



FOOTHILL-DE ANZA
COMMUNITY COLLEGE DISTRICT

2027 Health Plan Changes Highlights

Open Enrollment elections are effective January 1, 2027.

FSA program (active employees):

- **2027 FSA Health Care Account:**
 - Annual contribution limits will increase from \$3,300 in 2026 to \$3,400 in 2027. Eligible employees may elect \$500–\$3,400. FSA elections do not carry forward; you must re-elect each year.
 - For the plan year 2026, it is permissible to carry over up to \$660 of unused funds from the Health Care Account into the plan year 2027. Similarly, for the plan year 2027, you may carry over up to \$680 of unused funds from the Health Care Account into the plan year 2028.
- **2027 FSA Dependent Care Account:**
 - Annual contribution limits remain \$7,500 for 2027 (\$3,750 if married filing separately). Eligible employees may elect \$500–\$7,500. You must re-elect each year. Unused Dependent Care FSA funds do not carry over.
 - The combined household contribution cannot exceed \$7,500 in total, even if both spouses are eligible through their respective employers. The maximum contribution is limited to the lower-earning spouse's income. For example, if one spouse earns \$6,000, the household cannot contribute more than \$6,000.
- **2027 FSA Commuter Benefits:**
 - The maximum tax-free monthly allowance for transit and parking is \$340. Eligible employees may elect \$20–\$340 per month for parking, vanpool, or transit expenses. The Commuter Express program enables participants to purchase transit passes with pre-tax dollars, with monthly payroll deductions aligned with your preauthorized amount. Please note that the program does not permit excess purchases with after-tax funds.

Basic Medical Plans — Active Employees and Non-Medicare Retirees

UnitedHealthcare Basic HMO exit. Effective January 1, 2027, CalPERS will discontinue the following Basic (non-Medicare) UnitedHealthcare plans: SignatureValue Alliance HMO, SignatureValue Harmony HMO, and the Basic-plan portion of UnitedHealthcare Combination Plans (families with both Basic and Medicare members). UnitedHealthcare Group Medicare Advantage remains available for Medicare members. For more information visit [UnitedHealthcare Basic Health Plans Removal for 2027](#).

- Impacted members will receive communications from CalPERS explaining their options.
- Action required if you are on a UHC Basic HMO or Combination Plan. During Open Enrollment (September 14 – October 9, 2026), choose another CalPERS health plan available in your ZIP code.
- If you do not make a new election, CalPERS will automatically enroll you in a 2027 plan selected to preserve your primary care relationship where possible. For most Santa Clara County ZIP codes, the assigned plan is Blue Shield Access+ HMO. Alliance members in ZIP code 95033 will be assigned to Anthem Blue Cross Traditional HMO.

Anthem Blue Cross Select HMO exit (Monterey County). Effective January 1, 2027, Anthem Blue Cross Select HMO will no longer be available in Monterey County. Anthem and Aspire Health did not reach a contractual agreement. This change affects Basic and Combination plan members. A Combination plan means some family members are covered under a Medicare plan and others are covered under a Basic plan with the same health carrier.

- Impacted Monterey County members will receive mailed letters from CalPERS explaining their options. If you do not choose a new plan during Open Enrollment, CalPERS will administratively transfer affected members to Blue Shield Access+ HMO.



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Infertility coverage (Basic HMO and PPO). Starting July 1, 2027 (not January 1), all CalPERS Basic HMO and PPO plans will include expanded infertility diagnosis and treatment coverage under California Senate Bill 729.

- What will be covered: evaluation, diagnosis, and treatment of infertility; family-building services through specialized fertility providers; care coordination and navigation; access to a statewide fertility provider network; and additional family-building support, including surrogacy-related support through the fertility program vendor where applicable.
- Participating plans (except Kaiser Permanente) will partner with a specialized fertility vendor. Kaiser Permanente will provide these services through its integrated care model.

Medicare Medical Plans — Retirees

Medical and pharmacy split. Blue Shield Medicare Advantage PPO and UnitedHealthcare Medicare Advantage PPO will separate medical and pharmacy coverage into distinct plans beginning January 1, 2027. Members will receive two ID cards (one medical, one pharmacy). Coverage, copayments, and formularies will not change. Members will receive communications from Blue Shield or UnitedHealthcare.

Pharmacy benefits administration. CVS Caremark remains the PBM for Anthem Medicare Preferred, PERS Gold Medicare Supplement, and PERS Platinum Medicare Supplement. For Medicare members, SilverScript (a CVS affiliate) administers pharmacy benefits. Blue Shield Medicare Advantage, Kaiser Permanente Senior Advantage plans, and UnitedHealthcare Group Medicare Advantage continue to administer their own prescription benefits.

UnitedHealthcare Medicare Advantage PPO remains available and is not removed as part of the Basic HMO exit.

Other 2027 Benefit Changes (Active and Eligible Retirees)

- **Dental:** Effective January 1, 2027, Delta Dental's annual maximum increases from \$2,000 to \$2,500 for PPO network services. The \$1,800 annual maximum for non-PPO dentists remains unchanged. The lifetime orthodontia maximum increases from \$1,000 to \$2,000.
- **Vision:** Effective January 1, 2027, the VSP frame allowance increases from \$120 to \$180 (standard) and from \$140 to \$200 (featured). The elective contact lens allowance increases from \$120 to \$180. Costco becomes an in-network vision provider on January 1, 2027.
- **Pre-97 retirees:** Election of a medical plan also includes District vision and dental coverage. Pre-97 retirees may not opt out of dental and vision, nor elect only vision and dental.
- **Post-97 retirees:** Retirees under age 65 in the Bridge Program may elect District vision and dental as a package only, at full cost. Retirees who do not qualify for the Bridge Program or who have reached age 65+ may contract directly with vision and/or dental providers at their own cost.

Please confirm networks, deductibles, copays, coinsurance, and coverage limits in CalPERS and District materials before you elect a plan. Review 2027 details at [CalPERS Annual Health Plan Changes](https://hr.fhda.edu/benefits) and hr.fhda.edu/benefits.