SIDE LETTER AGREEMENT BETWEEN CONTRA COSTA COUNTY & PHYSICIANS' & DENTISTS' ORGANIZATION OF CONTRA COSTA

This Side Letter is by and between Physicians' and Dentists' Organization of Contra Costa ("PDOCC") and County of Contra Costa ("County") and is effective on the first day of the month following approval by the Board of Supervisors.

This Side Letter replaces Section 12 of the Memorandum of Understanding (MOU) (October 1, 2008-October 31, 2016) between the County and PDOCC with the revised Section 12 set forth in Exhibit A attached to this side and incorporated herein.

The terms of this Side Letter will be incorporated into the successor MOU between the County and PDOCC. All other terms and conditions of the MOU (October 1, 2008-October 31, 2016) between the County and PDOCC remain unchanged by this Side Letter.

Date: 6/28/16		
Contra Costa County: (Signature / Printed Name)	PDOCC: (Signature / Printed Name)	
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EXHIBIT A

Replace Section 12 of the PDOCC MOU with the revised Section 12 set forth below.

SECTION 12 - HEALTH, LIFE & DENTAL CARE

- **12.1** <u>Health Plan Coverages.</u> The County will provide medical and dental coverage for permanent full time employees (40/40) and permanent part time employees (whose positions are designated as 20/40 or more) and for their eligible family members, contained in one of the <u>Health Medical</u> Plan contracts and one of the Dental Plan contracts between the County and the following providers:
- a. Contra Costa Health Plans (CCHP)
- b. Kaiser Permanente Health Plan
- c. Health Net (HMO and PPO)
- d. Delta Dental
- e. DeltaCare (PMI)

Employee Co-pays for these plans are shown on Exhibit E.

Medical Plans:

All employees will have access to the following medical plans beginning in the 2017 Plan Year:

- CCHP Plan A & Plan B
- Kaiser Permanente Plan A & Plan B
- Health Net HMO Plan A & Plan B
- 4. Health Net PPO Plan A & Plan B
- Kaiser High Deductible Health Plan

Health Net PPO Plan B will be eliminated for all employees beginning January 1, 2018.

In the event that one of the medical plans listed above meets the criteria for a high cost employer-sponsored health plan that may be subject to an excise penalty (a.k.a. Cadillac Tax) under the federal Patient Protection and Affordable Care Act ("ACA") (42 U.S.C. § 18081), the Joint Labor/Management Benefit Committee will meet to consider plan design and other changes in an effort to mitigate the negative impact of the excise penalty. If the Committee is unable to make sufficient plan changes and the plan(s) continue to meet the criteria for high cost employer-sponsored health plan(s), such plan(s) will be eliminated for all employees beginning January 1, 2018.

12.2 County Health and Dental Plan Monthly Premium Subsidy:

A. County Premium Subsidy

1	For calendar year 2013, the County will pay the following monthly
1.	To calcinal year 2010, the obanty will pay the following monthly
	premium subsidy:

a. CCHP A Single: \$ Family: \$1,	
b. CCHP B Single: \$ Family: \$1,	
c. Kaiser Permanente Health————————————————————————————————————	591.46
d. Health Net HMO Single: \$ Family: \$1,	762.43 8 70.30
e. Health Net PPO Single: \$ Family: \$1,	680.77 617.19
f. Delta Dental with CCHP A Single: Family:	\$41.60
g. Delta Dental with Kaiser or Single: Family:	\$33.11
h. Delta Dental without a Hea Single: Family:	\$42.44
i. DeltaCare (PMI) with CCHF Single: Family:	\$28.19
j. DeltaCare (PMI) with Kaise Single: Family:	
k. DeltaCare (PMI) without a l Single: Family:	Health Plan \$28.76 \$62.17

2. For calendar year 2014, the County will pay the following monthly premium subsidy:

a. CCHP A

Single:	\$600.51
Family:	
. Cirmy.	ψ1,100.10
b. CCHP B	
Single:	\$611.34
Family:	\$1.452.65
,,	
c. Kaiser Permanente l	
Single:	\$614.78
Single: Family:	\$1,432.42
-	
d. Health Net HMO	
Single:	\$853.92
Family:	\$2,094.74
e. Health Net PPO	
Single:	\$753.81
Family:	\$1,790.70
f. Delta Dental with CC	
Single:	
Family:	\$93.72
B 10 B 20 1 1 10 16	
g. Delta Dental with Ka	
Single:	
Family:	\$74.59
D 16 D 16 20 1	- HW-Dl
h. Delta Dental without	
Single:	
Family:	>80.0∠
i. DeltaCare (PMI) with	CCUD A or D
Single:	
Family:	
	φυ 1.00
j. DeltaCare (PMI) with	Kaiser or Health Net
Single:	
Family:	\$48.99
- Cirmy.	Ψ10.00
k. DeltaCare (PMI) with	out a Health Plan
Single:	\$20.05
Family:	\$62.80
i airing.	402.00

3. County Premium Subsidy On and After January 1, 2015: Beginning on January 1, 2015, and for each calendar year thereafter, the County will pay a monthly dollar premium subsidy for each health and dental plan listed in Section 12.2 A.(2) (County Premium Subsidy) that is an amount equal to the actual monthly dollar premium subsidy that is paid by the County in December 2014. The amount of the County subsidy that is paid for employees and eligible family members for these plans will thereafter be is a set dollar amount and will not be a percentage of the

premium charged by the <u>health medical</u> or dental plan. <u>The County will</u> pay the following monthly premium subsidy:

Health & Dental Plans	Employee	Employee +1 Dependent	Employee +2 or More
			<u>Dependents</u>
Contra Costa Health Plans (CCHP), Plan A	\$600.51	\$1,430.76	<u>\$1,430.76</u>
Contra Costa Health Plans (CCHP), Plan B	<u>\$611.34</u>	<u>\$1,452.65</u>	<u>\$1,452.65</u>
Kaiser Permanente Health Plans	\$614.78	<u>\$1,432.42</u>	\$1,432.42
Health Net HMO Plans	\$853.92	\$2,094.74	<u>\$2,094.74</u>
Health Net PPO Plans	\$753.81	<u>\$753.81</u>	<u>\$1,790.70</u>
Delta Dental with CCHP A or B	<u>\$41.60</u>	\$93.72	<u>\$93.72</u>
Delta Dental with Kaiser or Health Net	<u>\$33.11</u>	<u>\$74.59</u>	<u>\$74.59</u>
Delta Dental without a Health Plan	\$42.44	<u>\$95.62</u>	<u>\$95.62</u>
DeltaCare (PMI) with CCHP A or B	\$28.48	<u>\$61.55</u>	<u>\$61.55</u>
DeltaCare (PMI) with Kaiser or Health Net	<u>\$22.67</u>	<u>\$48.99</u>	<u>\$48.99</u>
DeltaCare (PMI) without a Health Plan	\$29.05	<u>\$62.80</u>	<u>\$62.80</u>

The 2-tier premium structure in effect for the 2016 plan year will continue to apply to eligible retirees until such time as the County implements a 3-tier premium structure for a majority of all eligible County retirees participating in County health plans.

B. Optometrists. For employees in the classification Exempt Medical Staff Optometrist (VPS1), Section 12.2 A does not apply, and this section 12.2 B instead applies. For each health and/or dental plan, the County's monthly dollar premium subsidy is a set dollar amount and not a percentage of the premium charged by the plan. The County will pay the following monthly dollar premium subsidy:

a.	CCHP A	
	Single:	\$509.92
	Family:	\$1,214.90
	CCHP B	
	Single:	\$528.50
	Family:	\$1,255.79
C.	Kaiser Permanente	Health Plan
	Single:	\$478.91
	Family:	
d.	Health Net HMO	
	Single:	\$627.79
	Family:	\$1,540.02
e.	Health Net PPO	
	Single:	\$604.60
	Family:	\$1,436.25

Sing	a Dental with CCHP / lle: nily:	\$41.17
Sing	a Dental with Kaiser (lle: nily:	\$34.02
Sing	a Dental without a He lle: nily:	\$43.35
Sing	aCare (PMI) with CC yle: nily:	\$25.41
Sing	aCare (PMI) with Kai yle: nily:	\$21.31
———Sing	aCare (PMI) without a gle: nily:	\$27.31

- Joint Labor/Management Benefit Committee. PDOCC will join the Joint Labor/Management Benefit Committee ("Benefit Committee") created in 2016 that will convene in order to 1) select a replacement medical or dental plan in the event that a plan listed in this Section 12 is no longer available; 2) design a wellness program; 3) discuss future medical, dental, or vision plan design; or 4) assess the future impact of any excise tax pursuant to the federal Patient Protection and Affordable Care Act ("ACA") (42 U.S.C. § 18081) on any high cost medical plans offered by the County. The Benefit Committee replaces the existing Healthcare Oversight Committee. The existing Healthcare Coalition will remain, but may meet quarterly. The Benefit Committee will be composed of two (2) representatives (not including Union/Association staff) from each Union/Association in the County and Management representatives to be determined. If the Benefit Committee is selecting a replacement medical or dental plan, the selection must be unanimously agreed upon by the Union/Association representatives on the Committee and any such selected plan will be available to employees represented by the Unions and incorporated into their respective MOUs after ratification by each Union/Association. PDOCC may begin participating in the Benefit Committee following ratification of this MOU.
- C. If the County contracts with a health-medical or dental plan provider not listed above, the amount of the monthly dollar premium subsidy that the County will pay to that health-medical or dental plan provider for employees and their eligible family members shall not exceed the amount of the monthly dollar premium subsidy that the County would have paid to the former plan provider.
- D. In the event that the County premium subsidy amounts are greater than one hundred percent (100%) of the applicable premium of any healthmedical or

dental plan, for any plan year, the County's contribution will not exceed one hundred percent (100%) of the applicable plan premium.

12.3 Retirement Coverage:

A. Upon Retirement:

- 1. Employees Hired On or Before December 12, 2006.
 - a. Upon retirement and for the term of this agreement, eligible employees and their eligible family members may remain in their County health/dental plan, but without County-paid life insurance coverage, if immediately before their proposed retirement the employees and dependents are either active subscribers to one of the County contracted health/dental plans or if while on authorized leave of absence without pay, they have retained continuous coverage during the leave period. The County will pay the health/dental plan monthly dollar premium subsidies for eligible retirees and their eligible family members set forth in Section 12.2 (County Health and Dental Plan Monthly Premium Subsidy).
- 2. Employees Hired between December 13, 2006 October 31, 2013.
 - a. Upon retirement and for the term of this agreement, all employees covered by Section 12.1, who were hired on or after December 13, 2006 and before November 1, 2013, are eligible for retiree health coverage pursuant to the terms outlined in Section 12.3A(1)(a) above, upon completion of fifteen (15) years of service as an employee of Contra Costa County. For the purposes of retiree health eligibility, one year of service is defined as one thousand (1,000) hours worked within one anniversary year. The existing method of crediting service while an employee is on an approved leave of absence will continue for the duration of this agreement. The County will pay the health/dental plan monthly premium subsidies for eligible retirees and their eligible family members set forth in Section 12.2 (County Health and Dental Plan Monthly Premium Subsidy).
- 3. Employees Hired On or After November 1, 2013:
 - a. Eligibility for Retiree Health Coverage: All employees covered by Section 12.1 hired on or after November 1, 2013, are eligible for retiree health/dental coverage pursuant to subsection (b) below, upon completion of fifteen (15) years of service as an employee of Contra Costa County. For purposes of retiree health eligibility, one year of service is defined as one thousand (1,000) hours worked within one anniversary year. The existing method of crediting service while an employee is on an approved leave of absence will continue for the duration of this Agreement.
 - b. For eligible employees covered by Section 12.1 hired on or after

November 1, 2013, and their eligible family members, no monthly premium subsidy will be paid by the County for any health or dental plan after they separate from County employment. However, any such eligible employee who retires under the Contra Costa County Employees' Retirement Association ("CCCERA") may retain continuous coverage of a county health or dental plan provided that (i) he or she begins to receive a monthly retirement allowance from CCCERA within 120 days of separation from County employment, (ii) he or she pays the full premium cost under the health plan without any County premium subsidy and (iii) immediately before their proposed retirement the employees and dependents are either active subscribers to one of the County contracted health/dental plans or if while on authorized leave of absence without pay, they have retained continuous coverage during the leave period.

- 4. Any person who becomes age 65 on or after November 1, 2013, and who is eligible for Medicare must immediately enroll in Medicare Parts A and B.
- B. <u>Employees Who File For Deferred Retirement:</u> Employees covered by Section 12.1, who resign and file for a deferred retirement and their eligible family members, may continue in their County group health and dental plan under the following conditions and limitations.
 - 1. Health and dental coverage during the deferred retirement period is totally at the expense of the employee, without any County contributions.
 - 2. Life insurance coverage is not included.
 - 3. To continue health and dental coverage, the employee must:
 - a. be qualified for a deferred retirement under the 1937 Retirement Act provisions;
 - b. be an active member of a County group health and/or dental plan at the time of filing their deferred retirement application and elect to continue plan benefits;
 - c. be eligible for a monthly allowance from CCCERA and direct receipt of a monthly allowance within twenty-four (24) months of application for deferred retirement; and
 - d. file an election to defer retirement and to continue health benefits hereunder with the County Benefits Division within thirty (30) days before separation from County service.
 - 4. Deferred retirees who elect continued health benefits hereunder and their eligible family members may maintain continuous membership in their County health and/or dental plan group during the period of deferred retirement by paying the full premium for health and dental coverage on or before the 10th of each month, to the Contra Costa County Auditor-

Controller. When the deferred retirees begin to receive retirement benefits, they will qualify for the same health and/or dental plan coverage pursuant to Section 12.3 A "Upon Retirement" as similarly situated retirees who did not defer retirement.

- 5. Deferred retirees may elect retiree health benefits hereunder without electing to maintain participation in their County health and/or dental plan during their deferred retirement period. When they begin to receive retirement benefits, they will qualify for the same coverage and/or dental coverage pursuant to Section 12.3 A above as similarly situated retirees who did not defer retirement, provided reinstatement to a County group health and/or dental plan will only occur following a three (3) full calendar month waiting period after the month in which their retirement allowance commences.
- 6. Employees who elect deferred retirement will not be eligible in any event for County health or dental plan subvention unless the member draws a monthly retirement allowance within twenty-four (24) months after separation from County service.
- 7. Deferred retirees and their eligible family members are required to meet the same eligibility provisions for health/dental plans as similarly situated retirees who did not defer retirement.
- C. Subject to the provisions of Section 12.3 subparts A, B, and D and upon retirement and for the term of this agreement, the following employees (and their eligible family members) are eligible to receive a monthly premium subsidy for health and dental plans or are eligible to retain continuous coverage of such plans: permanent full time employees (40/40) and permanent part time employees (whose positions are designated as 20/40 or more), who retire from a position or classification that was represented by this bargaining unit at the time of his or her retirement.
- D. For purposes of this Section 12.3 only, 'eligible family members' does not include Survivors of employees or retirees.
- **12.4** <u>Health Plan Coverages and Provisions Part Time Employees.</u> The following provisions are applicable regarding Permanent Part Time (19/40) Employees County Health and Dental Plan participation:
- A. <u>Health, Dental and Life Participation by Permanent Part Time (19/40)</u>
 <u>Employees:</u> Permanent part-time employees whose positions are designated as 19 hours (19/40) or less may participate in the County Health or Dental plans (with the associated life insurance benefit) at the employee's full expense.
- **12.5** <u>Family Member Eligibility Criteria:</u> The following persons may be enrolled as the eligible Family Members of a medical or dental plan Subscriber:
- A. <u>Health Insurance</u>

1. Eligible Dependents:

- a. Employee's Legal Spouse
- b. Employee's qualified domestic partner
- c. Employee's child to age 26
- d. Employee's Disabled Child who is:
 - (1) Over age 26,
 - i. Unmarried; and,
 - ii. Incapable of sustaining employment due to a physical or mental disability that existed prior to the child's attainment of age 19.
- 2. "Employee's child" includes natural child, child of a qualified domestic partner, step-child, adopted child and a child specified in a Qualified Medical Child Support Order (QMCSO) or similar court order.

B. Dental Insurance

- 1. Eligible Dependents:
 - a. Employee's Legal Spouse
 - b. Employee's qualified domestic partner
 - c. Employee's unmarried child who is:
 - (1) Under age 19; or
 - (2) Age 19, or above, but under age 24; and,
 - i. Resides with the Employee for more than 50% of the year excluding time living at school; and,
 - ii. Receives at least 50% of support from Employee; and,
 - iii. Is enrolled and attends school on a full-time basis, as defined by the school.
 - d. Employee's Disabled Child who is:
 - (1) Over age 19,
 - i. Unmarried; and,
 - ii. Incapable of sustaining employment due to a physical or mental disability that existed prior to the child's attainment of age 19.
- 2. "Employee's child" includes natural child, child of a qualified domestic partner, step-child, adopted child and a child specified in a Qualified Medical Child Support Order (QMCSO) or similar court order.

12.6 **Dual Coverage:**

A. On and after January 1, 2014, each employee and retiree may be covered only by a single County health (and/or dental) plan, including a CalPERS plan. For example, a County employee may be covered under a single County health and/or dental plan as either the primary insured or the dependent of another County employee or retiree, but not as both the primary insured and the

dependent of another County employee or retiree.

- B. On and after January 1, 2014, all dependents, as defined by Section 12.5, Family Member Eligibility Criteria, may be covered by the health and/or dental plan of only one spouse or one domestic partner. For example, when both husband and wife parents are County employees, all of their eligible children may be covered as dependents of either the husband or the wife parent, but not both.
- C. For purposes of this Section 12.6 only, "County" includes the County of Contra Costa and all special districts governed by the Board of Supervisors, including, but not limited to, the Contra Costa County Fire Protection District.
- D. Optometrists. For employees in the classification Exempt Medical Staff Optometrist (VPS1), the dates set forth in subsections A and B do not apply. Instead, this section 12.6 "Dual Coverage" applies effective on and after January 1, 2010. With this exception, all other provisions of section 12.6 apply.
- 12.7 Medical Plan Cost-Sharing with Active Employees on and after the first day of the month following approval of this Agreement by the Board of Supervisors.

 A. The two-tier premium structure in effect for the 2016 plan year and the medical plan premium subsidies set forth in 12.2.A., above, will continue for the remainder of the 2016 plan year.
- B. For the plan year that begins on January 1, 2017: The County will pay for active employees the monthly premium subsidy for medical plans stated in subsection 12.2.A., and adjust the amounts paid by the County for active employees in recognition of the increases to the Employee Plus Two or More Dependents medical premiums caused by the shift to a three-tier structure. In total, the County will pay the following amounts for the 2017 plan year plus any additional amounts in accordance with 12.7.C. below:

Medical Plans	Employee	Employee +1	Employee +2 or
		Dependent	More Dependents
Contra Costa Health Plans (CCHP), Plan A	\$530.56	\$1,049.81	<u>\$1,646.89</u>
Contra Costa Health Plans (CCHP), Plan B	\$549.42	\$1,068.65	\$1,737.03
Kaiser Permanente Health Plan A	\$435.38	\$803.96	\$1,493.79
Kaiser Permanente Health Plan B	\$445.04	<u>\$881.68</u>	<u>\$1,407.40</u>
Health Net HMO Plan A	\$669.34	<u>\$1,131.34</u>	\$2,280.09
Health Net HMO Plan B	\$662.01	\$1,280.20	<u>\$2,060.75</u>
Health Net PPO Plan A	\$727.94	\$1,112.03	\$2,755.43
Health Net PPO Plan B	\$715.64	<u>\$1,144.40</u>	\$2,623.86
Kaiser High Deductible Health Plan	<u>\$447.04</u>	<u>\$916.72</u>	<u>\$1,387.40</u>

C. For the plan year that begins on January 1, 2017, and for the term of this agreement, if there is an increase in the monthly premium, including any plan premium penalty, charged by a medical plan, the County and the active employee will each pay fifty percent (50%) of the monthly increase above the plan premium amounts for medical plans with three tiers that are listed in 12.7.D, below. The fifty percent (50%) share of the monthly medical plan increase paid by the County is in addition to the amounts paid by the County in 12.7.B., above, for medical plans.

D. 2016 Plan Premium Amounts: For purposes of calculating the County and Active Employee cost-sharing increases described in 12.7.C., above, the following are the 2016 total monthly medical plan premium amounts for three tiers:

Medical Plans	Employee	Employee +1	Employee +2 or
		<u>Dependent</u>	More Dependents
Contra Costa Health Plans (CCHP), Plan A	\$657.08	\$1,314.15	<u>\$1,971.23</u>
Contra Costa Health Plans (CCHP), Plan B	\$728.38	\$1,456.77	<u>\$2,185.15</u>
Kaiser Permanente Health Plan A	\$749.80	<u>\$1,499.60</u>	\$2,249.39
Kaiser Permanente Health Plan B	\$585.68	<u>\$1,171.36</u>	<u>\$1,757.04</u>
Health Net HMO Plan A	\$1,208.76	\$2,417.52	<u>\$3,626.27</u>
Health Net HMO Plan B	\$840.55	\$1,681.10	<u>\$2,521.65</u>
Health Net PPO Plan A	\$1,643.40	\$3,286.80	\$4,930.20
Health Net PPO Plan B	\$1,479.47	\$2,958.94	<u>\$4,438.40</u>
Kaiser High Deductible Health Plan	\$470.10	<u>\$940.21</u>	<u>\$1,410.32</u>

- 12.78 <u>Life Insurance Benefit Under Health and Dental Plans:</u> For employees who are enrolled in the County's program of medical or dental coverage as either the primary or the dependent, term life insurance in the amount of ten thousand dollars (\$10,000) will be provided by the County.
- 12.89 <u>Supplemental Life Insurance</u>: In addition to the life insurance benefits provided by this agreement, employees may subscribe voluntarily and at their own expense for supplemental life insurance. Employees may subscribe for an amount not to exceed five hundred thousand dollars (\$500,000), of which one hundred thousand (\$100,000) is a guaranteed issue, provided the election is made within the required enrollment periods.
- Health Care Spending Account. After six (6) months of permanent employment, employees may elect to participate in a Health Care Spending Account (HCSA) Program designated to qualify for tax savings under Section 125 of the Internal Revenue Code, but such savings are not guaranteed. The HCSA Program allows employees to set aside a predetermined amount of money from their pay, not to exceed the maximum amount authorized by federal law, per calendar year, before taxes, for health care expenses not reimbursed by any other health benefit plans. HCSA dollars may be expended on any eligible medical expenses allowed by Internal Revenue Code Section 125. Any unused balance is forfeited and cannot be recovered by the employee.
- <u>12.101</u> <u>PERS Long-Term Care:</u> The County will deduct and remit monthly premiums to the PERS Long-Term Care Administrator for employees who are eligible and voluntarily elect to purchase long-term care at their personal expense through the PERS Long-Term Care Program.
- <u>12.142</u> <u>Dependent Care Assistance Program:</u> The County offers the option of enrolling in a Dependent Care Assistance Program (DCAP) designed to qualify for tax savings under Section 129 of the Internal Revenue Code, but such savings are not guaranteed. The program allows employees to set aside up to five thousand dollars (\$5,000) of annual salary (before taxes) per calendar year to pay for eligible dependent care (child and elder care) expenses. Any unused balance is forfeited and cannot be

recovered by the employee.

- Premium Conversion Plan: The County offers the Premium Conversion Plan (PCP) designed to qualify for tax savings under Section 125 of the Internal Revenue Code, but tax savings are not guaranteed. The program allows employees to use pre-tax dollars to pay health and dental premiums.
 - 12.134 Prevailing Section: To the extent that any provision of this Section (Section 12 HealthMedical, Dental, & Life Insurance Dental Care) is inconsistent with any provision of any other County enactment or policy, including but not limited to Administrative Bulletins, the Salary Regulations, the Personnel Management Regulations, or any other agreement or order of the Board of Supervisors, the provision(s) of this Section (Section 12 HealthMedical, Dental, & Life Insurance Dental Care) will prevail.
- 12.145 Rate Information. The County Benefits Division will make health and dental plan rate information available upon request to employees and departments. In addition, the County Benefits Division will publish and distribute to employees and departments information about rate changes as they occur during the year.
- 12.156 Coverage Upon Separation: An employee who separates from County employment is covered by his/her County health and/or dental plan through the last day of the month in which he/she separates. Employees who separate from County employment may continue group health and/or dental plan coverage to the extent provided by the COBRA laws and regulations.
- 12.167 Partial Month. The County's contribution to the health plan premium is payable for any month in which the employee is paid. If an employee is not paid enough compensation in a month to pay the employee share of the premium, the employee must make up the difference by remitting the amount delinquent to the Auditor-Controller by the tenth (10th) of each month. The responsibility for this payment rests with the employee. If payment is not made, the employee shall be dropped from the health plan.

An employee on leave in excess of twelve (12) months may-continue group coverage subject to the provisions of the Consolidated Omnibus Budget Reconciliation Act (COBRA) provided the employee pays the entire cost of coverage, plus any administrative fees, for the option selected. The entire cost of coverage shall be paid by the 10th of each month at a place and time specified by the County. Late payment may result in cancellation of health plan coverage with no reinstatement allowed.

12.189 <u>Child Care.</u> The County will continue to support the concept of non-profit child care facilities similar to the "Kid's at Work" program established in the Public

Works Department.

12.20 Health Benefit Coverage for Employees Not Otherwise Covered. To access County health plans, an employee represented by the PDOCC who is not otherwise eligible for health coverage by the County, must be eligible to receive an offer of coverage from the County under the federal Patient Protection and Affordable Care Act ("ACA") (42 U.S.C. § 18081). Employees eligible to receive an offer of coverage (and qualified dependents), will be offered access to County health insurance plans. Employees will be responsible for the full premium cost of coverage. This provision is not subject to the grievance process.