Elk Grove Benefits Employee Retirement Trust
EGBERT

STEPS TO RETIREMENT WITH EGUSD

1. **Deciding**
   Approximately 3 months prior to your anticipated retirement date, contact your Retirement System; **Public Employee Retirement System (CalPERS) or State Teachers Retirement System** (CalSTRS). Set up an appointment with a counselor to discuss your pension and decide on an appropriate retirement date.

2. **Retirement Dates**
   Your first day of retirement with CalPERS/STRS must be no later than 90 calendar days following your last day of employment with EGUSD. (Example: If last day of employment is May 29, 2026, then first day of CalPERS/STRS retirement must be no later than August 27, 2026).

3. **Notifying EGUSD**
   Once a date of service retirement has been determined, submit a Certificated/Classified Retirement Notice (form on EGUSD website) to Elk Grove Unified School District's Human Resources Department.

4. **Retiring with CalPERS/STRS**
   File a retirement application with the applicable retirement system (CalPERS or CalSTRS).

5. **EGBERT Eligibility**
   The EGUSD Benefits Department will receive a document from Human Resources with your retirement date. The Benefits staff will determine if you are eligible for continuation of benefits through EGBERT. If you qualify for EGBERT, Benefits will send you a letter and EGBERT will mail you a packet of forms to enroll. To comply with regulations, all benefit eligible employees are also sent a COBRA letter. You can ignore the COBRA letter for members who will be enrolling in an EGBERT plan.

6. **Medicare**
   - If you and/or your dependent are eligible for Medicare at the date of retirement, you will need to have proof of enrollment from the Social Security Administration (SSA) in Medicare for both Hospital (Part A) and Medical (Part B) effective the 1st of the month of your eligibility in order to enroll in an EGBERT medical plan.
   - Most people are eligible for Medicare the 1st of the month when they turn 65. You may be eligible earlier if you are deemed disabled by the SSA. Contact the SSA for further information regarding your eligibility.
   - Apply for Medicare online at www.ssa.gov or call 1-800-772-1213.
   - The Benefits Department will provide you with *(CMS-L564) Request for Employment Information Form* for each enrolled person over age 65. Submit this form to SSA with your Medicare application to avoid late enrollment penalties.
   - Do you have Part A but need Part B? EGBERT will include the (CMS 40B) *Application for Medicare Part B* in your enrollment packet or, you can download the form from SSA.
   - **Failure to enroll timely in Medicare Parts A & B may result in an increased cost of your EGBERT premiums and may also result in a higher cost for your Medicare Part B.**

7. **EGBERT Enrollment**

Your benefits with EGUSD will end and your EGBERT benefits will start the 1st of the month following your last day of employment. The EGBERT office will assist you with the re-enrollment process. Contact our office at 916-684-7120, 9am to 3pm on Tuesday, Wednesday, Thursday.

- Your enrollment packet will include forms to continue with the same medical coverage as you have had as an active employee. If you wish to make a change, please check the Forms section EGBERT website **www.egbertbenefits.com** or contact the office.
- The enrollment packet includes a cover letter with a check list. Complete all the forms you receive in your packet and return by the 15th of the month prior to your EGBERT effective date. If you have a question, leave the section blank and check with our office.
- If you/your spouse are Medicare eligible, proof of enrollment in Medicare Part A (Hospital) and Part B (Medical) must be submitted along with the medical plan enrollment forms prior to the month of eligibility. We are unable to enroll a member in a Medicare plan retroactively to a prior month.
- Your CalPERS/STRS letter to confirm your retirement will probably be the last of the required documents to be received. Do not wait until it is received to submit your forms, provide us with everything else and then submit the letter when it is received.
- Return all completed forms in person (appointment advised), by email at **egbertbenefits@gmail.com**, by fax 916-478-9884, or by US mail.

It is imperative you complete the documents that EGBERT sends to you as soon as possible. Failure to complete the documents in a timely manner may result in the lapse of your medical coverage.

ELK GROVE BENEFITS EMPLOYEE RETIREMENT TRUST
EGBERT Office
9297 Office Park Circle Suite 110
Elk Grove, CA 95758
Phone: 916-684-7120 Fax: 916-478-9884
Office Hours: Tuesday, Wednesday & Thursday 9am to 3pm
Email address: egbertbenefits@gmail.com Web Site: www.egbertbenefits.com

Elk Grove Unified School District Human Resources Dept.		916-686-7795
Elk Grove Unified School District Benefits Dept.		916-686-5085
CalPERS	1-888-225-7377	www.calpers.ca.gov
CalSTRS	1-800-228-5453	www.calstrs.com
Social Security Admin. Apply for Medicare through SSA	1-800-772-1213	www.ssa.gov

EGBERT Monthly Rates

Effective: January 1, 2027 through December 31, 2027

***Rates under "Retiree Pays" include monthly Retiree Contributions**

"EGBERT Pays" amounts include premiums for Dental and Vision

****For CSEA members retired on/after 7/1/2010, EGBERT pays the Retiree Only amount**

DESCRIPTION	In Area Plans	Retiree Pays*	Out of Area Plans	Retiree Pays*
Non-Medicare				
Retiree Only	Kaiser HMO	728.99	KaiserNW (Parts of OR/WA)	426.89
EGBERT Pays $1,098.35	Sutter Health Plan + TruHearing	862.55		
	Western Health Adv (WHA)	202.90		
Retiree + 1	Kaiser HMO	1,457.81	KaiserNW (Parts of OR/WA)	853.61
EGBERT Pays $2,196.87	Sutter Health Plan + TruHearing	1,724.65		
	Western Health Adv (WHA)	405.80		
Family	Kaiser HMO	2,801.69	KaiserNW (Parts of OR/WA)	2,156.95
EGBERT Pays $2,196.87	Sutter Health Plan + TruHearing	3,179.40		
	Western Health Adv (WHA)	1,313.54		
Medicare				
Retiree Only	Kaiser Senior Advantage	0.00	KaiserNW Sr Adv (Parts of OR/WA)	61.98
EGBERT Pays $442.12	Kaiser Sr Adv LOW	0.00	Anthem Medicare Preferred PPO	45.86
	Anthem Medicare Preferred PPO	45.86		
Retiree + 1	Kaiser Senior Advantage	0.00	KaiserNW Sr Adv (Parts of OR/WA)	123.96
EGBERT Pays $884.24	Kaiser Sr Adv LOW	0.00	Anthem Medicare Preferred PPO	91.72
	Anthem Medicare Preferred PPO	91.72		
1 Non-Medicare+1 Medicare				
Retiree + 1	Kaiser HMO + Senior Adv	683.13	KaiserNW + NW Sr Adv	443.01
EGBERT Pays $1,586.33	Kaiser HMO + Senior Adv LOW	586.51	(Parts of OR/WA)	
	Sutter Health + Anthem PPO	862.55		
	WHA + Anthem PPO	202.90		

Cost for Additional Dependents:

	CSEA + 1	CSEA FAMILY	FAMILY
DENTAL	$76.00	$135.00	$59.00
VISION	$10.00	$18.00	$8.00
TOTAL	**$86.00**	**$153.00**	**$67.00**

**See CSEA rate sheet for dependent medical costs

Retiree Contribution – 2027: $202.90 per each non-Medicare retiree and dependent

Medicare Part B – 2026: The current Part B base rate is $202.90 per month. Higher income beneficiaries pay an additional income-based surcharge (IRMAA) to Social Security.

Medicare Part D: While Part D is included in EGBERT plans, higher-income beneficiaries pay an income-based surcharge (IRMAA) to Social Security.