

**RESOLUTION NO.**  
**ELECTING TO BE SUBJECT TO THE PUBLIC EMPLOYEES' MEDICAL AND HOSPITAL CARE ACT**  
**AT AN EQUAL AMOUNT FOR EMPLOYEES AND ANNUITANTS**  
**WITH RESPECT TO A RECOGNIZED EMPLOYEE ORGANIZATION**  
**NON-PERS ELECTED DEPARTMENT HEADS**

- WHEREAS, (1) A contracting agency meeting the eligibility requirements set forth in Government Code Section 22920, may obtain health benefit plan(s), as defined under Government Code Section 22777, by submitting a resolution to the Board of Administration of the California Public Employees' Retirement System (the "Board"), and upon approval of such resolution by the Board, become subject to the Public Employees' Medical and Hospital Care Act (the "Act"); and
- WHEREAS, (2) **County of Shasta** is a contracting agency eligible to be subject to the Act under Government Code Section 22920; and
- WHEREAS, (3) Government Code Section 22892(a) provides that a contracting agency subject to Act shall fix the amount of the employer contribution by resolution; and
- WHEREAS, (4) Government Code Section 22892(b) provides that the employer contribution shall be an equal amount for both employees and annuitants, but may not be less than the amount prescribed by Section 22892(b) of the Act; and
- WHEREAS, (5) **County of Shasta** desires to obtain for its employees and annuitants who are members of **Non-PERS Elected Department Heads** the benefit of the Act and to accept the liabilities and obligations of an employer under the Act; now, therefore, be it
- RESOLVED, (a) **County of Shasta** elects to be subject to the provisions of the Act; and be it further
- RESOLVED, (b) That the employer contribution for each employee or annuitant shall be the amount necessary to pay the full cost of his/her enrollment, including the enrollment of family members, in a health benefits plan up to a maximum of **the PEMHCA Minimum** per month, plus administrative fees and Contingency Reserve Fund assessments; and be it further
- RESOLVED, (c) **County of Shasta** has fully complied with any and all applicable provisions of Government Code Section 7507 in electing the benefits set forth above; and be it further
- RESOLVED, (d) That the participation of the employees and annuitants of **County of Shasta** shall be subject to determination of its status as an "agency or instrumentality of the state or political subdivision of a State" that is eligible to participate in a governmental plan within the meaning of Section 414(d) of the Internal Revenue Code, upon publication of final Regulations pursuant to such Section. If it is determined that **County of Shasta** would not qualify as an agency or instrumentality of the state or political subdivision of a State under such final Regulations, CalPERS may be obligated, and reserves the right to terminate the health coverage of all participants of the employer.

- RESOLVED, (e) That the executive body appoint and direct, and it does hereby appoint and direct, Angela Davis, Director of Support Services to file with the Board a verified copy of this resolution, and to perform on behalf of **County of Shasta** all functions required of it under the Act; and be it further
- RESOLVED, (f) That coverage under the Act be effective on March 1, 2018.

Adopted at a regular meeting of the County of Shasta Board of Supervisors at Redding, this 30th day of January, 2018.

Signed: \_\_\_\_\_  
Les Baugh, Chairman  
Board of Supervisors  
County of Shasta  
State of California

Attest: \_\_\_\_\_  
Lawrence G. Lees  
Clerk of the Board Supervisors

## **INSTRUCTIONS**

This resolution form is the approved form designated by the California Public Employees' Retirement System (CalPERS). It should be used by a contracting agency for the purpose of electing to be subject to Public Employees' Medical and Hospital Care Act (PEMHCA) and to fix the monthly employer health contribution for employees and annuitants in accordance with Government Code Section 22892.

If the resolution is filed **on or before the tenth day of any month, it will be effective on the first of the following month** (date stamped as received by CalPERS; See address below).

WHEREAS, (2) should be completed with full name of the contracting agency.

WHEREAS, (5) should be completed with full name of the contracting agency and recognized employee organization.

RESOLVED, (a) should be completed with full name of the contracting agency.

RESOLVED, (b) should be completed to specify medical groups and the amount of the employer contribution toward the cost of enrollment for active employees and annuitants. The amount specified must be an amount equal to or greater than that prescribed by Section 22892(b).

Commencing January 1, 2009, the employer contribution shall be adjusted annually by the Board to reflect any change in the medical component of the Consumer Price Index, and shall be rounded to the nearest dollar.

RESOLVED, (c) should be completed with full name of the contracting agency.

RESOLVED, (d) should be completed with full name of the contracting agency.

RESOLVED, (e) requests the position title of the individual who handles the PEMHCA resolution for the contracting agency.

RESOLVED, (e) should be completed with full name of the contracting agency.

RESOLVED, (f) should be completed with the date the coverage is to become effective.

**For resolution processing, deliver to the following:**

### **Overnight Mail Service**

California Public Employees' Retirement System  
Health Resolution & Compliance Services, HAMD  
400 Q Street  
Sacramento, CA 95811

### **Regular Mail**

California Public Employees' Retirement System  
Health Resolution & Compliance Services, HAMD  
PO BOX 942714  
Sacramento, CA 94229-2714

The certification shown following the resolution is to be completed by those individuals authorized to sign for the contracting agency in legal actions and is to include the name of the executive body; i.e. Board of Directors, Board of Trustees, etc., the location and the date of signing.