

## **City of Joliet**

# Finance Committee Meeting Agenda

Committee Members
Councilman Pat Mudron, Chairperson
Councilman Larry E.Hug
Councilwoman Sherri Reardon

Thursday, November 14, 2024

3:30 PM

\*Special Meeting\* City Hall, Council Chambers

Citizens who are unable to attend the meeting can email comments in advance of the meeting to publiccomment@joliet.gov.

#### **ROLL CALL:**

#### CITIZENS TO BE HEARD ON AGENDA ITEMS:

#### **AGENDA ITEMS:**

Ordinance Amending and Restating Ordinance 17928 which <u>TMP-7897</u> Established Salary Ranges and Fringe Benefits for Non-Union Employees (Amendment to Group Health Insurance)

Attachments: 2025 Insurance Renewal Ordinance

# NEW OR OLD BUSINESS, NOT FOR FINAL ACTION OR RECOMMENDATION:

#### **PUBLIC COMMENTS:**

#### ADJOURNMENT:

This meeting will be held in an accessible location. If you need a reasonable accommodation, please contact The City Clerk Office, 150 West Jefferson Street, Joliet, Illinois 60432 at (815) 724-3780.



### City of Joliet

#### Memo

File #: TMP-7897 Agenda Date:11/14/2024

**TO:** Finance Committee

**FROM:** Kevin Sing, Director of Finance

#### SUBJECT:

Ordinance Amending and Restating Ordinance 17928 which Established Salary Ranges and Fringe Benefits for Non-Union Employees (Amendment to Group Health Insurance)

#### **BACKGROUND:**

The City provides group insurance benefits to its employees. Historically, these benefits were set by ordinance for non-union employees, and by collective bargaining agreements for union employees. This action is to modify the group insurance benefit plans for non-union employees and non-union retirees.

In an effort to respond to employee's requests for preventative care coverage, staff is proposing updates to group insurance benefit plans for 2025. The new benefit options would include preventative care coverage and comply with the 2010 Affordable Care Act. The most significant change is the creation of a second tier of benefits for non-union employees hired after January 1, 2025, and reducing the City's cost of employee insurance long term. A complete summary of the changes are as follows:

#### **Coverage Options**

#### Tier 1 - Non-union employees hired before January 1, 2025

Note: Union coverages must be negotiated

- (a) Offer current \$250 deductible plan with percentage based contribution model.
  - a. No changes to health, dental and vision benefits
  - b. Eliminate current \$200 preventative care reimbursement
- (b) Add new \$500 deductible Affordable Care Act compliant plan:
  - a. Preventative care covered at 100% (current preventative care reimbursement will be eliminated)
  - b. Under the new plan, all costs count toward out-of-pocket maximum including copays and prescription drugs
  - c. Virtual doctor visits covered at 100%

- d. Increase vision reimbursement from \$150 to \$200
- e. Add coverage for dental implants at 50%
- f. Minimal copays for doctor visits, urgent care visits, and ER visits
- g. Minimal increase to prescription copays
- h. Small increase to deductible and out of pocket maximums
- i. Coinsurance after deductible at 90% instead of 100%

#### **Employee Premium Contributions**

Change model to percent of calculated premium. Set employee contribution at 5.75% of calculated premium for 2025. See chart on following page.

#### Tier 2 - Non-union employes hired after January 1, 2025

Note: Union coverages must be negotiated

- (a) Add new \$750 deductible Affordable Care Act compliant plan:
  - a. Same plan design as new \$500 deductible plan in Tier 1
  - b. Under the new plan, all costs count toward out-of-pocket max including copays and prescription drugs
  - c. Preventative care covered at 100%
  - d. Virtual doctor visits covered at 100%
  - e. Vision reimbursement from \$150 to \$200
  - f. Dental implants covered at 50%
  - g. Increased deductible and out of pocket maximums
- (b) Not eligible for paid insurance at retirement

#### **Employee Premium Contributions**

Premiums would be the same as employees in the Tier 1 \$500 deductible plan

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File #: TMP-7897 Agenda Date:11/14/2024

Employee Per Paycheck Insurance Contribution				
	2024	2025	2025 Tier 1	2025 Tier 2
	\$250 Deductible	\$250 Deductible	\$500 Deductible	\$750 Deductible
Employee	\$50.00	\$59.81	\$26.64	\$26.64
Employee+ 1	\$50.00	\$115.82	\$51.59	\$51.59
Family	\$50.00	\$152.31	\$67.85	\$67.85

#### **Employee Opt Out and Spouse Reimbursement**

- a. Eliminate reimbursement of working spouse's insurance cost at their non-City of Joliet employer
- b. Eliminate stipend for employees not selecting insurance

#### Retiree Insurance

- a. Create second tier for non-union retirees employed after January 1, 2025. Tier 2 employees will need to fund their healthcare at retirement and will be offered the \$750 deductible plan. The employee can elect to defer their sick time buyout to be used for premiums.
- b. Current retirees from non-union positions will be moved to \$500 deductible plan.
- c. Current retirees from union positions will have the option to choose their plan. If no option is chosen, the retiree will remain in the \$250 deductible plan.

#### **Estimated Financial Impact**

- a. \$233,000 yearly savings for non-union active employees
- b. If proposed changes were able to be made to all active employees Citywide, the savings is estimated to be \$1,500,000 per year (8.8% of total active employee cost)
- c. Current unfunded liability attributed to active employees is an average of \$410,000 per employee. This cost is the equivalent of \$20,500 per year for the 20 years it takes to be eligible for 100% funding today. Had this been implemented over 20 years ago, the City's annual insurance cost for 2024 would be closer to \$16,000,000 instead of \$32,000,000.

### Tier 1 - Non Union Employees hired prior to January 1, 2025

PLAN STATUS	\$250 Deductible	\$250 Deductible Grandathered		ACA \$500 Deductible	
CARRIER( 8)	Blue Cross Bi	Blue Cross Blue Shield of IL		Blue Cross Blue Shield of IL	
PLAN(3)	PPO 100% / 70%; \$250 D Grandfathered Plan		PPO 90% /70% Plan: \$500 Deductible		
VETWORK(8)	Blue Cr	ngs PPO	Blue Cross	PPO	
PLAN BENEFITS	In-Network	Out-Network	In-Ne twork	Out-Network	
coincurance Level	100%	70%	90%	70%	
ndividual Deductible	\$250	\$500	\$500	\$1,000	
amily Deductible	\$500	\$1,000	\$1.000	\$2,000	
and account	Deductible Not Induded	Deductible Not Included	Indudes Dec		
re dical individual Out-of-Pooket	\$1,000	\$3.000	\$1.500	\$3,500	
redical Family Out-of-Pooket	\$3,000	\$9,000	\$4,500	\$10,500	
	\$5,000	\$9,000	24,000	\$10,500	
MEDICAL SERVICES	80% (after ded)	70% (after ded)	\$20 /\$40 mosty than 100%	70% (after died	
		10 10 10			
Preventive Care	80% (after died); (to age 16)	70% (after ded); (to age 16)	100% no deductible	70% (after died)	
Veliness/Pre ventative Relmb ursement	50	\$0	included in plan		
lagnostic Test (X-Ray, Blood Work)	100%	70% (after ded)	90% after ded	70% (after died)	
maging (CT/PET soan s, MRIs)	100%	70% (after ded)	90% after ded	70% (after died)	
Outpatient Surgery	100%	70% (after ded)	90% after ood	70% (after died	
Irgent Care	100%	70% (after ded)	\$40 copay	70% (after died)	
Emergency Care (walved if admitted)	80% (a	ter ded)	\$250 copay (waive	o if admitted)	
n patient Ho spita (per occurrence)	100%	70% (after ded)	50% after ded	70% (after died	
PRESCRIPTION DRUGS	- WANT - J	. Shaharan A	SANCHIII SANCE	30 30 30 30 30 30 30 30 30 30 30 30 30 3	
Tier 1-Generio	\$8	75% after copey	\$10	7.0% after copey	
Fler 2 Non - Generio Preferre d	\$15	75% after copay	\$30	70% after cope	
Ter 3 Name Brand	\$35		\$60		
		75% after copay		7.0% after coper	
Fier 4 - Speciality Re II Order Prescriptions (90 Days)	Covered \$14 / \$28 / \$68	Not Covered N/A	\$100 2.5x Retail Copav	Not Covered N/A	
PLAN STATUS	DEA	ITAL	DENTA		
PLANS)	Passive PPO 100/80/50/50: \$25 D		Parsolve PPO 100/80/50/50: \$25 D		
NETWORK(\$)		760/00/00: 525 D Care	Passive PPO 100/80 Blue Ca		
PLAN BENEFITS	In-Network	Out-Network	In-Network	Out-Network	
		\$25 / \$75			
Deduct ble (Individual / Family) Linnual Maximums	\$25/\$75	\$1,000	\$25 / \$75	\$25/\$75	
CLASS I - Preventive	100%	100%	100%	100%	
CLASS I - Basic	80%	80%	80%	80%	
CLASS II - Major	50%	50%	50%	50%	
CLASS M - Ortho (Toage 21)	50		50%		
Lifetime Maximums	\$1,000		S1,000		
COVERED SERVICES					
Endodontics	80%	80%	80%	80%	
Periodontics	80%	80%	80%	80%	
Simple Extractions	50%	50%	50%	50%	
mplante	Not Cove red	Not Covered	50%	50%	
rue Open Enrollment Y/N		es	Yes		
ate Entrant	None		None		
Maiting Period		ne	None	T	
J&C Percentile	Negotiated Fee	90th	Negotiated Fee	90th	
lan	VISION		Vision	Linear Control	
Carrier	Blue Crass Blue Shield of IL		Blue Cross Blue Shield of IL		
Coverage	S150 Annual Allowance		S200 Annual Allowance		
	Per psychock				
Imployee Share of Premiuma	Per co	ycheck	Permed	eck	
Employee Share of Premium a		ycheck 3.31	Perpayet \$26.64		

Tier 2 - Non-union Employees hired after January 1, 2025

PLAN STATUS	NewEmployees after \$750 Deductible	January 1, 2025 A	
CARRIER(S)	Blue Cross Blue Shield of IL		
PLAN(S)	PPO 90% / 70% Plan;	\$750 Deductible	
NETWORK(\$)	Blue Cross	PPO	
PLAN BENEFITS	In-Network	Out-Network	
Coinsurance Level	90%	70%	
Individual Deductible	\$750	\$1,500	
Family Deductible	\$1,500	\$3.000	
र रहे	Includes Ded	uctible	
Medical Individual Out-of-Pocket	52.250	\$5.250	
Medical Family Out-of-Pocket	98.750	\$15,725	
MEDICAL SERVICES			
Office Visits PCP/SPC	\$20 /\$40 copay then 100%	70% (after ded)	
Preventive Care	100% no deductible	70% (after ded)	
	STOLEN OF THE PARTY	racin tanas anal	
Wellness/Preventative Relimbursement	included in plan	444-11-41-41-41-41	
Diagnostic Test (X-Ray, Blood Work)	90% after ded	70% (after ded)	
Imaging (CT/PET scans, MRIs)	90% after ded	70% (after ded)	
Outpatient Surgery	90% after ded	70% (after ded)	
Urgent Care	\$40 copay	70% (after ded)	
Emergency Care (waived if admitted)	\$250 copay (waives		
inpatient Hospital (per occurrence)	90% after ded	70% (after ded)	
PRESCRIPTION DRUGS	- **		
Tier 1-Generic	\$10	70% after copiay	
Tier 2 Non - Generic Preferred	\$30	70% after copay	
Tier 3 Name Brand	\$60	70% after copay	
	_	The second second second	
Tier 4 - Speciality Mail Order Prescriptions (90 Days)	\$100 2.5x Retail Copay	Not Covered N/A	
	- Annatas	SAN:	
PLAN STATUS	DENTA	L	
PLAN(S)	Passive PPO 100/80		
NETWORK(S)	BlueCar	re	
PLAN BENEFITS	In-Network	Out-Network	
Deductible (Individual / Family)	\$25 / \$75	\$25 / \$75	
Annual Maximums	\$1,000	\$1,000	
CLASSI - Preventive	100%	100%	
CLASSII- Basic	80%	80%	
CLASS III - Major CLASS IV - Ortho (To age 21)	50%	50%	
CLASSIV - Ortho (Toage 21) Lifetime Maximums	\$1,000		
COVERED SERVICES	\$1,000		
Endodontics	80%	80%	
Periodontics	80%	80%	
Simple Extractions	50%	50%	
Implants	50%	50%	
True Open Enrollment Y/N	Yes	2010	
Late Entrant	None		
Waiting Period	None	12.40	
U&C Percentile	Negotiated Fee	90th	
Plan	VISION	i i	
Carrier	Blue Cross Blue Shield of IL		
Coverage	\$200 Annual A		
Employee Share of Premiums	Per paych	eck	
Single	\$26.64		
Employee + 1	351.59		
Family	\$87.85		

#### **RECOMMENDATION:**

Based on the above, it is recommended that the Mayor and City Council adopt this Ordinance.

#### ORDINANCE NO.

#### ORDINANCE AMENDING AND RESTATING ORDINANCE 17928 WHICH ESTABLISHED SALARY RANGES AND FRINGE BENEFITS FOR NON-UNION EMPLOYEES (Amendment to Group Health Insurance)

**WHEREAS**, the Mayor and City Council of the City of Joliet, Illinois (City) has the authority to adopt ordinances and to promulgate rules and regulations that pertain to its government and affairs and protect the public health, safety, and welfare of its citizens; and

**WHEREAS**, the City is a duly organized and existing municipal corporation created under the provisions of the laws of the State of Illinois; and

**WHEREAS**, the Mayor and City Council previously established fringe benefits for exempt employees and enacted Ordinance No. 16569 on or about December 15, 2009 which has subsequently been amended, most recently by Ordinance 17928; and

**WHEREAS**, the Mayor and City Council recognize that Section 9 and Section 16 of Ordinance 17928 must be amended; and

**WHEREAS**, the proposed Ordinance replaces Section 9 and Section 16 and incorporates the changes that will become effective on 01/01/2025; and

**WHEREAS**, the proposed Ordinance replaces Section 9 and incorporates the changes that will become effective on 01/01/2025; and

WHEREAS, there are no other changes to Ordinance 17928; and

**WHEREAS**, for clarity purposes, the amendments to Ordinance 17928, Section 9 and 16 are incorporated into the attached; and

**WHEREAS**, the City of Joliet is a home rule unit of local government.

# BE IT ORDAINED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF JOLIET, ILLINOIS, PURSUANT TO ITS STATUTORY AND HOME RULE AUTHORITY, AS FOLLOWS:

<u>SECTION 1</u>: The Mayor and City Council hereby find that the recitals contained in the preamble to this Ordinance are true, correct and complete and are hereby incorporated into this Ordinance by reference.

**SECTION 2**: That ORDINANCE 17928 shall be amended as follows:

#### Section 9: Sick Leave

- (a) Accrual Each Group I, II, III and IV employee shall accrue twelve (12) hours of paid sick leave for each month of paid employment. Each employee shall be permitted to accrue up to a maximum of 2,426 hours of paid sick leave.
- (b) Compensation for Unused Sick Leave

(1) Employees hired on or before December 31, 2024. Each Group I, II, III and IV employee who has been employed by the City as a full time employee for at least eight years and who terminates employment with or has his or her employment terminated by the City shall receive compensation for a percentage of accrued sick leave up to a maximum of 1,012 hours as follows:

Employee Group	
	Compensation Percentage
Group I	50%
Group II	45%
Group III and Group IV	40%

Compensation for unused sick leave shall not be payable to an employee terminated for cause by the City if any other applicable law or ordinance requires the forfeiture of this benefit.

- (2) Employees hired on or after January 1, 2025. Each Group I, II, III and IV employee who has been employed by the City as a full time employee for at eight years and who terminates employment with or has his or her employment terminated by the City has the option of:
  - i. Receiving compensation for a percentage of accrued sick leave up to a maximum of 1,012 hours as follows:

Employee Group	
	Compensation Percentage
Group I	50%
Group II	45%
Group III and Group IV	40%

ii. An employee with over 600 hours of accrued sick leave may defer payment of their accrued sick leave to be used for payment of City-provided retiree insurance premiums at retirement up to a maximum of 1,012 hours as follows:

Employee Group	
	Compensation Percentage
Group I	50%
Group II	45%
Group III and Group IV	40%

By selecting this option, the employee is deferring payment under option (i) above. This deferral is permanent and once selected cannot be undone.

Compensation for unused sick leave shall not be payable to an employee terminated for cause by the City if any other applicable law or ordinance requires the forfeiture of this benefit.

- (a) <u>Group Health Insurance</u> The City shall provide group health insurance benefits for each non-union full-time employee covered by this Agreement, and their qualifying dependents, in accordance with the Plan Documents, costs, and schedule of benefits adopted by City Council annually.
- (b) <u>Group Term Life Insurance</u> Each Group I, II, III and IV employee shall receive term life insurance coverage while employed by the City in the amount of \$50,000.
- (c) <u>Group Long Term Disability Insurance</u> Each full-time employee shall receive long-term disability insurance coverage in accordance with a plan approved by the City Council.
- (d) Working Spouses and Dependents of Full-Time Exempt Employees
  - (1) <u>Primary Coverage Limited</u> In the event the spouse or a dependent of an active employee enrolled in the City's group health insurance plan is employed on a non part-time basis (defined 36 hours or more per week on average), and the spouse or dependent is eligible for health insurance provided by his or her employer, then the spouse or dependent shall not be insured by the City on primary basis. Coverage by the City on a secondary basis shall be available, provided the spouse or dependent has enrolled with his or her employer for primary coverage, the spouse or dependent is properly enrolled in the City's Plan and all applicable premiums and copayments are paid as required.
  - (2) <u>Duty of Employee to Notify City of Status of Spouse or Dependent</u> The City shall provide an annual open enrollment process in which the employee shall be required to provide sufficient information to the City to establish the proper status of a spouse or dependent in order to determine eligibility for benefits and appropriate premiums and copayments under this Section. In addition, employees shall notify the City of a spouse or dependent becoming eligible for employer-provided health insurance within thirty (30) days of such eligibility. The City shall also permit mid-year changes in enrollment status of spouses and dependents due to changes in employment status.

An employee's failure to timely notify the City of a change in the status of a spouse or dependent, or to provide complete and accurate information required by the City pursuant to this Section may constitute just cause for discipline and for the denial or limitation of benefits and for the reimbursement of benefits improperly paid.

- (3) <u>Coordination of Benefits-Dependent Children of Parents not Separated or Divorced or of Divorced Parents Having Joint Custody</u> In the event that a dependent child is covered by more than one health insurance plan, then the plan covering the parent whose birthday falls earlier in the year shall provide primary coverage for the dependent child. If both parents have the same birthday, then the plan that has provided coverage longer shall provide primary coverage.
- (4) <u>Coordination of Benefits-Dependent Children of Divorced or Separated Parents</u> In the event that a dependent child is covered by more than one health insurance plan, then the plan covering the parent with custody of the child shall provide primary coverage and the plan of the spouse of the parent having custody shall provide secondary coverage. The plan of the parent not having custody of the child shall provide the next level of coverage.

The foregoing notwithstanding, if an order or decree issued by a court of competent jurisdiction provides a different method of coordination of benefits, then such method shall govern and control upon proper notification to the affected plans.

(e) Employee Election to Opt Out of Group Health Insurance Plan Section to be Eliminated

#### (f) Health Benefit Plan for Separating Employees (Retirees)

(1) Each Group I,II, Ill and IV employee hired on or before December 31, 2024 who, at the time of that employee's termination of employment, has a minimum of eight years of service as a full time City employee and is at least 55 years of age shall be eligible to continue to receive health insurance benefits and group term life insurance in accordance with plan documents, costs, and schedule of benefits adopted by City Council annually. Eligible separating employees shall be entitled to receive Hospital Benefits, Physician Benefits and Prescription Drug Program Benefits, but not Dental Benefits or Vision Benefits, in accordance with the Plan Documents and schedule of benefits adopted annually by the City Council.

The eligible retiree shall be responsible for the additional cost of covering eligible qualifying dependents. The retiree shall pay the applicable monthly premiums for that portion of the benefits payable by the retiree.

(2) Each Group I, II, Ill and IV employee hired on or after January 1, 2025 who, at the time of that employee's termination of employment, has a minimum of eight years of service as a full time City employee, is at least 55 years of age, and has a minimum of 600 hours of accumulated sick leave shall be eligible to receive health insurance benefits in accordance with Plan Documents and schedule of benefits adopted by City Council annually. Eligible separating employees shall be entitled to receive Hospital Benefits, Physician Benefits and Prescription Drug Program Benefits, but not Dental Benefits or Vision Benefits, in accordance with the Plan Documents and schedule of benefits adopted annually by the City Council.

The eligible retiree shall be responsible for 100% of the cost of these benefits. The retiree shall pay the applicable monthly premiums for the portion of the benefits selected. Failure to remit payments timely will result in the termination of this benefit.

<u>SECTION 3</u>: *No Vested Right in Benefits* This Ordinance shall not establish any vested right in any salary or fringe benefit for any employee. Nothing in this Ordinance shall be construed to create a contractual right to a position, salary or an increase in salary or benefit conferred by this Ordinance. The Mayor and City Council reserve the right to modify or terminate any benefit conferred by this Ordinance without notice and without cause.

<u>SECTION 4</u>: *Administrative Policies, Rules, and Regulations* The City Manager is authorized to promulgate policies, rules, and regulations consistent with the terms of this Ordinance for the implementation and administration of the provisions of this Ordinance. Any such policy, rule or regulation in effect on the effective date of this Ordinance shall continue in full force and effect provided it is not inconsistent with any provision of this Ordinance.

**SECTION 5**: **Severability** This Ordinance shall be considered severable. The invalidity of any section, clause, paragraph, sentence or provision of the Ordinance shall not affect the validity of any other portion of the Ordinance.

**SECTION 6**: **Conflicting Ordinances** All Ordinances or parts of Ordinances conflicting with any of the provisions of this Ordinance are hereby repealed to the extent of such conflict.

**SECTION 7**: *Effective Date* This Ordinance shall be in full force and effect from and after its passage, approval and publication as provided by law.

PASSED this	day of	,2024.		
MAYOR		CITY CLERK		
VOTING NO:				
VOTING YES:				
NOT VOTING:				