 17,703,068	\$ 22,316,075	79.3%	\$ 4,613,007	\$ 2,373,078	24.66%	5.92%	30.58%	\$ 381,591	\$ 203,585	\$ 70,747	\$ 655,923	\$ 1,352,299	\$ (418,528)
2022	18,247,187	22,784,800	80.1%	4,537,613	2,386,626	24.01%	6.10%	30.11%	379,474	193,494	65,590	638,558	1,421,212	(269,705)
2023	18,595,915	23,193,406	80.2%	4,597,491	2,405,076	23.74%	6.41%	30.15%	374,951	196,014	60,746	631,711	1,489,985	(111,116)
2024	18,894,305	23,547,126	80.2%	4,652,821	2,427,345	23.74%	6.72%	30.46%	370,898	205,353	56,410	632,661	1,555,059	0
2025	19,208,705	23,835,914	80.6%	4,627,209	2,453,152	23.68%	7.00%	30.68%	367,973	212,934	52,320	633,227	1,616,352	0
2026	19,603,824	24,064,939	81.5%	4,461,115	2,482,633	23.48%	7.27%	30.75%	365,692	217,230	48,466	631,388	1,673,417	0
2027	19,968,002	24,236,014	82.4%	4,268,012	2,518,456	23.29%	7.53%	30.82%	364,421	222,128	44,877	631,426	1,725,814	0
2028	20,305,701	24,350,613	83.4%	4,044,912	2,557,461	23.12%	7.76%	30.88%	364,183	227,103	41,747	633,033	1,777,534	0
2029	20,617,244	24,407,417	84.5%	3,790,173	2,600,575	22.99%	7.98%	30.97%	364,600	233,272	38,835	636,707	1,825,840	0
2030	20,906,363	24,406,459	85.7%	3,500,096	2,646,356	22.87%	8.18%	31.05%	365,726	239,495	36,390	641,611	1,873,521	0
2031	21,173,270	24,345,754	87.0%	3,172,484	2,695,674	22.80%	8.35%	31.15%	367,960	246,654	21,835	636,449	1,907,575	0
2032	21,420,038	24,222,943	88.4%	2,802,905	2,753,450	22.70%	8.52%	31.22%	371,165	253,868	18,999	644,032	1,950,868	0
2033	21,648,740	24,037,418	90.1%	2,388,678	2,813,927	22.63%	8.67%	31.30%	375,096	261,695	16,321	653,112	1,991,642	0
2034	21,862,183	23,787,589	91.9%	1,925,406	2,876,779	22.58%	8.80%	31.38%	379,735	269,842	13,809	663,386	2,025,140	0
2035	22,067,995	23,477,147	94.0%	1,409,152	2,942,401	22.54%	8.91%	31.45%	385,160	278,057	11,770	674,987	2,054,265	0
2036	22,271,486	23,106,796	96.4%	835,310	3,010,276	22.54%	9.01%	31.55%	391,035	287,481	9,633	688,149	2,078,154	0
2037	22,479,542	22,678,036	99.1%	198,494	3,079,581	22.55%	9.10%	31.65%	397,266	297,180	8,007	702,453	2,097,506	0
2038	22,698,380	22,193,626	102.3%	(504,754)	3,150,757	22.58%	9.18%	31.76%	403,927	307,514	6,302	717,743	2,107,908	0
2039	22,939,090	21,658,492	105.9%	(1,280,598)	3,225,637	22.61%	9.24%	31.85%	411,592	317,725	5,161	734,478	2,112,689	0
2040	23,210,569	21,075,430	110.1%	(2,135,139)	3,303,529	5.00%	9.29%	14.29%	165,177	0	3,964	169,141	2,106,710	0
2041	22,910,733	20,452,598	112.0%	(2,458,135)	3,384,397	4.98%	9.33%	14.31%	168,543	0	3,046	171,589	2,093,286	0
2042	22,605,407	19,795,332	114.2%	(2,810,075)	3,480,660	4.94%	9.36%	14.30%	171,945	0	2,436	174,381	2,070,972	0
2043	22,303,744	19,113,840	116.7%	(3,189,904)	3,578,351	4.93%	9.38%	14.31%	176,413	0	1,789	178,202	2,041,737	0
2044	22,014,246	18,408,000	119.6%	(3,606,246)	3,677,480	2.99%	9.40%	12.39%	109,957	0	1,471	111,428	2,000,543	0
2045	21,677,042	17,691,616	122.5%	(3,985,426)	3,777,877	1.97%	9.41%	11.38%	74,424	0	1,133	75,557	1,953,832	0
2046	21,326,348	16,969,894	125.7%	(4,356,454)	3,879,356	1.55%	9.42%	10.97%	60,130	0	776	60,906	1,900,124	0
2047	20,990,408	16,249,910	129.2%	(4,740,498)	3,981,953	1.45%	9.43%	10.88%	57,738	0	796	58,534	1,839,620	0
2048	20,690,074	15,539,015	133.1%	(5,151,059)	4,084,877	1.13%	9.44%	10.57%	46,159	0	408	46,567	1,776,589	0
2049	20,420,650	14,840,648	137.6%	(5,580,002)	4,189,471	0.77%	9.44%	10.21%	32,259	0	419	32,678	1,710,031	0
2050	20,186,081	14,159,513	142.6%	(6,026,568)	4,295,833	0.54%	9.44%	9.98%	23,198	0	430	23,628	1,643,351	0
Total									\$ 8,268,388	\$ 4,670,624	\$ 644,633	\$ 13,583,645		

The FY21 and FY22 Employer/State contribution rates shown above differ from those shown in Section 1.6 because they are adjusted for total salaries.

Section 3.6: Table of Projected Actuarial Results (\$'s in 000's) (continued)

Fiscal Year End	Valuation Amounts on July 1 (Beginning of FY)					
	Funding Ratio			Unfunded Liability / (Surplus)		
	Pension	Healthcare	Total	Pension	Healthcare	Total
2021	63.6%	113.5%	79.3%	\$ 5,565,815	\$ (952,808)	\$ 4,613,007
2022	64.3%	114.2%	80.1%	5,561,711	(1,024,098)	4,537,613
2023	64.5%	113.8%	80.2%	5,616,279	(1,018,788)	4,597,491
2024	64.6%	113.5%	80.2%	5,670,820	(1,017,999)	4,652,821
2025	65.0%	113.6%	80.6%	5,667,074	(1,039,865)	4,627,209
2026	65.8%	114.4%	81.5%	5,577,327	(1,116,212)	4,461,115
2027	66.6%	115.2%	82.4%	5,466,222	(1,198,210)	4,268,012
2028	67.5%	116.2%	83.4%	5,331,838	(1,286,926)	4,044,912
2029	68.4%	117.2%	84.5%	5,172,138	(1,381,965)	3,790,173
2030	69.5%	118.4%	85.7%	4,984,787	(1,484,691)	3,500,096
2031	70.6%	119.6%	87.0%	4,767,513	(1,595,029)	3,172,484
2032	71.9%	121.1%	88.4%	4,516,939	(1,714,034)	2,802,905
2033	73.4%	122.6%	90.1%	4,230,042	(1,841,364)	2,388,678
2034	75.1%	124.4%	91.9%	3,903,416	(1,978,010)	1,925,406
2035	77.1%	126.3%	94.0%	3,533,951	(2,124,799)	1,409,152
2036	79.4%	128.5%	96.4%	3,117,863	(2,282,553)	835,310
2037	82.1%	131.0%	99.1%	2,651,097	(2,452,603)	198,494
2038	85.2%	133.8%	102.3%	2,129,291	(2,634,045)	(504,754)
2039	88.9%	136.9%	105.9%	1,548,008	(2,828,606)	(1,280,598)
2040	93.4%	140.5%	110.1%	902,171	(3,037,310)	(2,135,139)
2041	93.9%	144.5%	112.0%	803,243	(3,261,378)	(2,458,135)
2042	94.5%	149.1%	114.2%	691,969	(3,502,044)	(2,810,075)
2043	95.3%	154.2%	116.7%	567,737	(3,757,641)	(3,189,904)
2044	96.3%	160.1%	119.6%	428,715	(4,034,961)	(3,606,246)
2045	96.9%	166.7%	122.5%	347,123	(4,332,549)	(3,985,426)
2046	97.2%	174.1%	125.7%	295,695	(4,652,149)	(4,356,454)
2047	97.5%	182.5%	129.2%	254,785	(4,995,283)	(4,740,498)
2048	97.8%	192.0%	133.1%	212,951	(5,364,010)	(5,151,059)
2049	98.1%	202.6%	137.6%	179,738	(5,759,740)	(5,580,002)
2050	98.2%	214.4%	142.6%	158,264	(6,184,832)	(6,026,568)

Section 3.7: Projected Pension Benefit Recipients and Amounts (\$'s in 000's)

Fiscal Year End	Pension		Fiscal Year End	Pension	
	Recipient Counts	Benefit Amounts		Recipient Counts	Benefit Amounts
2021	37,106	\$ 944,242	2063	5,483	\$ 521,539
2022	38,793	992,490	2064	4,863	483,803
2023	40,216	1,040,553	2065	4,301	447,709
2024	41,390	1,085,744	2066	3,791	413,263
2025	42,305	1,128,793	2067	3,331	380,453
2026	42,941	1,168,682	2068	2,917	349,261
2027	43,341	1,207,416	2069	2,545	319,665
2028	43,552	1,244,432	2070	2,210	291,638
2029	43,570	1,278,265	2071	1,912	265,154
2030	43,434	1,310,048	2072	1,644	240,184
2031	43,151	1,326,467	2073	1,408	216,681
2032	42,720	1,351,117	2074	1,198	194,607
2033	42,174	1,372,363	2075	1,014	173,940
2034	41,490	1,389,157	2076	851	154,634
2035	40,692	1,402,114	2077	710	136,667
2036	39,762	1,411,600	2078	588	119,994
2037	38,757	1,416,691	2079	482	104,608
2038	37,645	1,416,338	2080	392	90,471
2039	36,410	1,411,150	2081	316	77,587
2040	35,077	1,399,710	2082	252	65,910
2041	33,649	1,384,091	2083	198	55,344
2042	32,165	1,363,346	2084	154	45,863
2043	30,643	1,337,810	2085	119	37,424
2044	29,064	1,308,254	2086	90	30,024
2045	27,478	1,274,056	2087	68	23,633
2046	25,874	1,236,540	2088	51	18,212
2047	24,279	1,195,888	2089	37	13,692
2048	22,692	1,152,688	2090	27	10,028
2049	21,137	1,107,277	2091	19	7,140
2050	19,623	1,060,091	2092	14	4,929
2051	18,155	1,070,660	2093	9	3,287
2052	16,737	1,022,209	2094	7	2,119
2053	15,376	973,307	2095	5	1,322
2054	14,075	924,307	2096	4	799
2055	12,840	875,544	2097	3	471
2056	11,672	827,318	2098	2	276
2057	10,575	779,885	2099	2	163
2058	9,551	733,462	2100	1	101
2059	8,599	688,223	2101	1	67
2060	7,718	644,313	2102	1	48
2061	6,907	601,843	2103	1	35
2062	6,162	560,899	2104	0	0

Counts include retirees, disabilitants, and beneficiaries.

Section 5: Basis of the Actuarial Valuation

Section 5.1: Summary of Plan Provisions

Effective Date

January 1, 1961, with amendments through June 30, 2020. Chapter 82, 1986 Session Laws of Alaska, created a two-tier retirement system. Members who were first hired under PERS before July 1, 1986 (Tier 1) are eligible for different benefits than members hired after June 30, 1986 (Tier 2). Chapter 4, 1996 Session Laws of Alaska created a third tier for members who were first hired after June 30, 1996 (Tier 3). Chapter 9, 2005 Session Laws of Alaska, closed the plan to new members hired after June 30, 2006.

Administration of Plan

The Commissioner of Administration or the Commissioner's designee is the administrator of the system. The Attorney General of the state is the legal counsel for the system and shall advise the administrator and represent the system in legal proceedings.

Prior to June 30, 2005, the Public Employees' Retirement Board prescribed policies and adopted regulations and performed other activities necessary to carry out the provisions of the system. The Alaska State Pension Investment Board, Department of Revenue, Treasury Division was responsible for investing PERS funds.

On July 27, 2005, Senate Bill 141, enacted as Chapter 9, 2005 Session laws of Alaska, replaced the Public Employees' Retirement Board and the Alaska State Pension Investment Board with the Alaska Retirement Management Board.

Employers Included

Currently there are 153 employers participating in PERS, including the State of Alaska and 152 political subdivisions and public organizations. Two additional political subdivisions participate in PERS for healthcare benefits only.

Membership

PERS membership is mandatory for all permanent full-time and part-time employees of the State of Alaska and participating political subdivisions and public organizations, unless they are specifically excluded by Alaska Statute or employer participation agreements. Employees participating in the University of Alaska's Optional Retirement Plan or other retirement plans funded by the State are not covered by PERS. Elected officials may waive PERS membership.

Certain members of the Alaska Teachers' Retirement System (TRS) are eligible for PERS retirement benefits for their concurrent elected public official service with municipalities. In addition, employees who work half-time in PERS and TRS simultaneously are eligible for half-time PERS and TRS credit.

Senate Bill 141, signed into law on July 27, 2005, closes the plan effective July 1, 2006, to new members first hired on or after July 1, 2006.

Credited Service

Permanent employees who work at least 30 hours a week earn full-time credit; part-time employees working between 15 and 30 hours a week earn partial credit based upon the number of hours worked. Members receiving PERS occupational disability benefits continue to earn PERS credit while disabled. Survivors who are receiving occupational death benefits continue to earn PERS service credit while occupational survivor benefits are being paid.

Members may claim other types of service, including:

- part-time State of Alaska service rendered after December 31, 1960, and before January 1, 1976;
- service with the State, former Territory of Alaska, or U.S. Government in Alaska before January 1, 1961;
- past Peace Officer, correctional officer, fire fighter, and special officer service after January 1, 1961;
- military service (not more than five years may be claimed);
- temporary service after December 31, 1960;
- elected official service before January 1, 1981;
- Alaska Bureau of Indian Affairs service;
- past service rendered by employees who worked half-time in PERS and TRS simultaneously;
- leave without pay service after June 13, 1987, while receiving Workers' Compensation;
- Village Public Safety Officer service; and
- service as a temporary employee of the legislature before July 1, 1979, but this service must have been claimed no later than July 1, 2003, or by the date of retirement, if sooner (not more than ten years may be claimed).

Except for service before January 1, 1961, with the State, former Territory of Alaska, or U.S. Government in Alaska, contributions are required for all past service.

Past employment with participating political subdivisions that occurred before the employers joined PERS is creditable if the employers agree to pay the required contributions.

At the election of certain PERS members, certain service may be credited in the same fashion as members in TRS.

Members employed as dispatchers or within a state correctional facility may, at retirement, elect to convert their dispatcher or correctional facility service from "all other" service to Peace Officer/Firefighter service and retire under the 20-year retirement option. Members pay the full actuarial cost of conversion.

Employer Contributions

PERS employers contribute the amounts required, in addition to employees' contributions, to fund the benefits of the system.

The normal cost rate is a uniform rate for all participating employers (less the value of members' contributions).

The past service rate is a uniform rate for all participating employers to amortize the unfunded past service liability with payments that are a level percentage of payroll amount over a closed 25-year period starting June 30, 2014. Effective June 30, 2018, each future year's unfunded service liability is separately amortized on a level percent of pay basis over 25 years.

Employer rates cannot be less than the normal cost rate.

Pursuant to AS 39.35.255 effective July 1, 2008, each PERS employer will pay a simple uniform contribution rate of 22% of member payroll.

Additional State Contributions

Pursuant to AS 39.35.280 effective July 1, 2008, the State shall contribute an amount (in addition to the State contribution as an employer) that, when combined with the employer contribution of 22%, will be sufficient to pay the total contribution rate adopted by the Board.

Member Contributions

Mandatory Contributions: Peace Officer/Firefighter members are required to contribute 7.5% of their compensation; all Others contribute 6.75%. Those all Others who have elected to have their service calculated under TRS rules contribute 9.76% of their compensation. Members' contributions are deducted from gross wages before federal income taxes are withheld.

Contributions for Claimed Service: Member contributions are also required for most of the claimed service described above.

Voluntary Contributions: Members may voluntarily contribute up to 5% of their salary on an after-tax basis. Voluntary contributions are recorded in a separate account and are payable to the:

- a. member in lump sum payment upon termination of employment;
- b. member's beneficiary if the member dies; or
- c. member in a lump sum, life annuity, or payments over a designated period of time when the member retires.

Interest: Members' contributions earn 4.5% interest, compounded semiannually on June 30 and December 31.

Refund of Contributions: Terminated members may receive refunds of their member contribution accounts which includes their mandatory and voluntary contributions, indebtedness payments, and interest earned. Terminated members' accounts may be attached to satisfy claims under Alaska Statute 09.38.065, federal income tax levies, and valid Qualified Domestic Relations Orders.

Reinstatement of Contributions: Refunded accounts and the corresponding PERS service may be reinstated upon reemployment in PERS prior to July 1, 2010. Interest accrues on refunds until paid in full or members retire.

Retirement Benefits

Eligibility

- a. Members, including deferred vested members, are eligible for normal retirement at age 55 or early retirement at age 50 if they were hired before July 1, 1986 (Tier 1), and age 60 or early retirement at age 55 if they were hired on or after July 1, 1986 (Tiers 2 & 3). Additionally, they must have at least:
 - (i) five years of paid-up PERS service;
 - (ii) 60 days of paid-up PERS service as employees of the legislature during each of five legislative sessions and they were first hired by the legislature before May 30, 1987;
 - (iii) 80 days of paid-up PERS service as employees of the legislature during each of five legislative sessions and they were first hired by the legislature after May 29, 1987;
 - (iv) two years of paid-up PERS service and they are vested in TRS; or
 - (v) two years of paid-up PERS service and a minimum three years of TRS service to qualify for a public service benefit.
- b. Members may retire at any age when they have:
 - (i) 20 paid-up years of PERS Peace Officer/Firefighter service; or
 - (ii) 30 paid-up years of PERS "all other" or "elected official" service.

Benefit Type

Lifetime benefits are paid to members. Eligible members may receive normal, unreduced benefits when they (1) reach normal retirement age and complete the service required; or (2) satisfy the minimum service requirements under the "20 and out" or "30 and out" provisions. Members may receive early, actuarially reduced benefits when they reach early retirement age and complete the service required.

Members may select a joint and survivor option. Members who entered PERS prior to July 1, 1996 may also select a 66-2/3 last survivor option or a level income option. Under these options and early retirement, benefits are actuarially adjusted so that members receive the actuarial equivalents of their normal benefit amounts.

Benefit Calculations

Retirement benefits are calculated by multiplying the average monthly compensation (AMC) times credited PERS service times the percentage multiplier. The AMC is determined by averaging the salaries earned during the five highest (three highest for Peace Officer/Firefighter members or members hired prior to July 1, 1996) consecutive payroll years. Members must earn at least 115 days of credit in the last year worked to include it in the AMC calculation. PERS pays a minimum benefit of \$25.00 per month for each year of service when the calculated benefit is less.

The percentage multipliers for Peace Officer/Firefighter members are 2% for the first ten years of service and 2.5% for all service over ten years.

The percentage multipliers for all Others are 2% for the first ten years, 2.25% for the next ten years, and 2.5% for all remaining service earned on or after July 1, 1986. All service before that date is calculated at 2%.

Indebtedness

Members who terminate and refund their PERS contributions are not eligible to retire unless they return to PERS employment and pay back their refunds plus interest or accrue additional service which qualifies them for retirement. PERS refunds must be paid in full if the corresponding service is to count toward the minimum service requirements for retirement. Refunded PERS service is included in total service for the purpose of calculating retirement benefits. However, when refunds are not completely paid before retirement, benefits are actuarially reduced for life. Indebtedness balances may also be created when a member purchases qualified claimed service.

Reemployment of Retired Members

Retirement and retiree healthcare benefits are suspended while retired members are reemployed under PERS. During reemployment, members earn additional PERS service and contributions are withheld from their wages. A member who retired with a normal retirement benefit can elect to waive payment of PERS contributions. The waiver allows the member to continue receiving the retirement benefit during the period of reemployment. Members who elect the waiver option do not earn additional PERS service. The Waiver Option first became effective July 1, 2005 and applies to reemployment periods after that date. The Waiver Option is not available to members who retired early or under the Retirement Incentive Programs (RIPs). The Waiver Option is no longer available after June 30, 2009.

Members retired under the Retirement Incentive Programs (RIPs) who return to employment will:

- a. forfeit the three years of incentive credits that they received;
- b. owe PERS 150% of the benefits that they received for state and political subdivision members, and 110% for school district employees, under the 1996-2000 RIP, which may include costs for health insurance, excluding amounts that they paid to participate for the 1986 and 1989 RIPs. Under prior RIPs, the penalty is 110% of the benefits received; and

- c. be charged 7% interest from the date that they are reemployed until their indebtedness is paid in full or they retire again. If the indebtedness is not completely paid, future benefits will be actuarially reduced for life.

Employers make contributions to the unfunded liability of the plan on behalf of rehired retired members at the rate the employer is making contributions to the unfunded liability of the plan for other members.

Postemployment Healthcare Benefits

Major medical benefits are provided to retirees and their surviving spouses by PERS for all employees hired before July 1, 1986 (Tier 1) and disabled retirees. Employees hired after June 30, 1986 (Tier 2) and their surviving spouses with five years of credited service (or ten years of credited service for those first hired after June 30, 1996 (Tier 3)) must pay the full monthly premium if they are under age sixty and will receive benefits paid by PERS if they are over age sixty. Tier 3 Members with between five and ten years of credited service must pay the full monthly premium regardless of their age. Tier 2 and Tier 3 Members with less than five years of credited service are not eligible for postemployment healthcare benefits. Tier 2 Members who are receiving a conditional benefit and are age eligible are eligible for postemployment healthcare benefits. In addition, Peace Officers and their surviving spouses with twenty-five years of Peace Officer membership service, Other employees and their surviving spouses with thirty years of membership service, and any disabled member receive benefits paid by PERS, regardless of their age or date of hire.

Medical, prescription drug, dental, vision and audio coverage is provided through the AlaskaCare Retiree Health Plan. Health plan provisions do not vary by retirement tier or age, except for Medicare coordination. Participants in dental, vision, and audio coverage pay a full self-supporting rate and those benefits are not included in this valuation.

Surviving spouses continue coverage only if a pension payment form that provided survivor benefits was elected. Alternate payees (i.e. individuals who are the subject of a domestic relations order or DRO) are allowed to participate in the plan, but must pay the full cost.

Where premiums are required prior to age 60, the valuation bases this payment upon the age of the retiree.

Participants in the defined benefit plan are covered under the following benefit design:

Plan Feature	Amounts
Deductible (single/family)	\$150 / \$450
Coinsurance (most services)	20%
Outpatient surgery/testing	0%
Maximum Out-of-Pocket (single/family, excluding deductible)	\$800 / \$2,400
Rx Copays (generic/brand/mail-order), does not apply to OOP max	\$4 / \$8 / \$0
Lifetime Maximum	\$2,000,000

The plan coordinates with Medicare on a traditional Coordination of Benefits Method. Starting in 2019, the prescription drug coverage is through a Medicare Part D EGWP arrangement.

Disability Benefits

Monthly disability benefits are paid to permanently disabled members until they die, recover, or become eligible for normal retirement. Members are appointed to normal retirement on the first of the month after they become eligible.

Occupational Disability

Members are not required to satisfy age or service requirements to be eligible for occupational disability. Monthly benefits are equal to 40% of their gross monthly compensation on the date of their disability. Members on occupational disability continue to earn PERS service until they become eligible for normal retirement. Peace Officer/Firefighter members may elect to retain the disability benefit formula for the calculation of their normal retirement benefits.

Non-occupational Disability

Members must be vested (five paid up years of PERS service) to be eligible for non-occupational disability benefits. Monthly benefits are calculated based on the member's average monthly compensation and PERS service on the date of termination from employment because of disability. Members do not earn PERS service while on non-occupational disability.

Death Benefits

Monthly death benefits may be paid to a spouse or dependent children upon the death of a member. If monthly benefits are not payable under the occupational and non-occupational death provisions, the designated beneficiary receives the lump sum benefit described below.

Occupational Death

When an active member (vested or non-vested) dies from occupational causes, a monthly survivor's pension may be paid to the spouse. The pension equals 40% of the member's gross monthly compensation on the date of death or disability, if earlier. If there is no spouse, the pension may be paid to the member's dependent children. On the member's normal retirement date, the benefit converts to a normal retirement benefit. The normal benefit is based on the member's salary on the date of death and service, including service accumulated from the date of the member's death to the normal retirement date. Survivors of Peace Officer/Firefighter members receive the greater of 50% of the member's gross monthly compensation on the date of death or disability, or 75% of the member's monthly normal retirement benefit (including service projected to Normal Retirement). If the member is unmarried with no children, a refund of contributions is payable to the estate.

Death after Occupational Disability

When a member dies while occupationally disabled, benefits are paid as described above in Occupational Death.

Non-Occupational Death

When a vested member dies from non-occupational causes, the surviving spouse may elect to receive a monthly 50% joint and survivor benefit or a lump sum benefit. The monthly benefit is calculated on the member's average monthly compensation and PERS service at the time of termination or death.

Lump Sum Non-Occupational Death Benefit

Upon the death of a member who has less than one year of service, the designated beneficiary receives the member's contribution account, which includes mandatory and voluntary contributions, indebtedness payments, and interest earned. If the member has more than one year of PERS service or is vested, the beneficiary also receives \$1,000 and \$100 for each year of PERS service.

Death After Retirement

When a retired member dies, the designated beneficiary receives the member's contribution account, less any benefits already paid and the member's last benefit check. If the member selected a survivor option at retirement, the eligible spouse receives continuing, lifetime monthly benefits.

Postretirement Pension Adjustments

Postretirement pension adjustments (PRPAs) are granted annually to eligible benefit recipients when the consumer price index (CPI) for urban wage earners and clerical workers for Anchorage increases during the preceding calendar year. PRPAs are calculated by multiplying the recipient's base benefit including past PRPAs, but excluding the Alaska COLA, times:

- a. 75% of the CPI increase in the preceding calendar year or 9%, whichever is less, if the recipient is at least age 65 or on PERS disability; or
- b. 50% of the CPI increase in the preceding calendar year or 6%, whichever is less, if the recipient is at least age 60, or under age 60 if the recipient has been receiving benefits for at least five years.

Ad hoc PRPAs, up to a maximum of 4%, may be granted to eligible recipients who were first hired before July 1, 1986 (Tier 1) if the CPI increases and the funded ratio is at least 105%.

In a year where an ad-hoc PRPA is granted, eligible recipients will receive the higher of the two calculations.

Alaska Cost-of-Living Allowance (COLA)

Eligible benefit recipients who reside in Alaska receive an Alaska COLA equal to 10% of their base benefits or \$50, whichever is more. The following benefit recipients are eligible:

- a. members who first entered PERS before July 1, 1986 (Tier 1) and their survivors;
- b. members who first entered PERS after June 30, 1986 (Tiers 2 & 3) and their survivors if they are at least age 65; and
- c. all disabled members.

Changes in Benefit Provisions Valued Since the Prior Valuation

There were no changes in benefit provisions since the prior valuation.

Section 5.2: Description of Actuarial Methods and Valuation Procedures

The funding method used in this valuation was adopted by the Board in October 2006. Changes in methods were adopted by the Board in January 2019 based on the experience study for the period July 1, 2013 to June 30, 2017. The asset smoothing method used to determine valuation assets was changed effective June 30, 2014.

Benefits valued are those delineated in Alaska State statutes as of the valuation date. Changes in State statutes effective after the valuation date are not taken into consideration in setting the assumptions and methods.

Actuarial Cost Method

Liabilities and contributions shown in the report are computed using the Entry Age Normal Actuarial Cost Method, level percent of pay.

Effective June 30, 2018, the Board adopted a layered UAAL amortization method: Layer #1 equals the sum of (i) the UAAL at June 30, 2018 based on the 2017 valuation, plus (ii) the FY18 experience gain/loss. Layer #1 is amortized over the remainder of the 25-year closed period that was originally established in 2014¹. Layer #2 equals the change in UAAL at June 30, 2018 due to the experience study and EGWP implementation. Layer #2 is amortized over a separate closed 25-year period starting in 2018. Future layers will be created each year based on the difference between actual and expected UAAL occurring that year, and will be amortized over separate closed 25-year periods. The UAAL amortization continues to be on a level percent of pay basis. State statutes allow the contribution rate to be determined on payroll for all members, defined benefit and defined contribution member payroll combined.

Projected pension and postemployment healthcare benefits were determined for all active members. Cost factors designed to produce annual costs as a constant percentage of each member's expected compensation in each year from the assumed entry age to the assumed retirement age were applied to the projected benefits to determine the normal cost (the portion of the total cost of the plan allocated to the current year under the method). The normal cost is determined by summing intermediate results for active members and determining an average normal cost rate which is then related to the total payroll of active members. The actuarial accrued liability for active members (the portion of the total cost of the plan allocated to prior years under the method) was determined as the excess of the actuarial present value of projected benefits over the actuarial present value of future normal costs.

The actuarial accrued liability for retired members and their beneficiaries currently receiving benefits, terminated vested members and disabled members not yet receiving benefits was determined as the actuarial present value of the benefits expected to be paid. No future normal costs are payable for these members.

The actuarial accrued liability under this method at any point in time is the theoretical amount of the fund that would have been accumulated had annual contributions equal to the normal cost been made in prior years (it does not represent the liability for benefits accrued to the valuation date). The unfunded actuarial accrued liability is the excess of the actuarial accrued liability over the actuarial value of plan assets measured on the valuation date.

Under this method, experience gains or losses, i.e., decreases or increases in accrued liabilities attributable to deviations in experience from the actuarial assumptions, adjust the unfunded actuarial accrued liability.

¹ Layer #1 is referred to as "initial amount" in Sections 1.2 and 1.3.

Valuation of Assets

The actuarial asset value was reinitialized to equal Fair Value of Assets as of June 30, 2014. Beginning in FY15, the asset valuation method recognizes 20% of the gain or loss each year, for a period of five years. All assets are valued at fair value. Assets are accounted for on an accrued basis and are taken directly from financial statements audited by KPMG LLP.

Changes in Methods Since the Prior Valuation

There were no changes in the asset or valuation methods since the prior valuation.

Valuation of Retiree Medical and Prescription Drug Benefits

This section outlines the detailed methodology used in the internal model developed by Buck to calculate the initial per capita claims cost rates for the PERS postemployment healthcare plan. Note that the methodology reflects the results of our annual experience rate update for the period from July 1, 2019 to June 30, 2020.

Base claims cost rates are incurred healthcare costs expressed as a rate per member per year. Ideally, claims cost rates should be derived for each significant component of cost that can be expected to require differing projection assumptions or methods (i.e., medical claims, prescription drug claims, administrative costs, etc). Separate analysis is limited by the availability and historical credibility of cost and enrollment data for each component of cost. This valuation reflects non-prescription claims separated by Medicare status, including eligibility for free Part A coverage. Prescription costs are analyzed separately as in prior valuations. Administrative costs are assumed in the final per capita claims cost rates used for valuation purposes, as described below. Analysis to date on Medicare Part A coverage is limited since Part A claim data is not available by individual, nor is this status incorporated into historical claim data.

Benefits

Medical, prescription drug, dental, vision and audio coverage is provided through the AlaskaCare Retiree Health Plan and is available to employees of the State and subdivisions who meet retirement criteria based on the retirement plan tier in effect at their date of hire. Health plan provisions do not vary by retirement tier or age, except for Medicare coordination for those Medicare-eligible. Dental, vision and audio claims (DVA) are excluded from data analyzed for this valuation because those are retiree-pay all benefits where rates are assumed to be self-supporting. Buck relies upon rates set by a third-party for the DVA benefits. Buck reviewed historical rate-setting information and views contribution rate adjustments made are not unreasonable.

Administration and Data Sources

The plan was administered by Wells Fargo Insurance Services (acquired by HealthSmart, in January 2012) from July 1, 2009 through December 31, 2013 and by Aetna effective January 1, 2014.

Claims incurred for the period from July 2018 through June 2020 (FY19 through FY20) were provided by the State of Alaska from reports extracted from their data warehouse, which separated claims by Medicare status. Monthly enrollment data for the same period was provided by Aetna.

Aetna also provided census information identifying Medicare Part B only participants. These participants are identified when hospital claims are denied by Medicare; Aetna then flags that participant as a Part B only participant. Buck added newly identified participants to our list of Medicare Part B only participants. Buck assumes that once identified as Part B only, that participant remains in that status until we are notified otherwise.

Aetna provided a snapshot file as of July 1, 2020 of retirees and dependents that included a coverage level indicator. The monthly enrollment data includes double coverage participants. These are participants whereby both the retiree and spouse are retirees from the State and both are reflected with Couple coverage in the enrollment. In this case, such a couple would show up as four members in the

monthly enrollment (each would be both a retiree and a spouse). As a result, the snapshot census file was used to adjust the total member counts in the monthly enrollment reports to estimate the number of unique participants enrolled in coverage. Based on the snapshot files from the last two valuations, the total member count in the monthly enrollment reports needs to be reduced by approximately 13% to account for the number of participants with double coverage.

Aetna does not provide separate experience by Medicare status in standard reporting so the special reports mentioned above from the data warehouse were used this year to obtain that information and incorporate it into the per capita rate development for each year of experience (with corresponding weights applied in the final per capita cost).

Methodology

Buck projected historical claim data to FY21 for retirees using the following summarized steps:

1. Develop historical annual incurred claim cost rates – an analysis of medical costs was completed based on claims information and enrollment data provided by the State of Alaska and Aetna for each year in the experience period of FY19 through FY20.
 - Costs for medical services and prescriptions were analyzed separately, and separate trend rates were developed to project expected future medical and prescription costs for the valuation year (e.g. from the experience period up through FY21).
 - Because the reports provided reflected incurred claims, no additional adjustment was needed to determine incurred claims to be used in the valuation.
 - An offset for costs expected to be reimbursed by Medicare was incorporated beginning at age 65. Alaska retirees who do not have 40 quarters of Medicare-covered compensation do not qualify for Medicare Part A coverage free of charge. This is a relatively small and closed group. Medicare was applied to State employment for all employees hired after March 31, 1986. For the “no-Part A” individuals who are required to enroll in Medicare Part B, the State is the primary payer for hospital bills and other Part A services. Claim experience is not available separately for participants with both Medicare Parts A and B and those with Part B only. For Medicare Part B only participants, a lower average claims cost was applied to retirees covered by both Medicare Part A and B vs. retirees covered only by Medicare Part B based upon manual rate models that estimate the Medicare covered proportion of medical costs. To the extent that no-Part A claims can be isolated and applied strictly to the appropriate closed group, actuarial accrued liability will be more accurate.
 - Based on census data received from Aetna, less than 1% of the current retiree population was identified as having coverage only under Medicare Part B. We assume that 5% of actives hired before April 1, 1986 and current retirees who are not yet Medicare eligible will not be eligible for Medicare Part A.
 - Based upon a reconciliation of valuation census data to the snapshot eligibility files provided by Aetna as of July 1, 2019, and July 1, 2020, Buck adjusted member counts used for duplicate records where participants have double coverage; i.e. primary coverage as a retiree and secondary coverage as the covered spouse of another retiree. This is to reflect the total cost per distinct individual/member which is then applied to distinct members in the valuation census.
 - Buck understands that pharmacy claims reported do not reflect rebates. Based on actual pharmacy rebate information provided by Aetna for years through 2018 and Optum for January 2019 through June 2020, rebates were assumed to be 17% of prescription drug claims for FY19 and 19.5% of prescription drug claims for FY20.
2. Develop estimated EGWP reimbursements – Segal provided estimated 2021 EGWP subsidies, developed with the assistance of OptumRx. These amounts are applicable only to Medicare-eligible participants.

3. Adjust for claim fluctuation, anomalous experience, etc. – explicit adjustments are often made for anticipated large claims or other anomalous experience. FY19 and FY20 experience were compared to assess the impact of COVID-19 and whether an adjustment to FY20 claims was indicated for use in the June 30, 2020 valuation. A material decrease in medical claims during March 2020 to June 2020 was experienced due to COVID-19. Therefore, an adjustment was made for those months to adjust for the decrease that is not expected to continue in future years. There was an observed spike in prescription drug claims in March 2020; however, the FY20 prescription drug experience appears reasonable to use without adjustment for COVID-19. To adjust for the decrease in medical claims due to COVID-19 during the last 4 months of FY20, the per capita cost during the first 8 months was used as the basis for estimating claims that would have occurred in the absence of COVID-19. Due to group size and demographics, we did not make any additional large claim adjustments. We do blend both Alaska plan-specific and national trend factors as described below. Buck compared data utilized to lag reports and quarterly plan experience presentations provided by the State and Aetna to assess accuracy and reasonableness of data.
4. Trend all data points to the projection period – project prior years’ experience forward to FY21 for retiree benefits on an incurred claim basis. Trend factors derived from historical Alaska-specific experience and national trend factors are shown in the table in item 5 below.
5. Apply credibility to prior experience – adjust prior year’s data by assigning weight to recent periods, as shown at the right of the table below. The Board approved a change in the weighting of experience periods beginning with the June 30, 2017 valuation as outlined below. Note also that we averaged projected plan costs using Alaska-specific trend factors and national trend factors, assigning 75% weight to Alaska-specific trends and 25% to national trends:

Alaska-Specific and National Average Weighted Trend from Experience Period to Valuation Year			
Experience Period	Medical	Prescription	Weighting Factors
FY19 to FY20	7.3% Pre-Medicare / 4.6% Medicare	1.2%	50%
FY20 to FY21	6.3% Pre-Medicare / 5.2% Medicare	7.6%	50%

Trend assumptions used for rate development are assessed annually and as additional/improved reporting becomes available, we will incorporate into rate development as appropriate.

6. Develop separate administration costs – no adjustments were made for internal administrative costs. Third party retiree plan administration fees for FY21 are based upon total fees projected to 2021 by Segal based on actual FY20 fees. The annual per participant per year administrative cost rate for medical and prescription benefits is \$449.

Healthcare Reform

Healthcare Reform legislation passed on March 23, 2010 included several provisions with potential implications for the State of Alaska Retiree Health Plan liability. Buck evaluated the impact due to these provisions.

Because the State plan is retiree-only, and was in effect at the time the legislation was enacted, not all provisions of the health reform legislation apply to the State plan. Unlimited lifetime benefits and dependent coverage to age 26 are two of these provisions. We reviewed the impact of including these provisions, but there was no decision made to adopt them, and no requirement to do so.

Because Transitional Reinsurance fees are only in effect until 2016, we excluded these for valuation purposes.

The Further Consolidated Appropriations Act, 2020 passed in December 2019 repealed several healthcare-related taxes, including the Cadillac Tax.

The Tax Cuts and Jobs Act passed in December 2017 included the elimination of the individual mandate penalty and changed the inflation measure for purposes of determining the limits for the High Cost Excise Tax to use chained CPI. It is our understanding the law does not directly impact other provisions of the ACA. While the nullification of the ACA's individual mandate penalty does not directly impact employer group health plans, it could contribute to the destabilization of the individual market and increase the number of uninsured. Such destabilization could translate to increased costs for employers. We have considered this when setting our healthcare cost trend assumptions and will continue to monitor this issue.

We have not identified any other specific provisions of healthcare reform or its potential repeal that would be expected to have a significant impact on the measured obligation. We will continue to monitor legislative activity.

Data

In accordance with actuarial standards, we note the following specific data sources and steps taken to value retiree medical benefits:

The Division of Retirement and Benefits provided pension valuation census data, which for people currently in receipt of healthcare benefits was supplemented by coverage data from the healthcare claims administrator (Aetna).

Certain adjustments and assumptions were made to prepare the data for valuation:

- Some records provided on the Aetna data were associated with a participant social security number not listed on the RIN-to-SSN translation file. We reconciled those participants with the pension valuation data as either a surviving spouse or a retiree in the appropriate plan based on account structure information in the Aetna data.
- All records provided with retiree medical coverage on the Aetna data were included in this valuation and we relied on the Aetna data as the source of medical coverage for current retirees and their dependents.
- Some records in the Aetna data were duplicates due to the double coverage (i.e. coverage as a retiree and as a spouse of another retiree) allowed under the plan. Records were adjusted for these members so that each member was only valued once. Any additional value of the double coverage (due to coordination of benefits) is small and reflected in the per capita costs.
- Covered children included in the Aetna data were valued until age 23, unless disabled. We assumed that those dependents over 23 were only eligible and valued due to being disabled.
- For individuals included in the pension data expecting a future pension, we valued health benefits starting at the same point that the pension benefit is assumed to start.

We are not aware of any other data issues that would be expected to have a material impact on the results and there are no unresolved matters related to the data.

The chart below shows the basis of setting the per capita claims cost assumption, which includes both PERS and TRS.

	Medical		Prescription Drugs (Rx)	
	Pre-Medicare	Medicare	Pre-Medicare	Medicare
A. Fiscal 2019				
1. Incurred Claims	\$ 230,731,518	\$ 80,855,220	\$ 63,846,605	\$ 183,281,273
2. Adjustments for Rx Rebates	0	0	(10,853,923)	(31,157,816)
3. Net incurred claims	\$ 230,731,518	\$ 80,855,220	\$ 52,992,682	\$ 152,123,456
4. Average Enrollment	20,625	42,843	20,625	42,843
5. Claim Cost Rate (3) / (4)	11,187	1,887	2,569	3,551
6. Trend to Fiscal 2021	1.141	1.101	1.089	1.089
7. Fiscal 2021 Incurred Cost Rate (5) x (6)	\$ 12,762	\$ 2,077	\$ 2,798	\$ 3,867

B. Fiscal 2020				
1. Incurred Claims	\$ 229,531,664	\$ 89,497,345	\$ 64,442,660	\$ 188,022,328
2. Adjustments for Rx Rebates	0	0	(12,566,319)	(36,664,354)
3. Net incurred claims	\$ 229,531,664	\$ 89,497,345	\$ 51,876,341	\$ 151,357,974
4. Average Enrollment	19,354	44,965	19,354	44,965
5. Claim Cost Rate (3) / (4)	11,860	1,990	2,680	3,366
6. Trend to Fiscal 2021	1.063	1.052	1.076	1.076
7. Fiscal 2021 Incurred Cost Rate (5) x (6)	\$ 12,609	\$ 2,094	\$ 2,885	\$ 3,623

	Medical		Prescription Drugs (Rx)	
	Pre-Medicare	Medicare	Pre-Medicare	Medicare
C. Incurred Cost Rate by Fiscal Year				
1. Fiscal 2019 A.(7)	12,762	2,077	2,798	3,867
2. Fiscal 2020 B.(7)	12,609	2,094	2,885	3,623

D. Weighting by Fiscal Year				
1. Fiscal 2019	50%	50%	50%	50%
2. Fiscal 2020	50%	50%	50%	50%

E. Fiscal 2021 Incurred Cost Rate				
1. Rate at Average Age C x D	\$ 12,685	\$ 2,086	\$ 2,842	\$ 3,745
2. Average Aging Factor	0.826	1.263	0.838	1.121
3. Rate at Age 65 (1) / (2)	\$ 15,360	\$ 1,651	\$ 3,393	\$ 3,340

F. Development of Part A&B and Part B Only Cost from Pooled Rate Above	
1. Part A&B Average Enrollment	44,568
2. Part B Only Average Enrollment	398
3. Total Medicare Average Enrollment B(4)	44,965
4. Cost ratio for those with Part B only to those with Parts A&B	3.300
5. Factor to determine cost for those with Parts A&B (2) / (3) x (4) + (1) / (3) x 1.00	1.020
6. Medicare per capita cost for all participants: E(3)	\$ 1,651
7. Cost for those eligible for Parts A&B: (6) / (5)	\$ 1,618
8. Cost for those eligible for Part B only: (7) x (4)	\$ 5,340

Following the development of total projected costs, a distribution of per capita claims cost was developed. This was accomplished by allocating total projected costs to the population census used in the valuation. The allocation was done separately for each of prescription drugs and medical costs for the Medicare eligible and pre-Medicare populations. The allocation weights were developed using participant counts by age and assumed morbidity and aging factors. Results were tested for reasonableness based on historical trend and external benchmarks for costs paid by Medicare.

Below are the results of this analysis:

**Distribution of Per Capita Claims Cost by Age
for the Period July 1, 2020 through June 30, 2021**

Age	Medical and Medicare Parts A & B	Medical and Medicare Part B Only	Prescription Drug	Medicare EGWP Subsidy
45	\$ 9,374	\$ 9,374	\$ 2,072	\$ 0
50	10,605	10,605	2,461	0
55	11,999	11,999	2,923	0
60	13,576	13,576	3,149	0
65	1,618	5,340	3,340	1,003
70	1,876	6,191	3,688	1,107
75	2,174	7,177	4,071	1,223
80	2,401	7,923	3,971	1,192

Section 5.3: Summary of Actuarial Assumptions

The demographic and economic assumptions used in the June 30, 2020 valuation are described below. Unless noted otherwise, these assumptions were adopted by the Board in January 2019 based on the experience study for the period July 1, 2013 to June 30, 2017.

Investment Return

7.38% per year, net of investment expenses.

Salary Scale

Salary scale rates based upon the 2013-2017 actual experience (see Table 1).

Inflation – 2.50% per year.

Productivity – 0.25% per year.

Payroll Growth

2.75% per year (inflation + productivity).

Total Inflation

Total inflation as measured by the Consumer Price Index for urban and clerical workers for Anchorage is assumed to increase 2.50% annually.

Mortality (Pre-Commencement)

Mortality rates based upon the 2013-2017 actual experience.

RP-2014 employee table, benefit-weighted, rolled back to 2006, and projected with MP-2017 generational improvement.

Deaths are assumed to result from occupational causes 75% of the time for Peace Officer/Firefighters, and 40% of the time for Others.

Mortality (Post-Commencement)

Mortality rates based upon the 2013-2017 actual experience.

91% of male and 96% of female rates of RP-2014 healthy annuitant table, benefit-weighted, rolled back to 2006, and projected with MP-2017 generational improvement.

Turnover

Select and ultimate rates based upon the 2013-2017 actual experience (see Tables 2a and 2b).

Disability

Incidence rates based upon the 2013-2017 actual experience (see Table 3).

Post-disability mortality in accordance with the RP-2014 disabled table, benefit-weighted, rolled back to 2006, and projected with MP-2017 generational improvement. Disabilities are assumed to be occupational 75% of the time for Peace Officer/Firefighters, and 40% of the time for Others.

Retirement

Retirement rates based upon the 2013-2017 actual experience (see Tables 4a and 4b).

Deferred vested members are assumed to retire at their earliest unreduced retirement date.

The modified cash refund annuity is valued as a three-year certain and life annuity.

Spouse Age Difference

Males are assumed to be three years older than their wives. Females are assumed to be two years younger than husbands.

Percent Married for Pension

For Others, 75% of male members and 70% of female members are assumed to be married. For Peace Officer/Firefighters, 85% of male members and 60% of female members are assumed to be married.

Dependent Spouse Medical Coverage Election

Applies to members who do not have double medical coverage. For Others, 65% of male members and 60% of female members are assumed to be married and cover a dependent spouse. For Peace Officer/Firefighters, 75% of male members and 50% of female members are assumed to be married and cover a dependent spouse.

Dependent Children

- Pension: None
- Healthcare: Benefits for dependent children have been valued only for members currently covering their dependent children. These benefits are only valued through the dependent children's age 23 (unless the child is disabled).

Contribution Refunds

For Others, 5% of terminating members with vested benefits are assumed to have their contributions refunded.

For Peace Officers/Firefighters, 10% of terminating members with vested benefits are assumed to have their contributions refunded.

100% of those with non-vested benefits are assumed to have their contributions refunded.

Imputed Data

Data changes from the prior year which are deemed to have an immaterial impact on liabilities and contribution rates are assumed to be correct in the current year's client data. Non-vested terminations with appropriate refund dates are assumed to have received a full refund of contributions. Active members with missing salary and service are assumed to be terminated with status based on their vesting percentage.

Active Rehire Assumption

The Normal Cost used for determining contribution rates and in the projections includes a rehire assumption to account for anticipated rehires. The Normal Cost shown in the report includes the following assumptions (which were developed based on the five years of rehire loss experience through June 30, 2017). For projections, these assumptions were assumed to grade to zero uniformly over a 20-year period.

- Pension: 18.77%
- Healthcare: 17.09%

Re-Employment Option

All re-employed retirees are assumed to return to work under the Standard Option.

Active Data Adjustment

No adjustment was made to reflect participants who terminate employment before the valuation date and are subsequently rehired after the valuation date.

Alaska Cost-of-Living Adjustments (COLA)

Of those benefit recipients who are eligible for the Alaska COLA, 70% of Others and 65% of Peace Officers/Firefighters are assumed to remain in Alaska and receive the COLA.

Postretirement Pension Adjustment (PRPA)

50% and 75% of assumed inflation, or 1.25% and 1.875% respectively, is valued for the annual automatic PRPA as specified in the statute.

Expenses

The investment return assumption is net of investment expenses. The Normal Cost as of June 30, 2020 was increased by the following amounts for administrative expenses (for projections, the percent increase was assumed to remain constant in future years):

- Pension: \$7,223,000
- Healthcare: \$4,934,000

Part-Time Status

Part-time employees are assumed to earn 1.00 years of credited service per year for Peace Officer/Firefighter and 0.75 years of credited service per year for Other members.

Service

Total credited service is provided by the State. This service is assumed to be the only service that should be used to calculate benefits. Additionally, the State provides claimed service (including Bureau of Indian Affairs Service). Claimed service is used for vesting and eligibility purposes as described in Section 5.1.

Final Average Earnings

Final Average Earnings is provided on the data for active members. This amount is used as a minimum in the calculation of the average earnings in the future.

Per Capita Claims Cost

Sample claims cost rates adjusted to age 65 for FY21 medical and prescription drugs are shown below:

	Medical	Prescription Drugs
Pre-Medicare	\$ 15,360	\$ 3,393
Medicare Parts A & B	\$ 1,618	\$ 3,340
Medicare Part B Only	\$ 5,340	\$ 3,340
Medicare Part D – EGWP	N/A	\$ 1,003

Members are assumed to attain Medicare eligibility at age 65. All costs are for the 2021 fiscal year (July 1, 2020 – June 30, 2021).

The EGWP subsidy is assumed to increase in future years by the trend rates shown on the following pages. No future legislative changes or other events are anticipated to impact the EGWP subsidy. If any legislative or other changes occur in the future that impact the EGWP subsidy (which could either increase or decrease the plan's Actuarial Accrued Liability), those changes will be evaluated and quantified when they occur.

Third Party Administrator Fees

\$449 per person per year; assumed to increase at 4.5% per year.

Medicare Part B Only

We assume that 5% of actives hired before April 1, 1986 and current retirees who are not yet Medicare eligible will not be eligible for Medicare Part A.

Healthcare Cost Trend

The table below shows the rate used to project the cost from the shown fiscal year to the next fiscal year. For example, 6.5% is applied to the FY21 pre-Medicare medical claims costs to get the FY22 medical claims costs.

	Medical Pre-65	Medical Post-65	Prescription Drugs / EGWP
FY21	6.5%	5.4%	7.5%
FY22	6.3%	5.4%	7.1%
FY23	6.1%	5.4%	6.8%
FY24	5.9%	5.4%	6.4%
FY25	5.8%	5.4%	6.1%
FY26	5.6%	5.4%	5.7%
FY27-FY40	5.4%	5.4%	5.4%
FY41	5.3%	5.3%	5.3%
FY42	5.2%	5.2%	5.2%
FY43	5.1%	5.1%	5.1%
FY44	5.1%	5.1%	5.1%
FY45	5.0%	5.0%	5.0%
FY46	4.9%	4.9%	4.9%
FY47	4.8%	4.8%	4.8%
FY48	4.7%	4.7%	4.7%
FY49	4.6%	4.6%	4.6%
FY50+	4.5%	4.5%	4.5%

For the June 30, 2014 valuation and later, the updated Society of Actuaries' Healthcare Cost Trend Model is used to project medical and prescription drug costs. This model estimates trend amounts that are projected out for 80 years. The model has been populated with assumptions that are specific to the State of Alaska.

Aging Factors

Age	Medical	Prescription Drugs
0 – 44	2.0%	4.5%
45 – 54	2.5%	3.5%
55 – 64	2.5%	1.5%
65 – 74	3.0%	2.0%
75 – 84	2.0%	-0.5%
85 – 94	0.3%	-2.5%
95+	0.0%	0.0%

Retired Member Contributions for Medical Benefits

Currently contributions are required for PERS members who are under age 60 and have less than 30 years of service (25 for Peace Officer/Firefighter). Eligible Tier 1 members are exempt from contribution requirements. Annual FY21 contributions based on monthly rates shown below for calendar 2021 are assumed based on the coverage category for current retirees. The composite rate shown is used for current active and inactive members in Tier 2 or 3 who are assumed to retire prior to age 60 with less than 30 years of service and who are not disabled. For dependent children, we value 1/3 of the annual retiree contribution to estimate the per child rate based upon the assumed number of children in rates where children are covered.

Coverage Category	Calendar 2021 Annual Contribution	Calendar 2021 Monthly Contribution	Calendar 2020 Monthly Contribution
Retiree Only	\$ 8,448	\$ 704	\$ 741
Retiree and Spouse	\$ 16,896	\$ 1,408	\$ 1,482
Retiree and Child(ren)	\$ 11,940	\$ 995	\$ 1,047
Retiree and Family	\$ 20,388	\$ 1,699	\$ 1,788
Composite	\$ 12,552	\$ 1,046	\$ 1,101

Trend Rate for Retired Member Medical Contributions

The table below shows the rate used to project the retired member medical contributions from the shown fiscal year to the next fiscal year. For example, 0.0% is applied to the FY21 retired member medical contributions to get the FY22 retired member medical contributions.

Trend Assumptions	
FY21	0.0%
FY22	0.0%
FY23+	4.0%

Graded trend rates for retired member medical contributions are consistent with the rates used for the June 30, 2019 valuation. Actual FY21 retired member medical contributions are reflected in the valuation.

Healthcare Participation

100% of system paid members and their spouses are assumed to elect healthcare benefits as soon as they are eligible. 20% of non-system paid members and their spouses are assumed to elect healthcare benefits as soon as they are eligible.

Changes in Assumptions Since the Prior Valuation

Healthcare claim costs are updated annually as described in Section 5.2. Retired member contributions were updated to reflect the 5% decrease from CY20 to CY21. The amounts included in the Normal Cost for administrative expenses were changed from \$6,839,000 to \$7,223,000 for pension and from \$3,744,000 to \$4,934,000 for healthcare (based on the most recent two years of actual administrative expenses paid from plan assets).

Section 6: Actuarial Standard of Practice No. 51

Funding future retirement benefits prior to when those benefits become due involves assumptions regarding future economic and demographic experience. These assumptions are applied to calculate actuarial liabilities, current contribution requirements, and the funded status of the plan. However, to the extent future experience deviates from the assumptions used, variations will occur in these calculated values. These variations create risk to the plan. Understanding the risks to the funding of the plan is important.

Actuarial Standard of Practice No. 51 (ASOP 51)¹ requires certain disclosures of potential risks to the plan and provides useful information for intended users of actuarial reports that determine plan contributions or evaluate the adequacy of specified contribution levels to support benefit provisions.

Under ASOP 51, risk is defined as the potential of actual future measurements deviating from expected future measurements resulting from actual future experience deviating from actuarially assumed experience.

It is important to note that not all risk is negative, but all risk should be understood and accepted based on knowledge, judgement, and educated decisions. Future measurements may deviate in ways that produce positive or negative financial impacts to the plan.

In the actuary's professional judgment, the following risks may reasonably be anticipated to significantly affect the pension plan's future financial condition and contribution requirements.

- Investment Risk – potential that the investment return will be different than the 7.38% expected in the actuarial valuation
- Contribution Risk – potential that the contribution actually made will be different than the actuarially determined contribution
- Long-Term Return on Investment Risk – potential that changes in long-term capital market assumptions or the plan's asset allocation will create the need to update the long-term return on investment assumption
- Longevity Risk – potential that participants live longer than expected compared to the valuation mortality assumptions
- Salary Increase Risk – potential that future salaries will be different than expected in the actuarial valuation
- Inflation Risk – potential that the consumer price index (CPI) for urban wage earners and clerical workers for Anchorage is different than the 2.5% assumed in the valuation
- Other Demographic Risk – potential that other demographic experience will be different than expected

The following information is provided to comply with ASOP 51 and furnish beneficial information on potential risks to the plan. **This list is not all-inclusive**; it is an attempt to identify the more significant risks and how those risks might affect the results shown in this report.

Note that ASOP 51 does not require the actuary to evaluate the ability or willingness of the plan sponsor to make contributions to the plan when due, or to assess the likelihood or consequences of potential future changes in law. In addition, this valuation report is not intended to provide investment advice or to provide guidance on the management or reduction of risk.

¹ ASOP 51 does not apply to the healthcare portion of the plan. Accordingly, all figures in this section relate to the pension portion.

Assessment of Risks

Investment Risk

Plan costs are very sensitive to the market return.

- Any return on assets lower than assumed will increase costs.
- The plan uses an actuarial value of assets that smooths gains and losses on market returns over a five-year period to help control some of the volatility in costs due to investment risk.
- Historical experience of actual returns is shown in Section 2.4 of this report. This historical experience illustrates how returns can vary over time.

Contribution Risk

There is a risk to the plan when the employer's and/or State's actual contribution amount and the actuarially determined contribution differ.

- If the actual contribution is lower than the actuarially determined contribution, the plan may not be sustainable in the long term.
- Any underpayment of the contribution will increase future contribution amounts to help pay off the additional Unfunded Actuarial Accrued Liability associated with the underpayment(s).
- As long as the Board consistently adopts the actuarially determined contributions, this risk is mitigated due to Alaska statutes requiring the State to contribute additional funds necessary to pay the total contributions adopted by the Board.

Long-Term Return on Investment Risk

Inherent in the long-term return on investment assumption is the expectation that the current rate will be used until the last benefit payment of the plan is made. There is a risk that sustained changes in economic conditions, changes in long-term future capital market assumptions, or changes to the plan's asset allocation will necessitate an update to the long-term return on investment assumption used.

- Under a lower long-term return on investment assumption, less investment return is available to pay plan benefits. This may lead to a need for increased employer contributions.
- The liabilities will be higher at a lower assumed rate of return because future benefits will have a lower discount rate applied when calculating the present value.
- A 1% decrease in the long-term return on investment assumption will increase actuarial accrued liability by approximately 12%.
- This risk may be increased due to the plan being closed to new entrants. As the plan continues to mature, the magnitude of negative cash flow discussed in the Plan Maturity Measures later in this section will grow, thereby creating a need for more liquid assets that may not garner the same long-term return as currently assumed.

Longevity Risk

Plan costs will be increased as participants are expected to live longer.

- Benefits are paid over a longer lifetime when life expectancy is expected to increase. The longer duration of payments leads to higher liabilities.
- Health care has been improving, which affects the life expectancy of participants. As health care improves, leading to longer life expectancies, costs to the plan could increase.

- The mortality assumption for the plan mitigates this risk by assuming future improvement in mortality. However, any improvement in future mortality greater than that expected by the current mortality assumption would lead to increased costs for the plan.
- The Postretirement Pension Adjustments and Alaska Cost-of-Living Allowance increase longevity risk because members who live longer than expected will incur more benefit payment increases than expected and therefore increase costs.

Salary Increase Risk

Plan costs will be increased if actual salary increases are larger than expected.

- Higher-than-expected salary increases will produce higher benefits.
- The higher benefits may be partially offset by increased employee contributions due to higher salaries.
- If future payroll grows at a rate different than assumed, contributions as a percentage of payroll will be affected.

Inflation Risk

Plan costs will be increased if the actual CPI for Anchorage is greater than the 2.5% assumed in the valuation.

- Retirement benefits will be greater than expected if the CPI is greater than the assumed rate, which will increase costs.
- This risk is mitigated by the 75% and 50% of CPI provisions and the 9% and 6% maximums.
- This risk is also mitigated by the age and time in payment requirements to receive an increase.
- Inflation risk may be associated with the interaction of inflation with other assumptions, but this is not significant as a standalone assumption, and therefore is considered as part of the associated assumption risk instead of being discussed here.

Other Demographic Risk

The plan is subject to risks associated with other demographic assumptions (e.g., retirement, termination, and retired members remaining in Alaska assumptions). Differences between actual and expected experience for these assumptions tend to have less impact on the overall costs of the plan. The demographic assumptions used in the valuation are re-evaluated regularly as part of the four-year experience studies to ensure the assumptions are consistent with long-term expectations.

Historical Information

Monitoring certain information over time may help understand risks faced by the plan. Historical information is included throughout this report. Some examples are:

- Funded Ratio History shown in the Executive Summary illustrates how the plan's funded status (comparison of actuarial accrued liabilities to actuarial value of assets) has changed over time.
- Section 1.6 shows historical analysis of financial experience including how contribution rates have changed over time.
- Section 2.4 shows the volatility of asset returns over time.
- Section 4 includes various historical information showing how member census data has changed over time.

Plan Maturity Measures

There are certain measures that may aid in understanding the significant risks to the plan.

Ratio of Retired Liability to Total Liability (\$'s in \$000's)	June 30, 2019	June 30, 2020
1. Retiree and Beneficiary Accrued Liability	\$ 10,076,528	\$ 10,472,466
2. Total Accrued Liability	\$ 15,039,180	\$ 15,279,525
3. Ratio, (1) ÷ (2)	67.0%	68.5%

A high percentage of liability concentrated on participants in pay status indicates a mature plan (often a ratio above 60% - 65%). Because the plan was closed to new entrants in 2006, we expect the percentage in item #3 to continue to increase over time. An increasing percentage may indicate a need for a less risky asset allocation, which may lead to a lower long-term return on asset assumption and increased costs. Higher percentages may also indicate greater investment risk as benefit payments may be greater than contributions creating an increased reliance on investment returns. This ratio should be monitored each year in the future.

Ratio of Cash Flow to Assets (\$'s in \$000's)	FYE June 30, 2019	FYE June 30, 2020
1. Contributions	\$ 498,067	\$ 504,029
2. Benefit Payments	<u>848,019</u>	<u>895,523</u>
3. Cash Flow, (1) - (2)	\$ (349,952)	\$ (391,494)
4. Fair Value of Assets	\$ 9,489,405	\$ 9,469,161
5. Ratio, (3) ÷ (4)	(3.7%)	(4.1%)

When this cash flow ratio is negative, more cash is being paid out than deposited in the trust. Negative cash flow indicates the trust needs to rely on investment returns to cover benefit payments and / or may need to invest in more liquid assets to cover the benefit payments. More liquid assets may not generate the same returns as less liquid assets, which can increase the investment risk. Currently, the low magnitude of the ratio implies there may already be enough liquid assets to cover the benefit payments, less investment return is needed to cover the shortfall, or only a small portion of assets will need to be converted to cash. Therefore, the investment risk is likely not amplified at this time. However, due to the plan being closed, we expect this measure to become increasingly negative over time. This maturity measure should be monitored in the future.

Contribution Volatility (\$'s in \$000's)	June 30, 2019	June 30, 2020
1. Fair Value of Assets	\$ 9,489,405	\$ 9,469,161
2. DB/DCR Payroll	\$ 2,347,306	\$ 2,373,078
3. Asset to Payroll Ratio, (1) ÷ (2)	404.3%	399.0%
4. Accrued Liability	\$ 15,039,180	\$ 15,279,525
5. Liability to Payroll Ratio, (4) ÷ (2)	640.7%	643.9%

Plans that have higher asset-to-payroll ratios experience more volatile employer contributions (as a percentage of payroll) due to investment return. For example, a plan with an asset-to-payroll ratio of 10% may experience twice the contribution volatility due to investment return volatility than a plan with an asset-to-payroll ratio of 5%. Plans that have higher liability-to-payroll ratios experience more volatile employer contributions (as a percentage of payroll) due to changes in liability. For example, if an assumption change increases the liability of two plans by the same percent, the plan with a liability-to-payroll ratio of 10% may experience twice the contribution volatility than a plan with a liability-to-payroll ratio of 5%.

Glossary of Terms

Actuarial Accrued Liability

Total accumulated cost to fund pension or postemployment benefits arising from service in all prior years.

Actuarial Cost Method

Technique used to assign or allocate, in a systematic and consistent manner, the expected cost of a pension or postemployment plan for a group of plan members to the years of service that give rise to that cost.

Actuarial Present Value of Projected Benefits

Amount which, together with future interest, is expected to be sufficient to pay all future benefits.

Actuarial Valuation

Study of probable amounts of future pension or postemployment benefits and the necessary amount of contributions to fund those benefits.

Actuary

Person who performs mathematical calculations pertaining to pension and insurance benefits based on specific procedures and assumptions.

GASB 67 and 68

Governmental Accounting Standards Board Statement Number 67 amends Number 25 effective for the fiscal year beginning after June 15, 2013 and defines new financial reporting requirements for public pension plans.

Governmental Accounting Standards Board Statement Number 68 amends Number 27 effective for fiscal years beginning after June 15, 2014 and defines new accounting and financial reporting requirements for employers sponsoring public pension plans.

GASB 74 and 75

Governmental Accounting Standards Board Statement Number 74 amends Number 43 effective for the fiscal year beginning after June 15, 2016 and defines new financial reporting requirements for public postemployment benefit plans. Governmental Accounting Standards Board Statement Number 75 amends Number 45 effective for fiscal years beginning after June 15, 2017 and defines new accounting and financial reporting requirements for employers sponsoring public postemployment benefit plans.

Normal Cost

That portion of the actuarial present value of benefits assigned to a particular year in respect to an individual participant or the plan as a whole.

Rate Payroll

Members' earnings used to determine contribution rates.

Unfunded Actuarial Accrued Liability (UAAL)

The portion of the actuarial accrued liability not offset by plan assets.

Valuation Payroll

Members' earnings used to determine Normal Cost and Actuarial Accrued Liability.

Vested Benefits

Benefits which are unconditionally guaranteed regardless of employment.