

# Agenda Summary Report (ASR)

## Franklin County Board of Commissioners

<b>DATE SUBMITTED:</b> 10-16-2023	<b>PREPARED BY:</b> Margot Wilder
<b>Meeting Date Requested:</b> 10-18-2023	<b>PRESENTED BY:</b> Mike Gonzalez
<b>ITEM:</b> (Select One)      Consent Agenda <b>X</b> Brought Before the Board <b>Time needed:</b> 10 minutes	
<b>SUBJECT:</b> Determining Franklin County benefit contributions to health benefit plans and determination of VEBA benefit amounts for Non-Barg and Elected Officials, to be effective January 1, 2024. Also prohibiting Franklin County Commissioners from converting VEBA fringe benefit to wages.	
<b>FISCAL IMPACT:</b> The fiscal impact with vary from 2023 – 2024 as the changes are tied to benefit selections and those change from year to year.	
<p><b>BACKGROUND:</b> There is a desire to make the contributions toward the benefit premiums and HRA VEBA contributions more fiscally equitable for each eligible employee. The current contribution process is to provide each benefit eligible employee an equal sum, which is distributed between Medical, Dental, Vision, Long Term Disability and Life Insurance to cover the premiums for these benefits. This process creates a drastic discrepancy, with Medical, in regards to employee premium costs and the HRA VEBA benefit.</p> <p>As HRA VEBA has historically been a collection benefit for any contribution money that exceeds premium costs and therefore is not a true benefit for each employee. We are looking to shift contributions to create better equity regarding premium rates and maintain equality regarding HRA VEBA, by contributing an equal amount of money to each eligible employee for their HRA VEBA benefit. Employees who enroll in Franklin County's medical plan will receive \$400 and those who waive will receive \$600.</p> <p>County contributions toward medical premiums will adjust from year to year as medical premiums will adjust. As will the potential of employee premiums costs for benefits. For 2024 the employee premiums rates will range from \$12.50 - \$400.00 a month for medical, \$5.00 - \$40.00 a month for dental, long term disability, vision and life insurance will be fully covered by the county for each eligible employee.</p>	
<b>COORDINATION:</b> Mike Gonzalez, County Administrator, Margot Wilder, Human Resources Director and Tim Anderson, Finance Director	
<b>RECOMMENDATION:</b> The above parties are recommending the approval of the Benefit Contribution Changes for Non-Barg and Elected Officials for 2024	
<b>ATTACHMENTS:</b> (Documents you are submitting to the Board) ASR & Resolution	
<b>HANDLING / ROUTING:</b> (Once document is fully executed it will be imported into Document Manager. Please list <u>name(s)</u> of party(s) that will need a pdf.) Original : Clerk of the Board Teresa Alvarez Copy: Human Resources, Auditor's Office	

*I certify the above information is accurate and complete.*

Name:  Mike Gonzalez, County Administrator

**FRANKLIN COUNTY RESOLUTION \_\_\_\_\_**

**BEFORE THE BOARD OF COUNTY COMMISSIONERS  
FRANKLIN COUNTY, WASHINGTON**

**APPROVAL OF 2024 COUNTY BENEFIT CONTRIBUTION CHANGES FOR NON-BARGAINING  
EMPLOYEES and ELECTED OFFICIALS**

**WHEREAS**, the Board of Franklin County Commissioners acknowledges the importance of County employees in delivering services to the Citizens of Franklin County; and

**WHEREAS**, the Board of Franklin County Commissioners endeavors to balance meeting the County's financial obligations and the desire to provide adequate total compensation to our valued employees ; and

**WHEREAS**, the change of County contributions to the medical and dental plans will vary each year depending on the cost of premiums. The premiums incurred by each employee may also vary each year with changes in the cost of premiums; and

**WHEREAS**, the Board of Franklin County Commissioners desires to implement an adjustment to the County contribution to benefits for non-bargaining employees and elected officials as well as prohibiting the Commissioners from converting VEBA fringe benefits to wages; and

**WHEREAS**, the Board of Franklin County Commissioners constitutes the legislative authority of Franklin County and deems this to be in the best interest of Franklin County.

**NOW, THEREFORE IT IS HEREBY RESOLVED** the Board of Franklin County Commissioners hereby approves monthly insurance contributions towards benefit premiums for benefits-eligible non-bargaining employees and elected officials, effective January 1, 2024, of \$20.00 to vision, \$4.56 to life, \$5.00 to long-term disability, and medical, dental, medical VEBA, and dental VEBA as detailed in the charts below:

Medical Plans				
PPO 1000	Premium	Employer Premium Paid	Employee Premium Paid	Medical VEBA
Employee Only	\$800.38	\$750.38	\$50.00	\$400.00
Employee & Spouse	\$1,680.79	\$1,480.79	\$200.00	\$400.00
Employee & Child(ren)	\$1,440.68	\$1,340.68	\$100.00	\$400.00
Family	\$2,401.14	\$2,001.14	\$400.00	\$400.00
PPO 2000	Full Rate	Employer Premium Paid	Employee Premium Paid	Medical VEBA
Employee Only	\$675.26	\$650.26	\$25.00	\$400.00
Employee & Spouse	\$1,418.04	\$1,318.04	\$100.00	\$400.00
Employee & Child(ren)	\$1,215.47	\$1,165.47	\$50.00	\$400.00
Family	\$2,025.78	\$1,825.78	\$200.00	\$400.00
PPO 3500	Full Rate	Employer Premium Paid	Employee Premium Paid	Medical VEBA
Employee Only	\$576.99	\$564.49	\$12.50	\$400.00
Employee & Spouse	\$1,211.67	\$1,161.67	\$50.00	\$400.00
Employee & Child(ren)	\$1,038.58	\$1,013.58	\$25.00	\$400.00
Family	\$1,730.97	\$1,630.97	\$100.00	\$400.00

<b>H.S.A. 3500</b>	<b>Full Rate</b>	<b>Employer Premium Paid</b>	<b>Employee Premium Paid</b>	<b>Medical VEBA</b>
Employee Only	\$719.60	\$689.60	\$30.00	\$400.00
Employee & Spouse	\$1,511.16	\$1,391.16	\$120.00	\$400.00
Employee & Child(ren)	\$1,295.28	\$1,235.28	\$60.00	\$400.00
Family	\$2,158.80	\$1,918.80	\$240.00	\$400.00
<b>No Plan</b>	<b>Full Rate</b>	<b>Employer Premium Paid</b>	<b>Employee Premium Paid</b>	<b>Medical VEBA</b>
WAIVERS	\$0.00	\$0.00	\$0.00	\$600.00
<b>Dental Plans</b>				
<b>Premera \$2000</b>	<b>Full Rate</b>	<b>Employer Premium Paid</b>	<b>Employee Premium Paid</b>	<b>Dental VEBA</b>
Employee Only	\$42.20	\$32.20	\$10.00	\$30.00
Employee & Spouse	\$90.54	\$75.54	\$15.00	\$30.00
Employee & Child(ren)	\$103.84	\$83.84	\$20.00	\$30.00
Family	\$150.14	\$110.14	\$40.00	\$30.00
<b>Premera \$1000</b>	<b>Full Rate</b>	<b>Employer Premium Paid</b>	<b>Employee Premium Paid</b>	<b>Dental VEBA</b>
Employee Only	\$30.24	\$25.24	\$5.00	\$30.00
Employee & Spouse	\$64.90	\$64.90	\$10.00	\$30.00
Employee & Child(ren)	\$73.30	\$58.30	\$15.00	\$30.00
Family	\$106.49	\$86.49	\$20.00	\$30.00
<b>Willamette</b>	<b>Full Rate</b>	<b>Employer Premium Paid</b>	<b>Employee Premium Paid</b>	<b>Dental VEBA</b>
Composite	\$142.96	\$112.96	\$30.00	\$30.00

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

**BOARD OF COUNTY COMMISSIONERS  
FRANKLIN COUNTY, WASHINGTON**

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Chair Pro Tem

ATTEST:

\_\_\_\_\_  
Member

\_\_\_\_\_  
Clerk of the Board