MEMORANDUM OF AGREEMENT

Between

The City of Saint Paul

And

AFSCME Council 5 (Locals 1842, 2508, 3757), CCEA, FIRE FIGHTERS Local 21, FSA Local 3939, MACHINISTS, MANUAL & MAINTENANCE SUPERVISORS ASSOCIATION, OPERATING ENGINEERS Local 70, POLICE FEDERATION, PEA, SPSO, & TRI-COUNCIL (Locals 49, 120, 363) FOR 2021-2022

This MOA is entered into by the City of Saint Paul and the above listed Unions for the purpose of establishing Health Insurance contribution rates and VEBA contribution rates for 2021 and 2022. The parties agree to accept the Medica Health Insurance bid which includes rate increases of 3.5% in each year. Based on this agreement, the parties agree to the following:

- 1) The City agrees to continue to pay the administrative costs for FSA and the HRA and the premium for the preventive dental portion of the dental options. The employee will continue to pay the buy-up premiums for any additional dental insurance coverage the employee elects to receive. **Note**: the cost of the preventive dental was removed from the calculation in 2019 since the City is now responsible for the full cost of preventive dental.
- 2) The rates listed in Appendix A shall be incorporated into each individual union's 2021-2022 collective bargaining agreement.
- 3) This language does not alter or change the City's commitment to make pro-rata contributions for part-time employees as stated in applicable contracts.

4) The parties agree to accept the wellness program components approved by the LMCHI.

FOR THE CITY:

Jason Schmidt,
Labor Relations Manager

UNION:

NAME:

AFSCME Clerical, Local 2508

AFSCME Technical, Local 1842

AFSCME Legal, Local 3757

Classified Confidential Employees Assn (CCEA)

See attackment

Fire Fighters, Local 21

Fire Supervisory Association, Local 3939

Machinists, District Lodge No. 77	Il Stery of
Manual & Maintenance Supervisors Assn	Chile Otambe
Operating Engineers, Local 70	Christy Mills
Saint Paul Police Federation	see attackment
Professional Employees Association (PEA)	Resin Efre
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Saint Paul Supervisor's Organization (SPSO)	The P. I.
Tri-Council LIUNA Laborers Local 363	Momar
Tri-Council General Drivers Local 120	see attackment
Tri-Council Operating Engineers Local 49	see attachment

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FOR THE CITY:	Jason Schmidt, Date Labor Relations Manager
UNION:	NAME:
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FOR THE CITY:		
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	Labor Relations Manager	
UNION:	NAME:	
AFSCME Clerical, Local 2508		
AFSCME Technical, Local 1842	S	
AFSCME Legal, Local 3757		
Classified Confidential Employees Assn (CCEA)	Jane Watchind	
Fire Fighters, Local 21		
Fire Supervisory Association, Local 3939		- 120

Machinists, District Lodge No. 77	
Manual & Maintenance Supervisors Assn	
Operating Engineers, Local 70	
Saint Paul Police Federation	Parl 9 X 8-6-20
Professional Employees Association (PEA)	
Saint Paul Supervisor's Organization (SPSO)	
Tri-Council LIUNA Laborers Local 363	
Tri-Council General Drivers Local 120	
Tri-Council Operating Engineers Local 49	

Machinists, District Lodge No. 77	· · · · · · · · · · · · · · · · · · ·
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Saint Paul Supervisor's Organization (SPSO)	
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Tri-Council General Drivers Local 120	
Tri-Council Operating Engineers Local 49	the

APPENDIX A

(2021-2022 Premiums)

Effective <u>January 2021</u>, for each eligible employee covered by this Agreement who is employed full-time and who selects City-provided employee health insurance coverage, the Employer agrees to contribute the following amounts per month:

Choice Passport Plan:

2020 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2021, after any plan design changes; employees shall be responsible for the 2020 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2021, after any plan design changes.

Based on a 3.5% premium increase, this results in the following Employer contributions:

Single:

\$671.62, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per

quarter in a VEBA for completion of 2020 Wellness Program).

Employee share: \$16.88/month.

Family:

\$1,580.76, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225

per quarter in a VEBA for completion of 2020 Wellness Program).

Employee share: \$216.72/month.

Elect Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2021; or the actual cost of the Elect Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on a 3.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single:

\$640.84, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per

quarter in a VEBA for completion of 2020 Wellness Program).

Employee share: \$0.00/month.

Family:

\$1,580.76 plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225

per quarter in a VEBA for completion of 2020 Wellness Program).

Employee share: \$92.92/month.

ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2021; or the actual cost of the ACO Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on a 3.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single:

\$620.54, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per

quarter in a VEBA for completion of 2020 Wellness Program).

Employee share: \$0.00/month.

Family:

\$1,580.76, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225

per quarter in a VEBA for completion of 2020 Wellness Program).

Employee share: \$39.88/month.

Passport Copay Plan:

Single: \$398.88

(Employee share: \$481.08/month)

Family:

\$748.22

(Employee share: \$1,560.02/month)

Memorandum of Agreement APPENDIX A (2021-2022 Premiums) Page Two

Effective <u>January 2022</u>, for each eligible employee covered by this Agreement who is employed full-time and who selects City-provided employee health insurance coverage, the Employer agrees to contribute the following amounts per month:

Choice Passport Plan:

2021 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2022, after any plan design changes; employees shall be responsible for the 2021 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2022, after any plan design changes.

Based on a 3.5% premium increase, this results in the following Employer contributions:

Single: \$691.46, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per

quarter in a VEBA for completion of 2021 Wellness Program).

Employee share: \$21.08/month.

Family: \$1,632.66, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225

per quarter in a VEBA for completion of 2021 Wellness Program).

Employee share: \$227.72/month.

Elect Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2022; or the actual cost of the Elect Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on a 3.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: \$663.26, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per

quarter in a VEBA for completion of 2021 Wellness Program).

Employee share: \$0.00/month.

Family: \$1,632.66 plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225

per quarter in a VEBA for completion of 2021 Wellness Program).

Employee share: \$99.58/month.

ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2022; or the actual cost of the ACO Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on a 3.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: \$642.26, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per

quarter in a VEBA for completion of 2021 Wellness Program).

Employee share: \$0.00/month.

Family: \$1,632.66, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225

per quarter in a VEBA for completion of 2021 Wellness Program).

Employee share: \$44.70/month.

Passport Copay Plan:

Single: \$398.88 (Employee share: \$511.88/month)
Family: \$748.22 (Employee share: \$1,640.80/month)

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