

Date of Hearing: January 13, 2026

ASSEMBLY COMMITTEE ON HIGHER EDUCATION

Mike Fong, Chair

AB 1171 (Patel) – As Amended January 05, 2026

**SUBJECT:** Part-Time Community College Faculty Health Insurance Program

**SUMMARY:** Repeals portions of an existing optional part-time community college faculty health insurance program and establishes a statewide mandated for community college districts to participate in a program designed to provide reimbursements for health insurance benefits to qualifying part-time faculty at community colleges. Specifically, **this bill**:

- 1) Repeals the portions of the existing optional part-time community college faculty health insurance program.
- 2) Establishes a statewide mandate for community college districts to participate in a part-time community college faculty health insurance program where districts will offer all qualifying part-time and multidistrict community college faculty reimbursements for health insurance benefits.
- 3) States it is the intent of the Legislature to provide continuous access to health care benefits to part-time and multidistrict part-time faculty at community colleges throughout the state.
- 4) Defines the following:
  - a) “Health insurance benefits” as medical benefits that do not include vision or dental benefits;
  - b) “Multidistrict part-time faculty” as any part-time faculty member whose total teaching course load at two or more community college districts equates to or exceeds 40% of a full-time course load;
  - c) “Part-time faculty” as any faculty at a community college whose course load is equal to or exceeds 40% of what is considered a full-time course load but is less than a full-time course load; and,
  - d) “Program” as the part-time community college faculty health insurance programs established by the measure.
- 5) Permits a part-time faculty or multidistrict faculty, as defined above, to participate in the part-time community college faculty health insurance program.
- 6) Prohibits a part-time faculty or multidistrict part-time faculty, whose health insurance is paid for by another employer other than a community college district, from participating in the part-time community college faculty health insurance program.
- 7) Authorizes a community college district to provide a reimbursement of a determined amount to part-time faculty who have elected to self-purchase health care benefits. The district will reimburse the part-time faculty the lesser of the either of the following:

- a) 50% of the total health insurance premium paid by the part-time faculty for 12 months of health care benefits; or,
- b) The community college district's proportionate share of the full cost of the district's most commonly subscribed family coverage plan.

8) Permits a community college district to require a part-time faculty member to provide documentation to verify the employee is enrolled in a health insurance plan and that the premiums for the health insurance plan are paid.

9) Maintains the existing multidistrict part-time faculty health insurance reimbursement program as described in existing law of this analysis; however requires community colleges to participate in the multidistrict part-time faculty health insurance reimbursement (see (5) under existing law).

10) Requires each community college to send verification to the Chancellor of the California Community Colleges (Chancellor) of the number of those participating in the part-time community college faculty health insurance program.

11) Requires by June 15 of each year for the Chancellor to apportion to each community college district the amount equal to the reimbursements provided by the community college district to part-time and multidistrict part-time faculty who have elected to participate in the part-time community college faculty health insurance program.

12) Authorizes the Chancellor to distribute funds that have been appropriated for the part-time community college faculty health insurance program to community college districts who have provided verification of the reimbursements provided to part-time and multidistrict part-time faculty and permits the Chancellor to allocate funding to the districts in an amount equal to the reimbursements; but, prohibits the Chancellor from allocating funds in excess of the reimbursements as provided by the districts to qualifying faculty.

13) Returns at the end of the year any unused funds that are authorized for use by part-time community college faculty health insurance program to the General Fund.

14) Annually appropriates \$200 million from the State General Fund to the Board of Governors of the California Community College to be used exclusively for the part-time community college faculty health insurance program.

15) States if the Commission on State Mandates determines there is a cost associated with the implementation of the measure, the State will reimburse local agencies and school districts for the determined cost.

**EXISTING LAW:**

- 1) Establishes the part-time community college faculty health insurance program with the intent for the State to provide fiscal incentives for community college districts to offer health insurance for part-time faculty (Education Code (EDC) Section 87860.5).
- 2) Defines the following:

- a) "Health insurance benefits" as medical benefits that do not extend to vision and dental benefits;
- b) A multidistrict part-time faculty as community college faculty whose course load at two or more community colleges equals or exceeds 40 % of a full-time course load.
- c) Part-time faculty as faculty whose course load equals or exceeds 40 % of a full-time course load (EDC Section 87861).

3) Permits community colleges to provide health insurance to part-time faculty and multidistrict faculty and their dependents (EDC Section 87862).

4) Prohibits a part-time faculty and multidistrict faculty member from participating in the part-time community college faculty health insurance program if the faculty member has health benefits paid by another employer (EDC Section 87864).

5) Establishes a formula by which districts will reimburse multidistrict faculty for health insurance purchased by the individual faculty. The districts will reimburse the multidistrict faculty member the district's proportionate share of the total cost of the health care. The maximum a district will reimburse a faculty member will be equal to the cost of the district's most commonly subscribed family coverage plan. The district's proportionate cost is determined by the dividing the total amount of the health insurance by the total number of districts and multiplying the quotient by the percentage of health care cost paid by the community college district toward district's most commonly subscribed family coverage plan. Permits the community college district to require the multidistrict faculty to submit documentation of enrollment in a health care premium plan and documentation of employment by community college districts to verify the faculty's course load is equal in totality (between the two or more districts) of at least 40% of a full-time course (EDC Section 87865).

6) Requires community college districts who elect to provide health care to part-time or multi-district part-time faculty to complete the following:

- a) Negotiate with part-time union representation on the payment of the portion of health insurance premium that is not funded by the state; and,
- b) By June 1 of each year, send verification to the Chancellor of the California Community Colleges as to the number of participants in the program (EDC Section 87866).

7) Establishes the criteria for community college districts to be reimbursed by the state for health care provided to qualifying part-time and multidistrict faculty. Requires the Chancellor's Office of the community colleges by June 15 of each year, to provide a reimbursement to all participating community college districts of up to 50% of the total cost in providing health care for part-time or multidistrict part-time faculty. Permits up a community college district to receive up to 100% reimbursement for health care costs if the following occurs:

- a) Provides the same health care coverage for part-time faculty as full-time faculty;

- b) Limits the employee paid portion of health care for part-time faculty to the same amount paid by full-time faculty; and,
- c) Offers health insurance coverage to multidistrict part-time faculty (EDC Section 87867).

**FISCAL EFFECT:** Unknown.

**COMMENTS:** *Author's statement.* As stated by the Author, "AB 1171 expands health care coverage for part-time community college faculty by implementing a multidistrict strategy and using existing Part-Time Faculty Health Insurance Program funds. It aims to improve healthcare access for adjunct faculty at California Community Colleges who teach across multiple community college districts and face challenges in obtaining adequate insurance. The bill maintains current eligibility requirements and budget protections."

*Part-Time Faculty at California Community Colleges (CCC).* With 115 brick and mortar colleges and one exclusively online, the CCC continues to be the largest two-year college system in the nation. Each of the community colleges is assigned to a community college district (CCD) and is overseen by a locally elected governing board. In order to provide educational services to roughly 2.2 million Californians, each of the 73 CCDs employ part-time and full-time faculty.<sup>1</sup> A faculty member is considered part-time if the faculty's course load is less than 67% of the teaching hours per of a full-time course load (Education Code (EDC) Section 87482.5). The EDC does not define the course load required to be considered full-time; and therefore, the course load for full-time faculty is subject to collective bargaining agreements between the faculty representatives and the governing board of each CCD.

In the latest data provided by the CCDs to the Chancellor's Office, in fall 2024 there were 17,781 full-time faculty and 38,831 part-time faculty were employed by CCDs.<sup>2</sup> Given the close physical nature of a CCD, it is entirely possible for a part-time faculty member to have full-time course load or more than a full-time course load between two or more districts. For example, within the Sacramento region there are four CCDs which a faculty member could easily drive to within an hour. This phenomenon of a part-time faculty being employed full-time between two or more community colleges is known as freeway fliers and has been a concern raised by faculty for the last several decades.

Despite having a full-time course load, these faculty are still seen as part-time at each CCD rather than full-time by the system. Unlike their four-year counterparts, the CCC system is not seen as a single unit with one collective bargaining agreement for all faculty; instead, the CCC system is divided into 73 locally governed units who have individual autonomy to employ, promote, and discontinue the employment of faculty. These multidistrict faculty, despite having a full-time course load, are not afforded the same continuity of employment and benefits as their full-time counterparts. Committee staff note there are multiple lawsuits filed by part-time faculty moving through the California Judicial System regarding part-time faculty workloads, employer, and pay. *While this measure would not have a direct impact on the lawsuits, it is possible this measure could introduce a costly statewide mandate that in addition to the looming settlements*

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<sup>1</sup> Student Count – Annual Search – 2024-2025 – CCC Chancellor's Office Management Information Systems Data Mart.

<sup>2</sup> Headcount by District – 2024 – Annual Statewide staffing Reports - Faculty and Staff - CCC Chancellor's Office Management Information Systems Data Mart.

*or payouts from the pending lawsuits could prove exponentially costly to the CCC system and the State.*

Unlike their four-year counterparts, the CCC system is reliant on part-time faculty. In February 2023, the California State Auditor published an audit on the employment of part-time and full-time faculty at the community colleges and the various efforts of the Legislature to reduce the system's reliance on part-time faculty. The Auditor rationalized the increase in part-time faculty employment to the fact "colleges can hire part-time faculty faster and at less cost than they can hire full-time faculty, they frequently rely on part-time hiring to fill faculty positions in the short term."<sup>3</sup> Salaries and benefits provided to faculty at community colleges are determined by the conditions of a collective bargaining agreement between the community college governing board and the exclusive representatives of the faculty. Since there are 73 CCDs, there are 73 distinctly unique collective bargaining agreements which provide the terms and conditions for the educational services rendered by faculty to students within the CCD.

*Healthcare Benefits at the CCC.* One of the terms and conditions negotiated as part of a collective bargaining agreement is health care for faculty. Since there are 73 different collective bargaining agreements within the CCC system, the scope of health care benefits for faculty ranges widely throughout the state. While each CCD provides health care to full-time faculty, the scope of the health care, the cost of the co-payment for the employee, and the inclusion of dependents varies from district to district. Some CCDs for example provide multiple options for health care insurance to the faculty, some of which require a co-pay and some of which require no co-pay. Some CCDs include up to two dependents in the employer covered cost of insurance and others require the faculty to pay for the inclusion of dependents on the health insurance. Since each CCD operates as a medium size business, the governing board of each CCD is authorized to negotiate salaries, benefits, and work requirements for each employee union including part-time and full-time faculty. Therefore, the minimum provision of benefits for employees, unless stipulated in State or Federal Law is entirely negotiated by the CCD with the employee unions. Unlike their full-time counterparts, there is no Federal nor State law that requires health care benefits to be provided to part-time faculty. The provision of health insurance to part-time faculty is entirely predicated on the willingness of a CCD agree to the benefit as part of the CCD's collective bargaining agreement for part-time faculty. AB 1171 (Patel) would remove the provision of health insurance from the collective bargaining process and instead creates a program by which every CCD would provide health insurance reimbursements to qualifying part-time and multidistrict faculty.

*Part-time Community College Faculty Health Care Program - Version 1.0.* While there is no statewide requirement for the CCDs to provide health insurance to part-time faculty, since 1996, there has been a program by which CCDs receive partial reimbursement from the State for the cost of providing health insurance to part-time faculty.

In 1996, the State Legislature sought to address concerns raised by faculty of the CCC system's reliance on part-time faculty who were missing out on health insurance due to their part-time status despite having full-time course loads. AB 3099 (Campbell), Chapter 943, Statutes of 1996, established the part-time community college faculty healthcare program (program) to provide reimbursements to CCDs who provide health insurance to part-time faculty whose course load is

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<sup>3</sup> <https://information.auditor.ca.gov/reports/2022-113/index.html>

the equivalent of full-time between two or more CCDs. The justification for the measure was addressed in the Assembly Floor Analysis in 1996:

“Part-time faculty, who teach up to 60% of a full-time load of 12 units, generally receive no benefits, are paid less proportionately than full-time faculty, and have no job security. There are more than 26,000 part-time faculty in the community college system. This bill is intended to provide health benefits to ‘freeway fliers,’ part-time faculty who teach the equivalent of a full-time course load between two or more districts. The Community College Chancellor’s office estimates that there are approximately 1,300 ‘freeway fliers’ in the community college system, of which approximately 900 are employed more than 60% time. Although their course load meets or exceeds the minimum full-time load, ‘freeway fliers’ teaching the equivalent of a full-time load do not receive benefits as a full-time faculty member does.”<sup>4</sup>

The program received continuous appropriation each year until the program was amended in 2022. In the last year data was available for Version 1.0 of the program, 33 CCDs participated in the program and 3,691 part-time faculty received health insurance. The program received \$490,000 in State funding and the reimbursement from the State covered 2% of each CCD’s cost to provide health insurance to part-time faculty.<sup>5</sup>

*Part-time Community College Faculty Health Care Program - Version 2.0.* In January 2022, the Governor proposed increasing the annual appropriation for the program from \$490,000 to \$200 million. The proposed increase was intended to “augment the Part-Time Faculty Health Insurance Program to expand healthcare coverage provided to part-time faculty by community college districts.”<sup>6</sup> The original proposal did not include trailer bill language to expand the program nor did the original proposal identify how the Governor expected the program to “expand healthcare coverage.”

During discussions on the 2022 budget proposal in the Assembly concerns were raised by the Legislative Analyst Office (LAO) as to the viability of the program long-term and whether the program provided the best form of healthcare to faculty. Version 1.0 of the program allowed CCDs to provide any form of healthcare to part-time faculty with no limit to the amount of copay required by the CCD for the healthcare. The LAO argued with the creation of the California Health Benefits Exchange conceivably Covered California could offer part-time faculty with more options and lower premiums than a CCD.<sup>5</sup> Furthermore, the Chancellor’s Office of the CCC could not provide clear data on how many faculty would qualify for the program, how many part-time faculty were without health insurance, and whether the existing provision of health insurance by CCDs and the increase in funding would address the health care needs of faculty.<sup>5</sup>

To address concerns raised regarding the infusion of funding for the program, faculty groups worked alongside Senate and Assembly Budget staff to modify the program to include more faculty and to address concerns regarding the type of health care being provided to part-time faculty. The modifications established the version of the program which exists today. While still

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<sup>4</sup> California Archives – Assembly Floor Analysis – prepared by Alva Johnson – AB 3099 (Campbell), Chapter 943, Statutes of 1996

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<https://abgt.assembly.ca.gov/sites/abgt.assembly.ca.gov/files/April%205%20Sub%202%20CCC%20Agenda%20FINAL.pdf>

<sup>6</sup> <https://ebudget.ca.gov/2022-23/pdf/BudgetSummary/HigherEducation.pdf>

a voluntary program for CCDs to participate in, the program was expanded to provide health insurance to both faculty with a course load equal to or greater than 40% of a full-time equivalent course load. The changes adopted in 2022 created a two-part model whereby CCDs would provide access to health insurance to part-time and multidistrict faculty and then be eligible to for funding from the State.

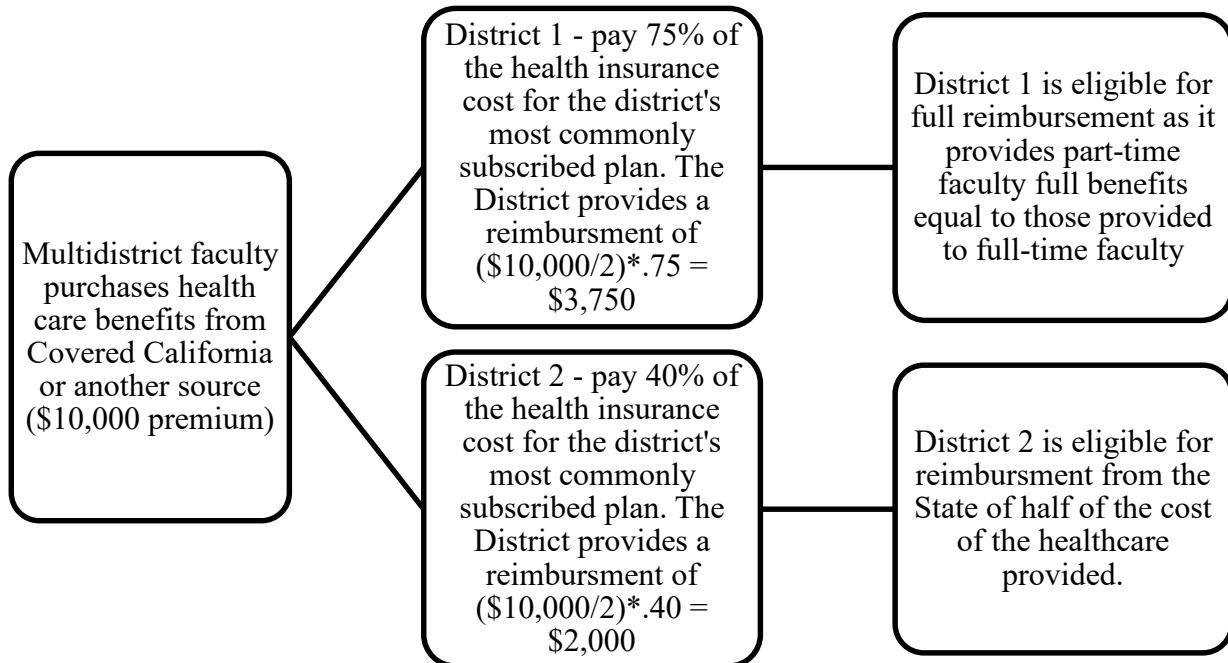
For multidistrict faculty, a faculty member would self-purchase healthcare and then receive reimbursement from the various CCDs through a formula. The CCD would then be eligible for State funding equal to either half or the full amount of the reimbursement that was provided by the CCD to the faculty. The formula to determine the amount the CCD will pay for their portion of the multidistrict faculty's self-purchased healthcare is as follows: (A/B)\*C

A = Total premium paid by the multidistrict part-time faculty.

B = Total number of district in which the multidistrict part-time faculty works.

C = % of health insurance cost paid by the district toward the total cost of the premiums for full-time faculty premiums or the most commonly subscribed premium offered by the district

The program places a cap on the total amount of reimbursement for multidistrict faculty for each CCD. The cap is equal to the total amount the district pays for the most commonly subscribed family coverage plan. The below model describes how the existing program provides healthcare access for multidistrict faculty and how the CCD receives funding from the State through the program:



For non-multidistrict part-time faculty, Version 2.0 of the program allows a CCD to collectively bargain health insurance benefits the exclusive representation for part-time faculty and offers health insurance. The program places the responsibility on the CCD and the exclusive representation of the part-time faculty to negotiate the terms of the provision of health care benefits through the CCD's collective bargaining process. The CCD is entitled to provide any

amount of coverage for the part-time faculty; however, the amount of funding the CCD receives from the State to aid in the provision of health insurance to part-time faculty is entirely predicated on the level of health insurance provided.

For a CCD to receive state funding equal to 100% of the total cost of providing health insurance to both multidistrict and part-time faculty, the CCD would have to meet the following requirements:

- 1) A CCD must offer the same health insurance coverage to all part-time faculty who have a minimum course load equal to 40% of a full-time course load;
- 2) A CCD must offer the same health insurance benefits to all faculty (part-time and full-time) who qualify; and,
- 3) The CCD must provide healthcare reimbursements to eligible multidistrict faculty, as illustrated above.

If a CCD does not meet the qualifications for full reimbursement from the state, the CCD will only receive 50% of the total cost of providing health insurance to both multidistrict and part-time faculty.

Along with the changes to the program, the Governor and the Legislature increased the funding for the part-time community college faculty health insurance program to \$200,490,000; which has been continuously approved each year since June 2022.

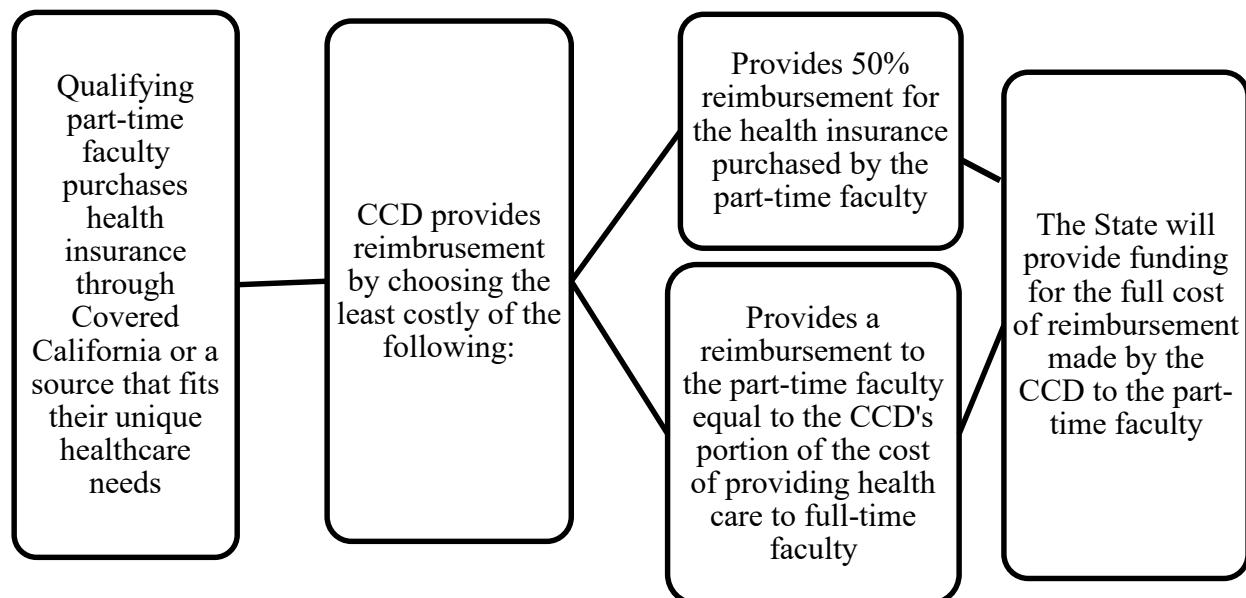
According to data provided by the Chancellor's Office of the CCC in the 2024-2025 fiscal year, 49 of the 72 brick and mortar CCDs participate in the program and provided 6,824 part-time faculty with health insurance benefits. The program also provided 125 multidistrict faculty with health insurance reimbursements. Of the \$200,490,000 appropriated for the program in the 2024-2025 fiscal year, only \$69,489,565 was dispersed to participating CCDs to cover the cost of the health insurance. 27 of the 44 CCDs who received state funding received an amount equal to the full cost of providing health insurance to their part-time and multidistrict faculty.<sup>7</sup>

*Proposed Changes to the Existing Part-time Community College Faculty Health Care Program.* AB 1171 (Patel) seeks to expand the program by making CCDs participation in the program a statewide mandate. AB 1171 (Patel) also seeks to make modifications to the existing program by establishing in state code a reimbursement plan for all qualifying part-time and multidistrict faculty. AB 1171 (Patel) repeals the existing program and seeks to provide an avenue for all CCDs to receive full funding from the state for the cost of providing reimbursements to part-time and multidistrict faculty. Instead of only permitting certain CCDs to receive full state funding for the cost of health insurance, under AB 1171 (Patel) all CCDs will receive funding to cover the total cost of providing health insurance to multidistrict and part-time faculty. The measure would also provide agency for all qualifying part-time faculty (regardless of multidistrict status) to purchase healthcare that addresses their unique health needs.

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<sup>7</sup> <https://www.cccco.edu/-/media/CCCCO-Website/docs/summary/2024-25-final-part-time-faculty-health-insurance-reimbursement-summary-a11y.pdf>

The measure modifies the existing reimbursement model for multidistrict faculty by ensuring that all CCDs receive state funding to cover the total cost of the health insurance reimbursement for multidistrict faculty. The measure establishes a reimbursement model for part-time faculty as follows:



*Committee comments.* When the program was instituted in 1996, the scope of the program was narrow: it only provided healthcare for faculty with a full-time course load between multiple CCDs and required the CCDs to voluntarily participate. In 1996, it was estimated that 1,300 faculty were employed by two or more CCDs and of those only 900 would qualify for health insurance through the program. The 1996 Assembly Committee on Appropriations analysis estimate the program would cost \$1 million to provide health insurance to 900 faculty.<sup>8</sup> Between 1996 and 2022, the participation in the program grew to 3,691 part-time faculty.

Since the modification to the program in 2022, participation in the program has increased by roughly 90% with State funding to CCDs nearly tripling in cost; however, as noted in the chart below the cost has never come close to the total amount provided by the State.

Year	Number of participants	Cost to the State in reimbursements to CCDs
2022-2023	3,840	\$23,270,785
2023-2024	4,711	\$37,730,254
2024-2025	6,950	\$69,489,565

Source: Chancellor's Office of the CCC

<sup>8</sup> California Archives – Assembly Committee on Appropriations Analysis – AB 3099 (Campbell), Chapter 943, Statutes of 1996.

In addition to the increase in number of CCDs and faculty participating in the program, healthcare premiums have exponentially increased since 1996. According to Covered California, a family of four in an urban area can spend up to \$2,055 for basic health care coverage and in a rural area the cost increases to \$2,550.<sup>9</sup> Additionally, the number of part-time faculty employed the CCDs has ballooned since 1996 from 26,000 to 38,831 in 2024.

Due to these dramatic increases, concerns have been raised as to whether the existing annual appropriation of \$200 million from the State is enough to address a statewide mandate expansion as proposed by this measure. The proposed statewide mandate does not change the existing eligibility restrictions for the program. A faculty member who receives health insurance from a non-community college source is not eligible. A faculty member whose course load is less than 40% of a full-time load is not eligible for the program. However, concerns regarding the cost of the mandate are founded due to the lack of reliable data to determine the number of eligible faculty.

Due to the decentralized nature of the CCC and the existence of local governance, the State does not have a reliable method of tracking: 1) the number of part-time faculty employed by multiple CCDs; 2) the course loads of faculty (full-time nor part-time) across the CCC system; and 3) the number of faculty without access to health insurance who would benefit from this measure.

These concerns were raised in 2022 during the Legislative Budget Process and have not been resolved. Committee staff note due to the lack of data it is impossible to know the true cost of the measure. However, if every existing participating CCD (48) were to have both the CCD's contribution and the faculty contribution covered by a reimbursement (\$80.2 million) and that sum was doubled (\$160.2 million), it would still be less than the allocated \$200 million.<sup>10</sup> If the three CCDs with the highest volume of participating part-time faculty, who provide the same health care for their part-time faculty as their full-time faculty, and subsequently receive the most in state funding, were to have their total state funding added together and multiplied by five it would still be less than \$200 million.<sup>10</sup>

Faculty have suggested the existing program is not working as there are several CCDs who have elected to not participate in the program despite requests from the exclusive representation of part-time faculty. Since the current program is voluntary, CCDs are not required to include health insurance as part of their collective bargaining agreement with part-time faculty. CCDs have expressed concern in voluntarily participating in the program whose funding is categorical and could be removed in any given budget year. This concern has historical relevance as the program received an apportionment of \$1 million from the state for several years, only for this amount to be reduced to \$490,000 during the Great Recession.

Without clear data on faculty workloads and classifications across the system, it is impossible to determine if the fears and concerns of a statewide mandate are founded; however, what is clear is the concept of a voluntary program has not resulted in the original intent of the Legislature – to provide healthcare to those faculty who are working full-time course loads across multiple CCDs. AB 1171 would realize this intention by creating a statewide mandate health insurance reimbursement program for qualifying part-time and multidistrict faculty.

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<sup>9</sup> <https://www.healthforcalifornia.com/plan-list?open-plan-wizard=0> and <https://www.healthforcalifornia.com/plan-list?open-plan-wizard=0>

<sup>10</sup> <https://www.cccco.edu/-/media/CCCCO-Website/docs/summary/2024-25-final-part-time-faculty-health-insurance-reimbursement-summary-a11y.pdf>

As previously mentioned, the existing program honors the local control of community college governing boards by allowing each CCD to negotiate through the collective bargaining process for the provision of health insurance. Concerns have been raised that the proposed language does not ensure a minimum level of quality of health insurance that would be available to community college faculty. AB 1171 (Patel) promotes equity across the system by allowing the individual faculty member to select any health insurance program that works for them rather than the health insurance provided by the CCD. Currently only half of participating CCDs provide the same health insurance to their full-time and part-time faculty. This measure would guarantee that all part-time faculty would at least be given a reimbursement equal to the “district’s most commonly subscribed family coverage plan” or half of faculty’s cost of the health insurance program.

Since AB 1171 creates a statewide mandate and outlines how CCDs are required to comply with the statewide mandate, the proposed language would supersede existing collective bargaining agreements. However, questions have been raised as to whether the proposed bill language would disrupt existing health insurance coverage that is subject to existing collective bargaining agreements. In the collective bargaining agreements examined by Committee staff of CCDs with healthcare coverage for part-time faculty, the agreements had a severability clause which stated if changes are made to the program or if funding was no longer available, the CCD was not required to provide part-time faculty with health insurance.

*Moving forward the Author may wish to address this concern by including a clause that delays implementation for CCDs with existing agreements for the provision of healthcare.*

Concerns have been raised that the deletion of “dependents” from existing program removes the ability for part-time faculty to have their dependents covered by the health insurance provided by AB 1171 (Patel). *To address this concern and to address a drafting error, the Committee has suggested, and the Author has accepted the following amendments:*

1) *Amends Education Code Section 87860 to read as follows:*

87860. It is the intent of the Legislature that part-time faculty and multidistrict part-time faculty *and their eligible dependents* have continuous access to health insurance benefits.

2) *Amends Education Code Section 87862 to read as follows:*

87862. (a) A part-time faculty member *and their eligible dependents are* ~~is~~ eligible to participate in the program established pursuant to this article.

(b) A multidistrict part-time faculty member and their eligible dependents are eligible ~~is~~ *eligible* to participate in the program established pursuant to this article.

3) *Amends Education Code 87863 to read as follows:*

87863. A part-time faculty member and a multidistrict part-time faculty member, *or their dependents* whose premiums for health insurance are paid by an employer other than a community college district are not eligible to participate in the program established pursuant to their article.

4) *Amends the Education Code Section 87864 subdivision (b) to read as follows:*

(b) A community college district shall reimburse a part-time faculty member for health insurance benefits purchased by the part-time faculty member. *The reimbursement rate shall be fifty percent of the health insurance premium paid by the part-time faculty member, up to the full cost of the district's most commonly subscribed family coverage plan. be the lesser of either of the following:*

~~(1) A community college district shall reimburse up to 50 percent of the total health insurance premium paid by the part time faculty member for 12 months of health care benefits.~~

~~(2) A community college district shall reimburse up to the district's proportionate share of the full cost of the district's most commonly subscribed family coverage plan.~~

5) Amends Education Code Section 87867 subdivision (a) to read as follows:

87867. (a) By June 15 of each year, the Chancellor of the California Community Colleges shall apportion to each community college district the total cost of the reimbursements for part-time faculty and multidistrict faculty, *and their dependents* as determined by Sections 87862 and 87865.

## REGISTERED SUPPORT / OPPOSITION:

### Support

None on file.

### Opposition

None on file.

**Analysis Prepared by:** Ellen Cesaretti-Monroy / HIGHER ED. / (916) 319-3960