



Live Well. Health Matters.

POLICY TITLE: HEALTH BENEFITS FOR DISTRICT BOARD MEMBERS
POLICY NUMBER: 2230

COMMITTEE APPROVAL DATE: 06/13/2023
BOARD APPROVAL DATE: 07/26/2023

WRITTEN/REVISED BY: HUMAN RESOURCES
SUPERSEDES: 11/20/2019

POLICY:

2230 It is the policy of Beach Cities Health District (“District”) to communicate benefit programs that are available to Board Members. If no coverage is elected, no payment in lieu of health coverage will be made to the Board Member. This policy is also referenced in the District’s Board Member Orientation Handbook.

SCOPE:

2230.1 This policy applies to all publicly elected or appointed members of the District Board.

ELIGIBILITY:

2230.2 Eligibility for benefits is dependent upon a member being elected, re-elected or appointed to the District’s Board of Directors, annual open enrollment period or the occurrence of a qualifying event. Benefits discontinue upon termination from the Board of Directors.

CONTENTS:

2230.3 Details and information on eligible health benefits programs are provided to all Board Members upon joining the Board. Copies are also kept on file with Human Resources and will be made available at the Board Member’s request.

2230.3.1 Medical Benefit Coverage

2230.3.1.1 The District is obligated to administer medical benefits in accordance with applicable Federal and State laws. This includes eligibility guidelines established by the California Public Employees’ Retirement System (CalPERS).

2230.3.1.2 Coverage for these medical benefits is optional and if opted, begins on the first day of the month following the date of election or appointment.

2230.3.1.3 Board members can also elect to participate in the District’s medical plan during the annual open enrollment period or if a “qualifying event” occurs. A qualifying life event is an event in a Board member’s life that makes them eligible for a special enrollment period. Coverage will begin on the first day of the month following the qualifying event or January 1st of the following year if selected during the open enrollment period.

2230.3.1.4 The District offers to pay a portion of the health insurance premium for the Board Member's participation in the District's group health insurance plan at the same rate provided to its employees under the qualified Cafeteria Plan adjusted annually.

2230.3.1.5 The District payment cannot exceed cost of the health insurance premium,

2230.3.1.6 The District payment cannot exceed any benefit provided its employees.

2230.3.1.7 The elected and appointed official must formally (in writing) authorize the District to make the payment for the health insurance premium on their behalf.

2230.3.1.8 The elected and appointed official must formally (in writing) authorize the District to deduct directly from their bank account or via check to cover any shortfall of portion of the health insurance premium not paid by the District.

2230.3.1.9 The elected and appointed official must formally (in writing) agree to cover any shortfall of portion of the health insurance premium not covered by their compensation and not paid by the District.

2230.3.1.10 In the event that a Board member does not seek reelection or get re-elected to the District's Board of Directors, they will lose coverage under the District. They will be eligible at their own expense to continue benefits via Consolidated Omnibus Budget Reconciliation Act (COBRA) for the time allowed by applicable laws.

2230.3.2 Health & Fitness Benefit

2230.3.2.1 The District encourages all to maintain a healthy lifestyle for themselves and their families and offers complementary membership to the Center for Health and Fitness (CHF) and AdventurePlex to Board Members.

2230.3.2.2 Upon termination from the Board of Directors, the Board Member may choose to enroll as a paying member to CHF and/or AdventurePlex.

EXCEPTIONS:

2230.4 The Chief Executive Officer must review and approve exceptions to this policy.