Board of Trustees DRAFT as of 12/17/14

BP 2730 BOARD MEMBER HEALTH BENEFITS

References:

Government Code Sections 53201 and 53208.5

NOTE: If the Board has determined that Board members are permitted to participate in the District's health benefits programs, the following policy language can be used to set out the District's commitment to current and former Board members. The determination of whether or not Board members and former Board members may participate must be made in accordance with Government Code Section 53201.

❖ From current CLPCCD Policy 7032 titled Group Insurance Benefits

Health Benefits for Current Board Members

The District shall provide health, dental, vision and life insurance for members of the Board of Trustees. Those plans shall be equivalent to those provided to full-time management employees.

❖ From current CLPCCD Policy 7033 titled Group Medical Insurance for Retired Board Members

Health Benefits for Retired Board Members

Health Benefits for retired board members are provided under either of the following categories:

- A. The District will continue to pay the cost of the District's group health and welfare benefit plan as provided for eligible retired management employees for each retired Board member and spouse following the retirement of the Board member provided that the Board member meets the following conditions at the time of retirement:
 - The retired Board member must have served as a member of the Board of Trustees of the Chabot-Las Positas Community College District on or after January 1, 1981 and before January 16, 1996 on or after January 1, 1995.
 - 2. The retired Board member must have served at least twelve complete years and one day of service at the time of retirement and has ceased to serve on the Board.

B. The District will offer retiring board members the opportunity to continue to participate in the District's group medical plans if they have completed one or more terms of office. The retiree is responsible for the full costs of the health and welfare benefits. [Confirmed for Anthem and Kaiser.]

Definition and Conditions of Continuing Benefits

- 1. A retired Board member is defined as any member who has ceased to serve on the Board.
- 2.1. The benefit(s) will continue during the life of the retiree. Upon the death of the retiree, the spouse may continue the benefit(s) if he/she agreed to pay quarterly the full amount of premium due the District in one (1) advance quarterly payment at his/her own expense, with monthly payments made in advance as determined by the District, and accepted by the insurance carrier.
- 3.2. The retired Board member may pay the additional premium(s) necessary to provide coverage for **other** eligible dependents other than spouse.
- 3. The District payment for eligible retirees will be limited to the coverage provided for active retired management personnel in the case of retirees under 65 years or to the premiums which will replace or supplement Medicare for retirees 65 years of age or older. Retirees eligible for Medicare must enroll in all parts for which they are eligible. Medicare Parts A, B, and D during his or her initial enrollment period as specified by the Social Security Administration. If the retiree and/or his/her spouse or approved domestic partner is ineligible, he/she must show proof of the ineligibility. Health and welfare benefit plan(s) may be changed from one company or health care organization to another by the retiree under age 65 years once each year on during the annual opening dateopen enrollment established by the District. Changes between companies for retirees age 65 and older will be subject to the policies in effect at that time by the insurance companies or health care service plans providing medical coverage. At the time of retirement, the retiree must be enrolled for continuance under any special requirements which are a part of that plan.
- 4. The District shall offer retired board members the opportunity to participate in the District's group dental and vision plans. The retiree shall be responsible for the full cost of the premium.

NOTE: The **green ink** signifies language that is **legally advised** and recommended by the Policy and Procedure Service. The language in **black ink** is from the current CLPCCD Policy 7032 titled Group Insurance Benefits adopted on January 16, 1996 and Policy 7033 titled Group Medical Insurance for Retired Board Members adopted on January 16, 1996. The language in **blue ink** was added during the review by Judy and Wyman on February 7, 2013 and on April 9, 2013. The language in **purple ink** was added by David, Rosalyn, and Deborah on December 17, 2014.

Date Adopted:

(This new policy replaces current CLPCCD Policies 7032 and 7033)

Legal Citations for BP 2730

Government Code Sections 53201 and 53208.5

53201.

- (a) The legislative body of a local agency, subject to conditions as may be established by it, may provide for any health and welfare benefits for the benefit of its officers, employees, retired employees, and retired members of the legislative body, as provided in subdivision (b), who elect to accept the benefits and who authorize the local agency to deduct the premiums, dues, or other charges from their compensation, to the extent that the charges are not covered by payments from funds under the jurisdiction of the local agency as permitted by Section 53205.
- (b) The legislative body of a local agency may also provide for the continuation of any health and welfare benefits for the benefit of former elective members of the legislative body who
 - (1) served in office after January 1, 1981, and whose total service at the time of termination is not less than 12 years, or
 - (2) have completed one or more terms of office, but less than 12 years, and who agree to and do pay the full costs of the health and welfare benefits.

(C)

- (1) Notwithstanding any other provision of law, a legislative body of a local agency that provided benefits pursuant to subdivision (b) to former elective members of the legislative body January 1, 1995, shall not provide those benefits to any person first elected to a term of office that begins on or after January 1, 1995, unless the recipient participates on a self-pay basis, as provided in subdivision (b).
- (2) A legislative body of a local agency that did not provide benefits pursuant to subdivision (b) to former elective members of the legislative body before January 1, 1994, shall not provide those benefits to former elective members of the legislative body after January 1, 1994, unless the recipients participate on a self-pay basis.
- (3) A legislative body of a local agency that provided benefits pursuant to subdivision (b) to former elective members of the legislative body before January 1, 1994, may continue to provide those benefits to those members who received those benefits before January 1, 1994.
- (d) The legislative body of a local agency that is a local hospital district may provide for any health and welfare benefits for the benefit of (1) members of its medical staff, employees of the medical staff members, and the dependents of both groups on a selfpay basis; and (2) employees of any entity owned, managed, controlled, or similarly affiliated with, the legislative body of

the local hospital district, and their dependents, on a self-pay basis.

(e) The provisions of this section are severable. If any provision of this section or its application is held invalid, that invalidity shall not affect other provisions or applications that can be given effect without the invalid provision or application.

53205. From funds under its jurisdiction, the legislative body may authorize payment of all, or such portion as it may elect, of the premiums, dues, or other charges for health and welfare benefits of officers, employees, retired employees, former elective members specified in subdivision (b) of Section 53201, and retired members of the legislative body subject to its jurisdiction.

Those expenditures are charges against the funds. If the employer pays any portion of the premiums, dues, or other charges for the health and welfare benefits, any dividends paid or premiums refunded or other rebates or refunds under any of those health and welfare benefits up to the aggregate expenditures of the employer for the benefits are the employer's property. The excess, if any, shall be applied by the employer for the benefit of the employees or their dependents generally.

53208.5.

(a) It is the intent of the Legislature in enacting this section, to provide a uniform limit on the health and welfare benefits for the members of the legislative bodies of all political subdivisions of the state, including charter cities and charter counties. The Legislature finds and declares that uneven, conflicting, and inconsistent health and welfare benefits for legislative bodies distort the statewide system of intergovernmental finance. The Legislature further finds and declares that the inequities caused by these problems extend beyond the boundaries of individual public agencies.

Therefore, the Legislature finds and declares that these problems are not merely municipal affairs or matters of local interest and that they are truly matters of statewide concern that require the direct attention of the state **government**. In providing a uniform limit on the health and welfare benefits for the legislative bodies of all political subdivisions of the state, the Legislature has provided a solution to a statewide problem that is greater than local in its effect.

- (b) Notwithstanding any other provision of law, the health and welfare benefits of any member of a legislative body of any city, including a charter city, county, including a charter county, city and county, special district, school district, or any other political subdivision of the state shall be no greater than that received by nonsafety employees of that public agency. In the case of agencies with different benefit structures, the benefits of members of the legislative body shall not be greater than the most generous schedule of benefits being received by any category of nonsafety employees.
- (c) Notwithstanding any other provision of law, members of the legislative body of a city, including a charter city, county, including a charter county, city and county, special district, school district,

or any other political subdivision of the state shall not be eligible to accrue multiple health and welfare benefits greater than the most generous schedule of benefits being received by any category of nonsafety employees from two or more public agencies for concurrent service except in the case of a member who serves as a regular full-time employee in a separate public agency.

(d) This section shall be applicable to any member of a legislative body whose first service commences on and after January 1, 1995.