

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 2023-2025**

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 2023, 2024, and 2025. The parties agree to accept the Medica Health Insurance bid which includes a rate decrease for 2023, a 7.5% rate cap for 2024, and an 8.5% rate cap for 2025. 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 2023 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,	Date
Labor Relations Manager	

UNION:

NAME:

AFSCME Clerical, Local 2508 _____

AFSCME Technical, Local 1842 _____

AFSCME Legal, Local 3757 _____

Classified Confidential Employees Assn (CCEA) _____

Fire Fighters, Local 21 _____

Fire Supervisory Association, Local 3939 _____

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Machinists, District Lodge No. 77 _____

Manual & Maintenance Supervisors Assn _____

Operating Engineers, Local 70 _____

Saint Paul Police Federation _____

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 _____

APPENDIX A

(2023 - 2025 Premiums)

Effective **January 2023**, 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:

2022 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2023, after any plan design changes; employees shall be responsible for the 2022 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2023, after any plan design changes.

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

Single: \$683.22, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2022 Wellness Program).

Employee share: \$19.34/month.

Family: \$1,611.16, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2022 Wellness Program).

Employee share: \$223.16/month.

Elect Plan/Vantage Plus ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2023; 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: \$632.74, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2022 Wellness Program).

Employee share: \$0.00/month.

Family: \$1,611.16 plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2022 Wellness Program).

Employee share: \$41.40/month.

Park Nicollet ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2023; 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: \$628.90, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2022 Wellness Program).

Employee share: \$0.00/month.

Family: \$1,611.16, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2022 Wellness Program).

Employee share: \$31.40/month.

Passport Copay Plan:

Single: \$398.88 (Employee share: \$499.12/month)

Family: \$748.22 (Employee share: \$1,607.36/month)

If the actual premiums for 2023 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 2024**, 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:

2023 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2024, after any plan design changes; employees shall be responsible for the 2023 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2024, after any plan design changes.

Based on a 7.5% premium increase, this results in the following Employer contributions:

Single: \$726.70, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2023 Wellness Program).
Employee share: \$28.56/month.

Family: \$1,724.68, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2023 Wellness Program).
Employee share: \$247.24/month.

Elect Plan/Vantage Plus ACO:

The lesser of the Employer's contribution for the Choice Passport Plan for 2024; 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 7.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: \$680.18, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2023 Wellness Program).
Employee share: \$0.00/month.

Family: \$1,724.68 plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2023 Wellness Program).
Employee share: \$51.82/month.

Park Nicollet ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2024; 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 7.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: \$676.06, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2023 Wellness Program).
Employee share: \$0.00/month.

Family: \$1,724.68, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2023 Wellness Program).
Employee share: \$41.06/month.

Passport Copay Plan:

Single: \$398.88 (Employee share: \$566.48/month)
Family: \$748.22 (Employee share: \$1,784.02/month)

If the actual premiums for 2024 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 2025**, 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:

2024 contributions plus eighty-two and one-half percent (82.5%) of the premium increase for 2025, after any plan design changes; employees shall be responsible for the 2024 employee contribution, plus seventeen and one-half percent (17.5%) of the premium increase for 2025, after any plan design changes.

Based on an 8.5% premium increase, this results in the following Employer contributions:

Single: \$779.64, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2024 Wellness Program).
Employee share: \$39.78/month.

Family: \$1,862.94, plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2024 Wellness Program).
Employee share: \$276.56/month.

Elect Plan/Vantage Plus ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2025; 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 an 8.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: \$738.00, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2024 Wellness Program).
Employee share: \$0.00/month.

Family: \$1,862.94 plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2024 Wellness Program).
Employee share: \$64.56/month.

Park Nicollet ACO Plan:

The lesser of the Employer's contribution for the Choice Passport Plan for 2025; 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 an 8.5% premium increase for the Choice Passport Plan, this results in the following Employer contributions:

Single: \$733.52, plus \$225 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2024 Wellness Program).
Employee share: \$0.00/month.

Family: \$1,862.94 plus \$135 per quarter to be deposited in a VEBA account (plus an additional \$225 per quarter in a VEBA for completion of 2024 Wellness Program).
Employee share: \$52.88/month.

Passport Copay Plan:

Single: \$398.88 (Employee share: \$648.54/month)

Family: \$748.22 (Employee share: \$1,999.26/month)

If the actual premiums for 2025 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.