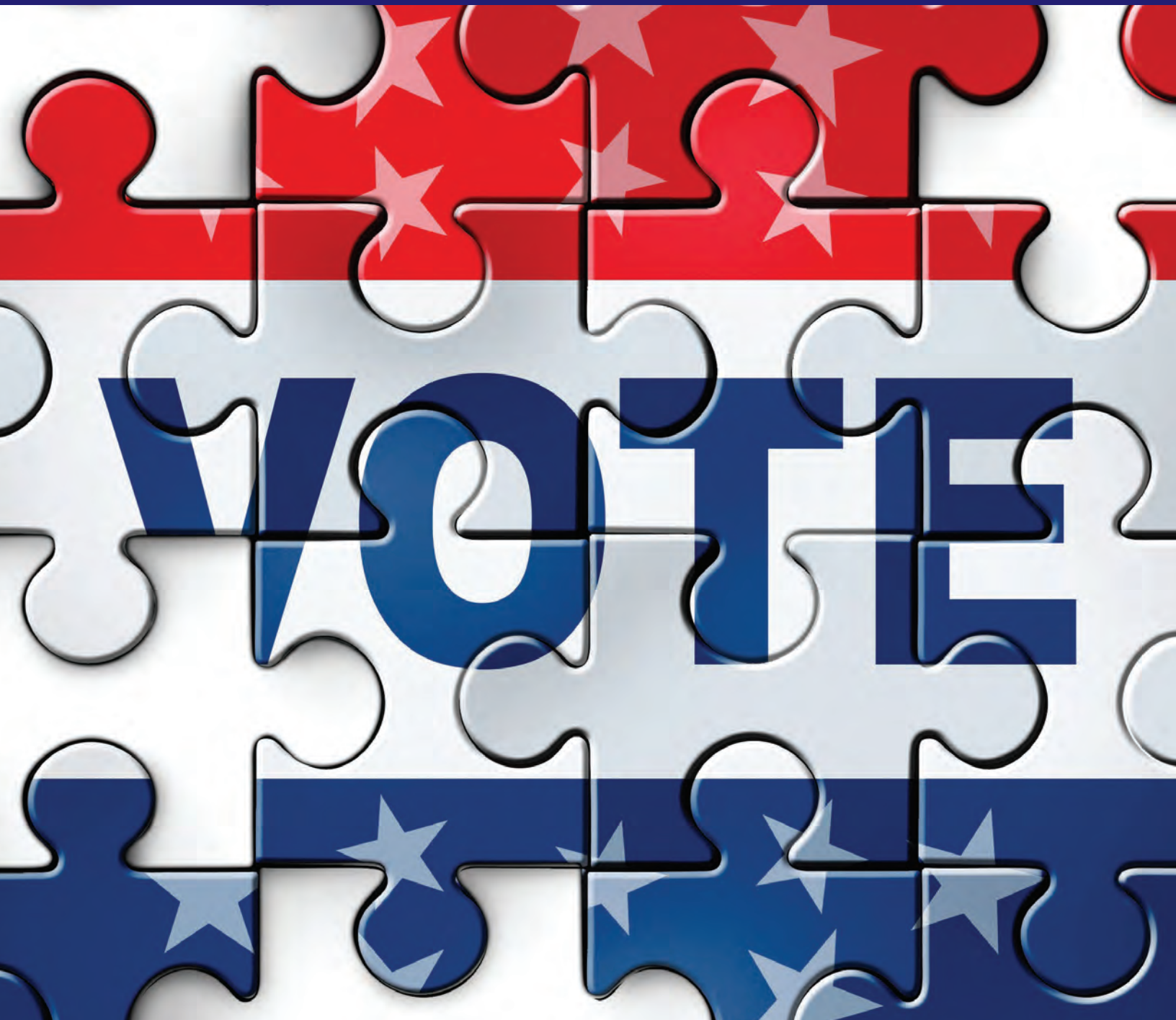




RETIRED PUBLIC EMPLOYEES' ASSOCIATION OF CALIFORNIA



ELECTION DAY IS TUESDAY, NOVEMBER 8

**PRESIDENT'S
REPORT**
Page 2

**RPEA HEALTH
BENEFITS
UPDATE**
Page 4-5

**RPEA
LEGISLATIVE
UPDATE**
Page 8

**RPEA DELEGATES
VOTE IN FAVOR OF MEMBERSHIP
DUES INCREASE**
Page 11

President's Report



George Linn
RPEA PRESIDENT



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RPEA NEWSLETTER

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A Message From President George Linn

Recently Governor Brown signed Assembly Bill 241 into law. This bill was developed and sponsored by RPEA as a means to assist public employee retirees should their former employer go into bankruptcy. While this bill was not controversial, RPEA, together with our lobbyists, Aaron Read and Pat Moran of Aaron Read & Associates, spent many hours explaining the implications to various individuals and groups that monitor legislation. While RPEA did not anticipate objection to the bill, there were many who had questions.

RPEA recently worked with the Association of Retired Employees of the City of Stockton (ARECOS) and became the holder of the funds for certain retirees.

This, together with AB 241, forms a good combination of plans to assist retirees that need to have representation when a city/state/special district seeks protection under bankruptcy and threatens to reduce pensions and healthcare.

This can be a membership recruiting tool as well. Tell your non-member friends that RPEA takes action to protect pensions and health care for retirees.

On another topic, I want to thank our General Assembly Planning Committee and Headquarters Office staff for the work they did to bring our Assembly to a successful conclusion. During our budget sessions in October 2015, an estimate for GA expense was developed based on prior years' meetings. I am pleased to say that for the first time GA expenses were under budget even though the budget was drastically cut compared to prior GA's.

As usual, I am going to return to the issue of membership. How do I say this? *We are on a roll!* For the third month in a row, membership numbers are up. This is partly due to the efforts of our endorsement of AMBIA. But it is also

due to our chapters and members continuing to place an emphasis on membership and membership drives. I understand that in some communities it is difficult to recruit new members. But with the tools that the Headquarters Office has provided, the task has proven possible. In early November, RPEA will again sponsor a booth at the statewide California Public Employers Labor Relations Association (CALPELRA) meeting. This has become an annual project where RPEA has an opportunity to meet and discuss our organization and RPEA benefits with Human Resources and other executives from public agencies around the state. This year we will be providing a listing of those who attended. The goal is to develop a process for chapter leaders to do a follow-up with the attendees by phone or in person. We need

"This bill is evidence that RPEA is on the forefront of the fight to protect retiree pensions and health benefits."

to build a relationship with these HR professionals to encourage them to tell those retiring about RPEA. This will be a path to having those just retiring join our organization.

During the next month I will be reviewing RPEA's committee structure with our committee chairs. Most of the committees that assist with the operations of RPEA are dictated by the Bylaws and Policy File. My goal is to encourage members to volunteer to join committees and become involved in the operation of RPEA. If you are interested in joining a committee, please contact our Headquarters Office and give them the information.

At the CalPERS Board and Committee meetings in September, the Board changed some procedures. One procedure was the change in the amount of time that members are permitted to use when addressing the Board. We are now limited to three minutes. I spoke against this; however, the Board enacted the procedure. Other important items on the CalPERS Board agenda included reviewing the risk analysis and projected investment earnings. Both I and RPEA Vice President, Al Darby, will be monitoring these issues as the CalPERS Board continues their review of their policies in this area.

Vice President's Op/Ed



By Al Darby, Vice President

A fellow CalPERS retiree recently mentioned that he thought his current benefits were pretty good, he didn't see a need for improvements and he didn't see a need to join a retiree advocacy association. I replied to him that there needed to be an improvement in our death benefit and that the COLA calculation needed to be adjusted to reflect cost-of-living issues that seniors experience which differ from those of the population in general. For example, medical and drug costs are a much larger factor for seniors than for the general population. Food, rent and other cost increases affect seniors more because their incomes are fixed, and current COLA calculation formulas weight these factors differently. Urban areas in California are facing housing (rental) costs that are double the national average. It is clear that using any COLA calculation that doesn't isolate California from the general U.S. COLA formula is inaccurate. There are COLA formulas that more accurately reflect conditions in urban California. My friend finally agreed with RPEA retiree advocacy.

As most of you know by now, Governor Brown signed the RPEA bill AB 241 (Gordon) which now requires by statute that any bankrupt public agency must provide a list of retirees and their addresses to any non-profit association the retirees chose to form to defend their rights in bankruptcy court. This increases the chances of fairer treatment of retirees by a bankruptcy court. In some cases RPEA has assisted retiree groups that are threatened with the loss of retiree benefits due to city council or board of supervisors actions or bankruptcies.

In addition to the kinds of actions in the above paragraphs, we monitor and take positions and make public comments on many different issues/actions in CalPERS investment, pension and health benefits committee meetings. We sometimes testify in state legislative committee hearings on retiree and senior issues. We continue to attend Californians for Retirement Security (CRS) meetings to stay abreast of any local, statewide or national legislation or initiatives that could positively or negatively affect public retirees. We continue to support federal legislation that could benefit retirees caught in the Windfall Elimination Provision (WEP) trap.

On a separate issue, RPEA finds itself in complete disagreement with a recent appellate court decision in

which the judge stated that pensions did not have to be determined by a formula but by a "reasonableness" standard. This flies in the face of the "California Rule" in which several California Supreme Court decisions have held that what you are promised at the time of hire are the benefits to must receive at retirement and any change to a benefit while employed must be a change that has the same or better value than the benefit that is changed or eliminated. It is absurd to suggest that "reasonable" be the standard to calculate a pension. Obviously, salary, length of service, nature of the job and age must be factors in determining a pension amount. We believe this sophomoric decision by this judge will be overturned at the California Supreme Court level.

"It is absurd to suggest that 'reasonable' be the standard to calculate a pension."

Unfortunately, newspapers around the state have seized this judicial decision as a validation of their claim that public pensions are too generous and the pension funds are underfunded and this leads to massive state and local government debt. The only way this imagined debt becomes reality is if all members of CalPERS were retired, the financial markets fail, real value to near zero and no one is working to pay taxes and employers do not pay their obligated contribution to the CalPERS. This is a very unlikely situation. During the 1930's depression, 75% of the workforce was still working because certain basic functions of life continue regardless of whether an economic depression is in place or not. The recession of 1980-1983 was a severe one as was the 2008-2012 recession. Unemployment was high (around 10%), but cushions in the economy (unemployment insurance, welfare and charities) helped ease the pain, and the economy recovered in each of these recessions.

The doomsday scenarios that are often floated by anti-public pension forces fail to mention that unfunded liabilities were identified before the 2008/2009 financial market crash and the "sky did not fall" on these pension funds during that terrible period. The pension funds lost a lot of value, but as the economy recovered so did the pension funds, and the pension systems never had to ask the legislature for a bailout like Wall Street had to have. The city bankruptcies over the past eight years have been related to mismanagement not pensions.

RPEA Health Benefits Update



By Joanne Hollender

Medicare Open Enrollment Period

Each year members have an opportunity to make changes to their Medicare Advantage or Medicare prescription drug coverage for the following year. ***The Medicare Open Enrollment Period starts on October 15 through December 7, 2016 for an effective date of January 1, 2017.***

You can make changes to your Medicare Advantage or Medicare prescription drug coverage for the following year. Members may:

- Change from a Medicare Advantage Plan back to Original Medicare.
- Change from Original Medicare to a Medicare Advantage Plan.
- Switch from one Medicare Advantage Plan to another Medicare Advantage Plan.
- Switch from a Medicare Advantage Plan that does not offer drug coverage to a Medicare Advantage Plan that offers drug coverage.
- Switch from a Medicare Advantage Plan that offers drug coverage to a Medicare Advantage Plan that does not offer drug coverage.
- Join a Medicare Prescription Drug Plan.
- Switch from one Medicare Prescription Drug Plan to another Medicare Prescription Drug Plan.
- Drop a Medicare prescription drug coverage completely.

For information about signing up for Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance), visit Medicare.gov/publications to view the booklet, ***Enrolling in Medicare Part A & Part B***. You can also call the Medicare helpline 24 hours a day, seven days a week at 1-800-MEDICARE (1-800- 633-4227), TTY (877) 486-2048. Tip: Say, "Agent," at anytime to talk to a customer service representative.

People in a Medicare health or prescription drug plan should always review the materials their plans send them, like the "Evidence of Coverage" (EOC) and "Annual Notice of Change" (ANOC). If their plans are changing, they should make sure their plans will still meet their needs for the following year. If they are satisfied that their current plans will meet their needs for next year and it is still being offered,

they do not need to do anything.

The following information covers enrollment in Medicare Advantage Plans (Part C) and Medicare Prescription Drug Plans (Part D), including who can sign up and when you can sign up.

There are specific times when you can sign up for a Medicare Advantage Plan (HMO or PPO), Medicare prescription drug coverage, or make changes to coverage you already have:

- During your Initial Enrollment Period when you first become eligible for Medicare or when you turn 65. (Note: The 7-month period that starts 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65. If you sign up for a Medicare Advantage Plan during this time, you can drop that plan at any time during the next 12 months and go back to Original Medicare.)
- During certain enrollment periods that happen each year.
- Under circumstances that qualify you for a Special Enrollment Period (SEP):
 - You move.
 - You are eligible for Medicaid (MediCal in California).
 - You qualify for Extra Help with Medicare prescription drug costs.
 - You're getting care in an institution, such as a skilled nursing facility or long term care hospital.
 - You want to switch to a plan with a 5-star overall quality rating. Quality ratings are available on Medicare.gov.

Note about joining a Medicare Advantage Plan: You must be enrolled in Medicare Part A and Part B to join a Medicare Advantage Plan. In most cases, if you have End-Stage Renal Disease (ESRD), you cannot join a Medicare Advantage Plan. Note: Medicare beneficiaries are not eligible to participate in health plans under the Affordable Care Act (ACA).

New CalPERS Pharmacy Benefits Manager in 2017

In May 2016, the CalPERS Board selected OptumRx as its new Pharmacy Benefits Manager (PBM) for the next five years. OptumRX is replacing CVS Caremark effective January 1, 2017. OptumRX will administer prescription drug benefits for nearly 486,000 members and their dependents enrolled in the following: PERS Select, PERS Choice, and PERS Care PPO plans (Basic and Medicare Supplement); Anthem Blue Cross Traditional & Select HMOs; Anthem Blue Cross

RPEA Health Benefits Update

Monterey & Del Norte EPOs; Health Net SmartCare & Salud y Mas; Sharp Health Plan; and, UnitedHealthcare Signature Value Alliance. Blue Shield Access+, UnitedHealthcare Group Medicare Advantage PPO and Kaiser Permanente health plans are not affected by this change.

CalPERS and OptumRx is making every effort to ensure there is no disruption of prescription orders. OptumRx pharmacy network includes all major chains and access to more than 65,000 retail pharmacies Nationwide. Most prescriptions will automatically transfer to OptumRx from CVS/Caremark home delivery. Prescriptions for certain medications will not transfer. Examples include controlled substances and expired prescriptions. In these cases, members will need a new prescription from their doctor.

In late September, OptumRx mailed transition materials to members, which included the following: **PBM Transition Mailer** and **PBM Transition FAQs**. In December, members will receive: a **New member ID card** with OptumRx information and a **Welcome Kit**. (The OptumRX online FAQs contain very helpful information.) Also in December 2016, the health plans will send new ID cards containing OptumRx information to Basic Members. Medicare/Part D members will receive two ID cards — one for medical services from the health plan and another for prescription medications from OptumRx. If you do not receive an ID card by January 1, 2017, please contact your health plan or OptumRx as appropriate.

Additional information regarding the new pharmacy benefits including Formulary, is available online at optumrx.com/calpers or call OptumRx at 1-855-505-8110 (Basic members) or 1-855-505-8106 (Medicare Part D members).

OptumRx Select90 Saver Program

The 90-day supply of medication at retail prices was originally advocated by RPEA and CalPERS implemented this concept several years ago. OptumRX continues this cost-savings measure. The OptumRx **Select90 Saver** program allows Basic Members to get up to a three-month supply of medications from either mail order/home delivery by OptumRx or a Walgreens retail pharmacy. The pharmacy benefit covers two 30-day fills from a retail pharmacy. After two fills, you must choose to fill your prescription through home delivery by OptumRx or a Walgreens retail pharmacy or you will pay a higher copayment. Medicare Part D members can obtain a

90-day supply from any participating pharmacy, but you will pay a lower copayment if you choose to fill your prescription through home delivery by OptumRx or a Walgreens retail pharmacy.

Prescription Drug Price/Cost Increases

The prescription drug cost trend shows no signs of abating (e.g. Hepatitis C drug and EpiPen pricing). CalPERS continues to shed public light on the implications of problematic pricing practices and support policies, and other interventions to moderate this trend. Specialty products, "authorized" generics (to discourage competition), and many orphan drugs (used to treat other diseases) are driving up prescription costs. CalPERS needs to continue to consider effective ways to moderate the impacts of these increasing costs and continue to seek out efforts designed to lower overall prescription drug cost growth.

Increase in California State Retiree Employer Contributions

California Government Code section 22871 establishes the formula used to determine the contribution amount for state retirees toward their state employer health plans. It is based on the principle that the state's annual contribution for retirees will equal to 100% of the weighted average of the health plan premiums for the upcoming year in the "four health benefit plans with the largest state enrollment during the previous benefit year."

Calculations for the 2017 state contribution were affected by the fact that NetValue, one of the four largest plans for 2016, will not be offered in 2017. It was determined that NetValue could not be used in the calculation for the state employer contribution for 2017 and that the fifth largest enrollment, UnitedHealthcare, would replace it. The plans ultimately used in the calculation were Kaiser Permanente, Blue Shield Access+, UnitedHealthcare, and PERS Choice. The formula was presented to the CalPERS Board, which adopted the 2017 health plan rates in June 2016.

This loss of NetValue resulted in an unexpected increase for approximately 17% of some state retirees for 2017. Those affected will be retirees, who are not yet eligible for Medicare plans and are still enrolled in one of CalPERS' Basic health plans. For those experiencing an increase, the amount will vary depending on the health plan in which the retiree is enrolled, with a range of about \$27 to \$131 per month.

Legislative Update



By Aaron Read and Patrick Moran, RPEA Legislative Advocates

The 2015-16 legislative session has just adjourned. We wanted to take a moment to thank Jim Anderson, your Legislative Committee chairman, as well as the entire committee for all their hard work this session. Below is a recap of all the measures RPEA was

sponsoring, supporting or opposing this session:

SPONSOR

AB 241 (Gordon, D-Menlo Park) – We are happy to report that RPEA sponsored bill AB 241 was signed by Governor Brown.

As you recall, AB 241 (Gordon) requires, under certain conditions, a local public entity to provide the name and mailing address of each retired employee to an organization that is incorporated and qualified under specific state and federal laws for the purpose of representing retired public employees during a bankruptcy proceeding.

When the City of Stockton filed for bankruptcy, retirees from the city organized as a group in order to become a party to the bankruptcy. This group received approval as a labor organization under the Internal Revenue Service's Code 501(c)(5). They were then able to obtain donations and hire legal counsel to represent them in bankruptcy court.

The group then requested from the city, the names and addresses of the city's retirees so they could notify them of their intent to seek representation before the bankruptcy court. The city refused. As a result, notifying retirees of the organization's attempt to hire an attorney was made exponentially more difficult.

Normally the names and addresses of public employees are exempted from the California Public Records Act (Government Code Section 6250 et seq.); however, there is at least one exception contained in Section 6253.2(b), that allows the names, addresses, and telephone numbers of in-home health care workers to be provided to labor organizations for the purpose of organizing and representing these workers.

Other creditors, active employee organizations, and public agencies that have a claim in the bankruptcy proceedings do not have the issue of organizing and funding legal costs. Retirees do. Organizing retired workers to be represented in a bankruptcy proceeding by their former employer should be an equivalent exemption.

SUPPORT

AB 332 (Calderon, D-Whittier) – This bill would have established the Long Term Care Insurance Task Force within the Department of Insurance, chaired by the Insurance Commissioner or his or her designee, and composed of specified stakeholders and representatives of government agencies, to examine the components necessary to design and implement a statewide long-term care insurance program. The bill would require the task force to recommend options for establishing this program and to comment on their respective degrees of feasibility in a report submitted to the commissioner, the Governor, and the Legislature by July 1, 2017. **RPEA was in support.** Unfortunately, this measure was vetoed by the Governor on October 11, 2015. Below is a copy of his veto message:

I am returning Assembly Bill 332 without my signature. This bill would establish a nine-member task force to explore the design and implementation of a statewide long-term care insurance program. Since the federal government and a number of private organizations have undertaken essentially the same task, I don't think that this bill is necessary. Moreover, I'm hesitant to start down a path that may lead to a large and potentially costly new mandate.

AB 374 (Nazarian, D-Sherman Oaks) – This bill authorizes a request for an exception to a health care service plan's or health insurer's step therapy process for prescription drugs to be submitted in the same manner as a request for prior authorization for prescription drugs, and

would require the plan or insurer to treat, and respond to, the request in the same manner as a request for prior authorization for prescription drugs. AB 374 was signed by the Governor on October 8, 2015.

RPEA was in support.

AB 533 (Bonta, D-Alameda) – This bill would have required a health care service plan contract or health insurance policy issued, amended, or renewed on or after July 1, 2016, to provide that if an enrollee or insured receives covered services from a contracting health facility, at which, or as a result of which, the enrollee or insured receives covered services provided by a non-contracting individual health professional, the enrollee or insured would be required to pay the non-contracting individual health professional only the same cost sharing required if the services were provided by a contracting individual health professional. Unfortunately, the Senate made several amendments to the bill that the Assembly could not agree upon. Therefore, it died in the Assembly once it came back for concurrence. **RPEA was in support.**

AB 1584 (Brown, D-San Bernardino) – This bill would reinstate, as of January 1, 2018, the Cost-Of-Living Adjustment for the State Supplementary Program for the Aged, Blind and Disabled. As of this writing, the bill is still awaiting action by the Governor. Typically, the Governor has 12 days to sign or veto legislation. If no action is taken, the bill automatically becomes law without his signature. There is an exception however. Since an abundance of bills are sent to the Governor during the final weeks of session, he is granted an extension and allowed 30 days to take action. That said, the Governor has until midnight on September 30th to sign or veto this bill. If no action is taken, it will automatically become law. **RPEA is in support.**

AB 1667 (Dodd, D-Napa) – This bill would have included "home care aide domestic referral agencies" as a new licensure category in the Home Care Services Consumer Protection Act overseen by the Department of Social Services. Unfortunately, due to an exorbitant fiscal impact associated with the bill, it died in the Assembly Appropriations Committee. **RPEA was in support.**

AB 1718 (Kim, R-Fullerton) – This bill would have required the court to sentence a defendant convicted of felony financial abuse of an elder or dependent adult exceeding \$950 to state prison rather than county jail. Unfortunately, California is still under a court order to reduce the state's prison population. Therefore, the bill died in the Assembly Public Safety Committee. **RPEA was in support.**

AB 1878 (Jones-Sawyer, D-Los Angeles) – The Public Employees' Retirement Law requires that, upon the death of any state or school member after retirement and while receiving a retirement allowance, the sum of \$2,000 be paid to the member's designated beneficiary, as specified. This bill would authorize the Board of Administration of the Public Employees' Retirement System, beginning on or after January 1, 2017, to adjust the death benefit amount following each actuarial valuation to reflect changes in the All Urban California Consumer Price Index, as specified. As of this writing, AB 1878 is currently awaiting action by the Governor. **RPEA is in support.**

AB 1952 (Gordon, D-Menlo Park) – Current law establishes the Senior Citizens and Disabled Citizens Property Tax Postponement Fund and continuously appropriates moneys in the fund to the Controller for specified purposes, including disbursements relating to the postponement of property taxes pursuant to the Property Tax Postponement Law. Current law requires the Controller to, on June 30, 2018, and on June 30 each year thereafter, transfer any moneys in the fund in excess of \$15,000,000 to the General Fund. This bill would have eliminated the requirement that the Controller transfer any moneys in the fund in excess of \$15,000,000 to the General Fund. **RPEA was in support.** Unfortunately, AB 1952 was vetoed by the Governor. Below is a copy of his veto message:

To the Members of the California State Assembly: I am returning Assembly Bill 1952 without my signature. This bill allows the Director of Finance to authorize expenditures from the General Fund to pay all

Legislative Update



approved claims from the Senior and Disabled Citizens Property Tax Postponement Program if the State Controller determines there are insufficient funds. The premise of the 2014 legislation reinstating this program was that it be entirely self-financing. This bill will reverse that, putting the General Fund back on the hook.



AB 2079 (Calderon, D-Whittier) – Current law requires that the staff-to-patient ratios in skilled nursing facilities to include separate licensed nurse staff-to-patient ratios in addition to the ratios established for other direct caregivers. Current law also requires every skilled nursing facility to post information about staffing levels in the manner specified by federal requirements. This bill would have replaced the requirement for staff-to-patient ratios in skilled nursing facilities with a requirement for direct care service hours per patient day, which, commencing January 1, 2018, except as specified, would have increased from 3.2 to 4.1 hours on a specified incremental basis by January 1, 2020. Unfortunately, AB 2079 died on the Senate Floor. **RPEA was in support.**

SB 190 (Beall, D-San Jose) – This bill would have required health care service plan contracts and health insurance policies issued, amended, renewed, or delivered on or after January 1, 2016, to include coverage for post-acute residential transitional rehabilitation services made necessary as a result of and related to an acquired brain injury. Unfortunately, SB 190 never made it out of its first committee and died in Senate Health. **RPEA was in support.**

SB 196 (Hancock, D-Berkeley) – This bill, commencing July 1, 2016, authorizes a county adult protective services agency to file a petition for a protective order on behalf of an elder or dependent adult who has suffered abuse and has an impaired ability to appreciate and understand the circumstances that place him or her at risk of harm, or who has provided written authorization for the agency to act on his or her behalf. SB 196 was signed by the Governor on September 9, 2016. **RPEA was in support.**

SB 546 (Leno, D-San Francisco) – This bill establishes weighted average rate increase. Disclosure requirements for a health plan's or insurer's aggregated large group market products and requires the Department of Managed Health Care and the California Department of Insurance to conduct a public meeting regarding large group rate changes for each plan or insurer that offers coverage in the large group market between November 1, 2016, and March 1, 2017, and annually thereafter. This bill also creates a notice to employers 60 days prior to renewal about the rate increase relative to rate increases negotiated by the California Health Benefit Exchange and CalPERS, and whether the rate change includes any portion of the excise tax paid by the plan. SB 546 was signed by the Governor on October 11, 2015. **RPEA was in support.**

SB 547 (Liu, D-La Canada Flintridge) – This bill would create a Statewide Aging and Long-Term Care Services and Coordinating Council, chaired by the Secretary of the California Health and Human Services Agency and requires the Council to develop a state aging and long-term care services strategic plan to address how California will meet the needs of the aging population in 2020, 2025, and 2030. As of this writing, SB 547 is currently awaiting action by the Governor. **RPEA is in support.**

SB 779 (Hall, D-Compton) – This bill would have increased the minimum number of required direct care hours per patient in skilled nursing facilities from 3.2 hours to 4.1 hours. The bill would require the Department of Public Health to develop staff to patient ratios that convert the direct care hours requirement into staffing ratios. Unfortunately, due to an exorbitant cost associated with the bill, it died in the Senate Appropriations Committee. **RPEA was in support.**

SB 923 (Hernandez, D-Azusa) – This bill prohibits, for grandfathered plan contracts and policies and non-grandfathered plan contracts and policies in the individual and small group markets, a health care service plan contract or health insurance policy that is issued, amended, or renewed on or after January 1, 2017, from changing the cost-sharing design, as defined, during the plan year or policy year, except when required by state or federal law. Because a willful violation of this prohibition by a health care service plan would be a crime, the bill imposed a state-mandated local program. SB 923 was signed by the Governor on August 25, 2016. **RPEA was in support.**

SB 924 (Roth, D-Riverside) – Current law requires insurers and insurance producers, as defined, to comply with specified requirements regarding the purchase, exchange, or replacement of an annuity recommended to a consumer, including, but not limited to, having reasonable grounds for the insurance producer believing the annuity transaction would be suitable for the consumer based on "suitability information," including, among other factors, age, annual income, and whether the consumer has a reverse mortgage. Current law authorizes the commissioner to require certain actions by, and impose sanctions and penalties on, insurers and their agents for a violation of these provisions. This bill adds to the suitability information whether the consumer intends to apply for means-tested government benefits, including, but not limited to, Medi-Cal or the veterans' aid and attendance benefit. SB 924 was signed by the Governor on August 19, 2016. **RPEA was in support.**

SB 1150 (Leno, D-San Francisco) – This bill, until January 1, 2020, requires mortgage servicers to provide successors in interest to deceased borrowers, as defined, with key information about outstanding mortgages previously held by the deceased borrowers; requires servicers to allow successors in interest to apply to assume those mortgages, as specified, and to apply and be considered for foreclosure prevention alternatives in connection with those mortgages, as specified; and provides judicial enforcement mechanisms for use by successors in interest to compel servicers to comply with the bill's provisions. As of this writing, SB 1150 is currently awaiting action by the Governor.

RPEA is in support.

SJR 1 (Beall, D-San Jose) – This bill urged the President and the Congress of the United States to pass legislation repealing the Government Pension Offset and the Windfall Elimination Provision from the Social Security Act. SJR 1 was chaptered on July 6, 2015. **RPEA was in support.** Resolutions such as these do not need to go to the Governor for signature. Once they have passed both houses of the Legislature, they are simply sent to the Secretary of State for recordation.

OPPOSE

AB 1812 (Wagner, R-Irvine) – This bill would have prohibited the retirement benefit paid to a member of any public retirement system whose service is not included in the federal social security system from exceeding \$100,000 and would have prohibited the retirement benefit paid to a member of any public retirement system whose service is included in the federal social security system from exceeding \$80,000. Also, the bill would have required that those amounts be adjusted annually by each public retirement system using the Consumer Price Index for All Urban Consumers. AB 1812 died in the Assembly Public Employees, Retirement and Social Security Committee, which was its first committee. **RPEA was opposed.**

RPEA Legislative Update



By James Anderson, Director of Legislation

Here are the headlines that have pension reformers salivating...

➤ **CALIFORNIA COURT HAS OPENED DOOR FOR PENSION BENEFITS REDUCTIONS.**

➤ **WILL APPEALS RULING SOBER UP PENSION ABUSERS?**

➤ **CALIFORNIA COURT OFFERS POSSIBILITY TO STOP WORST PUBLIC PENSION ABUSERS.**

What happened that made a stable, effective and comfortable defined benefit program for California public workers start to unravel and give succor to those who would take away from public employees a predictable, secure and reasonable retirement? The following is a discussion of a recent court case:

The First District Court of Appeals has made a ruling in a suit by the Marin Public Employees Association regarding a decision by their retirement board to change the rules for calculating the salaries for final retirement income. This change was made by the pension reform legislation adopted by the legislature in 2012. Under the new law certain salary boosts were considered to be "pension spiking" and would no longer be used in determining final compensation. (NOTE: RPEA agreed with the legislation to stop pension spiking.)

The Marin pension board (a 1937 Act County) adopted rules that would take effect in the future to restrict the calculation of certain income from being used to calculate retirement income. These rules would affect existing employees as well as new hires. The employee association claimed that because this new rule would affect existing employees, it violated the "California Rule" regarding changes to existing contracts and should not be allowed. The "California Rule" has been interpreted to mean that when a public employee starts work, the defined pension benefits are vested as deferred income, and the formula cannot be lowered without some other compensating benefit.

In its opinion, the appellate court made two major statements that will be further litigated in appeals to the California Supreme Court: First, that the legislature can make changes to the formula for existing employees going forward if it is "reasonable and bears some material relation

to the theory of a pension system and its successful operation." This means that instead of a pension being considered to be a contract which could not be changed, the legislature could make changes to the statute (which is not a contract) during the time of employment. This does not violate the "Impairment of Contracts Clauses of the U.S. and State Constitutions. The second statement is that public employees do not have an "immutable entitlement to the most optional formula of calculating pension benefits." A public employee is only entitled to a "reasonable pension," even if changes are made. Therefore, if the legislative body decides to alter the pension formula but still provides a "reasonable pension" there is no requirement that a counter benefit be provided. The court's opinion is that the part of

the "California Rule" to provide a compensating benefit was permissible by using the word "should" instead of a prior lower court's use of the word "must". (Who said that the "practice" of law was not fun?)

Obviously, this case will be appealed to the California Supreme Court. The biggest concern if the case is upheld is the fact that the Court of Appeals did not define what was "reasonable" in the two statements. What is a change in the retirement formula that is "reasonably necessary" for the successful operation of a retirement system? Retirement opponents would say that

any "unfunded liability" must be removed by reducing benefits now. The second undefined "reasonable" is what is a reasonable pension? There will be MUCH more litigation on these issues, and pension opponents will likely use the court's statements in their attempts to change the defined benefits system for public employees to something else which they will characterize as "reasonable."

THE BOTTOM LINE FOR RETIREES: The court specifically said that their opinion did not affect those public employees who had already retired, and the formula changes in the legislature and the retirement board did not impact existing retirees. However, the court did cite cases during the 1930's depression that allowed reduction of exiting retiree benefits because of the adverse economic conditions. (If the successful operation of the retirement system is in trouble, hang on to your wallet.)



"I'm afraid it's not gold-plated after all."

STAY TUNED TO THIS STATION FOR LATER NEWS!!!

RPEA Legislative Position & Tracking Chart

State and Federal Legislation - 2015-16		September 27, 2016	
BILL NUMBER & AUTHOR	LEGISLATIVE INTENT	CURRENT STATUS	RPEA POSITION
AB 241 (Gordon) Introduced 2/5/15 Bankruptcy: retired employees: disclosure of names	This bill would require a public entity contemplating bankruptcy to disclose the names and addresses of retirees from that entity to a qualified non-profit corporation for the purposes of appearing in the bankruptcy proceedings.	Signed by Governor Chapt. 252 of Statutes 2016	S Sponsored by RPEA
AB 533 (Bonta) Introduced 2-15-15 Out of network payments Amended in Senate	This bill would provide that an insured would be required to pay a non-network provider the same cost sharing required as if the services were provided by the in-network provider.	To Inactive File at request of Bonta DEAD	S (Watch)
AB 1584 (Brown) Introduced 1-6-16 SSI Cost of Living adjustment Amended 8-15)	Since 2011, cost-of-living adjustment could be made the maximum benefit payment unless otherwise specified by statute. This bill would reinstate the cost-of-living adjustment beginning January 1, 2018 calendar year and no adjustment will be made in 2017.	VETO by Governor "end run on budget process."	S-2
AB 1667 (DodD) Home health aide domestic registration	This bill would, among other things, make the provisions of the act applicable to home care aide domestic referral agencies, including licensure, fees, enforcement and fines, and regulation of registered home care aides having agreements with those agencies. The bill would require a home care aide domestic referral agency to provide specified information to a person to whom a home care aide is referred, including information about the person's potential employer responsibilities.	Assembly Appropriation Com. (Suspense file) DEAD	S-2
AB 1763 (Gibson) Introduced 2/3/16 Colorectal Cancer Screening	This bill requires a health care service plan contract or health insurance policy that is issued, amended, or renewed on or after January 1, 2018, to provide coverage for colorectal cancer screening examinations and laboratory test if recommended by the health care provider.	VETO by Governor "no cost sharing"	S-2
AB 1878 (Jones-Sawyer) Introduced 2/10/16 Increased death benefit for certified school members Amended 3-18-16 and 5-31-16	This bill, on and after January 1, 2017, would increase the amount of payment to upon the death of any school member after retirement described above, to not less than \$5,000 and thereafter After January 1, 2017 increase by using the CPI. This bill would make an appropriation. (\$ out now only CPI)	VETO by Governor "cost is too much with the unfunded pension liability."	S-2
AB 1952 (Gordon) Introduced 2/12/16 Senior Citizens and Disabled Property Tax Postponement Fund Amended August 18, 2016	Establishes additional requirements to the Senior Citizens and Disabled Citizens Property Tax Postponement Fund and if insufficient moneys in the fund to the Controller shall notify the Dept. of Finance on April 1 each year to transfer money from the General Fund.	VETO by Governor "fund was to be self financing and this puts Gen Fund back on hook."	S-2
AB 2079 (Calderon) Introduced 2-17-16 Require formulation of specific staff to patient ratios. Amended 8-15-16	This bill would require the department to develop regulations effective January 1, 2018 and include a minimum overall staff-to-patient ratio that includes specific staff-to-patient ratio for certified nurse assistants and for licensed nurses. This bill as amended would require that hours be increased from 3.2 to 4.1 by 2020, and regulations be drafted for waiver due to shortage of nurses.	To Inactive File at the request of Calderon DEAD	S-3
SB 547 (Liu) (Amended on 8-1-16) Single State Agency for Aging and Long Term Care	The Statewide Aging and Long-Term Care Services Coordinating Council of the heads of 22 agencies, chaired by the Secretary of California Health and Human Services, to develop a state aging and long-term care services strategic plan to meet the needs of the aging population and submit a report by July 1, 2018.	VETO by Governor "need to be addressed but Council is unwieldy"	S-2
SB 779 (Hall) Introduced 2-27-15 Staffing requirements for skilled nursing facilities	This bill would increase the minimum number of required direct care hours per patient in skilled nursing facilities from 3.2 hours to 4.1 hours. The bill would require the Department of Public Health to develop staff to patient ratios to convert direct care hours requirement into staffing ratios.	INACTIVE DEAD	S-2
SB 923 (Hernandez) Introduced 1-7-16 Changes on Health Care	This bill would prohibit any changes in "cost sharing" (co-pay, deductible etc. but not premiums) during the term of insurance coverage.	Signed by Governor Chapt. 192 of Statutes 2016	S-2
SB 924 (Roth) Introduces 1-14-16 Sale of Annuities to Seniors	Existing law makes it illegal to sell and annuity to seniors for the purpose of obtaining government benefits. This law requires the insurance companies to determine if the product is being use in an attempt to qualify the senior for government benefits and if so, whether the annuity is suitable for the senior.	Signed by Governor Chapt.148 of Statutes 2016	S-2
SB 1010 (Hernandez) Introduced 2-11-16 Health Care and Prescription Drugs Amended 8-1-16 and 8-16-16	This bill would require health plans and health insurers that report information on premium rates to their regulator to also include specified information relating to prescription drug spending. The bill would require drug manufacturers to report to state purchasers of health care services when drug prices are going to increase by more than 25% or when new drugs costing more than \$10,000 per course of treatment are going to be introduced to the market. Information would not be public and law would sunset in 2022.	Passed Senate in Assembly 3rd reading To INACTIVE DEAD	S-2
SB 1150 (Leno) Introduced 2-18-16 Mortgage Successor Rights Amended 8-19-16	This bill would prohibit a mortgage servicer or lender, upon notification that a borrower has died, from recording a notice of default for at least 30 days after requesting reasonable documentation of the death of the borrower from the successor in Interest and require assessment of the successor's financial situation and provide options to foreclosure and loan assumption options. Law would sunset in 2020.	Passed Senate and Assembly Chapt. 838 of Statutes 2016	S-3

Federal Legislation

HR 973 (Davis + 136 cosponsors) and S 1651 (Brown + 16 cosponsors) Repeal WEP and GPO	" Social Security Fairness Act 2015 " Proposal to repeal the Windfall Elimination Provision (WEP) and Government Pension Offset in the Social Security Law.	House Ways and Means Committee and the Senate Committee on Finance	S
HR 711 (Brady) + 51 cosponsors Equal Treatment of Public Servants Act of 2015 (Modifies WEP)	This bill would modify the provisions of the Windfall Elimination Provision (WEP) to replace the existing formula and take into account the actual wage history of the public employee regarding the contribution to the Social Security Trust Fund. Changes are proposed to be "cost neutral" with some increased costs to persons that incorrectly reported earnings.	House Ways and Means Committee	S

LEGISLATIVE SUPPORT POSITIONS: The following categories are used in your legislative summary reports:

- **SPONSOR** - This is a sponsored or co-sponsored bill.
- **SUPPORT 1 (S1)** - This is the highest priority support bill. We send a letter of support to the author, a letter of support to committee members considering the bill and undertake full lobbying to assure passage of the bill. We also closely monitor all amendments and constantly reevaluate our position.
- **SUPPORT 2 (S2)** - This level of support is moderate. A letter is sent to the author and committee considering the bill, but there is usually less lobbying or testifying before committee. We also closely monitor all amendments and constantly reevaluate our position.
- **SUPPORT 3 (S3)** - This is the lowest level of support. A letter of support is sent to the author. We closely monitor the bill for amendments.
- **OPPOSE (O)** - Only those bills which are judged to be detrimental are given an oppose position. Such bills require aggressive opposition lobbying, often accompanied by efforts to gain amendments, in an effort to make the bill acceptable to RPEA, and therefore to remove our opposition.
- **WATCH 1 (W1)** - This is a bill of more than casual interest. We actively monitor such bills and often communicate with the author, the author's staff, the legislative committee members and staff. We frequently seek clarifying amendments to bills in this category.
- **WATCH 2 (W2)** - This is a bill of interest or concern on which we keep close tabs. It appears in the summary report.
- **?** - This is a bill that will show up in our screening from time to time. It is important that we discuss the bill so that we are able to remove the question mark by either deleting the bill or by assigning one of the above positions.

RPEA & ARECOS

By L. Patrick Samsell, President & Treasurer of Chapter 003 – STOCKTON



Pat Samsell (right), President & Treasurer of RPEA Chapter 003 – STOCKTON and Treasurer of the Association of Retired Employees of the City of Stockton (ARECOS) presents a check in the amount of \$41,532.39 to RPEA President George Linn (left).

In 2011, the Association of Retired Employees of the City of Stockton (ARECOS) was formed to protect Stockton retiree benefits. ARECOS represented retirees during the City of Stockton bankruptcy process. The threat to retirees in bankruptcy was the loss of all retiree medical benefits and the reduction of retirement monthly checks by 60%. In fact, 1,102 retirees lost all their medical coverage.

ARECOS was instrumental in getting the City of Stockton's bankruptcy plan approved resulting in Stockton getting out of bankruptcy. With the ten year bankruptcy plan in place, ARECOS voted to dissolve. As part of the dissolution, ARECOS transferred all its assets to RPEA.



Meet Your New Editor, C. T. Weber:

C. T. joined RPEA's Chapter 004 – SACRAMENTO on June 19, 2008. He has served as Chapter Vice President since 2014 and was elected as RPEA State Director of Public Relations at the 2016 General Assembly. C. T. comes from a long history of activism from founding the Long Beach Free Clinic to marching 100 miles with Cesar Chavez through the Coachella Valley. He has a Bachelor's degree in history and a Master's in Public Administration. He served as a Special Agent for the California Public Utilities Commission and retired as an analyst for the California Highway Patrol. He was elected four times to the California State Employees Association Board of Directors. He was President of Service Employees International Union, Local 1000, District Labor Council 784; served on the SEIU Local 1000, State Council; and still serves as a delegate to the Sacramento Central Labor Council. C. T. looks forward to putting his extensive experience to work to enhance and improve our publication.

The Holiday Season is Rapidly Approaching...

See's Candy certificates make great gifts! Log on to www.rpea.com and order early to ensure you receive your certificates on time!

ORDER BY: Monday, December 5, 2016
guaranteed Christmas delivery.
Current price: \$16.00 per certificate.



NOVEMBER 6, 2016

DON'T FORGET TO
**FALL
BACK**

DON'T FORGET TO SET YOUR CLOCKS BACK

RPEA Delegates Vote in Favor of Membership Dues Increase



By Al Darby, Vice President

At the recent biennial RPEA General Assembly, the delegates approved a resolution to raise dues fifty cents per month to offset added inflation-related operating costs. This is the first increase in dues since the 50% increase that was approved in 2008. The new monthly dues rate of \$5.00 per month will become effective January 1, 2017. Fortunately, this increase is only one-third the cost of previous dues hikes.

During the past eight years, many cost-cutting measures and operating efficiencies have been implemented to keep the Association financially sound and focused on its mission to maintain and improve retirement benefits for all CalPERS retirees. This has not been easy in view of the challenges imposed by declining membership numbers and cost increases due to inflation and staff salary and benefit increases. We are operating with one less staff member and less contract service support. We have found many other ways to reduce costs such as lowering General Assembly costs and recruiting expenditures. While costing less, recruiting is enhanced by the acquisition of a new member services provider that recruits for the association. Association recruiting efforts continue as well.

Despite the fact that the Association has experienced serious erosion in membership, our efforts to carry out our mission have continued without interruption. We can point to many positive accomplishments for our members in several areas over the past eight years. Our new member services provider is producing new members for us at a rate that has reversed the

long-standing trend of membership loss. We anticipate growth in our membership numbers going forward that will slowly accelerate and outpace the loss rate that is inevitable in retiree associations. Threats to our pensions will continue which usually means our membership will increase with members fearful of cuts to our retiree benefits.

We are confident that our members will understand that costs always go up, and dues increases will be something we will have to face in the future from time to time. The best way to hold dues down is to bring your friends and other active and retired public employees into the organization. That increases revenue and lessens the need for higher dues.



RPEA AT THE GRASS VALLEY DOWNTOWN ASSOCIATION THURSDAY NIGHT MARKET

By Mary Ann Trygg, President, Chapter 078 – NEVADA COUNTY



Chapter 078 - NEVADA COUNTY members Wendy Reddish-Chase (left); Linda Klever (center), and RPEA President George Linn



Chapter 078 member, Stephanie Wagner (left); new 078 member, Karry Przeporski; Chapter 078 President, Mary Ann Trygg

The Grass Valley Thursday Night Market is an institution in our town. This year's event was held on July 23 – 28, 2016. It seems that nearly everyone from the Grass Valley, Nevada City and Penn Valley areas comes to walk the downtown at least once during the six weeks of the street fair which happens each Thursday from 5:30-9:00 p.m. This event is a chance for friends and neighbors to see each other, visit and purchase local produce, as well as to take advantage of what the many vendors and non-profit organizations have to offer. Additionally, participants enjoy street food and/or eating at any of a fine variety of restaurants. Music and other entertainment is also a big part of each night as well as a beer garden and the chance to learn more about local organizations.

Therefore, the current Chapter 078 – NEVADA COUNTY Board thought it a good idea that we were represented at the market this year, primarily to attract new members as well as to explain the importance of RPEA to those who came by. We had a number of conversations with folks who were CalPERS annuitants or who will be CalPERS retirees eventually, and we were able to discuss RPEA in detail. We were especially pleased to have President George Linn attend our first market night to support us.

During the market, eighteen RPEA members gave out a substantial amount of literature about our organization, and we were delighted to enroll four new members! We are looking forward to those who took home membership applications to ultimately join our chapter.

A Great Choice for Good Health

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- **Silver&Fit®**
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- **Optional Dental
Coverage for
Public Agency
Retirees**

*Medicare evaluates plans based on a 5-star rating system. Star Ratings are calculated each year and may change one year to the next. Centers for Medicare & Medicaid Services Health Plan Management System, Plan Ratings 2016. Kaiser Permanente #H0524.

Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year and at other times in accord with your group's contract with us. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. The provider network may change at any time. You will receive notice when necessary. In California, Kaiser Permanente is an HMO plan and a Cost plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal. You must reside in the Kaiser Permanente Medicare health plan service area in which you enroll.

Fighting For Your Rights

Because everyone deserves to retire with dignity

RPEA works tirelessly to safeguard and promote the retiree benefits of California's public employees.

Over 300 new members joined last month! You can join in the fight by supporting our efforts to:

- *Represent your best interests in the Legislature*
- *Maintain your earned health benefits*
- *Protect your pension*



**Retired Public Employees'
Association of California**

www.rpea.com

(800) 443-7732

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Membership Application

Joining RPEA Helps Us Support YOUR Retirement Security

RETIRED PUBLIC EMPLOYEES'

ASSOCIATION OF CALIFORNIA

Membership



Application



**Have a scanner app
on your smart phone?**

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www.rpea.com



Join online!



Why Join RPEA?

RPEA protects the interests of retirees at the state level to ensure your retirement remains secure. We retain a professional lobbyist who represents our interests before the Governor, Legislators and CalPERS Board. We also have access to a federal lobbyist who keeps us informed on federal retiree issues.

RPEA continues an active and ongoing relationship with CalPERS by serving on their Advisory Committee concerning CalPERS plans and proposals. We also monitor every CalPERS committee and frequently testify at these meetings on behalf of our members.

Every RPEA member receives a bi-monthly statewide newsletter with general information as well as legislative and health care updates.

Members also gain access to numerous member-only benefits including dental and vision plans and a wide array of merchant discount programs. For only \$4.50 a month you get even more back in benefit savings!

Become a Member in Three Easy Steps!

STEP 1: Tell Us About Yourself

Your Name: _____ Date of Birth ____ / ____ / ____
☐ M ☐ F
Spouse: _____ Date of Birth ____ / ____ / ____
☐ M ☐ F (Additional Applicant Name)
Address: _____
City/State/Zip: _____
Phone: (____) ____ - ____ Email: _____
Retired From: _____ Retirement Date: _____
RPEA Chapter Number or Name if Known: _____
Referred By: _____

STEP 2: Select One Membership Type

- | | |
|--|---|
| <input type="checkbox"/> Retiree (CalPERS Annuitant) | <input type="checkbox"/> Beneficiary (Beneficiary of a CalPERS retiree) |
| <input type="checkbox"/> Affiliate (Still working for a Public Agency) | <input type="checkbox"/> Associate Member (Supporter of RPEA's goals) |

STEP 3: Select One Payment Method

- ☐ **Option 1: MONTHLY CALPERS DEDUCTION:** I authorize the California Public Employees Retirement System (CalPERS) to deduct for each applicant on this form \$4.50 per month from my retirement allowance until revoked by me in writing. **Only available if one applicant is receiving a CalPERS retirement payment.**
- _____
Signature Social Security Number or CalPERS ID + Last 4 of SSN
- ☐ **Option 2: CHECK OR MONEY ORDER:** As payment for the first year's dues, I have attached a check or money order for \$54.00 (\$27.00 for affiliate membership) for each applicant on this form. I will be billed annually for subsequent renewals.
- ☐ **Option 3: CREDIT CARD AUTHORIZATION:** As payment for the first year's dues, I authorize \$54.00 for each applicant on this form (\$27.00 for affiliate membership) to be charged on my credit card. I will be billed annually for subsequent renewals.
- Card Number: - - -
- Expiration Date: / CVV/CVC: (3 Digit code on the back of card)
- _____
Signature

RPEA 08-2016

THANK YOU for Joining RPEA!

Return your completed application to:
RPEA • 300 T Street • Sacramento, CA 95811-6912



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If you have questions about our UnitedHealthcare plan, please call us at:



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This information is not a complete description of benefits. Contact the plan for more information. Limitations, co-payments, and restrictions may apply. Benefits, premium and/or co-payments/co-insurance may change on January 1 of each year. Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

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Wes Stonebreaker ANY TIME	Area Director VI	1060 Country Club Dr. Riverside, CA 92506	951 784 1060	951 781-3960	lindaandwes@aol.com
Dennis Cassella 8AM -- 5PM	Area Director VII (Interim)	205 Cypress Hill Dr. Grass Valley, CA 95945	530 272 2130	SAME (CALL FIRST)	d.cassella@sbcglobal.net
Kathleen Collins ANY TIME	Area Director VIII	*****	562-884 -8891	NONE	kcespresso@hotmail.com
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