Office of Employer & Member Health Services Public Agency Contracts P. O. Box 942714 Sacramento, CA 94229-2714

Agency Code: 0757

## Health Resolution

Please staple on top of the resolution or cover letter. This will ensure that the CalPERS mailroom expedites delivery to our office.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Rev / 08/05

## RESOLUTION ELECTING TO ESTABLISH A HEALTH BENEFIT VESTING REQUIREMENT FOR FUTURE RETIREES UNDER PUBLIC EMPLOYEES' MEDICAL AND HOSPITAL CARE ACT

WHEREAS, (1) Government Code 22893 provides that a local agency contracting under the Public Employees' Medical and Hospital Care Act may amend its resolution to provide a post retirement vesting requirement, and

WHEREAS, (2) Reclamation District #1000 is a local agency contracting under the Act, and

WHEREAS, (3) Reclamation District #1000 certifies, unrepresented employees are not represented by a bargaining unit and there is no applicable memorandum of understanding, and

WHEREAS, (3) Reclamation District #1000 certifies, certain employees are represented by a bargaining unit and subject to a memorandum of understanding, and

WHEREAS, (4) The credited service for purposes of determining the percentage of employer contributions shall mean service as defined in Section 20069, except that not less than five years of that service shall be performed entirely with the Reclamation District #1000; and

WHEREAS, (5) The contribution for active employees shall not be less then what is defined in Government Code Section 22892(b); now therefore it be

RESOLVED, (a) That the employer's contribution for each **retired** employee first hired on or after the effective date of this resolution shall be as listed:

BARGAINING UNIT	CONTRIBUTION PER MONTH
001 BOARD OF TRUSTEES	100/90 FORMULA AMOUNTS
002 ALL EMPLOYEES	100/90 FORMULA AMOUNTS

plus Administrative fees and Contingency Reserve Fund, but not more than 100 percent of the premium applicable to him or her, nor less than the 100 percent of the weighted average of the health benefits plan premiums for employees or annuitants enrolled for self alone plus 90 percent of the weighted average of the additional premiums required for enrollment of family members in the four health benefits plans that have the largest number of enrollments; and be it further

RESOLVED, (b) That the percentage of employer contribution payable for post retirement health benefits for each retired employee shall be based on the employee's completed years of credited service based upon Government Code Section 22893; plus administrative fees and Contingency Reserve Fund assessments; and be it further



RESOLVED, (c)	That Reclamation District #1000 has fully complicated applicable provisions of Government Code Section benefits set forth above; and be it further	
RESOLVED, (d)	That coverage under the Act be effective on Aux	<u>wany 1, 3013</u> .
	Adopted at a regular/special meeting of the Board	of Trustees
	Adopted at a regular special meeting of the Board at Socramento CA this 9th day of	November
	20 <u>12</u> -	
	Signed: (Président, Chairman, etc.)	11
	Attest: OMI HAMA (Secretary or appropriate office	<u>r)</u>

VESTING ALL GROUP Revision July 2009







P.O. Box 942715 Sacramento, CA 94229-2715 888 CalPERS (or 888-225-7377) | Fax: (800)-959-6545 www.calpers.ca.gov

California Public Employees' Retirement System

December 19, 2012

CalPERS ID 1118939592

Terrie A Figueroa Reclamation District #1000 1633 Garden Highway Sacramento, CA 95833

Dear Ms. Dvorak:

We are acknowledging receipt of your resolution electing health benefit vesting requirements for future retirees pursuant to Government Code 22893 of the Public Employees' Medical and Hospital Care Act. The effective date of this participation is January 1, 2013, and the vesting requirement will be applied to employees hired on or after this date. The monthly employer contribution designated on the vesting resolution is as follows:

<u>CODE</u> 001	BARGAINING UNIT Board of Trustees	MONTHLY EMPLOYER POST-RETIREMENT CONTRIBUTION FOR FULLY VESTED ANNUITANTS 100/90 State Annuitant Contribution Amounts for 2013: \$622.00 (Single), \$1183.00 (2-party), \$1,530.03 (Family)
002	ALL EMPLOYEES	100/90 State Annuitant Contribution Amounts for 2013: \$622.00 (Single), \$1183.00 (2-party), \$1,530.03 (Family)

If you have any questions, please contact me at (916) 795-1241.

Sincerely,

Œsteban Vásquez

Public Agency & Schools Contracts Unit

Health Account Services Section