

TESTIMONY IN OPPOSITION TO SB 438 AN ACT CONCERNING REVISIONS  
TO THE TEACHERS' RETIREMENT SYSTEM

Dear Co-Chairs Senator Osten and Representative Walker; Vice Chairs Senator Hartley, Representative Dimassa, and Representative Horn; Ranking Members Senator Formica and Representative Lavielle; and Distinguished Members of the Appropriations Committee.

My name is Walter Ciplinski a resident of Newington and a long time retired Connecticut public school teacher. I am privileged to have worked for thirty-three years as an active teacher and another dozen years as a substitute teacher. I have continued my advocacy work for teachers and students into my retirement years with roles as Legislative Committee Chair and Advisory Council Representative for the CEA-Retired. Currently, I serve on the ARTC Legislative Committee and with the Retired Teachers' Healthcare Advocates (RTHA).

I AM OPPOSED TO SB 438 UNLESS IT WILL BE AMENDED.

As SB 438 was introduced, it meets the needs of the TRB. What's missing is a statutory role that allows for retired Connecticut teachers' input on matters of healthcare insurance and communication. Retired teachers have a wealth of real world experience with healthcare insurance but, lack the formal structures for their voice to be heard effectively. Retired teachers seek a collaborative relationship with TRB. One in which retired teachers provide needed input before the TRB makes a final decision. 2018 was the year that galvanized many retired Connecticut teachers to seek a healthier relationship with the TRB. We trust that the Appropriations Committee can support that goal, too.

One way to improve the relationship can be to add a third elected seat on the TRB for a retired teacher who is a member of an organization composed exclusively of retired teachers which is not, currently, represented on the TRB. The last adjustment to balance the representation between active and retired teachers was in 1991 with PA 91-188. During 2019 there were about 51,000 active teachers and about 38,000 retired teachers – a 4:3 ratio. Since there are, now, four seats for elected active teachers, increasing the, now, two seats for elected retired teachers to three restores the appropriate balance.

Another way to improve the relationship can be to create an Advisory Council (hereafter referred to as Council) for the TRB. The Council would provide input to the TRB on matters of healthcare insurance and communications. The Council would be composed of two retired teachers selected by each of the following organizations: the CEA-Retired, the ARTC, AFT-Connecticut, and the RTHA. Each of these Council members will be enrolled in a TRB healthcare insurance plan. And the TRB Administrator would appoint a Liaison to the Council. The Council members will decide their own operating rules. The Council should have sufficient time to meet prior to each TRB meeting and be provided the necessary information related to their function. For many years, only one Board member of the TRB was enrolled in a TRB healthcare plan. A Council can provide the TRB with the needed real world experience of retirees. Better input equals better outcomes. Retired teachers who attend public TRB meetings can not ask questions during the post meeting comment period. A Council can be the alternative setting for this type of communications. Another option to improve communications is to revive the defunct TRB Newsletter, *THE TRIB*, by providing volunteer work. With contributions from active teachers, retired teachers pay about 90% of their own healthcare insurance premiums. The State of Connecticut contributes the balance. An Advisory Council would recognize that retired teachers deserve a voice to represent their contribution.

A third amendment should require that a Medicare Supplement Plan always be among the healthcare insurance plans offered by the TRB and that the Medicare Supplement Plan be substantially equal to or better than the base plan. Supplement Plans offer important protections that many retired teachers need and have come to rely on in past years. There will be no additional cost to the State for this language as the retired teachers pays the cost difference in the form of a “buy up” over the base plan for the Medicare Supplement Plan.

Lines 1327-1329 in SB 438 refer to professional fees associated with the administration of the retired teachers' health benefit plan. These lines should be deleted. It is wrong for retired teacher healthcare premiums to be used to pay for professional fees for a Healthcare Consultant and others or to subsidize an Agency budget. Access to public accountability in this area has been denied to retired teachers who shoulder these costs with their premiums.

I thank the Appropriations Committee for the opportunity to share ways of improving the relationship between the TRB and its' retired teacher members. While Covid-19 is a major challenge to our health and our economy, it frees up time to reflect on what is important in our families, our work, our culture and our government. Creating healthy relationships should be a pillar of the new foundation. Thank you.