



Visit the Gateway at <https://gateway.ifionline.org/login.aspx>

# Gateway User Guide

## OPEB Other Post-Employment Benefits Reporting



# Table of Contents

Frequently Asked Questions .....	3
Accessing the Other Post-Employment Benefits Report .....	4
Navigating the Report .....	6
Step 1 – Initial Configurations .....	7
Units without Other Post-Employment Benefits .....	7
Units with Other Post-Employment Benefits .....	7
Step 2 – Health Care Insurance Plans .....	8
Step 3 – Expenses .....	9
Step 4 – Liability .....	10
Step 5 – Assets .....	10
Signing and Submitting the Report .....	11



## Frequently Asked Questions

### *What is OPEB?*

Other Post-Employment Benefits (OPEB) are those benefits that may be provided to employees after employment ends. Those benefits are separate from the normal pension offered by a governmental unit. OPEB's may include medical insurance, prescription drug, dental, vision, life insurance, long-term care benefits, and long-term disability benefits.

### *Why are some fields grayed-out and unavailable for data entry?*

Certain fields are made unavailable based on the response to questions in step one. If a unit has not completed an actuarial valuation, the fields on the valuation are unavailable. If a unit selected the option to not report supplemental information, the supplemental questions are unavailable.

### *Is this a new reporting requirement?*

Yes. According to I.C. 36-1-8-17.5 passed in the 2013 General Assembly, each political subdivision must report for the preceding year to the Department of Local Government Finance (DLGF) before February 1 of each year:

- a. OPEB liability;
- b. Unfunded OPEB liability;
- c. OPEB assets;
- d. OPEB contributions; and
- e. OPEB expenses and expenditures.

The DLGF is to specify the manner of reporting the information and they have determined that Gateway is the appropriate format. OPEB's are to be submitted with the 2013 Annual Reports submitted through Gateway by January 31, 2014.

### *The only post employment benefits we offer is allowing our retirees to purchase health insurance on the group plan. However, we require our retirees to pay the full cost of their post employment premiums. Do we have an OPEB liability to report?*

It depends. In most cases, retirees pay the same premiums as active employees. This can create an OPEB liability since it increases the overall risk of the plan. The true cost for retiree health coverage is almost always higher than the cost for active employees. The retirees are older and more likely to require health care services. For example, if priced separately, the cost for a retiree health insurance plan may be \$10,000 per year and the cost for an active employee is \$6,000 per year. However, if priced in one large pool the price per plan would be \$8,000 per year. Then, there is an implicit subsidy of \$2,000 per year for each plan that is offered. The total amount of the subsidy is a part of the OPEB liability and expenses that the employer must report.

*Are we required to “pre-fund” these benefits?*

Not at this time. No cash contribution is currently required and no amount is required to be budgeted for this potential liability. However, some units may decide it makes sense to pre-fund OPEB's as some units have done for pension liabilities.

*If we determine that our unit does not have an OPEB liability, are we required to report anything in Gateway?*

Yes. Units with no liability are still required to report and submit an OPEB report in Gateway.



## Accessing the Other Post-Employment Benefits Report

The Gateway login page can be accessed through the Gateway public data output site at [gateway.ifionline.org](http://gateway.ifionline.org). Once on this site, please select the “Local Officials: Login Here” link on the top right-hand side of the page.



### An Open Door into Local Government Finance

This will take you to the login page below. Please enter your username which is typically your email address and your password. Once done, please select “Log In.”

Authorized Personnel Login

User Name: rburke@dlgf.in.gov

Password: [REDACTED]

\*After 5 failed attempts, account will be locked

←

[Forgot your password?](#)

If you are having difficulties logging in you may contact the Department at [gateway@dlgf.in.gov](mailto:gateway@dlgf.in.gov) for assistance.

Once you have logged in, you will be taken to the Select Application page in Gateway. Please select, "Other Post-Employment Benefits Report".



You should now be on the Select Unit from List page. Select the name of your unit to continue.

### Select Unit from List

Unit Code	Unit Name	Unit Type	Unit County
0000	<a href="#">ADAMS COUNTY</a>	County	Adams

Upon clicking the name of your unit, you will be taken to the Unit Main Menu. To begin the report, select "Step 1: Initial Configurations."





## Navigating the Report

The OPEB report is organized into multiple steps. To begin entering information into most steps, please click the red, "Click here to make changes to the form" button, on the top left-hand side of the page.

Step 1 | [Step 2 >>>](#)

**Click here to make changes to the form**      Last Saved:

Does the unit offer health insurance?

YES

Throughout the report are blue "i" information icons. Moving your cursor over these icons will reveal additional information regarding the adjacent question.

Does the unit currently offer any Other Post-Employment Benefits? 

YES  
 NO

These are benefits to non-active employees that typically include: medical, prescription drug, dental, vision, hearing, life insurance, long-term care benefits, and long-term disability benefits.

When a step is completed, please be sure to click, "Save Figures" to ensure all data has been saved.

Step 1 | [Step 2 >>>](#)

**Save Figures**      Cancel      Last Saved:

Does the unit offer health insurance?

YES

The next page can be accessed by selecting the next step on the top left-hand side of the page.

[Step 1 | Step 2 >>>](#)

**Save Figures**      Cancel



## Step 1 – Initial Configurations

Step 1 collects initial data that affects which information is requested in the remainder of this report.

### Units without Other Post-Employment Benefits

Units that do not offer any other post-employment benefits will likely answer “No” to the questions on Step 1. After answering the questions, it is important to click “Save Figures” to save the currently entered data. Upon saving, a “Skip to Submission” button will appear at the top of the page. This will redirect the user to the final submission portion of the report. Please navigate to the “Signing and Submitting the Report” section of this user guide for assistance submitting this report.

**>>>No figures to report. Skip to submission >>>**



### Units with Other Post-Employment Benefits

As questions are answered in Step 1, the remainder of the report will be customized to fit the unit’s needs. For units that offer other post-employment benefits, there are two separate paths for this report.

#### **Units that have completed an actuarial valuation**

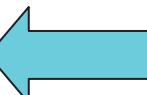
The first path is for users that have recently completed an OPEB valuation under standard 45 of the Government Accounting Standards Board. The Department understands that some units may not be required to complete a valuation annually or that a valuation for 2013 may not be completed before the January 31 deadline. Therefore, the Department will accept a valuation completed within the last 5 years. If an actuarial valuation was completed, but there are significant changes to the plan liability, users will need to describe these changes. For units that have completed an actuarial valuation, the users may choose to enter the five statutory data points in Steps 3, 4, and 5. Users have the option of completing additional information, but is it not required for units that have completed an actuarial valuation.

#### **Units that have not completed an actuarial valuation**

The second path is for users that have not completed an actuarial valuation of OPEB. For these users, the Department will collect qualitative data and will allow users to estimate some of the information typically calculated in an actuarial study. The Department understands that these will be estimates and the Department acknowledges that users who elect to enter these as a part of the filing are only entering a best guess without the paid help of an actuary.

Once the current step is completed, please be sure to click, “Save Figures” to ensure all data is saved. Step 2 may be accessed by selecting “Step 2 >>>” at the top-left hand side of the page.

**Step 1 | Step 2 >>>**





## Step 2 – Health Care Insurance Plans

Step 2 summarizes the unit's health care plan offerings. Units only need to enter plan information for plans where retirees are currently receiving coverage, even if retirees pay the entire premium. If the unit has plans that are offered to only active employees, those particular plans will not need to be reported. If there are any retirees on a plan, the Department requests that all tier data (Individual, Family, etc.) is collected, even if there are tiers without retirees in that particular tier. (i.e. Report family tier data, even if no retirees are receiving that tier's coverage.)

The unit will first need to add the plans that retirees currently receive coverage. On the top of this page the user will select the appropriate plan type from the drop down menu, enter a plan name, and then click the "Add" button on the right-hand side to save the plan.

Plan Type	Plan Name	Action
<input type="button" value="Health Insurance"/> <input type="button" value="Health Insurance"/> <input type="button" value="Dental Insurance"/> <input type="button" value="Vision Insurance"/> <input type="button" value="Prescription Drug"/> <input type="button" value="Hearing"/> <input type="button" value="Life Insurance"/> <input type="button" value="Long-Term Care Benefits"/> <input type="button" value="Long-Term Disability Benefits"/>	<input type="text" value="Plan Name Example"/>	<input type="button" value="Add"/>

Once all plans are added in the section above, the next step is to enter the cost/enrollment information for each of the plans' tiers. After entering the annual costs and enrollment information, click the "Add" button to save the entered data. Please note that there is a drop down menu on the top left-hand side of this section that is used to navigate between each plan. At least one tier per plan must be entered.

Select a plan to view/add/edit tiers below

Tiers	Health Insurance - ABC Health Plan	Health Insurance - ABC Health Plan	Dental Insurance - Dental Plan Name Example																																															
<table border="1"><thead><tr><th>Tier Name</th><th>Total Annual Premium Cost per Employee</th><th>Current Employees</th><th>Retirees</th><th>Enrollees</th><th>Action</th></tr></thead><tbody><tr><td>Example Individual Plan</td><td>10000</td><td><table border="1"><tr><td>Employer Paid portion of premiums</td><td>8000</td><td>Employer Paid portion of premiums</td><td>0</td><td>Employees</td><td>10</td></tr><tr><td>Individual Paid portion of premium</td><td>2000</td><td>Individual Paid portion of premium</td><td>10000</td><td>Retirees</td><td>2</td></tr></table></td><td><table border="1"><tr><td>Employees</td><td>10</td></tr><tr><td>Retirees</td><td>2</td></tr></table></td><td><input type="button" value="Edit"/> <input type="button" value="Delete"/></td></tr><tr><td>Example Family Plan</td><td>15000</td><td><table border="1"><tr><td>Employer Paid portion of premiums</td><td>11000</td><td>Employer Paid portion of premiums</td><td>0</td><td>Employees</td><td>15</td></tr><tr><td>Individual Paid portion of premium</td><td>4000</td><td>Individual Paid portion of premium</td><td>15000</td><td>Retirees</td><td>0</td></tr></table></td><td><table border="1"><tr><td>Employees</td><td>15</td></tr><tr><td>Retirees</td><td>0</td></tr></table></td><td><input type="button" value="Add"/></td></tr></tbody></table>	Tier Name	Total Annual Premium Cost per Employee	Current Employees	Retirees	Enrollees	Action	Example Individual Plan	10000	<table border="1"><tr><td>Employer Paid portion of premiums</td><td>8000</td><td>Employer Paid portion of premiums</td><td>0</td><td>Employees</td><td>10</td></tr><tr><td>Individual Paid portion of premium</td><td>2000</td><td>Individual Paid portion of premium</td><td>10000</td><td>Retirees</td><td>2</td></tr></table>	Employer Paid portion of premiums	8000	Employer Paid portion of premiums	0	Employees	10	Individual Paid portion of premium	2000	Individual Paid portion of premium	10000	Retirees	2	<table border="1"><tr><td>Employees</td><td>10</td></tr><tr><td>Retirees</td><td>2</td></tr></table>	Employees	10	Retirees	2	<input type="button" value="Edit"/> <input type="button" value="Delete"/>	Example Family Plan	15000	<table border="1"><tr><td>Employer Paid portion of premiums</td><td>11000</td><td>Employer Paid portion of premiums</td><td>0</td><td>Employees</td><td>15</td></tr><tr><td>Individual Paid portion of premium</td><td>4000</td><td>Individual Paid portion of premium</td><td>15000</td><td>Retirees</td><td>0</td></tr></table>	Employer Paid portion of premiums	11000	Employer Paid portion of premiums	0	Employees	15	Individual Paid portion of premium	4000	Individual Paid portion of premium	15000	Retirees	0	<table border="1"><tr><td>Employees</td><td>15</td></tr><tr><td>Retirees</td><td>0</td></tr></table>	Employees	15	Retirees	0	<input type="button" value="Add"/>	<input type="button" value="Health Insurance - ABC Health Plan"/> <input type="button" value="Health Insurance - ABC Health Plan"/> <input type="button" value="Dental Insurance - Dental Plan Name Example"/>	
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Once all tiers, for all plans, have been added, continue to the Step 3.



## Step 3 – Expenses

Step 3 summarizes the expenses incurred in the last calendar year.

The first field collects the expenditures paid directly for current retiree benefits. Examples of expenditures paid directly for current retiree benefits include payments of premiums.

Expenditures paid by unit for retiree benefits in the last year 

The second field asks for the number of retirees currently receiving any other post-employment benefits.

Total number of retirees currently receiving any other post-employment benefits

The Department is also requesting an estimate of the higher premiums paid for current employees, because of the retirees in your insurance pool. If you have no current retirees purchasing health insurance, this number will be zero. For units that have not completed an actuarial valuation, please report an estimate of the higher premiums paid for current employees because of the retirees in your insurance pool.

Estimated additional expenditures from higher healthcare premiums for current employees due to retirees in the insurance group 

One of the most complicated aspects of OPEB is understanding, and calculating, the subsidies provided and liability outstanding from allowing retirees to purchase health insurance on the unit's group plan. In most cases, retirees pay the same premiums as active employees. As defined by the Government Accounting Standards Board, this can create an OPEB liability since it increases the overall risk of the plan. The true cost for retiree health coverage is usually higher than the cost for active employees. The retirees are older and more likely to require health care services. Therefore, this expense is a cost to the government unit, through its payment of higher premiums for current employees.

Lastly, Step 3 asks for the total OPEB expenses paid in the last year. This total represents expenses paid directly for current retirees and expenses incurred through higher premiums for current employees. This amount is typically the sum of the first and third questions in this step.

Expenses paid in the last year 

Total (As estimated by the unit)

16

Total (As calculated in the actuarial valuation)

## Step 4 – Liability

Step 4 reports factors that affect the overall OPEB liability. This step begins by collecting basic employee/retiree information followed by the last section that collects the total liability, as estimated by the unit or actuarial consultant.

In this last section of Step 4, if the unit has not completed an actuarial valuation of its OPEB liability, the Department understands that these will be estimates and the Department acknowledges that users who elect to enter these as a part of the filing are only entering a best guess without the paid help of an actuary.

 <b>Liability</b>	
<b>Total (As estimated by the unit)</b> <input type="text"/>	<b>Total (As calculated in the actuarial valuation)</b> <input type="text"/>

The unfunded liability represents the total liability, less any assets set aside to fund future OPEB liability.

 <b>Unfunded Liability</b>	
<b>Total (As estimated by the unit)</b> <input type="text"/>	<b>Total (As calculated in the actuarial valuation)</b> <input type="text"/>



## Step 5 – Assets

Step 5 collects information regarding the funding of retiree benefits.

The first question asks if retiree benefits are being funded with assets designated for retirees.

Are retiree benefits being funded with assets designated for retirees?
<input checked="" type="radio"/> <b>YES</b>
<input type="radio"/> <b>NO</b>

The next question collects the total value of assets being saved to fund future OPEB liability. If there is not currently any assets being saved for future OPEB liability, please enter a zero.

<b>Current value of Assets in Saving for future OPEB liability:</b> <input type="text"/>
---

The last question of this report collects the total contributions during 2013 to fund future OPEB liability. If there were not any contributions in 2013, please enter a zero.

**Contributions made in 2013 to this Asset Fund:**

The Sign and Submit page may be accessed by selecting “Submission >>>” at the top-left hand side of the page.

[<<< Step 4](#) | [Step 5](#) | [Submission >>>](#)



## Signing and Submitting the Report

Your final step is to sign and submit this form. Please note that only users with submission rights will see the signature box.

This form has not been submitted

**Form Signature**

I hereby acknowledge that the submission of this document through the Gateway password and PIN system constitutes an "electronic signature" as defined in IC 5-24-2-2. This submission is intended to, and hereby does, constitute authentication and approval of the submitted document as required by the Indiana Code. The information reported is accurately represented and is without intentional misrepresentations.

I understand that this electronic signature takes the place of my handwritten signature and accomplishes the same purposes as would my handwritten signature in the same circumstance. I further acknowledge that this electronic signature has the same force and effect as my handwritten signature and can and will be used for all lawful purposes. I affirm that I have the real and apparent authority to electronically sign and submit this document on behalf of the unit.

NAME

Steve McQueen

TITLE

Clerk-Treasurer

SIGNATURE/PIN

••••



DATE

**SIGN AND SUBMIT FORM**

The signature box will not appear to users with edit or read-only rights.

To sign the form, first type your name and title into the signature box. After that, you will need to enter a four-digit PIN code. This PIN code has been sent, via email, to the person with submission rights. You may contact the Department at [gateway@dlgf.in.gov](mailto:gateway@dlgf.in.gov) or at (317) 232-3777 in the event that you have lost or not received a PIN code. Once you select “Sign and Submit Form,” today’s date will automatically populate the date field and the report will be submitted.

Once the form has been submitted, bold red text will state “**This form has been submitted.**” There will also be an unlock button that can be used to manually un-submit the form.

**This form has been submitted.**

[Click here to unlock the form](#)

Submitted at 8/15/2013 9:17:23 AM

Form Signature

If you have any questions while completing this form please contact the DLGF at [gateway@dlgf.in.gov](mailto:gateway@dlgf.in.gov) or at (317) 232-3777.