



**BEAUMONT-CHERRY VALLEY WATER DISTRICT**  
560 Magnolia Avenue, Beaumont, CA 92223

**NOTICE AND AGENDA  
MEETING OF THE PERSONNEL COMMITTEE**

*This meeting is hereby noticed pursuant to  
California Government Code Section 54950 et. seq.*

**Tuesday, March 17, 2026 - 4:30 p.m.**  
**560 Magnolia Avenue, Beaumont, CA 92223**

**TELECONFERENCE NOTICE**

*The BCVWD Personnel Committee members will attend in person at the  
BCVWD Administrative Office*

*This meeting is available to the public via Zoom teleconference*

*To access the Zoom conference, use the link below:*

<https://us02web.zoom.us/j/85792068838?pwd=cFArZHZ4aHRsUmJLeTBCZVpnUGRmdz09>

**To telephone in, please dial: (669) 900-9128**

**Enter Meeting ID: 857 9206 8838 • Enter Passcode: 457586**

*For Public Comment, use the “**Raise Hand**” feature if on  
the video call when prompted. If dialing in, please **dial \*9** to  
“**Raise Hand**” when prompted*

*Meeting materials will be available on the BCVWD’s website:*

<https://bcvwd.gov/document-category/personnel-committee-agendas/>

**PERSONNEL COMMITTEE MEETING – MARCH 17, 2026**

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**Call to Order: Chair Covington**

**Roll Call**

	<b>John Covington, Chair</b>
	<b>Lona Williams</b>

	<b>Andy Ramirez (alternate)</b>
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# PERSONNEL COMMITTEE MEETING – MARCH 17, 2026 - *continued*

## Public Comment

**PUBLIC COMMENT: RAISE HAND OR PRESS \*9 to request to speak when prompted. If you are present in the Conference Room, please fill out a Request to Speak card and deliver it to the Recording Secretary.**

At this time, any person may address the Committee on matters within its jurisdiction. However, state law prohibits the Committee from discussing or taking action on any item not listed on the agenda. Any non-agenda matters that require action will be referred to Staff for a report and possible action at a subsequent meeting.

**Please limit your comments to three minutes.** Sharing or passing time to another speaker is not permitted.

1. **Adjustments to the Agenda:** In accordance with Government Code Section 54954.2, additions to the agenda require a unanimous vote of the legislative body members present, which makes the determination that there is a need to take action, and the need to take action arose after the posting of the agenda.
  - a. Item(s) to be removed or continued from the Agenda
  - b. Emergency Item(s) to be added to the Agenda
  - c. Changes to the order of the Agenda

## ACTION ITEMS

### 2. **Acceptance of Personnel Committee Meeting minutes**

*Minutes may be accepted by consensus*

- a. February 17, 2026 Regular Meeting (pages 4 - 6)

### 3. **Report / Update from BCVWD Employees Association** (no staff report)

Association Representatives		
Vacant	Luis Lomeli	Ericka Enriquez

### 4. **Comments / Reports / Updates from BCVWD Unrepresented Employees**

*No staff report. Individual exempt employees are invited to provide comments at this time*

### 5. **Human Resources Report for February 2026** (pages 7 - 8)

### 6. **Proposed Amendment to CalPERS Pension Contract to Incorporate Public Employees' Pension Reform Act (PEPRA) Provisions** (pages 9 - 19)

### 7. **Cost and Benefit Comparison: CalPERS vs. ACWA JPIA Medical Programs** (pages 20 - 75)

### 8. **Action List for Future Meetings**

- Policy 3225 Employee Leave Donations Program and Policy

## 9. Next Meeting Date: April 21, 2026

## 10. Adjournment

### NOTICES

**AVAILABILITY OF AGENDA MATERIALS** - Agenda exhibits and other writings that are disclosable public records distributed to all or a majority of the members of the Beaumont-Cherry Valley Water District Personnel Committee in connection with a matter subject to discussion or consideration at an open meeting of the Committee are available for public inspection in the District's office, at 560 Magnolia Avenue, Beaumont, California ("District Office") during business hours, Monday through Thursday from 7:30 a.m. to 5 p.m. If such writings are distributed to members of the Board less than 72 hours prior to the meeting, they will be available from the District Office at the same time or within 24 hours' time as they are distributed to Board Members, except that if such writings are distributed one hour prior to, or during the meeting, they can be made available in the Board Room at the District Office. Materials may also be available on the District's website: <https://bcvwd.gov/>. (GC 54957.5)

**REVISIONS TO THE AGENDA** - In accordance with §54954.2(a) of the Government Code (Brown Act), revisions to this Agenda may be made up to 72 hours before the Meeting, if necessary, after mailings are completed. Interested persons wishing to receive a copy of the set Agenda may pick one up at the District's Main Office, located at 560 Magnolia Avenue, Beaumont, California, up to 72 hours prior to the Committee Meeting.

**REQUIREMENTS RE: DISABLED ACCESS** - In accordance with Government Code §54954.2(a), and the Americans with Disabilities Act (ADA), requests for a disability related modification or accommodation, including auxiliary aids or services, in order to attend or participate in a meeting, should be made to the District Office. Notification of at least 48 hours (two workdays) in advance of the meeting will generally enable staff to make reasonable arrangements to ensure accessibility. The Office may be contacted by telephone at (951) 845-9581, email at [info@bcvwd.gov](mailto:info@bcvwd.gov) or in writing at the Beaumont-Cherry Valley Water District, 560 Magnolia Avenue, Beaumont, California 92223.

**CERTIFICATION OF POSTING:** A copy of the foregoing notice was posted near the regular meeting place of the Personnel Committee of Beaumont-Cherry Valley Water District and to its website at least 72 hours in advance of the meeting (Government Code §54954.2(a)).



**BEAUMONT-CHERRY VALLEY WATER DISTRICT AGENDA**  
560 Magnolia Avenue, Beaumont, CA 92223

**MINUTES OF THE PERSONNEL COMMITTEE MEETING**  
Tuesday, February 17, 2026, at 4:30 p.m.

**CALL TO ORDER**

*Chair Covington called the meeting to order at 4:35 p.m.*

**ROLL CALL**

<i>Directors present:</i>	John Covington, Lona Williams
<i>Directors absent:</i>	None
<i>Staff present:</i>	General Manager Dan Jagers Director of Information Technology and Cybersecurity Robert Rasha Director of Finance and Administration Sylvia Molina Director of Operations James Bean Human Resources and Risk Manager Ren Berioso Executive Assistant Lynda Kerney
<i>BCVWD Employee Association reps:</i>	Luis Lomeli, Ericka Enriquez
<i>Members of the Public:</i>	None

**PUBLIC COMMENT:** None.

**ACTION ITEMS**

1. **Adjustments to the Agenda:** None.
2. **Acceptance of Personnel Committee Meeting minutes**
  - a. January 20, 2026 Regular Meeting

*The Committee accepted the meeting minutes by the following vote:*

MOVED: Williams	SECONDED: Covington	APPROVED
AYES:	Covington, Williams	
NOES:	None.	
ABSTAIN:	None.	
ABSENT:	None.	

3. **Report / Update from BCVWD Employees Association:** None.
4. **Report / Update from BCVWD Exempt Employees:** None.

## **5. Human Resources and Risk Management Report**

Human Resources and Risk Manager Ren Berioso presented highlights of the January 2026 report:

- Currently 47 employees
- Notable anniversaries including Joseph Haggin (19 years)
- Two job postings closed on Jan. 5, 2026:
  - Administrative Clerk (Operations/Engineering)
  - Customer Service Representative I (Finance & Administration)
- Turnover Rates:
  - January 2026 monthly turnover: 0%

Chair Covington asked if there had been an increase in the FY 2026 budget to add a position; General Manager Jagers reminded about the added Administrative Clerk position, and the part time position to transition a planned retirement near the end of the year. Ms. Molina noted that there will be a total of 46 when all positions are filled.

## **6. Policies and Procedures Manual Revisions:**

### **a. Policy 3225 Employee Leave Donations Program and Policy**

Human Resources and Risk Manager Ren Berioso presented proposed revisions to Policy 3225 and explained that the policy, originally adopted in 2019, had never been utilized due to restrictive qualification language. He stated that recent circumstances prompted management and HR to revisit the policy with the intent of softening certain provisions while maintaining safeguards to protect the District from liability and misuse. Berioso explained that the revisions were the result of a five-month collaborative effort involving the executive team, department heads, MOU and exempt representatives, and legal counsel.

General Manager Jagers stated that the revisions were largely driven by staff input and recent employee interest in utilizing the program. He emphasized that, while compassion for employees facing catastrophic circumstances is important, the policy must contain sufficient safeguards to prevent abuse. Jagers explained that the General Manager would ultimately serve as the balancing authority in approving or denying requests and must evaluate each situation holistically, including attendance history, prior leave usage, and potential gaming of the system. He noted that while there may be compelling cases warranting support, the District must protect itself from foreseeable misuse and ensure long-term policy sustainability.

The Committee discussed proposed eligibility changes, including expansion of qualifying events to include death of a family member and being a crime victim, and whether probationary employees could be eligible at the discretion of the General Manager. Chair Covington and Director Williams asked clarifying questions regarding probationary status, accrual practices, and review of attendance history. Discussion also addressed safeguards against program manipulation, including review of prior leave cash-outs and examination of up to twelve months of leave usage. Jagers suggested broadening language to allow review of general employment records to ensure adequate discretion in evaluating requests.

Significant discussion occurred regarding the financial mechanics of leave conversion. Staff explained that donated leave would be converted based on the donor's hourly rate to preserve the District's financial neutrality, rather than on a one-to-one hour basis. Chair Covington raised concerns regarding differences between sick leave cash-out at 50 percent value and donation at full value, identifying potential areas of inequity. The Committee also discussed whether donations should be limited to vacation leave rather than sick leave and whether a leave bank model might be preferable. Questions were raised regarding caps on donations, tax implications, payroll administration, and proportional return of unused donated leave. Finance staff confirmed that the administrative tracking was manageable.

President Williams inquired about confidentiality protections. Staff clarified that medical information would not be publicly disclosed and that documentation supporting eligibility would be reviewed by Human Resources and the General Manager, with the burden of proof resting on the requesting employee. Discussion also touched on concerns about potential misuse of donated leave.

Employee representative Luis Lomeli emphasized the importance of balancing compassion. Lomeli asked whether the policy would include a formal request form and formal written response to ensure clarity in approval or denial decisions. He also questioned how denial determinations based on attendance or employment record review would be communicated without being perceived as punitive or as an adverse employment action.

After discussion, Chair Covington stated that additional time was warranted to consider the policy revisions.

*The Committee directed staff to bring back the policy revisions to the April 21, 2026 meeting.*

#### **7. Action List for Future Meetings**

- Employee Association topics
- Policy manual updates (ongoing)
- Employee Group 2027 Memorandum of Understanding
- Policy 3225 Leave Donation Program (bring back)

#### **8. Next Meeting Date: March 17, 2026**

**ADJOURNMENT:** 5:28 *p.m.*

Attest:

*DRAFT UNTIL APPROVED*

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John Covington, Chairman  
to the Personnel Committee of the Beaumont-Cherry Valley Water District



**Beaumont-Cherry Valley Water District  
Personnel Committee Meeting  
March 17, 2026**

**Item 5**

**HUMAN RESOURCES REPORT**

**TO:** Personnel Committee  
**FROM:** Human Resources and Risk Management  
**SUBJECT:** Human Resources Report for the Month of February 2026

**Table 1: Personnel**

The table below represents the District's current Workforce.

As of February 28, 2026

<b>Total Current Employees (Excluding Board Members)</b>	<b>47</b>
Full-Time Employees	44
Part-Time	1
Temporary	1
Interns	1
Separations	0
Retired Employee(s)	0

**Table 2: New Hires**

The table below represents newly hired employees.

As of February 28, 2026

<b>Employee Name</b>	<b>Job Title</b>	<b>Department</b>
None		

**Table 3: Anniversaries\***

The table below represents BCVWD employee anniversaries.

As of February 28, 2026

<b>Employee Name</b>	<b>Department</b>	<b>Years of Service</b>
James Bean	Operations	27 years

*\*Work Anniversaries for the purposes of this report are calculated from the hire date and do not determine employment conditions or terms. This report does not include elected officials.*

**Table 4: Promotions or Division/Title Change**

The table below represents promotions or Division/Title Changes.

As of February 28, 2026

<b>Employee Name</b>	<b>Former Title</b>	<b>Changed to</b>
None	None	None



**Table 5: Recruitment**

The table below represents active/closed recruitment(s).

As of February 28, 2026

<b>Position</b>	<b>Department</b>	<b>Update</b>
Customer Service Representative I	Finance and Administration	Interviews Ongoing 2/9/2026
Administrative Clerk	Operations / Engineering	Interviews Ongoing 2/11/2026
Water Utility Worker I (Regular, Full-Time)	Operations	Job Posted: 2/17/2026

**Tables 6 to 7: Separation/Retirement**

Table 6 below represents employees separating from BCVWD.

As of February 28, 2026

<b>Employee Name</b>	<b>Position Held</b>	<b>Department</b>	<b>Last Day</b>
None			

Table 7 below represents the monthly and year-to-date Turnover Rate comparing 2025 and 2026

As of February 2026 vs. 2025

<b>Turnover Rate as of February 28, 2026</b>	0%	No Separation for this month
<b>2026 Turnover Rate Year-to-Date</b>	0%	0 Separation as of February 28, 2026
<b>Turnover Rate as of February 28, 2025</b>	4.25%	2 Separations for this month
<b>2025 Turnover Rate Year-to-Date</b>	4.17%	2 Separations as of February 28, 2025

**Table 9: Communications**

The table below represents HR communications to BCVWD employees.

As of February 28, 2026

<b>Communication</b>	<b>Topic</b>
HR Memo 26-002 Presidents Day Holiday Closure and Timesheet Completion Reminder	Holiday
HR Memo 26-003 Unrepresented Employees Comment Process for Personnel Committee Meetings	Procedure

*Staff Report Prepared by Ren Berioso, Human Resources and Risk Manager*



**Beaumont-Cherry Valley Water District  
Personnel Committee Meeting  
March 17, 2026**

**Item 6**

**STAFF REPORT**

**TO:** Personnel Committee  
**FROM:** Human Resources and Risk Management  
**SUBJECT:** **Proposed Amendment to CalPERS Pension Contract to Incorporate Public Employees' Pension Reform Act (PEPRA) Provisions**

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**Staff Recommendation**

Informational only.

**Executive Summary**

The California Public Employees' Retirement System (CalPERS) has requested that the Beaumont-Cherry Valley Water District (BCVWD) amend its existing pension contract to incorporate language reflecting the provisions of the Public Employees' Pension Reform Act of 2013 (PEPRA).

PEPRA established revised pension benefit structures for new members entering public employment on or after January 1, 2013. These provisions include modified benefit formulas and increased retirement age requirements. Although these provisions have been administered by CalPERS since their implementation, many contracting agencies have amended their pension contracts to formally incorporate the PEPRA language.

According to CalPERS records, BCVWD has not yet amended its contract to reflect these provisions. This staff report provides background regarding the CalPERS request and outlines the proposed timeline for the District to consider the amendment to its pension contract.

**Background**

The Beaumont-Cherry Valley Water District entered into a contract with the California Public Employees' Retirement System (CalPERS) effective April 1, 2002, to provide retirement benefits for eligible District employees.

On January 22, 2006, the District executed its most recent amendment to the CalPERS pension contract. This amendment modified the retirement benefit provisions for miscellaneous local members by establishing different benefit formulas based on the employee's service period relative to the amendment.

Under the amendment, service performed prior to the effective date of the amendment continued to be calculated under the 2% at age 55 retirement formula (supplemental to Federal Social Security) pursuant to Section 21354 of the California Public Employees' Retirement Law. Service performed on or after the effective date of the amendment is calculated under the 2.7% retirement formula at age 55 (supplemental to Federal Social Security) pursuant to Section 21354.5 of the California Public Employees' Retirement Law.



Since the January 22, 2006 amendment, the District and CalPERS have not entered into any additional pension contract amendments.

On January 1, 2013, the Public Employees' Pension Reform Act (PEPRA) became effective statewide and established new pension benefit structures for individuals who became members of CalPERS on or after that date.

Although PEPRA provisions have been applied administratively by CalPERS since 2013, the District and CalPERS did not execute a contract amendment at that time to formally incorporate the PEPRA statutory language into the District's pension contract.

On January 30, 2026, CalPERS contacted the Beaumont-Cherry Valley Water District Human Resources and Risk Management Division requesting that the District amend its pension contract to incorporate language reflecting the provisions of PEPRA.

Following this communication, members of the CalPERS Pension Contract Program team met with the District's General Manager and Human Resources and Risk Management staff to discuss the amendment process, procedural requirements, and a potential timeline for bringing the amendment forward for consideration by the Personnel Committee and the Board of Directors.

CalPERS indicated that while PEPRA provisions have been applied to contracting agencies since 2013 under state law, many agencies have amended their pension contracts to formally incorporate the statutory language. CalPERS has encouraged agencies that have not yet done so to initiate the amendment process to ensure that contract language aligns with current law.

As of the preparation of this report, the District has not yet received the draft amendment document from CalPERS. Once received, the document will be reviewed by staff and District Legal Counsel prior to presentation to the Personnel Committee and Board of Directors.

## **Discussion**

The Public Employees' Pension Reform Act of 2013 (PEPRA) established new pension formulas and retirement age requirements for employees who became members of CalPERS on or after January 1, 2013. These employees are commonly referred to as "new members" under PEPRA. The proposed amendment would formally incorporate these statutory provisions into the District's existing CalPERS pension contract.

Key provisions implemented under PEPRA include:

- Reduced benefit formulas for new miscellaneous members
- Increased retirement age thresholds
- Additional employee contribution and cost-sharing requirements

Although these provisions have been administered by CalPERS since 2013, CalPERS is requesting that contracting agencies formally amend their pension contracts so that the contract language reflects the statutory provisions currently in effect.

The proposed amendment is administrative in nature and does not change retirement benefits for existing employees, retirees, or employees hired after the implementation of PEPRA. Rather, it formally incorporates into the District's pension contract provisions that are already being applied under state law.



To initiate the amendment process, the District must coordinate with the CalPERS Pension Contract Program staff and follow the required formal contract amendment procedures.

CalPERS has indicated that it is flexible with the proposed timeline should the District Board of Directors require additional time to review and consider the amendment language once the draft document is received. The proposed timeline presented in this report reflects staff's anticipated schedule for review; however, adjustments can be made if the Board determines that additional discussion or review is necessary.

### **Contract Amendment Timeline**

The timeline for Board consideration of the pension contract amendment is as follows. As of the preparation of this report, the District has not received the draft amendment document.

**Table 1: Contract Amendment Timeline**

<b>Date</b>	<b>Event</b>	<b>Activity</b>
April 1, 2026	Legal Counsel Review	District Legal Counsel review of the proposed CalPERS pension contract amendment language and process once the draft amendment document is received from CalPERS
April 21, 2026	Personnel Committee Meeting	Initial review of the contract amendments at the Personnel Committee level.
May 13, 2026	Regular Board Meeting	Initial review of the contract amendments at the Board level
June 10, 2026	Regular Board Meeting	Final review and potential approval of the contract amendments through adoption of a Board Resolution authorizing the amendment to the District's CalPERS pension contract.
June 11, 2026	Proposed Effective Date of Amendment and Submission to CalPERS	Following Board approval, the District will submit the approved amendment documentation to CalPERS for processing and implementation.

### **Fiscal Impact**

No direct fiscal impact to the District is anticipated because of this amendment. The proposed amendment is administrative in nature and is intended to align the District's CalPERS pension contract language with the provisions of the Public Employees' Pension Reform Act of 2013.

### **Attachments:**

1. January 30, 2026 CalPERS Letter – Request to Amend Pension Contract
2. Contract Between CalPERS and BCVWD dated April 21, 2002
3. Amendment to Contract Between CalPERS and BCVWD dated January 22, 2006

*Staff Report Prepared by Ren Berioso, Human Resources Manager*

**Berioso. Ren (BCVWD)**

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**From:** Pension Contract Management <pensioncontracts@calpers.ca.gov>  
**Sent:** Friday, January 30, 2026 11:53 AM  
**To:** Berioso. Ren (BCVWD)  
**Subject:** \*EXTERNAL\*Request to Amend Pension Contract to Include PEPRA Provisions

**CAUTION:** Exercise caution with external emails. Verify sender authenticity before interacting, clicking links, or opening attachments. Forward suspicious emails to BCVWD internal spam check for verification.



P.O. Box 942715 Sacramento, CA 94229-2715  
**888 CalPERS** (or **888-225-7377**)  
 TTY: (877) 249-7442  
[www.calpers.ca.gov](http://www.calpers.ca.gov)

**California Public Employees' Retirement System**

January 30, 2026

Ren Berioso  
 Beaumont-Cherry Valley Water District

Subject: Request to Amend Pension Contract to Include PEPRA Provisions

Dear Ren,

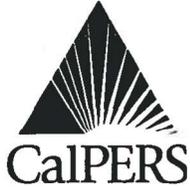
The purpose of this letter is to request that your agency amend its pension contract with the California Public Employees' Retirement System (CalPERS) to incorporate the language reflecting the new provisions outlined under the Public Employees' Pension Reform Act of 2013 (PEPRA).

In 2013, CalPERS implemented mandated benefit formulas to align with the changes set forth by PEPRA. These include reduced benefit formulas and increased retirement age provisions, resulting in new defined benefit formulas for all new miscellaneous (non-safety) and safety members. At the time of the implementation, no formal contract amendment was required for our contracting agencies. However, since then, many agencies have amended their contracts to include the PEPRA language. According to our records, your agency has not amended its contract to reflect these changes.

CalPERS would like to work with your agency to amend your contract within the next year to ensure that the contract aligns with the changes under PEPRA. To initiate the process of amending the contract, please email the Pension Contract Program staff at [pensioncontracts@calpers.ca.gov](mailto:pensioncontracts@calpers.ca.gov).

For more information on PEPRA and its impact on current and future CalPERS members, please visit the [Pension Reform Impacts page](#) on the CalPERS website at [www.calpers.ca.gov](http://www.calpers.ca.gov).

If you have any questions or concerns regarding this request, please contact us directly at (916) 795-1024 or via email at [pensioncontracts@calpers.ca.gov](mailto:pensioncontracts@calpers.ca.gov).



RECEIVED  
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California  
Public Employees' Retirement System

**CONTRACT**

Between the  
Board of Administration  
California Public Employees' Retirement System  
and the  
Board of Directors  
Beaumont-Cherry Valley Water District

In consideration of the covenants and agreement hereafter contained and on the part of both parties to be kept and performed, the governing body of above public agency, hereafter referred to as "Public Agency", and the Board of Administration, Public Employees' Retirement System, hereafter referred to as "Board", hereby agree as follows:

1. All words and terms used herein which are defined in the Public Employees' Retirement Law shall have the meaning as defined therein unless otherwise specifically provided. "Normal retirement age" shall mean age 55 for local miscellaneous members.
2. Public Agency shall participate in the Public Employees' Retirement System from and after 4-21-02 making its employees as hereinafter provided, members of said System subject to all provisions of the Public Employees' Retirement Law except such as apply only on election of a contracting agency and are not provided for herein and to all amendments to said Law hereafter enacted except those, which by express provisions thereof, apply only on the election of a contracting agency.

- 3. Employees of Public Agency in the following classes shall become members of said Retirement System except such in each such class as are excluded by law or this agreement:
  - a. Employees other than local safety members (herein referred to as local miscellaneous members).
- 4. Any exclusion(s) shall remain in effect until such time as the Public Employees' Retirement System determines that continuing said exclusion(s) would risk a finding of non-compliance with any federal tax laws or regulations. If such a determination is contemplated, the Public Employees' Retirement System will meet with the Public Agency to discuss the matter and coordinate any required changes or amendments to the contract.

In addition to the classes of employees excluded from membership by said Retirement Law, the following classes of employees shall not become members of said Retirement System:

**a. SAFETY EMPLOYEES.**

- 5. Assets heretofore accumulated with respect to members in the local retirement system shall be transferred to the Public Employees' Retirement System upon the effective date of this contract and applied against the liability for prior service incurred hereunder. That portion of the assets so transferred which represent the accumulated contributions (plus interest thereupon) required of the employees under said local system shall be credited to the individual membership account of each such employee under the Public Employees' Retirement System.
- 6. The percentage of final compensation to be provided for each year of credited prior and current service as a local miscellaneous member shall be determined in accordance with Section 21354 of said Retirement Law (2% at age 55), supplemental to Federal Social Security.
- 7. Public Agency elects to be subject to the following optional provisions:
  - a. Section 21335 (5% Cost-of-Living Allowance, base year 2002).
  - b. Section 20938 (Limit Prior Service to Members Employed on Contract Date).
  - c. Section 21536 (Local System Service Credit Included in Basic Death Benefit).
- 8. Public Agency shall contribute to said Retirement System the contributions determined by actuarial valuations of prior and future service liability with respect to local miscellaneous members of said Retirement System.

- 9. Public Agency shall also contribute to said Retirement System as follows:
  - a. A reasonable amount, as fixed by the Board, payable in one installment within 60 days of date of contract to cover the costs of administering said System as it affects the employees of Public Agency, not including the costs of special valuations or of the periodic investigation and valuations required by law.
  - b. A reasonable amount, as fixed by the Board, payable in one installment as the occasions arise, to cover the costs of special valuations on account of employees of Public Agency, and costs of the periodic investigation and valuations required by law.
- 10. Contributions required of Public Agency and its employees shall be subject to adjustment by Board on account of amendments to the Public Employees' Retirement Law, and on account of the experience under the Retirement System as determined by the periodic investigation and valuation required by said Retirement Law.
- 11. Contributions required of Public Agency and its employees shall be paid by Public Agency to the Retirement System within fifteen days after the end of the period to which said contributions refer or as may be prescribed by Board regulation. If more or less than the correct amount of contributions is paid for any period, proper adjustment shall be made in connection with subsequent remittances. Adjustments on account of errors in contributions required of any employee may be made by direct payments between the employee and the Board.

BOARD OF ADMINISTRATION  
PUBLIC EMPLOYEES' RETIREMENT SYSTEM

BOARD OF DIRECTORS  
BEAUMONT-CHERRY VALLEY WATER DISTRICT

BY *Louis McQuinn*  
KENNETH W. MARZION, CHIEF  
ACTUARIAL & EMPLOYER SERVICES DIVISION  
PUBLIC EMPLOYEES' RETIREMENT SYSTEM

BY *[Signature]*  
PRESIDING OFFICER

April 8<sup>th</sup>, 2002  
Witness Date

Attest:  
*[Signature]*  
Clerk



California  
Public Employees' Retirement System



## **AMENDMENT TO CONTRACT**

Between the  
Board of Administration  
California Public Employees' Retirement System  
and the  
Board of Directors  
Beaumont-Cherry Valley Water District



The Board of Administration, California Public Employees' Retirement System, hereinafter referred to as Board, and the governing body of the above public agency, hereinafter referred to as Public Agency, having entered into a contract effective April 21, 2002, and witnessed April 8, 2002, which provides for participation of Public Agency in said System, Board and Public Agency hereby agree as follows:

- A. Paragraphs 1 through 11 are hereby stricken from said contract as executed effective April 21, 2002, and hereby replaced by the following paragraphs numbered 1 through 12 inclusive:
1. All words and terms used herein which are defined in the Public Employees' Retirement Law shall have the meaning as defined therein unless otherwise specifically provided. "Normal retirement age" shall mean age 55 for local miscellaneous members.
  2. Public Agency shall participate in the Public Employees' Retirement System from and after April 21, 2002 making its employees as hereinafter provided, members of said System subject to all provisions of the Public Employees' Retirement Law except such as apply only on election of a contracting agency and are not provided for herein and to all amendments to said Law hereafter enacted except those, which by express provisions thereof, apply only on the election of a contracting agency.

3. Employees of Public Agency in the following classes shall become members of said Retirement System except such in each such class as are excluded by law or this agreement:
  - a. Employees other than local safety members (herein referred to as local miscellaneous members).
4. Any exclusion(s) shall remain in effect until such time as the Public Employees' Retirement System determines that continuing said exclusion(s) would risk a finding of non-compliance with any federal tax laws or regulations. If such a determination is contemplated, the Public Employees' Retirement System will meet with the Public Agency to discuss the matter and coordinate any required changes or amendments to the contract.

In addition to the classes of employees excluded from membership by said Retirement Law, the following classes of employees shall not become members of said Retirement System:

**b. SAFETY EMPLOYEES.**

5. Assets heretofore accumulated with respect to members in the local retirement system have been transferred to the Public Employees' Retirement System and applied against the liability for prior service incurred thereunder. That portion of the assets so transferred which represent the accumulated contributions (plus interest thereof) required of the employees under said local system has been credited to the individual membership account of each such employee under the Public Employees' Retirement System.
6. The percentage of final compensation to be provided for each year of credited prior and current service as a local miscellaneous member in employment before and not on or after the effective date of this amendment to contract shall be determined in accordance with Section 21354 of said Retirement Law (2% at age 55 supplemental to Federal Social Security).
7. The percentage of final compensation to be provided for each year of credited prior and current service as a local miscellaneous member in employment on or after the effective date of this amendment to contract shall be determined in accordance with Section 21354.5 of said Retirement Law (2.7% at age 55 supplemental to Federal Social Security).

8. Public Agency elected and elects to be subject to the following optional provisions:
  - a. Section 21335 (5% Cost-of-Living Allowance, base year 2002).
  - b. Section 20938 (Limit Prior Service to Members Employed on Contract Date).
  - c. Section 21536 (Local System Service Credit Included in Basic Death Benefit).
  - d. Section 20042 (One-Year Final Compensation).
  - e. Sections 21624, 21626 and 21628 (Post-Retirement Survivor Allowance).
9. Public Agency shall contribute to said Retirement System the contributions determined by actuarial valuations of prior and future service liability with respect to local miscellaneous members of said Retirement System.
10. Public Agency shall also contribute to said Retirement System as follows:
  - a. A reasonable amount, as fixed by the Board, payable in one installment within 60 days of date of contract to cover the costs of administering said System as it affects the employees of Public Agency, not including the costs of special valuations or of the periodic investigation and valuations required by law.
  - b. A reasonable amount, as fixed by the Board, payable in one installment as the occasions arise, to cover the costs of special valuations on account of employees of Public Agency, and costs of the periodic investigation and valuations required by law.
11. Contributions required of Public Agency and its employees shall be subject to adjustment by Board on account of amendments to the Public Employees' Retirement Law, and on account of the experience under the Retirement System as determined by the periodic investigation and valuation required by said Retirement Law.

12. Contributions required of Public Agency and its employees shall be paid by Public Agency to the Retirement System within fifteen days after the end of the period to which said contributions refer or as may be prescribed by Board regulation. If more or less than the correct amount of contributions is paid for any period, proper adjustment shall be made in connection with subsequent remittances. Adjustments on account of errors in contributions required of any employee may be made by direct payments between the employee and the Board.

B. This amendment shall be effective on the 22 day of January, 2006. *dep*

BOARD OF ADMINISTRATION  
PUBLIC EMPLOYEES' RETIREMENT SYSTEM

BOARD OF DIRECTORS  
BEAUMONT-CHERRY VALLEY WATER  
DISTRICT

BY *Lori McGartland*  
LORI MCGARTLAND, CHIEF  
EMPLOYER SERVICES DIVISION  
PUBLIC EMPLOYEES' RETIREMENT SYSTEM

BY *[Signature]*  
PRESIDING OFFICER

1/4/06  
Witness Date

Attest:

*[Signature]*  
Clerk



**Beaumont-Cherry Valley Water District  
Personnel Committee Meeting  
March 17, 2026**

**Item 7**

**STAFF REPORT**

**TO:** Personnel Committee  
**FROM:** Human Resources and Risk Management  
**SUBJECT:** **Cost and Benefit Comparison: CalPERS vs. ACWA JPIA Medical Programs**

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**Staff Recommendation**

Informational only.

**Executive Summary**

At the May 20, 2025 meeting, the Personnel Committee directed staff to conduct a comprehensive analysis of the potential financial, legal, administrative, and policy impacts if Beaumont-Cherry Valley Water District (BCVWD) were to terminate participation in CalPERS Health and enroll in another medical program potentially on the next fiscal year. Upon research, staff identified the ACWA JPIA Medical Program as the most viable alternative should the District consider exiting CalPERS, as it most closely aligns with the structure and coverage of the District's current health plan.

This analysis evaluates:

- Premium cost comparison and percentage variance
- Historical cost trends (2021–2026)
- Benefit plan structure comparison
- Governance and administrative implications
- Retiree eligibility and vesting considerations
- Impact on the District's approximately \$1.1 million OPEB liability (2024)
- Effect on the CalPERS retirement contract
- Labor negotiation requirements
- Strategic and institutional risk exposure

Based on current enrollment and projected 2026 premium data, ACWA JPIA's Incentive Plan would result in estimated annual savings of approximately 2–3%, while the Standard Plan would result in approximately a 2% annual increase.

While ACWA JPIA offers competitive plan designs and certain value-added programs, the modest financial savings must be weighed against structural, legal, actuarial, and administrative considerations associated with terminating participation in CalPERS Health.

**Discussion**

**1. Financial Impact – Premium Comparison**

Based on current District enrollment and projected 2026 premiums:



**Current: CalPERS Health**

Estimated annual medical cost (including OPEB impact modeling): approximately \$1.17 million.

**Table 1: Financial Impact Comparison – ACWA JPIA Options vs. CalPERS**

Option 1 – ACWA JPIA Standard Plan (with no OPEB)	Option 2 – ACWA JPIA Incentive Plan (with OPEB)
Estimated 2.0% Annual Increase	Estimated 2.3–2.4% annual decrease
Approximate additional cost: ~\$22,900 annually	Approximate savings: ~\$27,800 annually

The Incentive Plan represents the only projected savings scenario. However, savings represent less than 3% of total annual program cost.

**Table 2: Historical Premium 5-Year Trend Comparison (2021–2026)**

Below is a simplified summary of estimated annual premium changes from 2021–2026 based on available published trends and program reports.

Year	Overall CalPERS Health Average Increase (In Percentage Value)	Overall ACWA JPIA Health Average Increase (In Percentage Value)
2021 → 2022	~5%	~5%
2022 → 2023	~7%	~10%
2023 → 2024	10.77%	5.2%
2024 → 2025	10.79%	8.6%
2025 → 2026	9.54%	11.9%

Over the five-year period from 2021 through 2026, CalPERS health premiums demonstrate a more consistent pattern of annual increases, reflecting broader healthcare market trends and annual rate adjustments by participating carriers. In comparison, the ACWA JPIA Health Benefits Program shows greater variability, with both decreases and increases occurring during the same period due to its pooled, self-funded structure and reliance on claims experience and stabilization reserves.

This comparison highlights that while CalPERS premiums tend to increase more steadily over time, ACWA JPIA premiums may fluctuate from year to year depending on program performance and claims activity.

**2. Benefit Plan Comparison**

Medical plan designs between CalPERS and ACWA JPIA are generally comparable.

**Table 1: Comparison Between CalPERS Health and ACWA JPIA Medical Plans**

CalPERS Advantages	ACWA JPIA Advantages
Broader statewide carrier selection	HSA-compatible high-deductible health plan option
Medicare Supplement options (not offered under JPIA)	Lower out-of-pocket maximum under certain HMO designs



CalPERS Advantages	ACWA JPIA Advantages
Established integration with CalPERS pension administration	Value-added programs (e.g., surgical centers-of-excellence, fertility assistance)
Large statewide risk pool	Potential plan customization flexibility

*\*The table does not indicate side-by-side comparison*

Overall, given the current workforce profile, the transition would likely result in a reduction in active employee benefit richness. Additionally, structural differences would affect retiree benefits and administrative operations.

**3. Required Notice to Terminate CalPERS Health**

Under the Public Employees’ Medical and Hospital Care Act (PEMHCA):

- Termination must occur at the end of the calendar year (December 31).
- A minimum of 90 days’ written notice must be provided to CalPERS.

For a December 31, 2026 termination:

- Board resolution would need to be adopted no later than September 30, 2026.
- Formal written notice would then be submitted to CalPERS.

Additionally, once terminated, the District may not re-enter CalPERS Health for five (5) years. Early coordination with CalPERS Health Division would be required.

**4. Administrative and Governance Considerations**

If BCVWD transitions to ACWA JPIA:

- District must join ACWA and ACWA JPIA.
- Board resolution and JPA agreement required.
- Executive Committee approval required.
- COBRA administration would no longer be handled by CalPERS.
- Retiree billing would not be handled by JPIA.

This increases internal administrative workload or may require third-party administration.

**5. Annuitants and Vesting Considerations**

BCVWD currently has five (5) annuitants receiving retiree medical benefits and an approximate \$1.1 million OPEB liability (as of FY 2024).

The District’s 2003 CalPERS Health Resolution established:

- A maximum employer contribution of \$474 per month for employees.
- Annuitant contributions tied to employee contribution levels.

Per Legal Counsel, the resolution does not explicitly state:

- “Lifetime benefit”
- “Vested right”
- “Irrevocable”



However, under California case law, retiree medical benefits may be found to be impliedly vested if relied upon as part of compensation.

If retiree benefits are legally determined to be vested:

- Termination of CalPERS participation does not eliminate the District's obligation.
- The District may be required to provide equivalent coverage outside CalPERS.

Formal legal review by District Counsel would be required before any termination resolution is adopted.

## **6. OPEB Liability – Approximately \$1.1 Million**

The District's OPEB liability reflects the actuarial present value of promised retiree medical benefits under GASB 75. Termination of CalPERS Health does not automatically eliminate OPEB liability.

Termination scenarios may include:

### **Scenario A – Benefits not legally vested**

- Liability may decrease following actuarial remeasurement.

### **Scenario B – Benefits vested for current retirees**

- Liability remains
- Only delivery methods will change. The District must find another way to provide coverage for the retired annuitants.

### **Scenario C – Legal dispute**

- Liability remains until resolved.
- Litigation risk may increase long-term cost.

Actuarial remeasurement modeling multiple termination scenarios is recommended prior to Board action.

## **7. Impact on CalPERS Retirement Contract**

CalPERS Health and CalPERS Pension are separate statutory programs.

Termination of CalPERS Health:

- Does not terminate the District's CalPERS retirement contract.
- Does not affect pension formulas or retirement benefits.

However, communication with employees and retirees would be critical to avoid confusion.

## **8. Labor Relations Considerations**

For represented employees:

- Retiree medical is a mandatory subject of bargaining.
- The District should address this matter during the meet-and-confer process prior to any elimination or modification of retiree medical benefits.



For unrepresented employees:

- Personnel policy may govern; however, vesting exposure must still be evaluated.

*Transition would require:*

- Negotiation with the Employee Association through an MOU
- Negotiation with Unrepresented Employees through Employment Agreements
- Legal consultation
- Impact analysis
- Communication strategy

**Recommendation:**

After reviewing the projected financial impact, governance implications, retiree considerations, and long-term institutional risk, staff offers the following assessment for the Board’s consideration:

Given:

- Projected savings under the ACWA JPIA Incentive Plan of approximately 2–3%;
- Required governance transition and JPA membership obligations;
- Administrative responsibilities shifting from CalPERS to the District;
- Retiree eligibility restructuring considerations; and
- The five-year restriction on re-entry into CalPERS Health following termination;

Staff finds that the projected financial savings are modest relative to the broader structural and policy implications of exiting CalPERS Health.

While ACWA JPIA offers competitive medical plan designs and certain enhanced program features, the decision to transition would represent a significant institutional and administrative shift. At the currently modeled 2–3% variance, the potential savings alone may not be substantial enough to outweigh the governance, actuarial, retiree policy, and operational considerations identified in this report.

Accordingly, staff suggests that maintaining participation in CalPERS Health remains a prudent course of action at this time. However, should the Board wish to further explore long-term structural changes to retiree medical benefits, or if future financial projections demonstrate materially greater savings, staff can return with additional actuarial and legal analysis for further evaluation.

**Table 1: Comparative Assessment Summary**

<b>Category</b>	<b>Relative Advantage</b>
Plan Richness	Comparable
HSA Flexibility	ACWA JPIA
Administrative Simplicity	CalPERS
Retiree Stability	CalPERS
Governance Burden	CalPERS
Risk Exposure	CalPERS



<b>Category</b>	<b>Relative Advantage</b>
Specialty Medical Programs	ACWA JPIA
Long-Term Institutional Stability	CalPERS

Based on current financial modeling and structural considerations, remaining with CalPERS Health represents the lower institutional risk option from a risk-adjusted perspective.

### **Fiscal Impact**

If remaining with CalPERS:

No structural change: projected renewal increases apply.

If Transitioning to ACWA JPIA:

- Standard Plan: ~2% increase (~\$22,900 annually)
- Incentive Plan: ~2–3% decrease (~\$27,800 annually)
- Potential added administrative costs (not included above)
- OPEB liability impact subject to actuarial review

### **Attachments:**

1. HR Analysis of CalPERS Health vs ACWA JPIA Plans (2026 Current Workforce)
2. BCVWD Benefits Guide 2026
3. ACWA-JPIA 2026 Renewal Packet
4. ACWA JPIA Employee Benefits Program – New Agency Process
5. CalPERS Health Contract – Resolution 2003-07

*Staff Report Prepared by Ren Berioso, Human Resources Manager*

# 07 - Attachment 1

## HR Analysis of CalPERS Health vs ACWA JPIA Plans (2026 Current Workforce)

2026 Medical Insurance Enrollees	Single	2-Party	Family	TOTAL
Anthem BC Select HMO	2	0	0	2
Anthem BC Traditional HMO	1	2	0	3
Blue Shield Access+ HMO	2	0	14	16
Kaiser Permanente	6	6	9	21
United Healthcare Alliance HMO	0	0	1	1
PERS Platinum*	0	1	2	3
<b>TOTAL</b>	<b>11</b>	<b>9</b>	<b>26</b>	<b>46</b>
				<b>GRAND TOTAL</b>

2026 Medical Insurance Enrollees	Single	2-Party	Family	TOTAL
Anthem BC Select HMO	\$1,925.36	\$0.00	\$0.00	\$1,925.36
Anthem BC Traditional HMO	\$1,128.53	\$4,514.12	\$0.00	\$5,642.65
Blue Shield Access+ HMO	\$1,835.82	\$0.00	\$3,411.98	\$5,247.80
Kaiser Permanente	\$5,814.30	\$11,628.60	\$22,675.77	\$40,118.67
United Healthcare Alliance HMO	\$0.00	\$0.00	\$2,263.98	\$2,263.98
PERS Platinum	\$0.00	\$2,863.62	\$7,445.42	\$10,309.04
<b>TOTAL</b>	<b>\$10,704.01</b>	<b>\$19,006.34</b>	<b>\$65,797.15</b>	<b>\$95,507.50</b>
				<b>GRAND TOTAL</b>

With CalPERS >>> MONTHLY ANNUALLY \$95,507.50 \$95,507.50  
 If total enrollees at 46 each month from 1/1/2026  
 If total enrollees at 46 end of 2026

With CalPERS plus OPEB >>>> MONTHLY ANNUALLY \$97,877.50 \$1,174,530.00  
 If total enrollees at 46 each month from 1/1/2026 plus 5 OPEB  
 If total enrollees at 46 end of 2026 plus 5 OPEB

2026 ACWA JPIA Medical Insurance Costs (If BC/VWD opted for ACWA JPIA Standard)	Single	2-Party	Family	TOTAL
Anthem BC Select HMO (comparable to Anthem BC Value HMO)	\$2,173.48	\$0.00	\$0.00	\$2,173.48
Anthem BC Traditional HMO (comparable to Anthem BC CalCare HMO)	\$1,179.95	\$4,719.80	\$0.00	\$5,899.75
Blue Shield Access+ HMO (comparable to Anthem BC Value HMO)	\$2,173.48	\$0.00	\$40,318.04	\$42,491.52
Kaiser Permanente (comparable to Kaiser Traditional HMO)	\$5,077.80	\$10,155.60	\$21,174.39	\$36,407.79
United Healthcare Alliance HMO (comparable to Anthem BC Value HMO)	\$0.00	\$0.00	\$2,879.86	\$2,879.86
PERS Platinum (comparable to Anthem Classic PPO)	\$0.00	\$2,073.28	\$5,494.20	\$7,567.48
<b>TOTAL</b>	<b>\$10,604.71</b>	<b>\$16,948.68</b>	<b>\$69,866.49</b>	<b>\$97,419.88</b>
				<b>GRAND TOTAL</b>

\*Assuming all BlueShield and UHC enrollees shift to Anthem BC Value Plan.

With ACWA JPIA (S) >>>> MONTHLY ANNUALLY \$97,419.88 \$1,169,038.56  
 If total enrollees at 46 each month from 1/1/2026  
 If total enrollees at 46 end of 2026

Variance Monthly	\$1,912.38
Variance Annually	(\$22,946.56)
	2.00%
	2.00%

2026 CalPERS Plan Rates (R3)	Single	2-Party	Family
Anthem BC Select HMO	\$962.68	\$1,925.36	\$2,502.97
Anthem BC Traditional HMO	\$1,128.53	\$2,257.06	\$2,934.18
Blue Shield Access+ HMO	\$917.91	\$1,835.06	\$2,386.57
Kaiser Permanente	\$969.05	\$1,938.10	\$2,519.53
United Healthcare Alliance HMO	\$670.76	\$1,741.52	\$2,263.98
PERS Platinum	\$1,431.81	\$2,863.62	\$3,722.71
OPEB	\$474.00	\$474.00	\$474.00

\*Plans listed are the ones employees opted during open enrollment

Insurance Plan	Medical Rates		
	Single	2-Party	Family
Region 3 - Los Angeles, Pomona, and San Bernardino			
Anthem Blue Cross Select HMO	\$92.68	\$1,725.36	\$2,202.97
Anthem Blue Cross Traditional HMO	\$1,128.53	\$2,257.06	\$2,934.18
Blue Shield Access+ HMO	\$917.91	\$1,835.06	\$2,386.57
Blue Shield Trio HMO	\$82.56	\$1,705.12	\$2,216.66
Health Net Salud y Más	\$740.11	\$1,498.22	\$1,924.29
Kaiser Permanente	\$969.05	\$1,938.10	\$2,519.53
UnitedHealthcare SignatureValue Alliance	\$870.76	\$1,741.52	\$2,263.98
UnitedHealthcare SignatureValue Harmony	\$765.51	\$1,531.02	\$1,990.33
PERS Platinum	\$1,431.81	\$2,863.62	\$3,722.71
PERS Gold	\$960.03	\$1,920.06	\$2,496.08

2026 ACWA JPIA Plan Rates - RV	Single	2-Party	Family
Anthem BC Value HMO	\$1,086.74	\$2,173.48	\$2,879.86
Anthem BC CalCare HMO	\$1,179.95	\$2,359.90	\$3,126.87
Kaiser Traditional HMO	\$646.30	\$1,692.60	\$2,352.71
Anthem Classic PPO	\$1,086.64	\$2,073.28	\$2,747.10

\*No comparator to Blue Shield Access+ HMO  
 \*No comparator to UHC Alliance HMO

**Employer Participation Requirements**

**Medical**

**INCENTIVE RATES**  
Employers implementing these additional policies will receive a 4% discount on Anthem and Kaiser medical plan premiums.<sup>1,2</sup>

**ELIGIBILITY**

- All Employees who are eligible for enrollment in the JPIA medical plans must enroll.<sup>3</sup>
- Agency does not offer cash in lieu of benefits.

**PLANS OFFERED**

- Agency offers only JPIA-sponsored medical plans.

**EMPLOYER CONTRIBUTION TO PREMIUM**

- Contribution for dependents of employees must be at least 50% of the additional premium.

**OTHER CRITERIA**

- Firefighters covered, the employer must contribute at least 50% of the retiree only monthly premium for the exact cost of the plan for which the retiree is eligible.
- Only active population is less than 20% of total enrollment.

**ACWA JPIA 2026 Medical Plan Monthly Rates**

OTHER SOUTHERN CALIFORNIA  
Fresno, Imperial, Inyo, Kern, Kings, Maricopa, Orange, Riverside, San Diego, San Luis Obispo, Santa Barbara & Tulare Counties

	Standard Rates			Incentive Rates (4%)		
	Single	Two-Party	Family	Single	Two-Party	Family
Anthem Blue Cross Classic PPO	1,036.64	2,073.28	2,747.10	995.17	1,990.34	2,637.20
Advantage PPO	912.25	1,824.50	2,417.46	875.76	1,751.52	2,302.76
Consumer/Divine Health Plan (CDHP)	829.31	1,658.62	2,197.67	796.14	1,592.28	2,109.77
CalCare HMO	1,179.95	2,359.90	3,126.87	1,132.75	2,265.50	3,001.79
Value HMO	1,066.74	2,133.48	2,879.86	1,043.27	2,086.54	2,764.67

Some zip codes in the above counties may be in the Kaiser Month service area. See the JPIA's Other North region rate sheet for the applicable premiums.

	Standard Rates			Incentive Rates (4%)		
	Single	Two-Party	Family	Single	Two-Party	Family
Kaiser South Traditional HMO	846.30	1,692.60	2,352.71	812.45	1,624.90	2,283.61
HMO with Optical	861.88	1,723.76	2,396.03	827.40	1,654.80	2,300.17
Value HMO	773.56	1,547.12	2,150.50	742.62	1,485.24	2,064.48
Consumer/Divine Health Plan (CDHP)	612.35	1,224.70	1,702.33	587.66	1,175.72	1,634.25

**2026 ACWA JPIA Medical Insurance Costs**  
(If BC/VWD opted for ACWA JPIA Incentive Rates)

	Single	2-Party	Family	TOTAL
Anthem BC Select HMO (comparable to Anthem BC Value HMO)	\$2,086.54	\$0.00	\$0.00	\$2,086.54
Anthem BC Traditional HMO (comparable to Anthem BC CalCare HMO)	\$1,132.75	\$4,531.00	\$0.00	\$5,663.75
Blue Shield Access+ HMO (comparable to Anthem BC Value HMO)	\$2,086.54	\$0.00	\$38,705.38	\$40,791.92
Kaiser Permanente (comparable to Kaiser Traditional HMO)	\$4,874.70	\$9,749.40	\$20,327.49	\$34,951.59
UnitedHealthcare Alliance HMO (comparable to Anthem BC Value HMO)	\$0.00	\$0.00	\$2,764.67	\$2,764.67
PERS Platinum (comparable to Anthem Classic PPO)	\$0.00	\$1,990.34	\$5,274.40	\$7,264.74
<b>TOTAL</b>	<b>\$10,180.63</b>	<b>\$16,270.74</b>	<b>\$67,071.94</b>	<b>\$83,523.21</b>

\*Assuming all BlueShield and UHC enrollees shift to Anthem BC Value Plan.

With ACWA JPIA (IP) >>>	MONTHLY	ANNUALLY
	\$83,523.21	\$999,878.55

If total enrollees at 46 each month from 1/1/2026  
If total enrollees at 46 end of 2026

With ACWA JPIA (IP) plus OPEB >>>	MONTHLY	ANNUALLY
	\$95,554.46	\$1,146,653.52

If total enrollees at 46 each month from 1/1/2026 plus 5 OPEB  
If total enrollees at 46 end of 2026 plus 5 OPEB

Variance Monthly	\$2,323.04	-2.37%
Variance Annually	\$27,876.48	-2.37%

\*includes 5 OPEB enrollees  
\*includes 5 OPEB enrollees

2026 ACWA JPIA Plan Rates - IP	Single	2-Party	Family
Anthem BC Value HMO	\$1,043.27	\$2,086.54	\$2,764.67
Anthem BC CalCare HMO	\$1,132.75	\$2,265.50	\$3,001.79
Kaiser Traditional HMO	\$812.45	\$1,624.90	\$2,258.61
Anthem Classic PPO	\$995.17	\$1,990.34	\$2,637.20
OPEB	\$406.23	\$406.23	\$406.23

\*No comparator to Blue Shield Access+HMO  
\*No comparator to UHC Alliance HMO

**AT-A-GUANCE:**

PROVIDERS	Monthly Cost	Yearly Cost	OPEB (K\$)	TOTAL MONTHLY with OPEB	TOTAL YEARLY with OPEB	VARIANCE MONTHLY (- CalPERS)	VARIANCE YEARLY (- CalPERS)	% VALUE
CalPERS	\$95,507.50	\$1,146,090.00	\$2,370.00	\$97,877.50	\$1,174,530.00	N/A	N/A	
ACWA-JPIA (Standard No OPEB)	\$97,419.88	\$1,169,038.56	N/A	\$97,419.88	\$1,169,038.56	\$1,912.38	\$22,948.56	2.00%
ACWA-JPIA (Incentive with OPEB)	\$93,523.21	\$1,122,278.52	\$2,031.25	\$95,554.46	\$1,146,653.52	-\$2,323.04	-\$27,876.48	-2.37%

**Notes:**

- 1) The cost of medical insurance for the additional fully-benefited staff (2026 pending Board approval) is budgeted with the highest cost of the most popular plan.
- 2) OPEB for CalPERS is a fixed \$474/month per retiree. ACWA-JPIA offers incentive for including OPEB at 50%/month of the lowest quality plan cost per employee and dependents. (value is \$406.25 per retired annuitant)
- 3) As of the current, we have 5 retirees in the District books.

**Summary Analysis**

The comparison shows that CalPERS and ACWA-JPIA health plans are essentially cost-neutral, with only minor differences. The ACWA-JPIA Standard (no OPEB) option is about 2% more expensive (roughly \$1,912.38 per month and \$22,948.56 per year) than CalPERS, while the ACWA-JPIA Incentive (with OPEB) option is -2.37% cheaper (roughly \$2,323.04 less per month and \$27,876.48 per year).

**Conclusion**

Given that the financial difference is negligible and CalPERS offers long-term stability, established infrastructure, and administrative familiarity, staying with CalPERS is the more prudent choice unless ACWA-JPIA provides significantly better plan coverage or strategic advantages beyond cost (e.g., enhanced benefits flexibility, lower long-term rate risk, or improved member support).

# Employee Benefits Guide

2026

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**Click this icon in your benefits guide to watch a video explaining the associated topic.**



If you (and/or your dependents) have Medicare or you will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage.

Please see page 41 for more details.

The information in this brochure is a general outline of the benefits offered under the Beaumont-Cherry Valley Water District's benefits program. Specific details and plan limitations are provided in the Summary Plan Descriptions (SPD), which is based on the official Plan Documents that may include policies, contracts and plan procedures. The SPD and Plan Documents contain all the specific provisions of the plans. In the event that the information in this brochure differs from the Plan Documents, the Plan Documents will prevail.

# Introduction



## Benefit Choices

Beaumont-Cherry Valley Water District recognizes that your benefits are an important part of the reason you choose to work here. Benefits provided by Beaumont-Cherry Valley Water District, for eligible employees, include a choice of medical plans, dental plans, a vision plan, group life insurance with built in accidental death and dismemberment benefit, health care and dependent care assistance flexible spending plans along with other optional benefits. Since you have some decisions to make, it is important to understand the various plan options. That is why this guide is being provided to you.

You have 60 days from the date of your initial appointment to enroll, or decline coverage for yourself and eligible family members. Benefits will begin on the 1st of the month after you submit your paperwork and appropriate documentation to the Human Resources Department. If you do not enroll during the initial 60 days your rights to enroll (or add dependents) will be limited. If you have not experienced a qualifying life event, you will have to wait for the earliest of either a 90-day waiting period or the January 1 following the next CalPERS open enrollment period.

Any questions you may have regarding the enclosed information can be referred to the corresponding representative listed in the contact information found at the beginning of this guide.

Benefit	Board of Directors	General Employees (MOU)*	Exempt/ Management*	General Manager*	Confidential*	Temporary/ Part Time	Temporary /Grant
<b>CalPERS</b>	N/A	Classic/PEPRA	Classic/PEPRA	Classic/PEPRA	Classic/PEPRA	Classic/PEPRA for prior members	Classic/PEPRA for prior members
<b>Medical</b>	100% District-Paid	100% District-Paid	100% District-Paid	100% District-Paid	100% District-Paid	N/A	N/A
<b>Vision</b>	Available	Available	Available	Available	Available	Available	Available
<b>Dental</b>	Available	Available	Available	Available	Available	Available	Available
<b>Life Insurance</b>	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary
<b>Voluntary Life Insurance</b>	Available	Available	Available	Available	Available	Available	Available
<b>AD&amp;D</b>	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary	1x Annual Salary
<b>Supplemental Benefits (Colonial Life)</b>	Available	Available	Available	Available	Available	Available	Available
<b>Short-Term Disability (CA SDI)</b>	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Social Security</b>	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>457 Plan (Pre-Tax)</b>	Available	Available	Available	Available	Available	N/A	N/A
<b>Roth 457 Plan (Post-Tax)</b>	Available	Available	Available	Available	Available	N/A	N/A
<b>401(a) Accrued Leave Conversion Plan</b>	N/A	N/A	N/A	Available	N/A	N/A	N/A
<b>FSA (Health and Dependent Care)</b>	Available	Available	Available	Available	Available	N/A	N/A
<b>EAP (Employee Assistance Program)</b>	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Workers Comp</b>	N/A	Yes	Yes	Yes	Yes	Yes	Yes

# Introduction (continued)



Benefit	Board of Directors	General Employees (MOU)*	Exempt/ Management*	General Manager*	Confidential*	Temporary/ Part Time	Temporary /Grant
Holidays	N/A	10 plus birthday	10 plus birthday	10 plus birthday	10 plus birthday	N/A	N/A
Vacation	N/A	0-4 yrs: 80 hrs 5-9 yrs: 120 hrs	0-4 yrs: 80 hrs 5-9 yrs: 120 hrs	0-4 yrs: 80 hrs 5-9 yrs: 120 hrs	0-4 yrs: 80 hrs 5-9 yrs: 120 hrs	N/A	N/A
		10 yrs: 130 hrs 11 yrs: 140 hrs 12 yrs: 150 hrs 13 yrs and more: 160 hrs	10 yrs: 130 hrs 11 yrs: 140 hrs 12 yrs: 150 hrs 13 yrs and more: 160 hrs	10 yrs: 130 hrs 11 yrs: 140 hrs 12 yrs: 150 hrs 13 yrs and more: 160 hrs	10 yrs: 130 hrs 11 yrs: 140 hrs 12 yrs: 150 hrs 13 yrs and more: 160 hrs		
Sick Leave	N/A	96 hours	120 hours	120 hours	120 hours	1 hour for every 30 hours worked capped at 24 hours under 200 working days; 16 hours additional if reached 200th day of employment capped at 40 hours in a fiscal year	1 hour for every 30 hours worked capped at 24 hours under 200 working days; 16 hours additional if reached 200th day of employment capped at 40 hours in a fiscal year
Sick Leave and Vacation Buy-Back	N/A	Under conditions listed in District Policy, Accrued, Unused Vacation and Sick Leave may be eligible for buy-back.	Under conditions listed in District Policy, Accrued, Unused Vacation and Sick Leave may be eligible for buy-back.	The General Manager may not utilize buy-back for sick leave unless at the time of retirement.	Under conditions listed in District Policy, Accrued, Unused Vacation and Sick Leave may be eligible for buy-back.	N/A	N/A

\* Employment Agreements, MOUs, and Federal/State Law may provide exceptions.

CalPERS Member Type	Retirement Formula
Classic Member	2.7% at 55
PEPRA Member	2% at 62

Available CalPERS Health Plans	Available Dental Plans	Available Vision Plan
Anthem Blue Cross Select HMO	Ameritas Dental PPO Fusion	Ameritas: VSP Choice Network
Anthem Blue Cross Traditional HMO		
Blue Shield Access+ HMO	Liberty Dental Plan (DHMO)	-
Blue Shield Trio HMO		-
Health Net Salud y Más		
Kaiser Permanente		
UnitedHealthcare SignatureValue Alliance		
UnitedHealthcare SignatureValue Harmony		
PERS Platinum		
PERS Gold		

# 2026 Rates



Beaumont-Cherry Valley Water District covers the entire cost of eligible employee's monthly medical premiums.

The available plan options include:

Insurance Plan	Monthly		
	Single	2-Party	Family
<b>Medical Rates</b>			
Region 3 - Los Angeles, Riverside, and San Bernardino			
Anthem Blue Cross Select HMO	\$962.68	\$1,925.36	\$2,502.97
Anthem Blue Cross Traditional HMO	\$1,128.53	\$2,257.06	\$2,934.18
Blue Shield Access+ HMO	\$917.91	\$1,835.82	\$2,386.57
Blue Shield Trio HMO	\$852.56	\$1,705.12	\$2,216.66
Health Net Salud y Más	\$740.11	\$1,480.22	\$1,924.29
Kaiser Permanente	\$969.05	\$1,938.10	\$2,519.53
UnitedHealthcare SignatureValue Alliance	\$870.76	\$1,741.52	\$2,263.98
UnitedHealthcare SignatureValue Harmony	\$765.51	\$1,531.02	\$1,990.33
PERS Platinum	\$1,431.81	\$2,863.62	\$3,722.71
PERS Gold	\$960.03	\$1,920.06	\$2,496.08



# 2026 CalPERS – Health Plans



For more details about the benefits provided by a specific plan, refer to that plan's Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	Anthem Blue Cross	Blue Shield	Health Net	Kaiser Permanente	Sharp Performance Plus	United-Healthcare Signature-Value	Western Health Advantage HMO
	Select HMO Traditional HMO	Access+ HMO EPO Trio HMO				Alliance & Harmony	
<b>Calendar Year Deductible</b>							
• Individual	N/A	N/A	N/A	N/A	N/A	N/A	N/A
• Family	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Maximum Calendar Year Copay or Coinsurance (excluding pharmacy)</b>							
• Individual	\$1,500 (copay)	\$1,500 (copay)	\$1,500 (copay)	\$1,500 (copay)	\$1,500 (copay)	\$1,500 (copay)	\$1,500 (copay)
• Family	\$3,000 (copay)	\$3,000 (copay)	\$3,000 (copay)	\$3,000 (copay)	\$3,000 (copay)	\$3,000 (copay)	\$3,000 (copay)
<b>Hospital (including Mental Health and Substance Abuse)</b>							
• Deductible (per admission)	N/A	N/A	N/A	N/A	N/A	N/A	N/A
• Inpatient	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
• Outpatient Facility/Surgery Services	No Charge	No Charge	No Charge	\$15	No Charge	No Charge	No Charge
<b>Emergency Services</b>							
• Emergency Room Deductible	N/A	N/A	N/A	N/A	N/A	N/A	N/A
• Emergency (copay waived if admitted as an inpatient or for observation as an outpatient)	\$50	\$50	\$50	\$50	\$50	\$50	\$50
• Non-Emergency (copay waived if admitted as an inpatient or for observation as an outpatient)	\$50	\$50	\$50	\$50	\$50	\$50	\$50
<b>Physician Services (including Mental Health and Substance Abuse)</b>							
• Office Visits (copay for each service provided)	\$15	\$15	\$15	\$15	\$15	\$15	\$15
• Inpatient Visits	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
• Outpatient Visits	\$15	\$15	\$15	\$15	\$15	\$15	\$15
• Urgent Care Visits	\$15	\$15	\$15	\$15	\$15	\$15	\$15
• Preventive Services	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
• Surgery/Anesthesia	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge

The information described on this page is only intended to be a summary of benefits. It does not describe or include all benefit provisions, limitations, exclusions, or qualifications for coverage. Please review plan documents for full details. If there are any conflicts with information provided on this page, the plan documents will prevail.

# 2026 CalPERS – Health Plans (continued)



For more details about the benefits provided by a specific plan, refer to that plan's Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	Anthem Blue Cross	Blue Shield	Health Net	Kaiser Permanente	Sharp Performance Plus	United-Healthcare Signature-Value	Western Health Advantage HMO
	Select HMO Traditional HMO	Access+ HMO EPO Trio HMO				Alliance & Harmony	
<b>Diagnostic X-ray/Lab</b>	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
<b>Prescription Drugs</b>							
• Deductible	N/A	N/A	N/A	N/A	N/A	N/A	N/A
• Retail Pharmacy (30-day supply)	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50 Tier 4: \$30	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50	Generic: \$5 Brand: \$20	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50
• Retail Pharmacy (90-day supply)	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100 Tier 4: \$60 (Retail Preferred Pharmacy Maintenance Medications)	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100
• Mail Order Pharmacy Program (not to exceed 90-day supply for maintenance drugs)	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100 Tier 4: \$60	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Generic: \$10 Brand: \$40 (31-100 day supply)	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100
• Mail order maximum copayment per person per calendar year	\$1,000	\$1,000	\$1,000	N/A	\$1,000	\$1,000	\$1,000
<b>Durable Medical Equipment</b>	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
<b>Infertility Testing/Treatment</b>	50% of Covered Charges	50% of Covered Charges	50% of Covered Charges	50% of Covered Charges	50% of Covered Charges	50% of Covered Charges	50% of Covered Charges
<b>Occupational /Physical /Speech Therapy</b>							
• Inpatient (hospital or skilled nursing facility)	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge	No Charge
• Outpatient (office and home visits)	\$15	\$15	\$15	\$15	\$15	\$15	\$15

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# 2026 CalPERS – Health Plans (continued)



For more details about the benefits provided by a specific plan, refer to that plan’s Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	Anthem Blue Cross	Blue Shield	Health Net	Kaiser Permanente	Sharp Performance Plus	United-Healthcare Signature-Value	Western Health Advantage HMO
	Select HMO Traditional HMO	Access+ HMO EPO Trio HMO				Alliance & Harmony	
<b>Diabetes Services</b>							
• Glucose monitors	Coverage varies	No Charge	Coverage varies	No Charge	Coverage varies	Coverage varies	Coverage varies
• Self-management training	\$15	\$15	\$15	\$15	\$15	\$15	\$15
<b>Acupuncture</b>	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)
<b>Chiropractic</b>	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)	\$15/visit (acupuncture/ chiropractic; combined 20 visits per calendar year)
<b>Pregnancy &amp; Maternity Care</b>	No Charge						

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# 2026 CalPERS – PPO Basic Plans



For more details about the benefits provided by a specific plan, refer to that plan's Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	PERS Gold		PERS Platinum	
	PPO	Non-PPO	PPO	Non-PPO
<b>Calendar Year Deductible</b>				
• Individual	\$1,000 <sup>1,3</sup>	\$2,500 <sup>3</sup>	\$500 <sup>3</sup>	\$2,000 <sup>3</sup>
• Family	\$2,000 <sup>1,3</sup>	\$5,000 <sup>3</sup>	\$1,000 <sup>3</sup>	\$4,000 <sup>3</sup>
<b>Maximum Calendar Year Copay or Coinsurance (excluding pharmacy)</b>				
• Individual	\$3,000 (coinsurance)	Unlimited	\$2,000 (coinsurance)	Unlimited
• Family	\$6,000 (coinsurance)	Unlimited	\$4,000 (coinsurance)	Unlimited
<b>Hospital (including Mental Health and Substance Abuse)</b>				
• Deductible (per admission)	N/A		\$250 (copay)	
• Inpatient	20% <sup>2</sup>	40% <sup>4</sup>	10%	40% <sup>4</sup>
• Outpatient Facility/ Surgery Services	20%	40% <sup>4</sup>	10%	40% <sup>4</sup>
<b>Emergency Services</b>				
• Emergency Room Deductible	\$50 (applies to hospital emergency room facility charge only)		\$50 (applies to hospital emergency room facility charge only)	
• Emergency	20% (applies to other services such as physician, x-ray, lab, etc.)		10% (applies to other services such as physician, x-ray, lab, etc.)	
• Non-Emergency	20%	40%	10%	40%
	(payment for physician charges only; emergency room facility charge is not covered)		(payment for physician charges only; emergency room facility charge is not covered)	

- 1 Incentives available to reduce individual inpatient deductible (max. \$500) or family deductible (max. \$1,000). Refer to EOC for details.
- 2 Coinsurance waived for deliveries if enrolled in Included Health's Maternity Program by the 24th week of pregnancy. For deliveries after April 2026, member must be enrolled by January 1, 2026.
- 3 Deductible is not transferable between PERS Gold and PERS Platinum.
- 4 Of the allowable amount as defined in the EOC.

The information described on this page is only intended to be a summary of benefits. It does not describe or include all benefit provisions, limitations, exclusions, or qualifications for coverage. Please review plan documents for full details. If there are any conflicts with information provided on this page, the plan documents will prevail.

# 2026 CalPERS – PPO Basic Plans (continued)



For more details about the benefits provided by a specific plan, refer to that plan’s Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	PERS Gold		PERS Platinum	
	PPO	Non-PPO	PPO	Non-PPO
<b>Physician Services</b> (including Mental Health and Substance Abuse)				
• Office Visits (copay for each service provided)	\$35 <sup>1,2</sup>	40% <sup>3</sup>	\$20 <sup>2</sup>	40% <sup>3</sup>
• Inpatient Visits	20%	40% <sup>3</sup>	10%	40% <sup>3</sup>
• Outpatient Visits	\$35	40% <sup>3</sup>	\$20	40% <sup>3</sup>
• Urgent Care Visits	\$35	40% <sup>3</sup>	\$35	40% <sup>3</sup>
• Preventive Services	No Charge	40% <sup>3</sup>	No Charge	40% <sup>3</sup>
• Surgery/Anesthesia	20%	40% <sup>3</sup>	10%	40% <sup>3</sup>
<b>Diagnostic X-Ray/Lab</b>	20% <sup>4</sup>	40% <sup>3</sup>	10% <sup>4</sup>	40% <sup>3</sup>

- 1 Reduced to \$10 when seen by matched primary physician.
- 2 \$35 for specialist visit.
- 3 Of the allowable amount as defined in the EOC.
- 4 For lab services only — no charge when using Quest Diagnostic or Labcorp.

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# 2026 CalPERS – PPO Basic Plans (continued)



For more details about the benefits provided by a specific plan, refer to that plan’s Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	PERS Gold		PERS Platinum	
	PPO	Non-PPO	PPO	Non-PPO
<b>Prescription Drugs</b>				
• Deductible	N/A		N/A	
• Retail Pharmacy (30-day supply)	Tier 1: \$5 Tier 2: \$20 Tier 3: \$50		Tier 1: \$5 Tier 2: \$20 Tier 3: \$50	
• Retail Pharmacy (90-day supply)	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100		Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	
• Mail Order Pharmacy Program (not to exceed 90-day supply for maintenance drugs)	Tier 1: \$10 Tier 2: \$40 Tier 3: \$100		Tier 1: \$10 Tier 2: \$40 Tier 3: \$100	
• Mail Order Maximum Copayment Per Person Per Calendar Year	\$1,000		\$1,000	
<b>Durable Medical Equipment</b>	20%	40% <sup>1</sup>	10%	40% <sup>1</sup>
	(pre-certification required for specific equipment)		(pre-certification required for the purchase of equipment priced at \$1,000 or more)	

<sup>1</sup> Of the allowable amount as defined in the EOC.

The information described on this page is only intended to be a summary of benefits. It does not describe or include all benefit provisions, limitations, exclusions, or qualifications for coverage. Please review plan documents for full details. If there are any conflicts with information provided on this page, the plan documents will prevail.

# 2026 CalPERS – PPO Basic Plans (continued)



For more details about the benefits provided by a specific plan, refer to that plan's Evidence of Coverage (EOC) booklet. All benefits subject to regulatory approval.

Benefits	PERS Gold		PERS Platinum	
	PPO	Non-PPO	PPO	Non-PPO
<b>Infertility Testing/ Treatment</b>	50%		50%	
<b>Occupational / Physical / Speech Therapy</b>				
• Inpatient (hospital or skilled nursing facility)	No Charge		No Charge	
• Outpatient (office and home visits)	20%	40% (Occupational therapy: 20%)	10%	40% (Occupational therapy: 10%)
	(pre-certification required for more than 24 visits)		(Pre-certification required for more than 24 visits)	
<b>Diabetes Services</b>				
• Glucose monitors	Coverage Varies		Coverage Varies	
• Self-management training	\$20 <sup>1</sup>	40% <sup>2</sup>	\$20 <sup>1</sup>	40% <sup>2</sup>
<b>Acupuncture</b>	\$15/Visit	40% <sup>2</sup>	\$15/Visit	40% <sup>2</sup>
	(acupuncture/chiropractic; combined 20 visits per calendar year)		(acupuncture/chiropractic; combined 20 visits per calendar year)	
<b>Chiropractic</b>	\$15/Visit	40% <sup>2</sup>	\$15/Visit	40% <sup>2</sup>
	(acupuncture/chiropractic; combined 20 visits per calendar year)		(acupuncture/chiropractic; combined 20 visits per calendar year)	
<b>Pregnancy &amp; Maternity Care</b>	20% <sup>3</sup>	40%	10%	40%

<sup>1</sup> \$35 for specialist visit.

<sup>2</sup> Of the allowable amount as defined in the EOC.

<sup>3</sup> Coinsurance waived for deliveries if enrolled in Included Health's Maternity Program by the 24th week of pregnancy. For deliveries after April 2026, member must be enrolled by January 1, 2026.

The information described on this page is only intended to be a summary of benefits. It does not describe or include all benefit provisions, limitations, exclusions, or qualifications for coverage. Please review plan documents for full details. If there are any conflicts with information provided on this page, the plan documents will prevail.

# 2026 Employee Benefits Program Renewal

## Attachment 3



August 18, 2025

Dear ACWA JPIA Members,

In 2024 and in 2025, we have experienced much higher than normal claims costs due to multiple high dollar medical claims as well as inflation and other cost pressures. For the self-insured PPO plans, we are increasing rates to address these expenses. As we have done in the past, we will mitigate the 2026 PPO rate increases with our excess funds to stabilize the experience of our members.

The Anthem and Kaiser fully insured HMO programs will also see rate increases for the upcoming plan year.

Effective January 1, 2026, our dental rates will increase slightly, and we are adding three new plans to address concerns about dentists going out-of-network, particularly in rural areas.

Additionally, we are enhancing our vision plans with no change in rates.

The 2026 rates for our EAP will not change and our long-term and short-term disability rates will decrease. Please see the next pages for all our plan year 2026 rate actions and premium charts.

### 2026 Plan/Benefit Changes:

- **Consumer Driven Health Plans (CDHPs)** – To comply with IRS requirements for HSA compatibility in 2026, Anthem and Kaiser CDHP deductibles will increase from \$1,650/\$3,300 to \$1,700/\$3,400 for single/family.
  - The Out-of-Pocket Maximums on the Anthem CDHP are unchanged.
  - The Out-of-Pocket Maximums on the Kaiser CDHP are still to be determined. Currently they are \$3,300 (single coverage), and \$5,800 (family). We expect to receive the final plan design from Kaiser before October 1, 2025.
- Our fully insured Anthem and Kaiser HMO plans will now include **infertility benefits** in compliance with California SB 729. We are hopeful that details on these benefits will be available from the carriers before October 1, 2025. There are no changes to the infertility benefits offered on the Anthem PPO plans through Progyny.



- JPIA is adding three new Delta Dental PPO plans effective January 1, 2026, which are designed to increase reimbursement to non-network dentists, thereby lowering the out-of-pocket costs for participants who use non-Delta dentists. These plans are targeted for areas of California where there are fewer in-network Delta dentists; however, any agency, regardless of location, may move to one of these new plans. Click [here](#) for more information.
- On our **VSP vision plans**, the contact lens allowance and frame allowance are both increasing to \$170 from \$150 with no change in rates.

The deadline to request a change to the JPIA benefit plans you offer employees is **September 1, 2025** for a **January 1, 2026** effective date. For assistance, please contact Jackie Rech at [jrech@acwajpia.com](mailto:jrech@acwajpia.com) or Michele Dye at [mdye@acwajpia.com](mailto:mdye@acwajpia.com).

Open enrollment will run from **October 1 through November 7, 2025**. For ease of administration, members are encouraged to advertise a shorter Open enrollment period within the above time frame. The most frequent Open enrollment period utilized is two weeks. Please refer to the [Open Enrollment To-Do List](#) for a list of member responsibilities.

Please join us for the 2026 Employee Benefits Renewal webinar at 11:30 am on [Wednesday, September 10, 2025](#).

Finally, we have welcomed a new member to the Employee Benefits Team, Michele Dye, who is our new Employee Benefits Specialist. Jackie Rech, who is retiring at the end of 2025 is working closely with Michele as she transitions into fully taking over the position in January.

If you have any questions or concerns, please contact us at (800) 736-2292 or [benefits@acwajpia.com](mailto:benefits@acwajpia.com). Thank you for your continued partnership.

Warm regards,

Adam Dedmon

Employee Benefits Manager



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## 2026 RATE AND BENEFIT CHANGES

The Executive Committee approved the following changes effective January 1, 2026.

### **Anthem PPOs (Classic, Advantage, and CDHP)**

Rate increase of 10%.

### **Anthem HMOs (CalCare and Value)**

Rate increase of 5%.

### **Kaiser North and Kaiser South**

Aggregate rate increase of 4.28%.

### **Kaiser Senior Advantage**

Rate increase of 8.51%. *\*Pending Executive Committee approval on Sep 30, 2025.*

### **UnitedHealthcare Group Medicare Advantage PPO**

Rate increase of 9%.

### **Delta Dental PPO**

Rate increase of 3%. Addition of three new plans with 80% UCR Out-of-network reimbursement.

### **DeltaCare DHMO**

No change.

### **Vision Service Plan**

No change in rates. Increase to \$170 for the frame allowance and contact lens allowance.

### **Anthem Employee Assistance Program**

No change.

### **Standard Basic Life, Supplemental Life, Child Life, Dependent Life, and AD&D**

No change.

### **Standard Long-Term Disability**

Rate reduction of 20%. (Participating agencies will receive an updated self-reporting invoice with their new rate in December)

### **Standard Short-Term Disability**

Rate reduction of 10%. (Participating agencies will receive an updated self-reporting invoice with their new rate in December)



**ANTHEM CONSUMER DRIVEN HEALTH PLAN (CDHP)** Due to IRS changes to HSA-eligible high deductible plan requirements, the deductible will increase to **\$1,700** for single coverage and **\$3,400** for family coverage. All other benefits remain the same.

**KAISER CONSUMER DRIVEN HEALTH PLAN (CDHP)** Due to IRS changes to HSA-eligible high deductible plan requirements, the deductible will increase to **\$1,700** for single coverage and **\$3,400** for family coverage. Out-of-pocket maximums for Kaiser CDHP plans are still to be determined but expected before October 1, 2025.

**HEALTH SAVINGS ACCOUNT CONTRIBUTION LIMITS** The IRS updates the maximum amount allowable contribution to a tax-advantaged Health Savings Account (HSA) each year. In 2026, the maximum contribution from all sources for a person enrolled in a high deductible plan as an **individual** will increase from \$4,300 to **\$4,400**. The maximum contribution for a person enrolled in a high deductible plan as a **family** (employee plus one or more) will increase from \$8,550 to **\$8,750**. Those who will be age 55 or older at any time in 2026 may contribute an additional **\$1,000**.

## NEXT STEPS

Review the [Open Enrollment To-Do List](#) for required and optional actions to prepare for Open Enrollment.

Join the 2026 Renewal Webinar at 11:30 am, on [Wednesday, September 10, 2025](#). This webinar will be recorded and available upon request.

This packet includes rates effective January 1, 2026. Please update your agency's finance department.

Visit the [JPIA website](#) to access the following documents:

- [Open Enrollment To-Do List](#);
- [Communication Template](#) to send to employees;
- Benefit flyers;
- [Annual participant notices](#);
- Plan summaries - Availability may vary. All are expected to be posted by mid-September.
- Summaries of Benefits and Coverages (SBCs) - Availability may vary. All are expected to be posted by mid-September.

Employers are **required** to distribute the annual notices and SBCs, and to inform employees of the once per year opportunity to make plan changes, unless they experience a mid-year qualifying event.

# Anthem Rate Region Map



JPIA RATING REGIONS	
[Dark Green Box]	OTHER NORTH
[Blue Box]	SACRAMENTO
[Light Blue Box]	BAY AREA
[Orange Box]	LOS ANGELES
[Yellowish-Brown Box]	OTHER SOUTH

## ACWA JPIA 2026 Medical Plans

Anthem Blue Cross	Deductible (Indiv./Family)	Dr.	ER	Hospital	X-ray, lab	Prescription	Medical Max Out of Pocket	RX Max Out of Pocket
Classic PPO	\$200/600	\$15	\$50	Ded/10%/20% <sup>1</sup>	20%	\$5/20/50	\$2,000/4,000	\$5,350/10,200
Advantage PPO	\$500/1,000	\$20	\$50	Ded/20%	20%	\$5/20/50	\$3,000/6,000	\$3,600/7,200
CalCare HMO	None	\$10	\$50	\$0	N/A	\$5/20/50	\$500/1,500	\$6,100/11,700
Value HMO	None	\$30	\$150	\$250	N/A	\$5/20/50 <sup>2</sup>	\$2,500/5,000	\$4,100/8,200
Consumer Driven Health Plan	\$1,700/3,400 <sup>3</sup>	Deductible, then 20% coinsurance	Deductible, then 20% coinsurance	Deductible, then 20% coinsurance	Ded/\$5/20/50		\$2,500/4,000	

Kaiser	Deductible (Indiv./Family)	Dr.	ER	Hospital	X-ray, lab	Prescription	Combined Max OOP
Traditional HMO	None	\$10	\$50	\$0	N/A	\$5/15	\$1,500/3,000
HMO with Optical	None	\$10	\$50	\$0	N/A	\$5/15	\$1,500/3,000
Value HMO	None	\$30	\$150	\$250	N/A	\$10/20	\$3,000/6,000
Consumer Driven Health Plan	\$1,700/3,400 <sup>3</sup>	\$20	\$100	\$250	copays	Ded/\$10/20	\$3,300/5,800 <sup>4</sup>

Medicare Advantage	Deductible (Indiv./Family)	Dr.	ER	Hospital	X-ray, lab	Prescription	Combined Max OOP
Kaiser Senior Advantage <sup>5</sup>	None	\$20	\$50	\$0	N/A	\$10/25	\$1,000/2,100
UHC Medicare Advantage PPO <sup>5</sup>	None	\$0	\$50	\$0	\$0	\$5/20/50	\$2,300 per person <sup>6</sup>

### Important Notes

- <sup>1</sup> Facility charge is covered at 90%. Physician charge covered at 80%. Both are subject to deductible.
  - <sup>2</sup> An annual \$100 (individual)/\$300 (family) drug deductible applies to medications on this plan.
  - <sup>3</sup> Member is responsible for 100% of medical & prescription costs (excluding Preventive Care and some maintenance medications) until deductible is met.
  - <sup>4</sup> Kaiser CDHP OOP maximums for 2026 are TBA
  - <sup>5</sup> Retiree's enrollment in Medicare Parts A and B is required.
  - <sup>6</sup> UHC Medical OOP max of \$200 plus Rx OOP max of \$2,100
- This is a very brief plan comparison of **IN-NETWORK** benefits. Plan summaries are available at [www.acwajpia.com](http://www.acwajpia.com).  
The Evidence of Coverage prevails in the event of a discrepancy.

# ACWA JPIA 2026 Medical Plan Monthly Rates

## LOS ANGELES AREA

Los Angeles, San Bernardino & Ventura Counties

Anthem Blue Cross	Standard Rates		Incentive Rates (-4%)		Change to Rates
	Single	Two-Party	Single	Family	
Classic PPO	977.28	1,954.56	938.19	2,486.20	10%
Advantage PPO	859.99	1,719.98	825.59	2,187.81	10%
Consumer Driven Health Plan (CDHP)	781.81	1,563.62	750.54	1,988.93	10%
CalCare HMO	1,093.97	2,187.94	1,050.21	2,783.06	5%
Value HMO	1,007.65	2,015.30	967.34	2,563.45	5%
Kaiser South	Standard Rates		Incentive Rates (-4%)		Std / Inc
Traditional HMO	846.30	1,692.60	\$ 812.45	2,258.61	
HMO with Optical	861.88	1,723.76	827.40	2,300.17	4.28%
Value HMO	773.56	1,547.12	742.62	2,064.48	4.28%
Consumer Driven Health Plan (CDHP)	612.35	1,224.70	587.86	1,634.25	4.28%
Medicare Advantage	212.45	424.90	-	-	7.78%
Kaiser Senior Advantage	557.45	1,114.90	557.45	1,672.35	8.78%
United Healthcare PPO	3		3		4
Mixed Medicare <sup>1,2</sup>	1,534.73	2,169.96	1,495.64	2,105.46	9.55%
Classic PPO	1,417.44	1,976.43	1,383.04	1,919.67	9.52%
Advantage PPO	1,339.26	1,847.44	1,307.99	1,795.84	9.49%
Consumer Driven Health Plan (CDHP)	1,651.42	2,362.50	1,607.66	2,290.30	6.14%
CalCare HMO	1,565.10	2,220.07	1,524.79	2,153.56	6.21%
Value HMO	1,058.75	1,718.86	1,024.90	1,658.61	4.85%
Kaiser Traditional HMO + Senior Advantage <sup>5</sup>					

<sup>1</sup> Mixed Medicare rates are for enrollments that include one retiree with Medicare and one without Medicare.

<sup>2</sup> Kaiser enrollments cannot mix with UHC enrollments. It must be Anthem+UHC or Kaiser+Kaiser.

<sup>3</sup> Kaiser Mixed Medicare rates vary based on a variety of combinations. Email [benefits@acwajpia.com](mailto:benefits@acwajpia.com) to request a scenario-specific rate.

<sup>4</sup> Family Mixed Medicare rates are for one adult with Medicare, plus one adult and child without Medicare.

<sup>5</sup> Change to Mixed Medicare rates shown is a comparison of Two-Party Standard rates.

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# ACWA JPIA 2026 Medical Plan Monthly Rates

## OTHER SOUTHERN CALIFORNIA

Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, Riverside, San Diego, San Luis Obispo, Santa Barbara & Tulare Counties

Anthem Blue Cross	Standard Rates		Incentive Rates (-4%)		Change to Rates
	Single	Two-Party	Single	Two-Party	
Classic PPO	1,036.64	2,073.28	995.17	1,990.34	10%
Advantage PPO	912.25	1,824.50	875.76	1,751.52	10%
Consumer Driven Health Plan (CDHP)	829.31	1,658.62	796.14	1,592.28	10%
CalCare HMO	1,179.95	2,359.90	1,132.75	2,265.50	5%
Value HMO	1,086.74	2,173.48	1,043.27	2,086.54	5%

Some zip codes in the above counties may be in the Kaiser North service area. See the JPIA's Other North region rate sheet for the applicable premiums.

Kaiser South	Standard Rates		Incentive Rates (-4%)		Std / Inc
	Single	Two-Party	Single	Two-Party	
Traditional HMO	846.30	1,692.60	812.45	1,624.90	4.28%
HMO with Optical	861.88	1,723.76	827.40	1,654.80	4.28%
Value HMO	773.56	1,547.12	742.62	1,485.24	4.28%
Consumer Driven Health Plan (CDHP)	612.35	1,224.70	587.86	1,175.72	4.28%
Medicare Advantage					
Kaiser Senior Advantage	212.45	424.90	-	-	7.78%
United Healthcare PPO	557.45	1,114.90	-	-	8.78%
Mixed Medicare <sup>1,2</sup>					
Classic PPO + UHC	1,594.09	2,267.91	1,552.62	2,199.48	9.57%
Advantage PPO + UHC	1,469.70	2,062.66	1,433.21	2,002.45	9.53%
Consumer Driven Health Plan (CDHP) + UHC	1,386.76	1,925.81	1,353.59	1,871.08	9.51%
CalCare HMO + UHC	1,737.40	2,504.37	1,690.20	2,426.49	6.07%
Value HMO + UHC	1,644.19	2,350.57	1,600.72	2,278.85	6.14%
Kaiser Traditional HMO + Senior Advantage <sup>5</sup>	1,058.75	1,718.86	1,024.90	1,658.61	4.85%

<sup>1</sup> Mixed Medicare rates are for enrollments that include one retiree with Medicare and one without Medicare.  
<sup>2</sup> Kaiser enrollments cannot mix with UHC enrollments. It must be Anthem+UHC or Kaiser+Kaiser.  
<sup>3</sup> Family Mixed Medicare rates are for one adult with Medicare, plus one adult and child without Medicare.  
<sup>4</sup> Change to Mixed Medicare rates shown is a comparison of Two-Party Standard rates.  
<sup>5</sup> Rates reflect Kaiser Traditional HMO. Contact JPIA Benefits for rates for other Kaiser plan combinations.  
 If you have questions or would like additional information, please email [benefits@acwajpia.com](mailto:benefits@acwajpia.com).

# ACWA JPIA 2026 Medical Plan Monthly Rates

## SACRAMENTO

Amador, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Sutter, Yolo & Yuba Counties

Anthem Blue Cross	Standard Rates		Incentive Rates (-4%)		Change to Rates
	Single	Family	Single	Family	
Classic PPO	1,136.41	3,011.49	1,090.95	2,891.02	10%
Advantage PPO	1,000.03	2,650.08	960.03	2,544.08	10%
Consumer Driven Health Plan (CDHP)	909.12	2,409.17	872.76	2,312.81	10%
CalCare HMO	1,451.14	3,845.52	1,393.09	3,691.69	5%
Value HMO	1,336.20	3,540.93	1,282.75	3,399.29	5%
Kaiser North	Standard Rates		Incentive Rates (-4%)		Std / Inc
Traditional HMO	1,007.25	2,800.16	966.96	2,688.15	
HMO with Optical	1,025.06	2,849.67	984.06	2,735.69	4.28%
Value HMO	931.17	2,588.65	893.92	2,485.10	4.28%
Consumer Driven Health Plan (CDHP)	771.19	2,143.91	740.34	2,058.15	4.28%
Medicare Advantage					
Kaiser Senior Advantage	340.24	1,535.79			8.05%
United Healthcare PPO	557.45	1,672.35			8.78%
Mixed Medicare <sup>1,2</sup>					
Classic PPO	1,693.86	2,432.53	1,648.40	2,357.52	9.60%
Advantage PPO	1,557.48	2,207.50	1,517.48	2,141.50	9.56%
Consumer Driven Health Plan (CDHP)	1,466.57	2,057.50	1,430.21	1,997.50	9.53%
CalCare HMO	2,008.59	2,951.83	1,950.54	2,856.05	5.90%
Value HMO	1,893.65	2,762.18	1,840.20	2,673.99	5.97%
Kaiser Traditional HMO + Senior Advantage <sup>5</sup>	1,347.49	2,133.15	1,307.20	2,061.43	5.10%

<sup>1</sup> Mixed Medicare rates are for enrollments that include one retiree with Medicare and one without Medicare.

<sup>2</sup> Kaiser enrollments cannot mix with UHC enrollments. It must be Anthem+UHC or Kaiser+Kaiser.

<sup>3</sup> Kaiser Mixed Medicare rates vary based on a variety of combinations. Email [benefits@acwajpia.com](mailto:benefits@acwajpia.com) to request a scenario-specific rate.

<sup>4</sup> Family Mixed Medicare rates are for one adult with Medicare, plus one adult and child without Medicare.

<sup>5</sup> Change to Mixed Medicare rates shown is a comparison of Two-Party Standard rates.

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# ACWA JPIA 2026 Medical Plan Monthly Rates

## OTHER NORTHERN CALIFORNIA

Alpine, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Plumas, San Benito, Shasta, Sierra, Siskiyou, Stanislaus, Sutter, Tehama, Trinity & Tuolumne Counties

Anthem Blue Cross	Standard Rates		Incentive Rates (-4%)		Change to Rates
	Single	Two-Party	Single	Two-Party	
Classic PPO	1,141.79	2,283.58	1,096.12	2,192.24	10%
Advantage PPO	1,004.78	2,009.56	964.59	1,929.18	10%
Consumer Driven Health Plan (CDHP)	913.43	1,826.86	876.89	1,753.78	10%
CalCare HMO	1,463.85	2,927.70	1,405.30	2,810.60	5%
Value HMO	1,347.89	2,695.78	1,293.97	2,587.94	5%
Kaiser North	Standard Rates		Incentive Rates (-4%)		Std / Inc
	Single	Two-Party	Single	Two-Party	
Traditional HMO	1,007.25	2,014.50	966.96	1,933.92	4.28%
HMO with Optical	1,025.06	2,050.12	984.06	1,968.12	4.28%
Value HMO	931.17	1,862.34	893.92	1,787.84	4.28%
Consumer Driven Health Plan (CDHP)	771.19	1,542.38	740.34	1,480.68	5.46%
Medicare Advantage					
Kaiser Senior Advantage	340.24	680.48			8.05%
United Healthcare PPO	557.45	1,114.90			8.78%
Mixed Medicare <sup>1,2</sup>	Standard Rates		Incentive Rates (-4%)		Std / Inc
	Single	Two-Party	Single	Two-Party	
Classic PPO	1,699.24	2,441.40	1,653.57	2,366.05	9.60%
Advantage PPO	1,562.23	2,215.34	1,522.04	2,149.02	9.56%
Consumer Driven Health Plan (CDHP)	1,470.88	2,064.61	1,434.34	2,004.32	9.54%
CalCare HMO	2,021.30	2,972.80	1,962.75	2,876.20	5.90%
Value HMO	1,905.34	2,781.47	1,851.42	2,692.50	5.96%
Kaiser Traditional HMO + Senior Advantage <sup>5</sup>	1,347.49	2,133.15	1,307.20	2,061.43	5.10%

<sup>1</sup> Mixed Medicare rates are for enrollments that include one retiree with Medicare and one without Medicare.

<sup>2</sup> Kaiser enrollments cannot mix with UHC enrollments. It must be Anthem+UHC or Kaiser+Kaiser.

<sup>3</sup> Kaiser Mixed Medicare rates vary based on a variety of combinations. Email [benefits@acwajpia.com](mailto:benefits@acwajpia.com) to request a scenario-specific rate.

<sup>4</sup> Family Mixed Medicare rates are for one adult with Medicare, plus one adult and child without Medicare.

<sup>5</sup> Change to Mixed Medicare rates shown is a comparison of Two-Party Standard rates.

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# ACWA JPIA 2026 Medical Plan Monthly Rates

## BAY AREA

Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, & Sonoma Counties

Anthem Blue Cross	Standard Rates		Incentive Rates (-4%)		Change to Rates
	Single	Two-Party	Single	Two-Party	
Classic PPO	1,187.99	2,375.98	1,140.47	2,280.94	10%
Advantage PPO	1,045.44	2,090.88	1,003.62	2,007.24	10%
Consumer Driven Health Plan (CDHP)	950.41	1,900.82	912.39	1,824.78	10%
CalCare HMO	1,534.83	3,069.66	1,473.44	2,946.88	5%
Value HMO	1,413.21	2,826.42	1,356.68	2,713.36	5%
Kaiser North	Standard Rates		Incentive Rates (-4%)		Std / Inc
	Single	Two-Party	Single	Two-Party	
Traditional HMO	1,007.25	2,014.50	\$ 966.96	1,933.92	4.28%
HMO with Optical	1,025.06	2,050.12	\$ 984.06	1,968.12	4.28%
Value HMO	931.17	1,862.34	\$ 893.92	1,787.84	4.28%
Consumer Driven Health Plan (CDHP)	771.19	1,542.38	\$ 740.34	1,480.68	4.28%
Medicare Advantage	Standard Rates		Incentive Rates (-4%)		Std / Inc
	Single	Two-Party	Single	Two-Party	
Kaiser Senior Advantage	340.24	680.48			8.05%
United Healthcare PPO	557.45	1,114.90			8.78%
Mixed Medicare <sup>1,2</sup>	Standard Rates		Incentive Rates (-4%)		Std / Inc
	Single	Two-Party	Single	Two-Party	
Classic PPO	1,745.44	2,517.63	1,697.92	2,439.23	9.61%
Advantage PPO	1,602.89	2,282.43	1,561.07	2,213.42	9.57%
Consumer Driven Health Plan (CDHP)	1,507.86	2,125.63	1,469.84	2,062.89	9.55%
CalCare HMO	2,092.28	3,089.92	2,030.89	2,988.63	5.86%
Value HMO	1,970.66	2,889.25	1,914.13	2,795.97	5.92%
Kaiser Traditional HMO + Senior Advantage <sup>5</sup>	1,347.49	2,133.15	1,307.20	2,061.43	5.10%

<sup>1</sup> Mixed Medicare rates are for enrollments that include one retiree with Medicare and one without Medicare.

<sup>2</sup> Kaiser enrollments cannot mix with UHC enrollments. It must be Anthem+UHC or Kaiser+Kaiser.

<sup>3</sup> Kaiser Mixed Medicare rates vary based on a variety of combinations. Email [benefits@acwajpia.com](mailto:benefits@acwajpia.com) to request a scenario-specific rate.

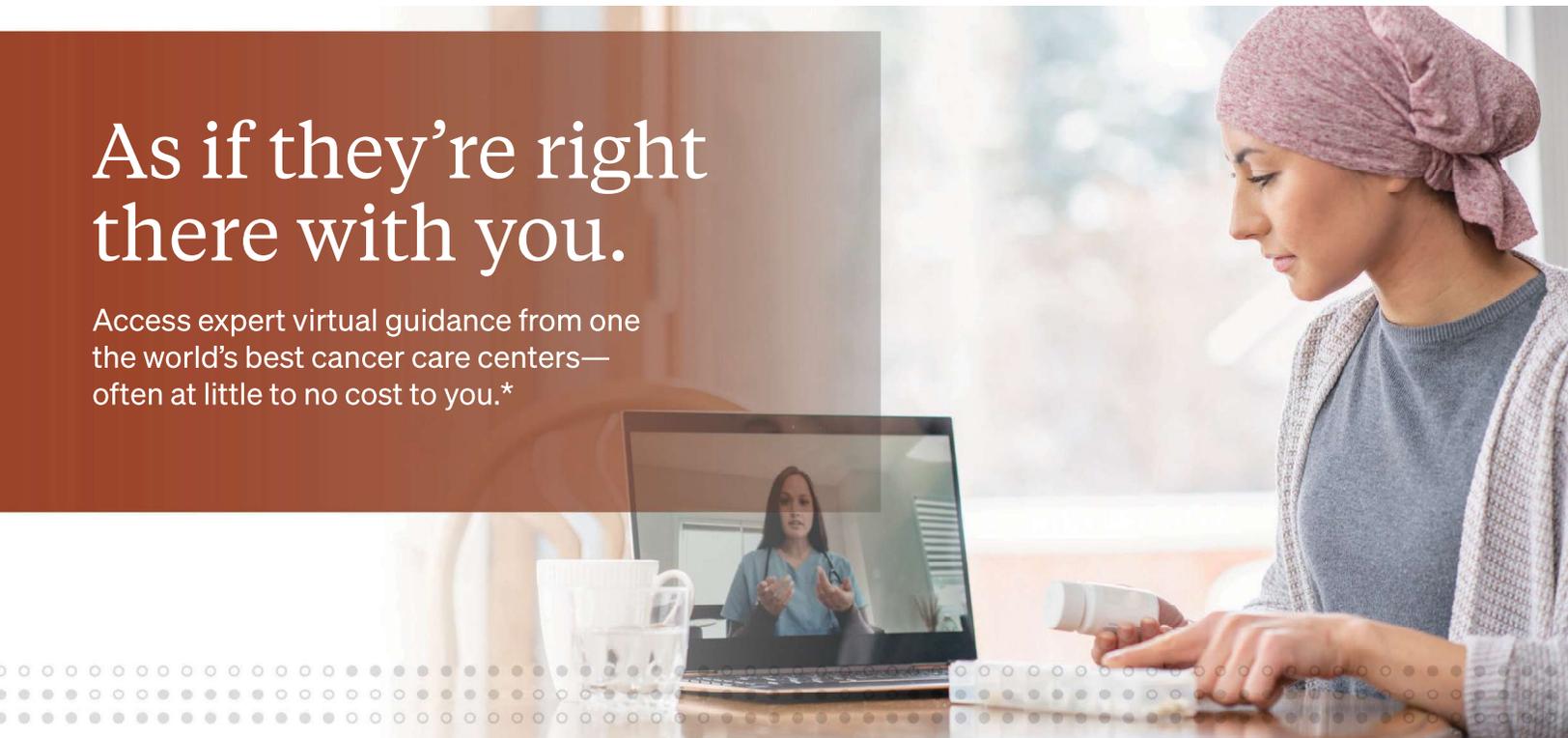
<sup>4</sup> Family Mixed Medicare rates are for one adult with Medicare, plus one adult and child without Medicare.

<sup>5</sup> Change to Mixed Medicare rates shown is a comparison of Two-Party Standard rates.

If you have questions or would like additional information, please email [benefits@acwajpia.com](mailto:benefits@acwajpia.com).

# As if they're right there with you.

Access expert virtual guidance from one of the world's best cancer care centers—often at little to no cost to you.\*



The Carrum Health benefit provides an easier and less-expensive way to get exceptional surgical care. Now, eligible employees also have access to the very best cancer support.

When facing cancer, getting the correct diagnosis and access to the latest research is critical to achieving the best possible outcome. And now, with your Carrum Health benefit, eligible ACWA JPIA employees have access to expertise from two amazing cancer care organizations:

**AccessHope:** Delivers expertise from renowned National Cancer Institute (NCI)–Designated Comprehensive Cancer Centers including:

- City of Hope
- Dana-Farber Cancer Institute
- Emory Healthcare and Winship Cancer Institute of Emory University
- Fred Hutchinson Cancer Center
- Northwestern Medicine and the Robert H. Lurie Comprehensive Cancer Center of Northwestern University

Through AccessHope, eligible employees\* have access to leading edge cancer expertise, compassionate oncology nurses who can answer cancer-related questions, and specialists who can review your case and provide treatment recommendations to your local oncologist, so you can stay close to home.

**For qualifying members, the Carrum Health benefit also covers:**

- Access to navigational support from a team of oncology-certified nurses
- An expert opinion of your cancer diagnosis and treatment plan from world-renowned specialists
- Recommendations for local providers and specialists
- Access to some of the largest clinical trial programs in the country

*In addition to the remote expertise, eligible employees and dependents with first-time, nonmetastatic breast or thyroid cancer may be eligible for additional care through one of Carrum Health's top-tier cancer treatment centers.*

**Ready to get started?**

Visit: [info.carrumhealth.com/acwajpia](http://info.carrumhealth.com/acwajpia)  
Call: 888-855-7806



\*Carrum Health is a special benefit for employees, sponsored by your employer's health plan through ACWA JPIA. Employees and dependents on the Anthem PPO or CDHP plan are eligible. For CDHP plan members, with the exception of second opinions, Carrum will work with Anthem to collectively ensure you pay the minimum deductible to maintain HSA eligibility. Second opinions are provided at no cost to members and do not require payment of any deductible. Per IRS rules, a portion of any covered travel expenses will be reported as taxable income to the covered member.

The information contained in this document is for informational purposes only. No material is intended to be a substitute for professional medical advice, diagnosis or treatment.

# Top Surgeons, World-class Care.

Carrum Health selects the nation's top surgeons for our network, so you're sure to get the world-class care you deserve. And when you use your Carrum Health benefit, most, if not all, of your surgery costs are often covered.

With the surgeons carefully selected by Carrum Health, you'll benefit from:

**80%** **Fewer Complications**  
Our surgeons have 80% fewer complications and readmissions compared to the national average.

**30%** **Reduction in Unnecessary Surgeries**  
30% of members who come to Carrum with a recommendation for surgery benefit from less-invasive treatment options.

**3X** **More Experience**  
Our surgeons, on average, perform three times as many procedures as most other surgeons in the country.



If surgery has been recommended to you, register today and see your options for extraordinary care.

Starting in 2024, you'll receive a \$250 incentive for completing a surgical consultation/second opinion through Carrum Health. Please note, the incentive is not valid for cancer guidance.

## Ready to get started?

Visit: [info.carrumhealth.com/acwajpia](http://info.carrumhealth.com/acwajpia) or call: 888-855-7806



\*Carrum Health is a special benefit for employees, sponsored by your employer's health plan through ACWA JPIA. Employees and dependents on the Anthem PPO or CDHP plan are eligible. For CDHP plan members, with the exception of second opinions, Carrum will work with Anthem to collectively ensure you pay the minimum deductible to maintain HSA eligibility. Second opinions are provided at no cost to members and do not require payment of any deductible. Per IRS rules, a portion of any covered travel expenses will be reported as taxable income to the covered member.

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# Fertility and Family Building

## Provided by: ACWA JPIA

Your Progyny benefit has been specifically designed to give you the best chance of fulfilling your dreams of family. Whether you just want to learn more about your options, are trying to conceive, or exploring fertility treatment, we are here for you.

Access **comprehensive coverage** through the **Progyny Smart Cycle**, which covers all the individual services, tests, and treatments you may need. Connect with **top fertility specialists** across the U.S. and lean on your Patient Care Advocate with unlimited **concierge support**.

## Your Progyny coverage includes:

- **2 Smart Cycles** per family per lifetime for fertility treatment coverage
- **Progyny Rx** fertility medication coverage
- **\$20,000** adoption financial assistance per lifetime
- **\$20,000** surrogacy financial assistance per lifetime
- **\$1,000** doula financial assistance per child
- **Fertility preservation** coverage for egg and sperm freezing
- **Donor tissue** coverage for egg and sperm tissue purchase

Note: To be eligible for Progyny benefits, you must be enrolled in an Anthem PPO plan through ACWA JPIA. You are subject to financial responsibility accordingly to your plan. Please consult with your human resources department to confirm eligibility.

## Common ways to use a Smart Cycle:



IVF Fresh Cycle



IVF Freeze-All Cycle



Frozen Embryo Transfer (FET)



Intrauterine Insemination (IUI) or Timed Intercourse



Pre-Transfer Embryology Services



Egg Freezing



Sperm Freezing



Call Progyny at 866.461.4990 to get started

Visit [progyny.com/benefits](https://progyny.com/benefits)



Marcus is wearing a TruHearing Advanced hearing aid.

## Save thousands on hearing care.

Thanks to VSP® Vision Care plan, you and your family have access to exclusive savings through TruHearing®. Your hearing program saves you 30-60% off the retail price of prescription hearing aids.

### Example pricing per pair

If you have a hearing aid allowance through your medical insurance, you may be able to combine it with TruHearing prices to save even more on quality hearing aids.

Product	Retail price	Savings	TruHearing price
TruHearing Advanced	\$2,720	\$1,470	\$1,250
⚡ Signia 3IX	\$2,113	\$763	\$1,350
⚡ Widex® SmartRIC™ 220	\$2,332	\$982	\$1,350
⚡ ReSound NEXIA™ 9	\$3,047	\$797	\$2,250
Starkey® Genesis® AI 1600	\$2,129	\$579	\$1,550
⚡ Phonak® Lumity® L-RL 90	\$3,349	\$1,099	\$2,250
⚡ Oticon® Real® 2	\$3,018	\$1,243	\$1,775

⚡ Rechargeable | Listed products are smartphone-compatible<sup>1</sup>  
Exam must be performed by a TruHearing network provider.

Start by calling TruHearing.

📞 1-844-622-3213 | TTY: 711

Hours: 8am–8pm, Monday–Friday



### Your hearing aid purchase includes



60-day, risk-free trial



1 year of follow-up visits



80 free batteries per non-rechargeable hearing aid



3-year manufacturer warranty



Get started with **5 simple steps.**

# TruHearing makes the journey easy.



Scan with your smartphone to see how it works.  
[TruHearing.com/how-it-works](https://TruHearing.com/how-it-works)



**1. Call TruHearing**



**2. Schedule an exam**



**3. Go to your exam**



**4. Order hearing aids**



**5. Fitting and follow-up**

## Call TruHearing to get started.

 **1-844-622-3213** | TTY: 711

Hours: 8am–8pm, Monday–Friday

**Learn more at: [TruHearing.com/VSP](https://TruHearing.com/VSP)**



## Save up to 20% on over-the-counter (OTC) hearing aids.

For those with mild-moderate hearing loss, TruHearing also offers several models of OTC hearing aids.<sup>2</sup> Learn more at [shop.TruHearing.com](https://shop.TruHearing.com).

<sup>1</sup> Smartphone-compatible hearing aids connect directly to iPhone®, iPad®, and iPod® Touch devices. Some TruHearing models connect to Android® phones directly. Connectivity also available to many Android phones with use of an accessory. TV streaming available through most TVs with use of an accessory.

<sup>2</sup> Hearing benefits cannot be used to purchase OTC hearing aids. Over-the-counter hearing aid purchase inclusions are different from prescription hearing aids see [shop.TruHearing.com](https://shop.TruHearing.com) for specific details.

VSP is providing information to its members, but does not offer or provide any discount hearing program. The relationship between VSP and TruHearing is that of independent contractors.

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\$0 cost to you

## INTRODUCING MENOPAUSE CARE

# Take control of your menopause symptoms

Joint pain, bone density changes, hot flashes, embarrassing leaks. Menopause symptoms are often overwhelming and unexpected.

As a benefit covered by ACWA JPIA, Hinge Health can help you manage these symptoms at no additional cost to you.\*

### What does menopause care include?

- A virtual care plan that features personalized exercises, guided breathing, and educational articles.
- Expert guidance from a physical therapist trained in menopause care.
- A convenient app where you can access all of the above — anytime, anywhere.



Scan the QR code to enroll now  
[hinge.health/acwajpia-menocare](https://hinge.health/acwajpia-menocare)  
 Questions? Call (855) 902-2777

Please use the default camera on your device to scan the QR code, not a third party application. If you are directed to another site, do not proceed.

Hinge Health está disponible en español

Alivia los dolores articulares y musculares y previene las lesiones con tus beneficios de salud gratuitos.

\*Eligibility for menopause care is based on the specific program in which you are placed.

Employees, early retirees (pre-Medicare), and dependents 18+ enrolled in an Anthem PPO or CDHP medical plan through ACWA JPIA are eligible. Thinking about or planning for surgery? ACWA JPIA also offers Carrum Health, a surgery benefit that makes it easy to get the best care possible at little or no cost to you. Go here to learn more about the Carrum Health Benefit: [carrum.me/acwajpia](https://carrum.me/acwajpia).

Clear your mind



Wellbeing

# Be kind to your mind.

Take advantage of multiple accessible resources on Wellhub that can clear your mind, sharpen your thinking, improve your mood, and offer a sense of calm.



### Headspace

Stress less, sleep soundly, and get happier with guided meditations, sleepcasts, and more.  
iOS, Android, Web



### ifeel

Mental wellness tools, mood tracking, and daily affirmations for self-improvement.  
iOS, Android



### Zen

Guided meditations, music and programs for personal development.  
iOS, Android



### Meditopia

Find inner peace through meditation, sleep stories and music.  
iOS, Android, Web



### Sleep Cycle

A tracking tool to help you improve your sleep.  
iOS, Android



### Minddoc

Monitor and manage your mental wellbeing through self-care practices.  
iOS, Android



### Rootd

Anxiety and panic attack management and relief tools in your pocket.  
iOS, Android



### MindSpa

Immersive 3D sound for mind travel, meditation and relaxation.  
iOS, Android, Web

Wellhub app partners can be accessed at no additional cost through your membership using the Wellhub app. Scan the QR code to download!



Questions?  
Chat with us at [support.wellhub.com](https://support.wellhub.com)

Get started today!  
Download the Wellhub app or visit [wellhub.com/en-us](https://wellhub.com/en-us)

## ACWA JPIA 2026 Dental and Vision Plan Numbers Listing by Agency

See pages 28-31 for 2026 Dental PPO and Vision plan rates. There are no changes to vision rates for 2026.  
For plan numbers in red, see page 32.

Member Agency	Dental Plan	Vision Plan
ACWA	1002	3051
ACWA-JPIA	1002	4029
Alameda County Water District	2453	4011
Alpaugh Irrigation District	1312	3029
Alta Irrigation District	1309	3043
Amador Water Agency	1002	3009
American River Flood Control	1002	3041
Angiola Water District	1012	3009
Antelope Valley-East Kern WA	1002	3009
Aromas Water District	1009	3009
Arvin-Edison WSD	N/A	4017
Banta Carbona ID	1001	3009
Bay Area Water Supply	3007	4011
Bella Vista WD	1012	N/A
Berrenda Mesa WD	1312	4029
Big Bear City CSD	3007	3043
Big Bear MWD	1012	N/A
Biggs-West Gridley WD	3007	3043
Bodega Bay PUD	3002	3009
Bolinas Community PUD	1012	N/A
Borrego WD	3007	4005
Brookstrail Township CSD	1009	N/A
Browns Valley ID	1012	3043
Buena Vista WSD	3003	3043
Butte WD	5303	4003
Byron-Bethany ID	4003	3043
Cachuma Oper & Maint Board	3002	3043
Calaveras CWD	1012	3043
Calaveras PUD	1007	3043
Calleguas MWD	1002	4029
Camrosa WD	1312	3051
Carmichael WD	1003	4005
Carpinteria Valley WD	3002	3043
Casitas MWD	1012	3043
Castroville CSD	1007	4005
Cawelo WD	1012	N/A
Centerville CSD	1012	3101
Central Basin MWD	3007	N/A
Central California ID	N/A	3043
Central WD	1009	3051
Channel Island Beach CSD	3002	3043
Chino Basin Desalter Authority	1002	3043
Chino Basin WCD	1009	4029
Chowchilla WD	1002	3043
City of Buellton	1007	3043
City of San Juan Bautista	1312	3029
City of Tehachapi	5003	4029
Clearlake Oaks CWD	3007	4029
Coastside CWD	5003	3019
Consolidated ID	1002	3043
Contra Costa WD	1015	3051
Corcoran ID	3002	3043

## ACWA JPIA 2026 Dental and Vision Plan Numbers Listing by Agency

See pages 28-31 for 2026 Dental PPO and Vision plan rates. There are no changes to vision rates for 2026.  
For plan numbers in red, see page 32.

Member Agency	Dental Plan	Vision Plan
Crestline Village WD	1007	N/A
Crestline-Lake Arrowhead WA	3007	4005
Del Puerto WD	3307	3051
Delano-Earlimart ID	3002	3009
Delhi County WD	3002	3043
Desert WA	1312	3043 (GF)/3029
Diablo Water District	5004	N/A
East Contra Costa ID	1012	3043
East Orange CWD	3002	4011
El Toro WD	5004	3051
Elsinore Valley MWD	N/A	4011
Exeter Irrigation District	1302	3051
Fair Oaks WD	3002	4035
Fall River Valley CSD	1309	4029
Fallbrook PUD	1013	3051
Firebaugh Canal WD	1007	4005
Florin Resource Conservation Dist.	3002	4011
Foothill MWD	1302	3043
Forestville WD	N/A	4033
Frazier Park PUD	1009	4011
Fresno Metro Flood Control Dist.	5004	3043
Friant Power Authority	1012	3055
Friant Water Authority	3007	3043
Georgetown Divide PUD	5304	4033
Glenn Colusa ID	1002	N/A
Golden Hills CSD	1012	3051
Goleta WD	3302	3009
Grassland Basin Authority	1307	3043
Grassland WD	3002	3043
Helix WD	1302	3043
Hidden Valley Lake CSD	1002	N/A
Hi-Desert WD	1002	3051/3047 (Retirees)
Humboldt Bay MWD	1012	3043
Humboldt CSD	1012	3055
Idyllwild WD	1012	3009
Indian Wells VWD	1007	3009
Ivanhoe ID	1312	3043
James ID	1007	3051
Joshua Basin WD	5304	4029
Kanawha WD	1009	3043
Kaweah Delta WCD	1002	3043
Kern CWA	1002	3019
Kern Tulare WD	1012	N/A
Kings County Water District	1012	4033
Kings River Conservation District	1009	3055
Kinneloa ID	1012	3043
Kirkwood Meadows PUD	3007	3043
La Habra Heights CWD	N/A	3043
La Puente Valley CWD	N/A	4005
Laguna Beach CWD	1012	3051
Laguna ID	N/A	3051
Lakeside Irrigation WD	1312	3051

## ACWA JPIA 2026 Dental and Vision Plan Numbers Listing by Agency

See pages 28-31 for 2026 Dental PPO and Vision plan rates. There are no changes to vision rates for 2026.

For plan numbers in red, see page 32.

Member Agency	Dental Plan	Vision Plan
Lakeside WD	1012	N/A
Laton Community Services District	1309	4017
Le Grand CSD	1012	3051
Littlerock Creek ID	1012	3009
Los Alamos CSD	3007	4029
Madera ID	1012	3019
Madera WD	1009	N/A
Madera/Chowchilla WPA	1302	3019
Mammoth CWD	1007	3041
Marina Coast WD	1312	3051
Mariposa PUD	1009	N/A
McKinleyville CSD	3002	N/A
Mid-Peninsula WD	5004	3019
Mission Hills CSD	1012	3043
Mission Springs WD	N/A	3043
Mojave PUD	1012	3043
Mojave WA	1002	3009
Montara Water & Sanitary District	1012	N/A
Montecito Sanitary District	1012	4017
Montecito Water District	1309	3029
Mountain Gate CSD	1012	3009
MWD of Orange County	N/A	3009/3003 (Retirees)
Nevada ID	1002	3055
North Coast CWD	5004	4101
North Delta Water Agency	1309	3029
North Kern WSD	1302	4005
Oakdale ID	1002	3019
Olivenhain MWD	N/A	3051
Orange Cove ID	1007	3009
Orange CWD	1309	3043
Orchard Dale WD	3007	4029
Orosi PUD	3002	3043
Pajaro Valley WMA	5004	3043
Pajaro/Sunny Mesa CSD	1012	3009
Palm Ranch ID	1009	3051
Palmdale WD	3002	4033
Panoche WD	1007	3043
Paradise ID	1003	3023
Patterson ID	1012	3043
Pebble Beach CSD	1007	3009
Pescadero RD #2058	N/A	3029
Pico WD	N/A	4011
Planada CSD	3007	3009
Pleasant Valley County Water District	3002	3043
Porterville ID	1012	3009
Princeton-Codora-Glenn ID	1012	4017
Quartz Hill WD	1003	4029
Rainbow MWD	N/A	3101
Ramona Municipal WD	N/A	3009
Rancho California WD	1002	3019
Reclamation District #1000	1007	3043
Reclamation District #1004	1009	4029

## ACWA JPIA 2026 Dental and Vision Plan Numbers Listing by Agency

See pages 28-31 for 2026 Dental PPO and Vision plan rates. There are no changes to vision rates for 2026.  
For plan numbers in red, see page 32.

Member Agency	Dental Plan	Vision Plan
Reclamation District #784	5004	3009
Richvale ID	1001	3029
Rincon Del Diablo MWD	1007	3051
Rio Alto Water District	5001	3051
Rosamond CSD	3007	3051
Rosedale-Rio Bravo WSD	3002	4029
Rowland WD	5004	4033
San Andreas SD	1007	4029
San Benito CWD	1302	N/A
San Bernardino VMWD	3007	4033
San Bernardino VWCD	1012	3009
San Francisquito Creek JPA	3007	3009
San Gabriel CWD	N/A	3009
San Geronio Pass WA	1307	4101
San Juan Water District	3307	3043
San Luis & Delta-Mendota WA	1007	3009
San Mateo County FSLRRD	1312	3029
Santa Ana Watershed PA	5001	3009
Santa Clarita Valley WA	1007	3043
Santa Margarita WD	3307	3043
Santa Ynez River WCD	3007	3051
Saucelito ID	5001	3009
Scotts Valley WD	5001	3043
Semitropic WSD	1012	3043
Serrano WD	1007	3055
Shafter-Wasco ID	1002	3043
Solano County WA	1009	3043
Solano ID	1002	3043
Soquel Creek WD	1002	3043
South Feather Water & Power	1012	3009
South Montebello ID	3007	3009
South San Joaquin ID	N/A	3009
South Sutter WD	1012	3041
South Tahoe PUD	N/A	3009
Southern San Joaquin MUD	1002	N/A
Stockton East WD	1002	4011
Stone Corral ID	3307	3043
Sutter Extension WD	1009	3043
Tehachapi-Cummings CWD	1007	3009
Terra Bella ID	1002	3051
Thermalito WSD	3002	N/A
Three Valleys MWD	3002	3051
Tranquility ID	1009	3043
Tri-County Water Authority	1012	3009
Tri-Dam Project	1001	4005
Tri-District Water Authority	3302	3043
Tulare ID	5004	3043
Tulare Lake Basin WSD	1312	N/A
Tulelake ID	1002	4029
Tuolumne Utilities District	1002	3051
Twentynine Palms WD	1012	3051
Union Public Utility District	5003	4101

## ACWA JPIA 2026 Dental and Vision Plan Numbers Listing by Agency

See pages 28-31 for 2026 Dental PPO and Vision plan rates. There are no changes to vision rates for 2026.  
For plan numbers in red, see page 32.

Member Agency	Dental Plan	Vision Plan
United WCD	1003	3043
Vallecitos WD	3002	3051
Valley CWD	3007	4011
Valley of the Moon WD	1002	3043
Vandenberg Village CSD	1012	3051
Ventura River CWD	1002	3051
Vista ID	1002	N/A
Walnut Valley WD	1007	3041
Water Replenishment Dist of So CA	1001	N/A
Weaverville CSD	1012	4005
West Basin MWD	3007	N/A
West Kern WD	3007	N/A
West Stanislaus ID	1007	4029
West Valley WD	3007	N/A
Westborough WD	1007	3043
Western Canal WD	1007	4033
Westside Water Authority	1312	4029
Wheeler Ridge-Maricopa WSD	N/A	3051
Yolo County FC & WCD	N/A	4029
Yorba Linda WD	3007	N/A
Yuba County WA	3007	4033
Yuima MWD	1312	3009

Plan numbers are accurate as of 8/12/25. If you requested a plan change or addition after that date, your prior information will be shown on the table above.

Revised 8/12/25

## ACWA JPIA 2026 DeltaCare USA HMO Participating Agencies

No change to rates

### Member Agency

ACWA

ACWA JPIA

Berrenda Mesa Water District

East Contra Costa Irrigation District

Helix Water District

Idyllwild Water District

Kern County Water Agency

Laguna Beach County Water District

Orange County Water District

Palmdale Water District

Pescadero Reclamation District #2058

Rosamond Community Service District

Santa Margarita Water District

Three Valleys Municipal Water District

Tulare Irrigation District

Vallecitos Water District

Vista Irrigation District

Walnut Valley Water District

West Valley Water District

Yorba Linda Water District

Revised 7/31/2025

### JPIA Employee Benefits Medical Program – Review Process

As a part of the initial review process for entry into the JPIA Employee Benefits Medical program, please complete the following steps:

- Review the JPIA Employee Benefits participation requirements and retiree policy requirements in the quote packet you were provided and confirm that your agency will be able to follow these practices. Optimally, a call or visit can be set up to go over these requirements with you.
- **IF YOU ARE CURRENTLY WITH CALPERS for *health benefits*, please read the attached **Information for Agencies Considering a Move from CalPERS.****
- If you wish to move forward, we will ask you for the items listed below. For certain items, templates and forms will be given to you for completion. The following documents should be provided to JPIA Employee Benefits (email to [jrech@acwajpia.com](mailto:jrech@acwajpia.com)) for review.
  - a) Employee census (A template will be sent to you that includes the specific census information that should be provided to ACWA JPIA.)
    - i) Include waivers (for any reason) and any COBRA participants
    - ii) Include retirees and/or directors who are eligible for/enrolled in coverage through your agency's health plan
  - b) Medical Application (form will be provided)
  - c) Current employee handbook, MOU or policy manual
  - d) Large claims disclosure statement – please complete to the best of your knowledge (form will be provided)
  - e) Current carrier and health plan information including:
    - i) In force rates and benefits (e.g. benefit summary or evidence of coverage)
    - ii) Last health plan renewal letter (from medical carrier) with rates
- If your agency is new to JPIA programs (i.e. not currently participating in JPIA Property, Liability, Workers' Comp, or Employee Benefits), make note of the additional steps needed for joining ACWA and ACWA JPIA (see next page).

JPIA Employee Benefits will review the information provided and make a determination regarding your agency's entry into the JPIA Employee Benefits Medical Program. If we have any questions, we will contact you for clarification.

NOTE: We strongly recommend that agencies do not move forward with obtaining internal approvals (i.e. staff, board or union) until JPIA has made its determination.

If you have any questions about any of the above steps or the status of your request, please email Jackie Rech at [jrech@acwajpia.com](mailto:jrech@acwajpia.com) or call 916-474-1773.

## For Agencies New to ACWA JPIA

If your agency is new to ACWA JPIA, and you are approved to join the JPIA Employee Benefits program, the following steps must also be completed:

1. Become a member of [ACWA](#) (Association of California Water Agencies). We can provide a contact name at ACWA who can help you with membership.
2. Become a member of ACWA JPIA:
  - a) Pass a board resolution agreeing to the JPA Agreement. The JPA Agreement can be found [here](#).
  - b) Sign the JPA Agreement.
  - c) Provide confirmation of ACWA membership. NOTE: ACWA must receive check for dues before being considered officially approved for ACWA membership.
  - d) Obtain JPIA Executive Committee approval. Your agency will be presented for membership by JPIA Employee Benefits at the next JPIA ExCo meeting, if the previous steps have been completed.
  - e) Designate a District Director to serve as an ACWA JPIA Director\*. Designate a staff member or another Director to serve as an alternate.

\* All of our member agency Directors, along with staff or any involved or interested parties, are invited to our board meetings in May and November. Attendance isn't required, but is encouraged. For governance purposes, this full board elects an Executive Committee with nine members who approve business throughout the year at more frequent meetings.

## For Agencies Considering a Move from CalPERS

Below are some of the significant differences between JPIA and CalPERS rules and administration that should be reviewed when considering a move from CalPERS health benefits to JPIA medical. This is not a complete list. Care should be taken to understand the differences between CalPERS benefit plans and administration and those of ACWA JPIA.

- Agencies must follow JPIA Participation requirements to join JPIA medical.
  - A. JPIA has minimum contribution and other requirements for member agencies that may not match those required by CalPERS.
- JPIA does not handle COBRA administration. Agencies may administer COBRA in-house or may engage a COBRA administrator.
- JPIA does not handle retiree health billing administration. Agencies may administer retiree billing in-house or may engage a billing administrator.
- Agencies can continue to participate in CalPERS pension and have health coverage elsewhere. If your agency offers retiree health coverage through ACWA JPIA, the retirees would still have their pensions through CalPERS.
- Retiree health coverage with JPIA is not driven by CalPERS pension or health eligibility rules. Being eligible for a CalPERS pension does not automatically confer retiree health coverage through JPIA. Whether a terminating employee draws their CalPERS pension has no bearing on eligibility for JPIA retiree health benefits. Eligibility is driven solely by age and years of service at your agency.
- Upon termination of health coverage, CalPERS does not allow anyone to remain with CalPERS coverage including COBRAs and retirees, unless those retirees are receiving their retiree coverage due to service with another agency (rare).
- Agencies must follow JPIA Retiree Health Policy requirements to join JPIA medical. Please note:
  - A. Agencies are **not** required to offer retiree health benefits.
  - B. JPIA minimum age for retirement is 50 years of age **and** minimum service of five years at the agency, **not** five years as a CalPERS participant.
    - i. Agencies may require a higher age or years of service to qualify for retiree health benefits and most do.
    - ii. An agency's retiree health policy may end retiree health coverage at a certain age or number of years of coverage, such as age 65 or after ten years.
  - C. JPIA does not allow disability retirements unless the employee already meets the agency's retiree health coverage requirements, and those requirements meet JPIA's minimum thresholds.
    - i. For example, if an agency's minimum age for retirement is 60 years and minimum service required is ten years, and an employee becomes disabled at 55 with ten years of service, they would not be eligible for retiree health coverage through JPIA. They should be offered COBRA instead.



**CERTIFIED  
COPY**

**RESOLUTION ELECTING TO BE SUBJECT TO PUBLIC EMPLOYEES' MEDICAL AND HOSPITAL CARE ACT AND FIXING THE EMPLOYER'S CONTRIBUTION FOR EMPLOYEES AND THE EMPLOYER'S CONTRIBUTION FOR ANNUITANTS AT DIFFERENT AMOUNTS**

**WHEREAS,** Government Code Section 22850 provides the benefits of the Public Employees' Medical and Hospital Care Act to employees and annuitants of local agencies contracting with the Public Employees' Retirement System on proper application by a local agency; and

**WHEREAS,** Government Code Section 22857 provides that a contracting agency may fix the amount of the employer's contribution for employees and the employer's contribution for annuitants at different amounts provided that the monthly contribution for annuitants shall be annually increased by an amount not less than 5 percent of the monthly contribution for employees, until such time as the amounts are equal; and

**WHEREAS,** **Beaumont Cherry Valley Water District**, hereinafter referred to as Public Agency is a local agency contracting with the Public Employees' Retirement System; and

**WHEREAS,** The Public Agency desires to obtain for its employees and annuitants the benefit of the Act and to accept the liabilities and obligations of an employer under the Act and Regulations; now, therefore, be it

**RESOLVED,** That the Public Agency elect, and it does hereby elect, to be subject to the provisions of the Act; and be it further

**RESOLVED,** That the employer's contribution for each employee shall be the amount necessary to pay the full cost of his enrollment, including the enrollment of his family members in a health benefits plan up to a maximum of **\$474.00** per month; and be it further;

**RESOLVED,** That the employer's contribution for each annuitant shall be the amount necessary to pay the cost of his enrollment, including the enrollment of his family members, in a health benefits plan up to a maximum of **(see calculation sheet)** per month; and be it further

**RESOLVED,** That the employer's contribution for each annuitant shall be increased annually by 5 percent of the monthly contribution for employees, until such time as the contributions are equal;

And that the contributions for employees and annuitants shall be in addition to those amounts contributed by the Public Agency for administrative fees and to the Contingency Reserve Fund; and be it further

**RESOLVED,** That the executive body appoint and direct, and does hereby appoint and direct, C.J. Butcher to file with the Board of Administration of the Public Employees' Retirement System a verified copy of this Resolution, and to perform on behalf of said Public Agency all functions required of it under the Act and Regulations of the Board of Administration; and be it further

**RESOLVED,** That coverage under the Act be effective on **May 1, 2002.**

Adopted at a regular/special meeting of the Board of Directors of the BCVWD  
at 7.00pm this 13<sup>th</sup> day of August 2003.

Signed:   
Gerald H. Brey  
President of the Board of Directors of the  
Beaumont Cherry Valley Water District

Attest:   
C.J. Butcher  
Secretary of the Board of Directors of the  
Beaumont Cherry Valley Water District

**RESOLUTION 99-7**

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE  
BEAUMONT-CHERRY VALLEY WATER DISTRICT  
ELECTING TO BE SUBJECT TO THE PUBLIC EMPLOYEES' MEDICAL  
AND HOSPITAL CARE ACT  
FIXING THE EMPLOYER'S CONTRIBUTION FOR EMPLOYEES  
AND ANNUITANTS AT DIFFERENT AMOUNTS**

**WHEREAS,** (1) Government Code Section 22850 extends the benefits of the Public Employees' Medical and Hospital Care Act to employees of contracting agencies on proper application by an agency; and

**WHEREAS,** (2) Government Code Section 22754 (g) defines any special District as a contracting agency; and

**WHEREAS,** (3) Government Code Section 22857 provides that a contracting agency may fix the amount of the employer's contribution for employees and the employer's contribution for retired employees and survivors at different amounts provided that the monthly contribution for retired employees and survivors shall be annually increased by an amount not less than 5 percent of the monthly contribution for employees, until such time as the amounts are equal; and

**WHEREAS,** (4) A Special District is hereby defined as a non-profit, self-governed public agency within the State of California, and comprised solely of public employees performing a governmental rather than proprietary function, and

**WHEREAS,** (5) Beaumont-Cherry Valley Water District hereinafter referred to as Special District is an entity meeting the above definition; and

**WHEREAS,** (6) The Special District desires to obtain for its active and retired employees and survivors the benefit of the Act and to accept the liabilities and obligations of an employer under the Act and Regulations;

**NOW, THEREFORE, BE IT RESOLVED,**

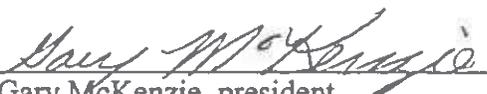
- (a) That the Special District elect, and it does hereby elect, to be subject to the provisions of the Act; and be it further resolved,
- (b) That the employer's contribution for each employee shall be the amount necessary to pay the full cost of his enrollment, including the enrollment of his family members in a health benefits plan up to a maximum of \$474 per month; and be it further resolved,

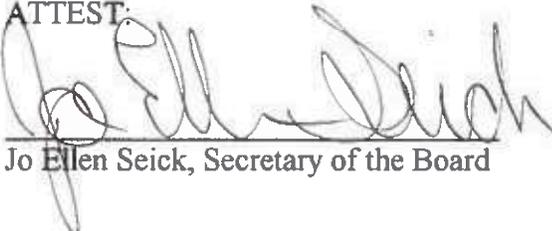
- (c) That the employer's contribution for each retired employee or survivor shall be the amount necessary to pay the cost of his enrollment, including the enrollment of his family members, in a health benefits plan up to a maximum of \$1 per month; and be it further resolved,
- (d) That the employer's contribution for each retired employee or survivor shall be increased annually by 5% of the monthly contribution for employees, until such time as the contributions are equal;

And that the contributions for active and retired employees and survivors shall be in addition to those amounts contributed by the Special District for administrative fees and to the contingency Reserve Funds; and be it further resolved,

- (e) That the executive body appoint and direct, and does hereby appoint and direct, the Assistant Manager to file with the Board of Administration of the Public Employees' Retirement System a verified copy of this Resolution, and to perform on behalf of said Special District all functions required of it under the Act and Regulations of the Board of Administration; and be it further resolved,
- (f) That the officer appointed pursuant to section (e) will advise the Board of Administration of the Public Employees' Retirement System if the District ceases to be a public agency as defined in section (4) above; and be it further resolved,
- (g) That coverage under the Act be effective on June 1, 1999.

**ADOPTED** at a Special Meeting of the Board of Directors of the Beaumont-Cherry Valley Water District, at Beaumont, CA this 31<sup>st</sup> day of March 1999.

  
 Gary McKenzie, president

ATTEST:  
  
 Jo Ellen Seick, Secretary of the Board

FILED: APRIL 22, 1999  
 EFFECTIVE DATE: JUNE 1, 1999

# BEAUMONT-CHERRY VALLEY WATER DISTRICT

## DIRECTORS

Gary McKenzie

President

Dave Andrews

Vice President

William Hurlbirt

David L. Sumner

Joseph Voigt

P.O. Box 2037

560 Magnolia Avenue

Beaumont, California 92223-2258

Telephone 909-845-9581

Fax 909-845-0159

## OFFICERS

Jo Ellen Seick

Secretary of the Board

Dave L. Sumner

Treasurer

J.C. Reichenberger

Parsons Engineering Science

Engineer

Jeffry Ferre

General Counsel

May 19, 1999

Ms. Rosie Jimenez  
CalPERS  
Administrative/Contract Unit  
P. O. Box 942714  
Sacramento CA 94229-2714

Dear Ms. Jimenez:

Enclosed please find District Resolution 99-8 regarding health benefit coverage for the District's elected members. Although the resolution was adopted the present elected officials do not wish to participate at this time. Donna Beaumont suggested the District proceed with filing the resolution with CalPERS in order to afford coverage to elected members when they should choose to participate.

Thank you for your assistance throughout our decision-making process. Please feel free to contact me if you have any questions.

Sincerely,



Jo Ellen Seick  
Finance/Business Manager

Enclosure

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**RESOLUTION 99-8**

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE  
BEAUMONT-CHERRY VALLEY WATER DISTRICT  
ELECTING TO BE SUBJECT TO THE PUBLIC EMPLOYEES'  
MEDICAL AND HOSPITAL CARE ACT ONLY WITH RESPECT TO  
ELECTED MEMBERS OF THE DISTRICT  
FIXING  
THE DISTRICT'S CONTRIBUTION FOR ELECTED MEMBERS  
AND THE EMPLOYER'S CONTRIBUTION FOR ANNUITANTS  
AT DIFFERENT AMOUNTS**

**WHEREAS**, (1) The Public Employees' Medical and Hospital Care Act provides that a contracting agency may elect, upon proper application, to participate under the Act with respect to its elected members of its Board of Directors ("Board Members"); and

**WHEREAS**, (2) Government Code Section 22754 (g) defines any Special District as a contracting agency; and

**WHEREAS**, (3) Government Code Section 22857 provides that a contracting agency may fix the amount of the employer's contribution for elected Board Members and the employer's contribution for retired elected Board Members and survivors at different amounts provided that the monthly contribution for retired elected Board Members and survivors shall be annually increased by an amount not less than 5 percent of the monthly contribution for elected Board Members, until such time as the amounts are equal; and

**WHEREAS**, (4) A Special District is hereby defined as a non-profit, self-governed public agency within the State of California, and comprised solely of public employees performing a governmental rather than proprietary function, and

**WHEREAS**, (5) Beaumont-Cherry Valley Water District hereinafter referred to as Special District is an entity meeting the above definition; and

**WHEREAS**, (6) The Special District desires to obtain for the members of the Board of Directors who are active and retired elected Board Members of the agency, the benefit of the Act and to accept the liabilities and obligations of an employer under the Act and Regulations; and

**WHEREAS**, (7) Government Code Section 53208.5(b) prohibits any elective member of a legislative body whose service first commences on and after January 1, 1995, from receiving health and welfare benefits greater than the most generous schedule of benefits being received by any category of non-safety employees; and

**WHEREAS**, (8) Government Code Section 53201(c) (2) prohibits a local agency that did not provide benefits to former elective members of a legislative body before January 1, 1994, from providing benefits after January 1, 1994, unless the members participate on a self-pay basis; and

**WHEREAS**, (9) Government Code Section 53201(c)(1) provides that a legislative body that provided benefits to former elected Board Members shall not provide benefits to any person first elected to a term of office that begins on or after January 1, 1995, unless the members participate on a self-pay basis or was fully vested prior to January 1, 1995.

**NOW THEREFORE BE IT RESOLVED,**

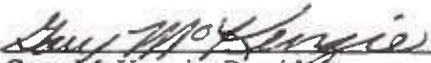
- (a) That the Special District elect, and it does hereby elect, to be subject to the provisions of the Act; and be it further resolved
- (b) That the employer's contribution for each elected Board Member shall be the amount necessary to pay the full cost of their enrollment, including the enrollment of their family members in a health benefits plan up to a maximum of \$16 per month; and be it further resolved
- (c) That the employer's contribution for each retired elected Board Member or survivor shall be the amount necessary to pay the cost of their enrollment, including the enrollment of their family members, in a health benefits plan up to a maximum of \$1 per month; and be it further resolved
- (d) That the employer's contribution for each retired elected Board Member or survivor shall be increased annually by 5% of the monthly contribution for elected Board Members, until such time as the contributions are equal;

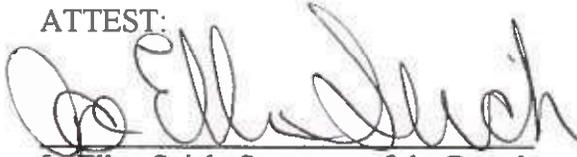
And that the contributions for active and retired elected Board Members and survivors shall be in addition to those amounts contributed by the Special District for administrative fees and to the contingency Reserve Funds; and be it further resolved,

- (e) That the executive body appoint and direct, and does hereby appoint and direct, the Assistant Manager to file with the Board of Administration of the Public Employees' Retirement System a verified copy of this Resolution, and to perform on behalf of said Special District all functions required of it under the Act and Regulations of the Board of Administration; and be it further resolved
- (f) That coverage under the Act be effective on July 1, 1999.

**ADOPTED** at a Special meeting of the Board of Directors of the Beaumont-Cherry Valley Water District, at Beaumont, California, this 28<sup>th</sup> day of April 1999.

ATTEST:

  
Gary McKenzie, President

  
Jo Ellen Seick, Secretary of the Board

EFFECTIVE DATE: 7-1-99

APPROVED: 