



STATE OF ILLINOIS
**OFFICE OF THE
AUDITOR GENERAL**

William G. Holland, Auditor General

SUMMARY REPORT DIGEST

**REVIEW OF INFORMATION SUBMITTED BY THE
CHICAGO TRANSIT AUTHORITY'S RETIREE HEALTH CARE TRUST**

ANNUAL REVIEW

Release Date: December 16, 2010

SYNOPSIS

The Board of Trustees of the Chicago Transit Authority Retiree Health Care Trust is required by the Illinois Pension Code to submit a report to the Office of the Auditor General (OAG). The report is intended to annually assess the funding level of the Retiree Health Care Trust.

The Illinois State Auditing Act (Section 5/3-2.3(f)) requires the OAG to examine the information on the funding level of the Retiree Health Care Trust submitted pursuant to Section 22 101B(b)(3)(iii) of the Illinois Pension Code.

The OAG is required to review the Retiree Health Care Trust's assumptions to ensure they are not unreasonable in the aggregate. Our review was limited to the specific conclusions required by the State Auditing Act. This report does not constitute an audit as that term is defined in generally accepted government auditing standards.

- The Retiree Health Care Trust submitted its Actuarial Report to the Office of the Auditor General on September 30, 2010.
- The Report concluded that the actuarial present value of projected contributions, trust income, and assets in excess of the statutory reserve, exceeded the actuarial present value of the projected benefits. Consequently, no change in benefits or contributions was required.
- We examined the Retiree Health Care Trust's assumptions and found that they were not unreasonable in the aggregate.

STATUTORY REQUIREMENTS

The Illinois State Auditing Act (Section 5/3-2.3(f)) requires the Auditor General to annually examine the information on the funding level of the Retiree Health Care Trust submitted pursuant to Section 22-101B(b)(3)(iii) of the Illinois Pension Code. The Pension Code requires the Retiree Health Care Trust to prepare a report that meets the requirements delineated in the Code and to submit it to the Auditor General at least 90 days prior to the end of its fiscal year.

The Pension Code (Section 22-101B(b)(3)(iv)) provides the OAG 90 days to review the information submitted by the Retiree Health Care Trust. If the Retiree Health Care Trust projects a funding shortfall, it shall provide a plan to (1) increase contributions by employees, retirees, dependents, or survivors, or (2) decrease benefits, or (3) make other plan changes, or (4) any combination thereof to cure the shortfall within 10 years. If the Retiree Health Care Trust projects a surplus, it may decrease contributions, increase benefits, or make other plan changes, to the extent of the surplus.

If the OAG review determines the Retiree Health Care Trust's assumptions are not unreasonable in the aggregate, the Trust shall implement the plan. Otherwise, the OAG shall explain the basis for its determination to the Retiree Health Care Trust and may recommend an alternative plan.

This report does not constitute an audit as that term is defined in generally accepted government auditing standards. The OAG's review, the scope of which is established by the Pension Code, focused on whether the actuarial assumptions used in the Retiree Health Care Trust's report were not unreasonable in the aggregate.

REPORT DETERMINATION

The Board of Trustees of the Chicago Transit Authority Retiree Health Care Trust submitted its Report to the Office of the Auditor General on September 30, 2010. The Actuarial Report as of January 1, 2010 included information required by the Pension Code. As shown in Digest Exhibit 1, the Report concluded that the actuarial present value of projected contributions and trust income plus assets in excess of the statutory reserve exceeded the actuarial present value of the projected benefits:

The Retiree Health Care Trust's Actuarial Report concluded that the actuarial present value of projected contributions and trust income plus assets in excess of the statutory reserve exceeded the actuarial present value of the projected benefits.

- The net actuarial present value of projected benefits was \$772,641,049.
- The actuarial present value of projected active contributions, trust income, and assets was \$781,001,402 (after subtracting \$42,817,797 for the required statutory reserve).

- Consequently, projected income and assets exceeded projected benefits by 1.1 percent, and as such, no reduction in benefits or increase in contributions was necessary.

Exhibit 1 RETIREE HEALTH CARE TRUST ANNUAL ASSESSMENT OF ADEQUACY OF TRUST FUNDING			
ACTUARIAL PRESENT VALUE OF PROJECTED BENEFITS		ACTUARIAL PRESENT VALUE OF PROJECTED INCOME AND ASSETS	
Actuarial present value of projected benefits prior to reduction for retiree contributions	\$1,335,491,288	Actuarial present value of projected active contributions and trust income plus assets	\$823,819,199
<u>Less:</u> Projected current and future retiree contributions	(\$562,850,239)	<u>Less:</u> Statutory Reserve ¹	(\$42,817,797) ¹
Net actuarial present value of projected benefits	\$772,641,049	Present value of projected income and assets, net of statutory reserve	\$781,001,402
Projected Income and Assets Exceed Projected Benefits by 1.1%			
Note: ¹ Statutory Reserve is net of retiree contributions Source: Retiree Health Care Trust Actuarial Report as of January 1, 2010			

We found the assumptions used in the Retiree Health Care Trust's Actuarial Report were not unreasonable in the aggregate.

With the assistance of our consulting actuary, Aon Hewitt, we examined the Retiree Health Care Trust's assumptions as disclosed in the Actuarial Report. Overall, we found these assumptions were not unreasonable in the aggregate. Pages 4 – 7 of our 2010 Annual Review contain observations on the specific assumptions used in the Actuarial Report.



WILLIAM G. HOLLAND
Auditor General

WGH:JFS

This Annual Review was conducted by OAG staff with the assistance of our consultants, Aon Hewitt.