



RETIREE MEDICAL TRUST

PORACRMT.ORG

RETIREE MEDICAL TRUST

Serving PORAC Members Since 2008

- BENEFITS DESIGNED TO LAST FOR A LIFETIME
- COVERS PREMIUMS & MEDICAL EXPENSES
- RUN BY PORAC MEMBERS
- AVAILABLE TO POLICE & FIRE ASSOCIATIONS IN ALL 50 STATES
- COVERS COPAYS & DEDUCTIBLES
- TRIPLE TAX-FREE PLAN
- NON-TAXABLE REIMBURSEMENTS
- SURVIVING SPOUSE BENEFITS

2021 FAQs Bulletin



PORAC RETIREE MEDICAL TRUST

c/o Vimly Benefit Solutions, Inc.

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FREQUENTLY ASKED QUESTIONS

-FEBRUARY 2021 -

These Frequently Asked Questions (FAQs) contain important information about the PORAC Retiree Medical Trust (the “Trust”). The purpose of these FAQs is to answer common questions about the “Medical Expense Reimbursement Plan (the “Plan”) of the Trust. These FAQs will give you a general outline of the operation and structure of the Plan and Trust.

IMPORTANT NOTE: *These FAQs have been designed to provide you with key information about the Plan, but they do not provide all the details and limitations of the Plan. Exact specifications are provided in the formal “Medical Expense Reimbursement Plan of the PORAC Retiree Medical Trust,” restated ef. ***, which will prevail in case of conflict with these FAQs. You may request a copy of the most up-to-date Plan document from the Trust Office; see Part A(3) below for contact information.*

PART A:

INTRODUCTION TO THE PORAC RETIREE MEDICAL TRUST

1) What is the PORAC Retiree Medical Trust? The PORAC Retiree Medical Trust is a funding vehicle in which to deposit money while you are working, to pay for medical expenses after you retire, pursuant to the rules of the Plan. Any PORAC member Association may choose, as a bargaining unit (through collective bargaining), to join the Trust. (You cannot choose to join as an individual; it must be through bargaining by your Association). There is a special low rate for out-of-state Associations to join PORAC, which is \$6/member/year.

Note regarding new hires: An Association may bargain that only new hires will participate in the Trust, e.g., every employee hired after January 1, 2017. That is, although there can be no individual employee choice to join the Trust, an Association may bargain that a certain *defined class of employees* will participate in the RMT. That may help in situations where your employer is cutting off retiree health benefits only for new hires.

2) Why should my Association join the Trust? Your Association should consider joining the PORAC Retiree Medical Trust as part of the solution to the problem of rising health care costs, and budget strains on cities and counties. The Trust is a flexible and tax-favored program available to PORAC member Associations to fund for post-retirement medical expenses, through pre-tax employer and/or employee contributions. Also, the Trust offers the advantages of pooling contributions, such as providing a lifetime¹ stream of benefit payments. This differs from an individual health savings account benefit, which will terminate when the account balance reaches zero. (For details see Part E, “Tax and Pooling Advantages.”)

¹ The Plan is designed to provide monthly reimbursement benefits to Eligible Retirees until death. However, this feature is not guaranteed. The Trustees reserve the right to modify, limit or terminate benefits as necessary to preserve the financial soundness of the Trust.

3) Whom should I contact with questions regarding the Trust? You should contact the Trust Office, or any Trustee (see Part F2), with questions regarding the Trust, e.g., if your Association is interested in joining the Trust or if you have any questions regarding benefits from the Trust:

PORAC Retiree Medical Trust
c/o Ms. Suzan Kolb
Phone: (877) 808-5994 * Email: PORAC@vimly.com * Web: PORACRMT.org

PART B: BENEFITS AND PARTICIPATION AT A GLANCE

1) What types of benefits are available from the Trust? Benefits from the Trust come in the form of reimbursement for certain medical costs incurred after you retire, which the Plan defines as “Covered Expenses.”

2) For what type of medical expenses does the Trust provide reimbursement benefits? The Trust provides reimbursement benefits toward the cost of post-retirement “Covered Expenses” paid by participants, on or after the date the participant becomes an Eligible Retiree under the Plan. “Covered Expenses” include the following:

- ❖ Premium or contribution payments for coverage under health, dental, or vision insurance plans.
- ❖ Medical expenses excludable from gross income under Internal Revenue Code Section 213(d), i.e., costs for diagnosis, cure, mitigation, treatment, or prevention of disease or injury, including insulin, but not including other non-prescribed drugs.
- ❖ Premium payment for qualified long-term care insurance.

You may contact the Trust Office, or visit www.irs.gov to see IRS Publication 502 for more details on Covered Expenses. Generally, any medical expense that would be deductible under Internal Revenue Code Sec. 213(d) is allowed as a Covered Expense.

3) Who can participate in the Trust? An individual can participate in the Trust if he/she is a member of a bargaining unit that is a member Association of PORAC, which has bargained to participate in the Trust; and the individual is employed in a classification covered by a MOU, which provides for participation in the Trust. This includes Associations outside of California, if they join PORAC.

If you are represented by a member Association of PORAC interested in joining the Trust, please contact Ms. Suzan Kolb of the Trust Office at (877) 808-5994.

PART C: MONTHLY BENEFITS FROM THE TRUST

(Note: the rules in this Part C are for the regular monthly benefits: they don't apply to Employee Account benefits from the Trust, which are discussed below in Part D.)

1) How does a participant become eligible for monthly reimbursement benefits? A participant becomes eligible for monthly reimbursement benefit payments if the following five requirements have been met:

- ❖ The participant has earned 10 years of Active Service in the Plan (or five year for an individual who is an Employee when his/her bargaining unit joins the Trust);
- ❖ Ten years have passed since Contributions for the participant began (or five years for an individual who is an Employee when his/her bargaining unit joins the Trust);
- ❖ The Trust has received monthly Contributions for all years of Active Service earned by the participant;
- ❖ The participant has attained age 55; and
- ❖ The participant has ceased all employment (including part time or post-retirement contract work) with any participating employer of this Trust.

2) When will monthly benefits commence? Monthly reimbursement benefit payments commence after retirement, assuming the participant meets the eligibility rules in Sec. C1.

3) What is an Active Service Unit (ASU)? An Active Service Unit (ASU) is a factor used to calculate the monthly benefit level for an Eligible Retiree. The Trust will credit a participant with one ASU for each monthly \$50 contribution that the Trust has received on the participant's behalf over the duration of his/her career. For example, if the participant's Association has negotiated a monthly contribution of \$100, he/she will receive 2 ASUs for each monthly contribution; or if the negotiated monthly contribution is \$200, the participant will receive 4 ASUs for each monthly contribution. In this way, the Association has flexibility to modify the amount of the monthly contribution in a subsequent MOU, and that modification will be reflected, eventually, in a higher (or lower) benefit level after retirement.

Note the difference between “Active Service” and “Active Service Units” (or ASUs):

- Active Service reflects periods of employment when your employer transfers contributions to the Trust on your behalf. Your length of Active Service is one of the factors that determines your eligibility for monthly benefits as an Eligible Retiree.
- “Active Service Units” reflect the number of \$50 contributions made on your behalf to the Trust. The number of Active Service Units is a factor used to determine your benefit level.

4) What is the Unit Multiplier? The Unit Multiplier is a factor that the Trust uses to calculate benefit levels. From time to time, the Trustees, with the help of a professional actuary, will determine the value of the Unit Multiplier, which is based on demographic and financial data.

5) What is an Eligible Retiree's “benefit level” and how is it calculated? An Eligible Retiree's “benefit level” is the maximum amount that he/she may receive in monthly reimbursement benefits from the Trust. The benefit level for each Retiree is calculated by multiplying the total number of ASUs he/she has accumulated by the Unit Multiplier, currently \$0.74. The benefit level will change from time to time. See Attachment A for sample benefit level calculations.

6) Does the Trust provide benefits to participants who will retire before earning 10 years of Active Service? Yes, for a participant who retires before earning the required 10 years (or five years, if applicable; see Part C1), the Trust will credit his/her contributions to an Employee Account in the Trust, and he/she will be entitled to reimbursement of medical expenses limited to the amount in his/her Employee Account. See Part D.

7) Can a participant use accrued sick/vacation leave to “buy-up” Active Service and meet the requirement for monthly benefits? Yes, a participant may use his/her accrued sick or vacation leave to “buy-

up” (at actuarial cost) the years of Active Service to achieve eligibility for monthly benefits, when he/she might not otherwise have been eligible. This buy-up is subject to certain rules in the Plan.

8) Why do benefits from the Trust start at age 55 instead of age 50 like some pension plans? This Plan was designed for all PORAC members, and there are many different retirement formulas among the members. If the Trust allowed monthly reimbursement benefit payments to begin at age 50, the actuarial assumptions would have to include the possibility of everyone retiring at age 50. Accordingly, the Trustees would have to reduce monthly benefit levels for everyone.

9) How long will monthly benefits from the Trust last? It is the Trustees’ intent, and the Plan is designed so that monthly reimbursement benefit payments for Eligible Retirees will last until death. However, this is not guaranteed, and the Trustees will have the authority to reduce or terminate benefits earlier, if prudent, to preserve the soundness of the Plan for all of the participants. In any event, all contributions and earnings in the Trust may be spent only on benefits and administrative expenses, as required by federal law.

10) What happens to a participant’s monthly benefits upon death? Are there survivor’s benefits? The Plan includes monthly reimbursement benefit payments to the Surviving Spouse and Children (as defined in the Plan) of an Eligible Retiree. The monthly benefit level for a Surviving Spouse is 50% of the monthly benefit level of the deceased Retiree. If there is no Surviving Spouse and there are surviving Children, the monthly benefit level is 50% of the benefit level of the deceased Retiree (to be divided equally among the Children). However, if the Surviving Spouse has surviving Children in the household, the monthly benefit level will be 100% of the Eligible Retiree’s monthly benefit level.

11) When does the Trust pay Surviving Spouse benefits? These benefits are paid to the Surviving Spouse during two periods. First, benefits will be paid to the Surviving Spouse for 24 months immediately following the Eligible Retiree’s death, regardless of age, while the widow(er) adjusts to the new circumstances. Second, the monthly reimbursement benefit payments will resume when the spouse reaches age 55, and will then continue until the spouse’s death.

However, the Trustees have the authority to modify these benefit rules or terminate benefits at any time, if prudent, to preserve the financial health of the Plan for all participants.

PART D: EMPLOYEE ACCOUNT BENEFITS

(Note: the rules in this Part D are for the Employee Account benefits: they don’t apply to regular monthly benefits from the Trust, which are discussed above in Part C.)

1) Who will have an individual Employee Account in the Trust? Generally, a participant will have an Employee Account in the Trust if his/her Association has negotiated for the mandatory transfer of sick/vacation leave to the Trust. In addition, a participant who does not qualify for the monthly lifetime² benefit under Part C will have an Employee Account to which his/her monthly payroll contributions will be credited.

2) What benefits are offered by an Employee Account? Benefits from an Employee Account are the same as for the monthly lifetime benefits, i.e., reimbursement of “Covered Expenses” (see Part B). However, there are two important differences:

² See footnote 1.

- ❖ The claim can be in any amount up to the amount in the Employee Account; and
- ❖ Claims are paid only until the Employee Account balance is exhausted (not for lifetime).

3) What will be included in the balance of a participant's Employee Account? The balance of a participant's Employee Account will generally include the following amounts:

- ❖ The amount of sick/vacation leave transferred to the Trust that is not used to buy up additional Active Service Units (see Part C7);
- ❖ Investment earnings and losses (minus a proportionate share of investment fees or expenses).

Note that participants who have only an Employee Account, i.e., participants whose employer does not make monthly contributions to the Trust, are charged a monthly administrative fee, which is deducted from their Employee Account each month.

Also, the Trust will transfer the monthly payroll Contributions of a participant who does not meet the Active Service requirement to an Employee Account for the participant.

4) Can a participant receive both monthly reimbursement benefits and Employee Account benefits? Yes, a participant may receive both monthly reimbursement benefits and Employee Account benefits if the participant has met the eligibility requirements for monthly benefits, and also has elected to deposit sick/vacation leave into an Employee Account, or otherwise has an Employee Account.

5) What happens to Employee Account benefits upon the death of a participant? In the event of death, a Surviving Spouse may utilize the deceased participant's Employee Account funds to pay for covered medical expenses until the balance reaches zero.

Possible forfeiture. Note that if there is no Surviving Spouse, then the balance of the Employee Account is divided equally among all Children (as defined in the Plan) for reimbursement of Covered Expenses, and if there are no Children, then it forfeits to the Trust.

PART E: TAX and POOLING ADVANTAGES

1) What are the tax advantages of the Plan? The Trustees have structured the Plan to obtain three separate tax breaks:

- ❖ Neither employer contributions or employee contributions to the Trust are taxable income to you;
- ❖ The Trust itself will accrue earnings on a non-taxable basis (which increases your benefits); and
- ❖ Your benefit payments from the Trust will not be taxed when you receive them.

This is better tax treatment than a pension plan (e.g., CalPERS) or your deferred compensation 457 plan. Benefits from those plans are taxed upon receipt, after you retire. But the benefits Eligible Retirees receive from this Retiree Medical Trust, to reimburse them for medical expenses after they retire, will not be taxable income.

2) What are the advantages of a pooled account over an individual Employee Account system? The Trust is generally designed so that contributions are held and invested collectively in a "pooled account." (The

Trust provides the individual Employee Accounts (discussed in Part D) for limited purposes.) There are certain advantages to pooling funds, including:

- ❖ **Higher investment assumption is reasonable.** This Trust is different than an individual “Health Savings Account” (“HSA”). This Trust invests the pooled account on a long-term time horizon. The Trustees do not move the investments in a pooled account to a more conservative earnings assumption as a given retiree ages, since the pool is always gaining more funding, and doesn’t have a limited life span. Contrast that to a retiree over age 55 with an individual account and no more funding, who generally moves to a more conservative investment portfolio as he/she ages. Actuarial studies clearly demonstrate that this plan design produces greater aggregate benefits to beneficiaries.
- ❖ **Lifetime benefit payments.** The pooled part of the Plan is designed to provide a monthly stream of benefit payments for the retiree’s lifetime,³ plus a continuing benefit payment stream to the Surviving Spouse during retirement years, until his or her death. This will become very important in a retiree’s later years, when an individual account HSA might run out.

Option to join Pooled Account, and for Employee Account participation. As described above, there are advantages to a pooled plan. Nonetheless, the Trustees understand that in certain circumstances, it may be difficult for an Association to negotiate a regular payroll transfer from salary into the pooled account of the Trust. Accordingly, the Trustees have adopted a policy that allows Associations to join the Trust for the individual Employee Accounts – by transfer of sick or vacation leave, so long as a distinct class of employees (e.g., new hires) are in the pooled account.

Option to join both with payroll transfer and sick/vacation leave transfer. Also, any Association can choose to negotiate a regular payroll transfer from salary to the pooled part of the plan, and also to transfer sick or vacation leave into the Employee Accounts.

PART F: LEGAL STRUCTURE AND GOVERNANCE

1) What is the legal structure of the Plan? Plan assets will be held in the PORAC Retiree Medical Trust, which is a legally separate entity from PORAC, the participating Associations, or employers. The Trust is controlled and administered by a Board of Trustees, composed of peace officer members from PORAC member Associations. The Board designs the Plan, selects investment vehicles, decides on distribution options, etc. The Board has hired a professional investment manager to advise it regarding investment of Plan assets.

Federal law regulates the Trust, and the Trustees are charged with fiduciary responsibility to administer the Plan for the “exclusive benefit” of the participating employees. If the Trustees fail to do so, they are subject to civil and criminal penalties. All contributions and earnings in the Trust can be spent only on benefits and administrative expenses. It would violate federal law if the assets ever were paid to any Association, PORAC, the Trustees, or the employers.

2) Who is currently on the Board of Trustees? The current Trustees are:

³ The Plan is designed to provide monthly reimbursement benefits to Eligible Retirees until death. However, benefits from the Trust are not vested, and the Trustees reserve the right to modify and/or terminate benefits as necessary to preserve the financial soundness of the Trust.

Brian Dutton, Region I
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Steve Saucedo, Region III
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Tim Davis, PORAC Board Representative
Sacramento Police Officers' Association
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One Trustee from each PORAC Region is elected for a two-year term. Elections for regional trustees are held on a rotating basis during the PORAC Annual Conference. The PORAC President appoints one trustee for a one-year term. If you are interested in running for a position on the Board, please contact the PORAC Office.

3) Who handles the day-to-day administration of the Trust? The Trustees have retained Vimly Benefit Solutions, Inc., a third-party administrator, to handle the day-to-day administration of the Trust and serve as the Trust Office. Participants should contact the Trust Office with any questions regarding the Trust or updates of any information that might affect your rights and benefits under the Plan, such as, change of address, family composition (e.g., marriage, divorce, birth of a child, etc.) or employment status (e.g., lay-off, reduction in hours, retirement, etc.). The contact information for the Trust Office is:

PORAC Retiree Medical Trust
c/o Vimly Benefit Solutions, Inc.
Attn: Ms. Suzan Kolb
PO Box 6, Mukilteo, WA 98275-006
Phone: (877) 808-5994 Fax: (866) 676-1530
Email: PORAC@vimly.com

PART G: JOINING THE TRUST/ FUNDING

1) How does a PORAC member Association join the Trust? A PORAC member Association can join the Trust by entering into an MOU with its employer, which mandates contributions to the Trust in the same amount for every employee in the bargaining unit. The MOU can provide for employer contributions on behalf of employees, and/or to take pre-tax deductions from employees' paychecks to pay into the Trust (or both). In order to comply with IRS guidelines, there can be no individual election to enroll, and the contributions by or on behalf of employees generally must be the same for all members of the bargaining unit.

However, there is an exception to this all-or-none rule: an Association may bargain that only a defined class within the bargaining unit, e.g., new hires, will participate in the Trust. That is, although there can be no individual employee election whether or not to join the Trust, an Association may bargain that only a certain group of employees will participate in the RMT. That may help in situations where your employer is cutting off retiree health benefits only for new hires. Please call the Trust Office if you have any questions about this feature.

For more info: Contact Ms. Suzan Kolb of Vimly Benefit Solutions, Inc. (phone: (877) 808-5994) for sample MOU provisions and enrollment requirements.

2) What is the contribution rate to join the Trust?

❖ **Monthly contributions from salary.**

- \$100 minimum per employee per month. An Association may join with contributions in any \$25 increment, starting at least at \$100/month per employee per month. There is no individual election either to participate or the contribution level.
- Introductory rate of \$50 for 12 months. However, we understand it may be difficult to start your members at \$100/month, given that this is a new type of benefit plan. So there is a special introductory rule that an Association may join at a contribution rate of \$50/employee per month **on the condition that the contribution rate must increase to \$100 no later than twelve months after the date of the first contribution.** (After twelve months, the Trust will no longer accept \$50 contributions. After that, it must increase to at least \$100/employee per month.)

❖ **Changes in Contribution Rate Allowed**

The Association is allowed to change its contribution in increments of \$25 at any time, as set forth in your Memorandum of Understanding, or side letter. Accordingly, if the Association increases its monthly contribution rate during the career of an Employee, then his or her monthly benefit level upon retirement will reflect that increase. The Association can select one contribution rate in one MOU, and change it with the next MOU, or even during the course of an MOU. You may contact the Trust Office for sample MOU language.

❖ **Contribution of sick or vacation leave in the form of a lump-sum transfer to individual Employee Accounts.** An Association may also join by negotiating an automatic transfer of accrued sick and/or vacation leave of its members to the Trust for deposit into individual Employee Accounts. The Trust will accept deposits of accrued sick/vacation leave at retirement or once a year, if negotiated in the MOU at a uniform percentage (e.g., 50% of accumulated sick leave; 100% of accumulated sick leave, etc.) for all individuals in the bargaining unit. These amounts will not be taxable income to the employee (as they would be if the employee takes them in cash). These amount will be credited to the participant's Employee Account in the Trust.

3) May an individual participant contribute more (or less) than the other members in his/her bargaining unit? No, individual increases (or decreases) in contributions are not allowed. The IRS imposes the prohibition on individual election, including contribution increases; any violation will jeopardize the Trust's tax advantages. (The only exception is COBRA contributions.)

4) May an individual elect whether or not to participate in the Trust (like a cafeteria or 401k plan)? No, there is no individual election to participate in the Trust. Generally, either the entire bargaining unit must participate, or no one may participate. The tax advantages depend on the absence of individual election. However, as discussed in part G1, you may carve out part of the bargaining unit to participate, e.g., new hires. These requirements are set by the IRS.

We hope these FAQs provide you with an understanding of the basic purpose and operation of the PORAC Retiree Medical Trust. This material is designed to give general information on the subject covered. It is not intended to be comprehensive or to treat exhaustively the subject or to provide legal advice. Any conflict

between these FAQs and the formal “Medical Expense Reimbursement Plan of the PORAC Retiree Medical Trust” will be resolved in favor of the formal Plan.

ATTACHMENT A

Examples of Calculation of Benefit Level

\$50 monthly contribution = 1 Active Service Unit
Unit Multiplier, effective October 1, 2018 = \$0.74⁴

Example #1 – 6 years in Trust: An Association has a contribution rate of \$100/month, and Employee Jones participates for two years (or 24 months) at that level. Then the Association increases the contribution rate to \$150/month, and Jones participates for four years (or 48 months) at that level, and then retires. The monthly amount available to Jones for medical expense reimbursement will be calculated as follows:

Step 1: Convert monthly contributions to Active Service Units

\$100/month = 2 Active Service Units/ Month

\$150/month = 3 Active Service Units/ Month

Step 2: Find number Active Service Units

2 Active Service Units x 24 months = 48 Active Service Units

3 Active Service Units x 48 months = 144 Active Service Units

Total = 192 Active Service Units

Step 3: Multiply number Active Service Units by Unit Multiplier:

Monthly Benefit Amount: 192 x \$ 0.74 = \$142.08

Example #2 – 12 years in Trust: An Association selects a contribution rate of \$100/month, and Employee Jones participates for seven years (or 84 months) at that level. Then the Association increases the contribution rate to \$200/month, and Jones participates for five years (or 60 months) at that level, and then retires. Then the monthly amount available to Jones for medical expense reimbursement will be calculated as follows:

Step 1: Convert monthly contribution to Active Service Units.

\$100/month = 2 Active Service Units/ Month

\$200/month = 4 Active Service Units/ Month

Step 2: Find number Active Service Units.

2 Active Service Units x 84 months = 168 Active Service Units

4 Active Service Units x 60 months = 240 Active Service Units

Total = 408 Active Service Units

Step 3: Multiply number Active Service Units by Unit Multiplier.

Monthly Benefit Amount: 408 x \$ 0.74 = \$301.92

⁴ *The Trustees have the authority to modify the UM from time to time for both existing and future Beneficiaries and work with a professional actuarial firm to determine the UM.*

Example #3 – Career Employee – 25 years in Trust: An Association selects a contribution rate of \$100/month, and Employee Jones participates for seven years (or 84 months) at that level. Then the Association increases the contribution rate to \$200/month, and Jones participates for 18 years (or 216 months) at that level, and then retires. Then Jones' benefit level will be calculated as follows:

Step 1: Convert monthly contributions to Active Service Units.

\$100/month = 2 Active Service Units/ Month

\$200/month = 4 Active Service Units/ Month

Step 2: Find number Active Service Units.

2 Active Service Units x 84 months = 168 Active Service Units

4 Active Service Units x 216 months = 864 Active Service Units

Total = 1,032 Active Service Units

Step 3: Multiply number Active Service Units by Unit Multiplier.

Monthly Benefit Amount: 1,032 x \$ 0.74 = \$763.68

Caveat: These are examples. The Trustees reserve the right to modify the Unit Multiplier and the formula used to calculate benefit levels at any time for both existing and future Beneficiaries. Such a modification is most frequently attributable to favorable or adverse demographic or financial experience of the Plan.

IMPORTANT CONTACTS

TRUSTEES

Region I

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