JUNE 30, 2011 ACTUARIAL VALUATION OF THE POST RETIREMENT BENEFITS PLAN OF THE TOWN OF WESTWOOD

January 2012

TABLE OF CONTENTS

Section	<u>Item</u> <u>Pag</u>	<u>;e</u>
SECTION I	OVERVIEW	1
SECTION II	REQUIRED INFORMATION	4
SECTION III	MEDICAL PREMIUMS	5
SECTION IV	MEMBERSHIP DATA AND BREAKDOWN OF RESULTS	6
SECTION V	REQUIRED SUPPLEMENTARY INFORMATION	7
SECTION VI	NET OPEB OBLIGATION	8
SECTION VII	SCHEDULE OF EMPLOYER CONTRIBUTIONS	9
SCHEDULE A	ACTUARIAL ASSUMPTIONS AND METHODS1	2
SCHEDULE B	SUMMARY OF PROGRAM PROVISIONS1	8
SCHEDULE C	CONSIDERATIONS OF HEALTHCARE REFORM1	9
SCHEDULE D	GLOSSARY OF TERMS2	0:

SECTION I - OVERVIEW

The Town of Westwood has engaged Buck Consultants, LLC (Buck) to prepare an actuarial

valuation of their post-retirement benefits program as of June 30, 2011. This valuation was performed

using employee census data, enrollment data, claims, premiums, participant contributions and plan

provision information provided by personnel of the Town of Westwood. Buck did not audit these

data, although they were reviewed for reasonability. The results of the valuation are dependent on the

accuracy of the data.

The purpose of the valuation is to provide reporting and disclosure information for financial

statements, governmental agencies and other interested parties. This valuation report contains

information required by the Governmental Accounting Standards Board's Statement No. 45

entitled "Accounting and Financial Reporting by Employers for Postemployment Benefits Other

Than Pensions."

According to GASB principles, if the benefits are not prefunded, the rate earned by the General Asset

Account must be used to select the discount rate used to measure the plan. At the request of the

Town, under advisement from its audit firm, the discount rate to measure on this basis was revised

from 3.5% to 4.0%. We believe the 4.0% assumption is reasonable for these purposes, though

represents a less conservative assumption than the 3.5% which was used in the previous valuation.

The 4.0% scenario figures should be reflected in the Town's financial statements based on the

Town's current Pay-as-You-Go funding approach. Section II provides a summary of the principal

valuation results. Section VII provides a projection of funding and accounting result amounts.

If the Town was to commence funding the Annual Required Contribution instead of just paying

benefits when due as it has in the past, the measurement would be based on the expected return that

assets set aside for prefunding would be assumed to earn, which in turn depends upon the asset

allocation of those funds.

The valuation provides a second scenario of values, illustrating the potential reduction in financial

disclosure values resulting from prefunding. The alternative scenario is calculated using an 8.0%

discount rate, which implicitly assumes a relatively high proportion of equity investments. The

calculation in this scenario can be used to analyze the current funded position of the Town's post-

retirement benefits program, and determine the level of contributions necessary to assure sound

Town of Westwood Post Retirement Benefits Plan

funding. If the plan were to be prefunded, the plan itself would be required to produce financial

statements including information required by the Governmental Accounting Standards Board's

Statement No. 43, entitled "Financial Reporting for Postemployment Benefit Plans Other Than

Pension Plans"

The economic and demographic assumptions used for financial accounting purposes were chosen by

the plan sponsor with our advice. We believe these assumptions are reasonable for financial

accounting purposes. The demographic assumptions used represent a reasonable estimate of future

demographic experience of the plan participants. Given the assumptions selected, the costs and

actuarial exhibits presented in this report have been prepared in accordance with the requirements of

GASB 45. While the actuary believes that the assumptions are reasonable for financial reporting

purposes, it should be understood that there is a range of assumptions that could be deemed

reasonable that would yield different results. Moreover, while the actuary considers the assumption

set to be reasonable based on prior plan experience, it should be understood that future plan

experience may differ considerably from what has been assumed.

These results reflect the recent change to the health insurance options that the Town offers to retirees

who remain in area. As communicated to participants on April 25, 2011, effective July 1, 2011, all

active and non-Medicare retirees who live in the area are required to enroll in a Rate Saver Plan of

their choice if they wish to continue Town sponsored medical benefits. Retirees who live out of state

were allowed to continue to elect non-Rate Saver Plans. We assumed future retirees would choose to

remain in area or move out of state in the same proportion as current retirees.

Due to recent updates within Actuarial Standards of Practice No. 35 (ASOP 35) of the Actuarial

Standards Board (ASB), we have revised our mortality assumptions. The tables used reflect an

assumption about mortality improvement after the valuation date. Our mortality assumptions are the

RP-2000 Mortality Tables for males and females with static projection to 2018 using Scale AA for

post-retirement mortality and the RP-2000 Mortality Tables for males and females with static

projection to 2026 using Scale AA for pre-retirement mortality. Additionally, the assumed ultimate

healthcare cost inflation was revised downward to 4.5% from 5.0%.

For the first time, we reflected the Medicare Part B premium reimbursement, offered for current and

future retirees in Medicare plans, in the liabilities. Finally, due to recent healthcare reform, we

included the estimated impact of the Excise Tax on high cost health plans (aka, the "Cadillac tax") for

Town of Westwood Post Retirement Benefits Plan

the first time. All of these changes, as well as updated per capita costs and census information, and

the revision of the discount rate from 3.5% to 4.0%, resulted in a net increase to the Unfunded

Actuarial Accrued Liability by approximately \$2.9 million as compared to the expected 6/30/2011

Unfunded Actuarial Accrued Liability based on the previous valuation. In addition to these changes,

we have assumed that overall payroll would grow at 4.0% instead of 4.5% as was used in the

previous valuation. This has no impact on the Unfunded Actuarial Accrued Liability, but does

impact the Annual Required Contribution.

Our valuation was prepared in accordance with generally accepted actuarial principles and practices,

and, to the best of our knowledge, fairly reflects the values of the benefits under the Plan as of June

30, 2011. The valuation was prepared under my supervision. I am a Fellow of the Society of

Actuaries and a Member of the American Academy of Actuaries and have met the Qualifications

Standard of the American Academy of Actuaries to render the actuarial opinions contained herein.

Thank you for this opportunity to be of service. I am available to answer questions about this report.

Respectfully Submitted,

BUCK CONSULTANTS, LLC

Reza Vahid, FSA, MAAA

Director, Health & Productivity

<u>January 5, 2012</u>

Date

SECTION II - REQUIRED INFORMATION

	Pay	y-as-You-Go 4.0%		rpothetical Il Prefunding 8%	
a) Actuarial valuation date	Ju	ne 30, 2011	Ju	ne 30, 2011	Difference
b) Actuarial Value of Assets	\$	0	\$	0	\$ 0
c) Actuarial Accrued Liability					
Active participants	\$	31,483,007	\$	14,712,081	\$ 16,770,926
Retired participants		27,571,284		18,666,718	 8,904,566
Total AAL	\$	59,054,291	\$	33,378,799	\$ 25,675,492
d) Unfunded Actuarial Liability "UAL" [c - b]	\$	59,054,291	\$	33,378,799	\$ 25,675,492
e) Funded ratio [b/c]		0.0%		0.0%	0.0%
f) Annual covered payroll	\$	37,620,046	\$	37,620,046	
g) UAL as percentage of covered payroll		157.0%		88.7%	
h) Normal Cost for fiscal year beginning 7/1/2012	\$	2,923,257	\$	1,222,767	\$ 1,700,490
i) Amortization of UAL for fiscal year beginning 7/1/2012*		1,968,476		1,824,242	144,234
i) Approal Description "ADC"					
j) Annual Required Contribution "ARC" for fiscal year beginning 7/1/2012 [h + i]	\$	4,891,733	\$	3,047,009	\$ 1,844,724
k) Estimated pay-as-you-go costs	\$	1,751,826	\$	1,751,826	\$ 0

^{* 30-}year amortization, increasing 4.0% per year

SECTION III - MEDICAL PREMIUMS

Monthly Premiums effective July 1, 2011

Health benefits are available to employees and retirees through a number of plans. The Town obtains health insurance coverage through the West Suburban Health Group, which purchases a variety of fully insured plans, with the rates provided to each participating municipality based in part on the municipality's demographic characteristics. The following are monthly rates per subscriber for plans in which current Town employees and/or retirees are enrolled:

Non-Medicare Plans:	Town	Member	Total
Harvard Pilgrim Rate Saver			
Individual	\$375.04	\$210.96	\$586.00
Family	\$978.56	\$550.44	\$1,529.00
Blue Options Rate Saver			
Individual	\$385.92	\$217.08	\$603.00
Family	\$1,036.80	\$583.20	\$1,620.00
Tufts Navigator Rate Saver			
Individual	\$396.80	\$223.20	\$620.00
Family	\$1,038.72	\$584.28	\$1,623.00
Fallon Select Rate Saver Plan			
Individual	\$333.44	\$187.56	\$521.00
Family	\$898.56	\$505.44	\$1,404.00
Fallon Direct Rate Saver Plan			
Individual	\$310.40	\$174.60	\$485.00
Family	\$835.20	\$469.80	\$1,305.00
Harvard Pilgrim PPO			
Individual	\$710.00	\$710.00	\$1,420.00
Family	\$1,577.00	\$1,577.00	\$3,154.00
Tufts POS			
Individual	\$710.00	\$710.00	\$1,420.00
Family	\$1,577.00	\$1,577.00	\$3,154.00

SECTION III - MEDICAL PREMIUMS

Medicare Plans:

BCBS Medex Enhanced	\$216.00	\$216.00	\$432.00
Harvard Pilgrim Medicare Enhanced	\$203.00	\$203.00	\$406.00
Tufts Medicare Prime Supplement	\$164.00	\$164.00	\$328.00
Managed Blue for Seniors	\$214.05	\$214.06	\$428.11
Tufts Medicare Compliment	\$195.00	\$195.00	\$390.00
Tufts Medicare Preferred HMO	\$121.00	\$121.00	\$242.00
Fallon Senior Plan	\$133.50	\$133.50	\$267.00

Retirees contribute 36% of the total cost for Non-Medicare Rate Saver plans and 50% of the cost for Medicare plans and Non-Medicare PPO/POS plans. In addition, the Town offers a Medicare Part B refund for retirees currently enrolled in Medicare plans. The refund is equal to 50% of their Medicare Part B premium.

SECTION IV - MEMBERSHIP DATA AND BREAKDOWN OF RESULTS

Number of Employees	Town	School	Total
Actives	180	449	629
Retirees and Beneficiaries	109	261	370
Total	289	710	999
Accrued Liability @ 4.0%			
Active	\$12,631,684	\$18,851,323	\$31,483,007
Retirees and Beneficiaries	8,943,150	18,628,134	27,571,284
Total	\$21,574,834	\$37,479,457	\$59,054,291
Annual Required Contribution @ 4.0%	, 0		
Normal Cost	\$1,015,352	\$1,907,905	\$2,923,257
Amortization of UAL	719,161	1,249,315	1,968,476
Total	\$1,734,513	\$3,157,220	\$4,891,733
Expected Pay-as-you-go Costs	\$568,252	\$1,183,574	\$1,751,826
Accrued Liability @ 8%			
Active	\$6,053,794	\$8,658,287	\$14,712,081
Retirees and Beneficiaries	5,941,116	12,725,602	18,666,718
Total	\$11,994,910	\$21,383,889	\$33,378,799
Annual Required Contribution @ 8%			
Normal Cost	\$429,468	\$793,299	\$1,222,767
Amortization of UAL	655,554	1,168,688	1,824,242
Total	\$1,085,022	\$1,961,987	\$3,047,009
Expected Pay-as-you-go Costs	\$568,252	\$1,183,574	\$1,751,826
Difference	\$516,770	\$778,413	\$1,295,183

SECTION V - REQUIRED SUPPLEMENTARY INFORMATION

Schedule of Funding Progress on a Pay-as-You-Go Basis - 4.0%

	(a)	(b)	(b) - (a)	(a) / (b)	(c)	(d)
		Actuarial				
Actuarial	Actuarial	Accrued	Unfunded			Unfunded
Valuation	Value of	Liability	AAL	Funded		AAL as %
<u>Date</u>	<u>Assets</u>	(AAL)	(UAL)	<u>Ratio</u>	<u>Payroll</u>	of Payroll
June 30, 2009*	0	49,334,499	49,334,499	0.00%	39,100,816	126.2%
June 30, 2011	0	59,054,291	59,054,291	0.00%	37,620,046	157.0%

^{*} A discount rate of 3.5% was used for the June 30, 2009 measurement.

SECTION VI - NET OPEB OBLIGATION

GASB Statement No. 45 requires the development of Annual OPEB Cost and Net OPEB Obligation (NOO). This development is shown in the following table. This assumes that the ARC for the fiscal year ending June 30, 2011 is based on the results of the June 30, 2009 valuation.

Development of OPEB Cost and Net OPEB Obligation (NOO)

Year		Interest		Annual		Change	
Ending	Annual Required	on	Amortization	OPEB Cost	Actual	in NOO	NOO
June 30	Contribution	NOO	of NOO	(1) + (2) - (3)	Contribution	(4) - (5)	Balance
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
2009	5,973,531	0	0	5,973,531	1,302,000	4,671,531	4,671,531
2010	4,260,901	163,504	134,984	4,289,421	1,078,212	3,211,209	7,882,740
2011	4,502,956	275,896	227,773	4,551,079			
2012	4,891,733						

SECTION VII - SCHEDULE OF EMPLOYER CONTRIBUTIONS

The Governmental Accounting Standards Board's Statement No. 45 "Accounting and Financial

Reporting by Employers for Postemployment Benefits Other Than Pensions" outlines various

requirements of a funding schedule that will amortize the unfunded actuarial liability and cover

normal costs. Amortization of the unfunded actuarial liability is to be based on a schedule that

extends no longer than 30 years. The contribution towards the amortization of the unfunded

actuarial liability may be made in level payments or in payments increasing at the same rate as

salary increases. There is no requirement to actually fund the Annual Required Contribution,

however.

In the amortization schedules shown on the following pages, the amortization of the unfunded

accrued liability is increasing at 4.0% for 30 years. The normal cost is expected to increase at the

same rate as the assumed ultimate healthcare trend rate. Projected benefit payments/employer

contributions reflect only the benefit for those individuals now employed or retired, not any future

entrants.

Paragraph 12 of GASB 45 stipulates that valuations must be performed at least biennially. The

following projections are intended only to illustrate long-term implications of Prefunding versus

Pay-as-You-Go.

Town of Westwood Post Retirement Benefits Plan June 30, 2011

SECTION VII - SCHEDULE OF GASB 45 ARC AMOUNTS AND EXPECTED EMPLOYER PAY-AS-YOU-GO CONTRIBUTIONS

Pay-as-You-Go Basis - 4.0%

Fiscal		·		
Year		Amortization		
Ending In	Normal Cost	of UAL	ARC*	Pay-as-You-Go
2011*	2,872,140	1,630,816	4,502,956	1,156,674
2012	2,923,257	1,968,476	4,891,733	1,751,826
2013	3,054,804	2,089,004	5,143,808	1,884,014
2014	3,192,270	2,214,420	5,406,690	2,086,129
2015	3,335,922	2,342,748	5,678,670	2,251,101
2016	3,486,038	2,475,580	5,961,618	2,419,155
2017	3,642,910	2,613,217	6,256,127	2,626,502
2018	3,806,841	2,754,750	6,561,591	2,824,027
2019	3,978,149	2,900,912	6,879,061	3,009,632
2020	4,157,166	3,052,549	7,209,715	3,208,763
2021	4,344,238	3,209,690	7,553,928	3,366,853
2022	4,539,729	3,374,226	7,913,955	3,490,472
2023	4,744,017	3,547,919	8,291,936	3,679,622
2024	4,957,498	3,729,212	8,686,710	3,816,281
2025	5,180,585	3,920,512	9,101,097	3,930,032
2026	5,413,711	4,123,331	9,537,042	4,133,737
2027	5,657,328	4,335,419	9,992,747	4,307,710
2028	5,911,908	4,558,523	10,470,431	4,525,792
2029	6,177,944	4,791,963	10,969,907	4,654,204
2030	6,455,951	5,039,597	11,495,548	4,773,638
2031	6,746,469	5,302,715	12,049,184	4,945,482
2032	7,050,060	5,580,587	12,630,647	5,055,170
2033	7,367,313	5,876,370	13,243,683	5,204,704
2034	7,698,842	6,189,899	13,888,741	5,381,311
2035	8,045,290	6,521,459	14,566,749	5,599,748
2036	8,407,328	6,870,866	15,278,194	5,775,759
2037	8,785,658	7,240,816	16,026,474	5,898,508
2038	9,181,013	7,634,508	16,815,521	6,041,537
2039	9,594,159	8,052,790	17,646,949	6,247,663
2040	10,025,896	8,495,120	18,521,016	6,329,927
2041	10,477,061	8,967,313	19,444,374	6,444,830
2042	10,948,529	9,470,128	20,418,657	6,642,562
2043	11,441,213	10,002,679	21,443,892	6,725,907

^{*} Based on the results of the June 30, 2009 valuation.

SECTION VII - SCHEDULE OF EMPLOYER CONTRIBUTIONS

Full Prefunding Basis - 8%

Fiscal Year		Amortization		
Ending In	Normal Cost	of UAL	<u>ARC</u>	Pay-as-You-Go
2012	1,222,767	1,824,242	3,047,009	1,751,826
2013	1,277,791	1,897,212	3,175,003	1,884,014
2014	1,335,292	1,973,100	3,308,392	2,086,129
2015	1,395,380	2,052,024	3,447,404	2,251,101
2016	1,458,172	2,134,105	3,592,277	2,419,155
2017	1,523,790	2,219,469	3,743,259	2,626,502
2018	1,592,361	2,308,248	3,900,609	2,824,027
2019	1,664,017	2,400,578	4,064,595	3,009,632
2020	1,738,898	2,496,601	4,235,499	3,208,763
2021	1,817,148	2,596,465	4,413,613	3,366,853
2022	1,898,920	2,700,324	4,599,244	3,490,472
2023	1,984,371	2,808,337	4,792,708	3,679,622
2024	2,073,668	2,920,670	4,994,338	3,816,281
2025	2,166,983	3,037,497	5,204,480	3,930,032
2026	2,264,497	3,158,997	5,423,494	4,133,737
2027	2,366,399	3,285,357	5,651,756	4,307,710
2028	2,472,887	3,416,771	5,889,658	4,525,792
2029	2,584,167	3,553,442	6,137,609	4,654,204
2030	2,700,455	3,695,580	6,396,035	4,773,638
2031	2,821,975	3,843,403	6,665,378	4,945,482
2032	2,948,964	3,997,139	6,946,103	5,055,170
2033	3,081,667	4,157,025	7,238,692	5,204,704
2034	3,220,342	4,323,306	7,543,648	5,381,311
2035	3,365,257	4,496,238	7,861,495	5,599,748
2036	3,516,694	4,676,088	8,192,782	5,775,759
2037	3,674,945	4,863,132	8,538,077	5,898,508
2038	3,840,318	5,057,657	8,897,975	6,041,537
2039	4,013,132	5,259,963	9,273,095	6,247,663
2040	4,193,723	5,470,362	9,664,085	6,329,927
2041	4,382,441	5,689,176	10,071,617	6,444,830
2042	4,579,651	-	4,579,651	6,642,562
2043	4,785,735	-	4,785,735	6,725,907

TOWN OF WESTWOOD, ALL GROUPS

Pay-as-You-Go: 4.00% per year (in the prior valuation this had Interest:

been 3.50%)

Full Prefunding: 8.00% per year, net of investment expenses

Actuarial Cost Method: Projected Unit Credit. Benefits are attributed ratably to service

from date of hire until decrement.

Healthcare Cost Trend Rate:

FY Ending	Trend Rate
2012	7.5%
2013	7.0%
2014	6.5%
2015	6.0%
2016	5.5%
2017	5.0%
2018 & after	4.5%*

^{*} In the prior valuation, ultimate trend was assumed to be 5.0%.

Medicare Part B Increase Rate: Increases in the Medicare Part B monthly premium are assumed to be 4% per year. Additionally, for future retirees, it was assumed that the average Medicare Part B reimbursement rate would be higher than the standard Part B premium due to the income related portion of the premium due for high income retirees, by 5% in the valuation year, increasing by 1% additional each year for the next 9 years."

> Actual reported levels of income related Part B premiums were reflected for current retirees.

TOWN OF WESTWOOD, ALL GROUPS

Amortization Period:

30-year level percent of pay assuming 4.0% aggregate annual payroll growth, open basis for Pay-as-You-Go. The amortization period is 30 years for all future valuations under the Pay-as-You-Go scenario. Under the Full Prefunding scenario, a 30-year closed basis was used for the amortization, starting with Fiscal Year ending June 30, 2012. The amortization period for the Full Prefunding scenario is a specific number of years that is counted from one date, declining to zero with the passage of time.

Participation:

85% of future retirees are assumed to participate in the retiree medical plan.

Marital Status:

80% of male employees and 60% of female employees are assumed to have a covered spouse at retirement. Wives are assumed to be three years younger than their husbands.

Pre-Medicare Retirees:

Current retirees who are under age 65 are assumed to remain in the pre-Medicare medical plan until age 65. The retirees are valued based on per capitas developed using weighted average premium amounts.

Current active employees who are assumed to retire prior to age 65 are valued using per capitas developed using weighted-average premium amounts. This weighted-average premium is based on the medical plan coverage of current retirees under age 65.

Post-Medicare Retirees:

Current retirees over age 65 remain covered until death. It is assumed that all future retirees will become Medicare eligible when they reach age 65. Amounts to be received in the future for the Medicare Part D Retiree Drug Subsidy are not reflected in the valuation. All Medicare eligible retirees (current or future) are valued using per capitas developed based on weighted average premiums of those current retirees now on Medicare.

Termination Benefit:

50% of current actives over age 50 with at least 10 years of service are expected to elect medical coverage starting at age 55.

TOWN OF WESTWOOD, ALL GROUPS

Medical Plan Costs:

It is assumed that future retirees participate in the same manner as current retirees. The Town participates in the West Suburban Health Group, with the rates provided to each participating municipality based in part on the municipality's demographic characteristics. Per capita costs were developed from the monthly costs.

The estimated average gross premium all non-Medicare retirees and beneficiaries before adjusting for aging for 2011-12 is \$8,475. This amount is \$13,094 when normalized to age 65. The average Medicare eligible retirees' per capita claims cost is \$4,698 for the same period. The amount is \$3,595 when normalized to age 65.

It is assumed that future retirees participate in the same manner as current retirees (i.e. they elect a blend of options equal to the current retiree population's election mix). Employee cost sharing is based on current rates as described above.

Age-Based Morbidity:

Per capita costs are adjusted to reflect expected cost increases related to age. The increase in the net incurred claims was assumed to be:

<u>Age</u>	Annual Increase
49 and below	2.6%
50-54	3.2%
55-59	3.4%
60-64	3.7%
65-69	3.2%
70-74	2.4%
75-79	1.8%
80 and over	0.0%

Valuation Cycle:

This valuation is prepared using data as of June 30, 2011 in order to calculate the Annual Required Contribution amounts for use for the fiscal years ending June 30, 2012 and June 30, 2013.

TOWN OF WESTWOOD, GROUPS 1 AND 2 (NON-TEACHERS)

SEPARATIONS FROM ACTIVE SERVICE: Representative values of the assumed annual rates of withdrawal and vesting, disability, death and service retirement are as follows:

		Service Retiremen		
Age	Disability	Male	Female	
25	0.0002			
30	0.0003			
35	0.0006			
40	0.0010			
45	0.0015			
50	0.0019	0.010	0.015	
55	0.0024	0.020	0.055	
60	0.0028	0.120	0.050	
62	0.0030	0.300	0.150	
65	0.0030	0.400	0.150	
69	0.0030	0.300	0.200	

Years of	Rates of
Service	Withdrawal
0	0.150
1	0.120
2	0.100
3	0.090
4	0.080
5	0.076
10	0.054
15	0.033
20	0.020
25	0.010
30+	0.000

Mortality: RP-2000 Mortality Tables for males and females with static projection to 2018 using Scale AA for post-retirement mortality and the RP-2000 Mortality Tables for males and females with static projection to 2026 using Scale AA for pre-retirement mortality. For the period after disability retirement, the RP-2000 Combined Healthy Table set forward 2 years is used.

In the prior valuation, the mortality assumption for non-disabilities was the RP-2000 Combined Healthy Table.

TOWN OF WESTWOOD, GROUPS 1 AND 2 (TEACHERS)

SEPARATIONS FROM ACTIVE SERVICE: Representative values of the assumed annual rates of withdrawal and vesting, disability, death and service retirement are as follows:

Age	Disability	Years of Service	Rates of Withdrawal
25	0.0002	0	0.150
30	0.0003	1	0.120
35	0.0006	2	0.100
40	0.0010	3	0.090
45	0.0015	4	0.080
50	0.0019	5	0.076
55	0.0024	10	0.054
60	0.0028	15	0.033
62	0.0030	20	0.020
65	0.0030	25	0.010
69	0.0030	30+	0.000

	Male		Female	
	Service	Retirement	Service 1	Retirement
Age	<20	20+	<20	20+
50	0.00	0.01	0.00	0.01
55	0.02	0.03	0.02	0.04
60	0.12	0.20	0.12	0.16
61	0.15	0.30	0.15	0.20
62	0.18	0.35	0.18	0.25
63	0.15	0.35	0.15	0.25
64	0.25	0.30	0.25	0.30
65	0.40	0.50	0.40	0.40
66	0.40	0.30	0.40	0.30
67	0.40	0.30	0.40	0.25
68	0.40	0.30	0.40	0.35
69	0.40	0.40	0.40	0.35
70	1.00	1.00	1.00	1.00

Teachers electing the increased benefit under Chapter 114 of the Acts of 2000 were assumed to have higher rates of retirement from ages 54 to 62 if their service was greater than 30 years. These rates are the same for males and females. The rate at age 54 is 0.035. The rate increases to 0.06 at age 55, 0.18 at age 56 and 0.30 at age 57. The rate for ages 58, 59 and 62 is 0.40. The rate for ages 60 and 61 is 0.35.

Mortality: The RP-2000 Mortality Tables for males and females with static projection to 2018 using Scale AA for postretirement mortality, and projected to 2026 for pre-retirement mortality. For the period after disability retirement, the RP-2000 Combined Healthy Table set forward 2 years is used.

In the prior valuation, the mortality assumption for non-disabilities was the RP-2000 Combined Healthy Table.

TOWN OF WESTWOOD, GROUP 4

SEPARATIONS FROM ACTIVE SERVICE: Representative values of the assumed annual rates of disability, service retirement, and withdrawal are as follows:

		Service
Age	Disability	Retirements
25	0.0020	
30	0.0030	
35	0.0030	
40	0.0030	
45	0.0100	0.010
50	0.0125	0.020
55	0.0120	0.150
60	0.0085	0.200
62	0.0075	0.250
65	0.0000	1.000
69		

Years of	Rates of
Service	Withdrawal
0	0.015
1	0.015
2	0.015
3	0.015
4	0.015
5	0.015
6	0.015
7	0.015
8	0.015
9	0.015
10	0.015
11+	0.000

Mortality: The RP-2000 Mortality Tables for males and females with static projection to 2018 using Scale AA for post-retirement mortality and the RP-2000 Mortality Tables for males and females with static projection to 2026 using Scale AA for pre-retirement mortality. For the period after disability retirement, the RP-2000 Combined Healthy Table set forward 2 years is used.

In the prior valuation, the mortality assumption for non-disabilities was the RP-2000 Combined Healthy Table.

SCHEDULE B - SUMMARY OF PROGRAM PROVISIONS

Retirement Medical Insurance: Retired employees pay a variable portion of their post-retirement

medical costs, which varies by plan. In addition, retirees in Medicare plans are entitled to a Medicare Part B reimbursement, which is currently 50% of their required Part B premium including any income related excess premium they have to pay. (This amount is \$49.95 for 2012, before adjustment for income

related excess premium charges).

Spousal Coverage: Current and future retirees may elect to include their spouses as

part of their post-retirement benefits. There is lifetime spousal coverage for medical insurance even after the death of the retiree. The spouse of an employee who dies prior to termination from service but who has 10 or more years of service is eligible to receive medical insurance for life or until

remarriage. No remarriage was assumed for this valuation.

Section 18 Coverage: The Town has elected to adopt Section 18 under Chapter 32B of

the General Laws of Massachusetts, which requires that an employee or retiree must participate in the Medicare program as the primary payer once one reaches age 65 and is Medicare

eligible.

Retirement Eligibility: Age 55 with 10 years of service, or 20 years of service.

Ordinary Disability Eligibility: 10 years of service and under age 55.

Termination Eligibility: 10 years of service.

SCHEDULE C - CONSIDERATIONS OF HEALTH CARE REFORM

Early Retiree Reinsurance Program ("ERRP") - Effective June 1, 2010: The town has not

received any reimbursement under this program.

Removal of Lifetime Maximum: Any cost in relations to removal of any historic annual or

lifetime maximums is assumed to already have been reflected in the premiums that we were

provided.

Medicare Advantage Plans - Effective January 1, 2011: The law provides for phased in

reductions to the amounts that would be provided to Medicare Advantage plans starting in 2011.

We have considered the impact that these reductions might have on plan costs in setting the trend

assumption used.

Expansion of Child Coverage to Age 26: Since few retirees cover children on retiree health

plans, this provision will likely have a relatively small effect on the gross benefit cost. The cost

covering children through age 26 is assumed to already have been reflected in the premiums that

we were provided.

Medicare Part D Subsidy - Shrinking Medicare Prescription Drug "Donut Hole" - Starting

January 1, 2011: RDS payments are not reflected as on ongoing offsetting item in GASB 45

valuations, and so no direct impact is reflected. We do not think that the improved Medicare Part

D benefits will cause any change in participation levels given the level of the plan's subsidy for

benefits for Medicare eligible participants.

Excise Tax on High-Cost Employer Health Plans (aka Cadillac Tax) - Effective January 1,

2018: There is considerable uncertainty about how the tax would be applied, and considerable

latitude in grouping of participants for tax purposes. We have estimated the impact using the

weighted average of the stated premiums and a 3.5% assumed CPI and applied the estimated

amounts as a load on calculated liabilities.

Other: We have not identified any other specific provision of health care reform that would be

expected to have a significant impact on the measured obligation. As additional guidance on the

legislation is issued, we will continue to monitor any potential impacts.

Town of Westwood Post Retirement Benefits Plan

SCHEDULE D - GLOSSARY OF TERMS

Actuarial Accrued Liability

That portion, as determined by a particular Actuarial Cost Method, of the Actuarial Present Value of OPEB benefits and expenses which is not provided for by future Normal Costs and therefore is the value of benefits already earned.

Actuarial assumptions

Assumptions as to the occurrence of future events affecting OPEB costs, such as: mortality, withdrawal, disablement and retirement; changes in compensation and Government provided OPEB benefits; rates of investment earnings and asset appreciation or depreciation; procedures used to determine the Actuarial Value of Assets; characteristics of future entrants for Open Group Actuarial Cost Methods; and other relevant items.

Actuarial cost method

A procedure for determining the Actuarial Present Value of OPEB benefits and expenses and for developing an actuarially equivalent allocation of such value to time periods, usually in the form of a Normal Cost and an Actuarial Accrued Liability.

Actuarial experience gain or loss

A measure of the difference between actual experience and that expected based upon a set of Actuarial Assumptions, during the period between two Actuarial Valuation dates, as determined in accordance with a particular Actuarial Cost Method.

Amortization (of unfunded actuarial accrued liability)

That portion of the OPEB plan contribution which is designed to pay interest on and to amortize the Unfunded Actuarial Accrued Liability or the Unfunded Frozen Actuarial Accrued Liability.

Annual OPEB cost

An accrual-basis measure of the periodic cost of an employer's participation in a defined benefit OPEB plan.

Annual required contributions of the employer (ARC)

The employer's periodic expense to a defined benefit OPEB plan, calculated in accordance with the parameters. It is the value of the cash contributions for a funded plan and the value of the expense entry in the profit and loss section of the financial statements.

Closed amortization period (closed basis)

A specific number of years that is counted from one date and, therefore, declines to zero with the passage of time. For example, if the amortization period initially is thirty years on a closed basis, twenty-nine years remain after the first year, twenty-eight years after the second year, and so forth. In contrast, an open amortization period (open basis) is one that begins again or is recalculated at each actuarial valuation date. Within a maximum number of years specified by law or policy (for example, thirty years), the period may increase, decrease, or remain stable.

Covered payroll

Annual compensation paid to active employees covered by an OPEB plan. If employees also are covered by a pension plan, the covered payroll should include all elements included in compensation on which contributions to the pension plan are based. For example, if pension contributions are calculated on base pay including overtime, covered payroll includes overtime compensation.

Defined benefit OPEB plan

An OPEB plan having terms that specify the benefits to be provided at or after separation from employment. The benefits may be specified in dollars (for example, a flat dollar payment or an amount based on one or more factors such as age, years of service, and compensation), or as a type or level of coverage (for example, prescription drugs or a percentage of healthcare insurance premiums).

Funded ratio

The actuarial value of assets expressed as a percentage of the actuarial accrued liability.

SCHEDULE D - GLOSSARY OF TERMS

Funding policy

The program for the amounts and timing of contributions to be made by plan members, employer(s), and other contributing entities (for example, state government contributions to a local government plan) to provide the benefits specified by an OPEB plan.

Healthcare cost trend rate

The rate of change in per capita health claims costs over time as a result of factors such as medical inflation, utilization of healthcare services, plan design, and technological developments.

Investment return assumption (discount rate)

The rate used to adjust a series of future payments to reflect the time value of money.

Level dollar amortization method

The amount to be amortized is divided into equal dollar amounts to be paid over a given number of years; part of each payment is interest and part is principal (similar to a mortgage payment on a building). Because payroll can be expected to increase as a result of inflation, level dollar payments generally represent a decreasing percentage of payroll; in dollars adjusted for inflation, the payments can be expected to decrease over time.

Level percentage of projected payroll amortization method

Amortization payments are calculated so that they are a constant percentage of the projected payroll of active plan members over a given number of years. The dollar amount of the payments generally will increase over time as payroll increases due to inflation; in dollars adjusted for inflation, the payments can be expected to remain level.

Net OPEB Obligation

The cumulative difference since the effective date of this Statement between annual OPEB cost and the employer's contributions to the plan, including the OPEB liability (asset) at transition, if any, and excluding (a) short-term differences and (b) unpaid contributions that have been converted to OPEB-related debt. It will be included as a balance sheet entry on the financial statements.

Normal cost

That portion of the Actuarial Present Value of OPEB benefits and expenses which is allocated to a valuation year by the Actuarial Cost Method. It is the value of benefits to be accrued in the valuation year by active employees.

OPEB-related debt

All long-term liabilities of an employer to an OPEB plan, the payment of which is not included in the annual required contributions of a sole or agent employer (ARC) or the actuarially determined required contributions of a cost-sharing employer. Payments generally are made in accordance with installment contracts that usually include interest. Examples include contractually deferred contributions and amounts assessed to an employer upon joining a multiple-employer plan.

Other postemployment benefits

Postemployment benefits other than pension benefits. Other postemployment benefits (OPEB) include postemployment healthcare benefits, regardless of the type of plan that provides them, and all postemployment benefits provided separately from a pension plan, excluding benefits defined as termination offers and benefits.

Pay-as-You-Go

A method of financing an OPEB plan under which the contributions to the plan are generally made at about the same time and in about the same amount as benefit payments and expenses becoming due.

Required supplementary information (RSI)

Schedules, statistical data, and other information that are an essential part of financial reporting and should be presented with, but are not part of, the basic financial statements of a governmental entity.