MEMORANDUM OF AGREEMENT
Between
The City of Saint Paul
And
AFSCME Council 5 (Locals 1842, 2508, 3757), CCEA, FIRE FIGHTERS Local 21, FIRE SUPERVISOR ASSOCIATION, MACHINISTS, MANUAL & MAINTENANCE SUPERVISORS ASSOCIATION, OPERATING ENGINEERS Local 70, POLICE FEDERATION, PEA, SPSO, & TRI-COUNCIL (Locals 49, 120, 363) FOR 2026-2027

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 2026 and 2027. The parties agree to accept the Medica Health Insurance bid which includes a rate 8.0% increase for 2026, and a 9.5% rate cap for 2027. 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 elective dental insurance coverage. 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 2026 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.
5) The parties agree to accept a partnership with Kavira Health, which will provide a 1.5% reduction in 2026 Medica Health Insurance bid. This partnership reduced the 9.5% increase to 8%.

FOR THE CITY: Jason Schmidt (Sep 4, 2025 13:09:40 CDT) Sep 4, 2025

Jason Schmidt, Date
Labor Relations Manager

UNION: **NAME:**

AFSCME Clerical, Local 2508 Jen Quertin (Aug 6, 2025 07:57:11 CDT)

AFSCME Technical, Local 1842 Isaac Mielke (Sep 4, 2025 12:32:13 CDT)

AFSCME Legal, Local 3757 Anthony Edwards (Aug 6, 2025 08:50:51 CDT)

AFSCME Field Representative Dane Ryan (Sep 4, 2025 12:41:11 CDT)

Classified Confidential Employees Assn (CCEA) Michelle LeBow

Fire Fighters, Local 21	
Fire Supervisory Association	
Machinists, District Lodge No. 77	Ingrid V[illegible]ela (Aug 6, 2025 13:08:29 CDT)
Manual & Maintenance Supervisors Assn	Joe Grau
Operating Engineers, Local 70	Travis Aslakson (Aug 7, 2025 10:05:34 CDT)
Saint Paul Police Federation	Mark Ross (Aug 18, 2025 12:55:36 CDT)
Professional Employees Association (PEA)	Sara Nurmela
Saint Paul Supervisor's Organization (SPSO)	Glen Kadrlik Glen Kadrlik (Aug 19, 2025 08:07:30 CDT)
Tri-Council LIUNA Laborers Local 363	
Tri-Council General Drivers Local 120	Chris Riley Chris Riley (Sep 4, 2025 11:50:22 CDT)
Tri-Council Operating Engineers Local 49	Jonathan Turner (Sep 4, 2025 11:58:40 CDT)

APPENDIX A

(2026-2027 Premiums)

Effective **January 2026**, 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:
2025 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2026, after any plan design changes; employees shall be responsible for the 2025 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2026, after any plan design changes.

Based on the proposed Medica RFP quotes, this results in the following Employer contributions:

Single: $833.04, plus $225 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2025 Wellness Program).
Employee share: $51.10/month.

Family: $2,002.34 plus $135 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2025 Wellness Program).
Employee share: $306.12/month.

Elect Plan/Vantage Plus ACO Plan:
The lesser of the Employer's contribution for the Choice Passport Plan for 2026; or the actual cost of the Elect Plan/Vantage Plus ACO Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on the proposed Medica RFP quotes for the Choice Passport Plan, this results in the following Employer contributions:

Single: $796.30, plus $225 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2025 Wellness Program).
Employee share: $0.00/month.

Family: $2,002.34 plus $135 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2025 Wellness Program).
Employee share: $77.42/month.

Park Nicollet ACO Plan:
The lesser of the Employer's contribution for the Choice Passport Plan for 2026; or the actual cost of the Park Nicollet ACO Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on the proposed Medica RFP quotes for the Choice Passport Plan, this results in the following Employer contributions:

Single: $791.46, plus $225 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2025 Wellness Program).
Employee share: $0.00/month.

Family: $2,002.34, plus $135 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2025 Wellness Program).
Employee share: $64.82/month.

Passport Copay Plan:
Single: $398.88 (Employee share: $731.28/month)
Family: $748.22 (Employee share: $2,216.32/month)

If the actual premiums for 2026 differ from the estimate upon which these contributions are based, the employer and employee contributions will be adjusted to reflect the negotiated cost sharing percentages as applied to the actual premiums for all plan options other than the Passport Copay Plan.

Effective **January 2027**, 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:
2026 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2027, after any plan design changes; employees shall be responsible for the 2026 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2027, after any plan design changes.

Based on a 9.5% premium increase, this results in the following Employer contributions:

Single: $902.30, plus $225 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2026 Wellness Program).
Employee share: $65.78/month.

Family: $2,183.22, plus $135 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2026 Wellness Program).
Employee share: $344.48/month.

Elect Plan/Vantage Plus ACO:
The lesser of the Employer's contribution for the Choice Passport Plan for 2027; or the actual cost of the Elect Plan/Vantage Plus ACO Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on a 9.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: $871.94, plus $225 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2026 Wellness Program).
Employee share: $0.00/month.

Family: $2,183.22, plus $135 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2026 Wellness Program).
Employee share: $94.10/month.

Park Nicollet ACO Plan:
The lesser of the Employer's contribution for the Choice Passport Plan for 2027; or the actual cost of the Park Nicollet ACO Plan premium. Employees shall be responsible for the difference between the monthly premium and the Employer's monthly contribution.

Based on a 9.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: $866.64, plus $225 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2026 Wellness Program).
Employee share: $0.00/month.

Family: $2,183.22 plus $135 per quarter to be deposited in a VEBA account (plus an additional $225 per quarter in a VEBA for completion of 2026 Wellness Program).
Employee share: $80.32/month.

Passport Copay Plan:
Single: $398.88 (Employee share: $838.64/month)
Family: $748.22 (Employee share: $2,497.94/month)

If the actual premiums for 2027 differ from the estimate upon which these contributions are based, the employer and employee contributions will be adjusted to reflect the negotiated cost sharing percentages as applied to the actual premiums for all plan options other than the Passport Copay Plan.