#### SIDE LETTER AGREEMENT Medical, Dental, & Life Insurance

This Side Letter is by and between the County of Contra Costa ("County") and Teamsters Local 856 ("Teamsters") and is effective following approval by the Board of Supervisors.

The County and Teamsters agree to modify Section 19- Medical, Dental, & Life Insurance of the Memorandum of Understanding ("MOU") between the County and Local 856 (July 1, 2016 – June 30, 2022) as amended in Attachment A: Section 19-Medical, Dental, & Life Insurance.

This Side Letter will remain in effect for the term of the current MOU between the County and Teamsters (July 1, 2016 – June 30, 2022). The terms of this Side Letter will be incorporated into the successor MOU unless otherwise negotiated by the parties. All other terms and conditions of the current MOU between the County and Teamsters remain unchanged by this Side Letter.

Date: 5-14-19	
Contra Costa County: (Signature / Printed Name)	TEAMSTERS LOCAL 856: (Signature / Printed Name)
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#### SECTION 19- MEDICAL, DENTAL, & LIFE INSURANCE

- **19.1** <u>Health Plan Coverages.</u> The County will provide the medical and dental coverage for permanent employees regularly scheduled to work twenty (20) or more hours per week and for their eligible family members, expressed in one of the Medical 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
  - D. Teamsters 856 Trust Fund KP Health Plan (available as of 01/01/2017)
  - E. Delta Dental

Employee Co-pays for these plans are shown on Attachment B.

#### Medical Plans:

All employees will have access to the following medical plans for the 2016 Plan Year:

- 1. CCHP Plan A & Plan B
- 2. Kaiser Permanente Plan A
- 3. Health Net HMO Plan A
- 4. Health Net PPO Plan A

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

- 1. CCHP Plan A & Plan B
- 2. Kaiser Permanente Plan A & Plan B
- 3. Teamsters 856 Trust Fund KP Health Plan
- Health Net HMO Plan A & Plan B
- 5. Health Net PPO Plan A & Plan B
- 6. Kaiser High Deductible Health Plan

Health Net PPO Plan B was 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.

#### 19.2 Monthly Premium Subsidy:

A. For each medical and/or dental plan, the County's monthly premium subsidy is a set dollar amount and is not a percentage of the premium charged by the plan. The County will pay the following monthly premium subsidy:

Health & Dental Plans	Employee	Employee +1 Dependent	Employee +2 or More Dependents
Contra Costa Health Plans (CCHP), Plan A	\$509.92	\$1,214.90 \$1,255.79	\$1,214.90 \$1,255.79
Contra Costa Health Plans (CCHP), Plan B Kaiser Permanente Health Plans	\$528.50 \$478.91	\$1,115.84	\$1,115.84
Teamsters 856 Trust Fund KP Health Plan	\$478.91	\$1,115.84	\$1,115.84
(available as of 01/01/2017) Health Net HMO Plans	\$627.79	\$1,540.02	\$1,540.02
Health Net PPO Plans	\$604.60 \$41.17	\$1,436.25 \$93.00	\$1,436.25 \$93.00
Delta Dental PPO with CCHP A or B  Delta Dental PPO with Kaiser or Health Net	\$34.02	\$76.77	\$76.77
Delta Dental PPO without a Health Plan	\$43.35 \$25.41	\$97.81 \$54.91	\$97.81 \$54.91
DeltaCare HMO with CCHP A or B  DeltaCare HMO with Kaiser or Health Net	\$25.41	\$46.05	\$46.05
DeltaCare HMO without a Health Plan	\$27.31	\$59.03	\$59.03

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. If the County contracts with a medical and/or dental plan provider not listed above, the amount of the premium subsidy that the County will pay to that medical and/or dental plan provider for employees and their eligible family members shall not exceed the amount of the premium subsidy that the County would have paid to the former plan provider.
- C. In the event that the County premium subsidy amounts are greater than one hundred percent (100%) of the applicable premium of any medical and/or dental plan, for any plan year, the County's contribution will not exceed one hundred percent (100%) of the applicable plan premium.

# D. Joint Labor/Management Benefit Committee.

The Union will join the Joint Labor/Management Benefit Committee ("Benefit Committee") created in 2016 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. The Benefit Committee replaces the existing Healthcare Oversight Committee. The existing Healthcare Coalition will remain, but may meet quarterly.

- 2. The Benefit Committee will convene in order to 1) select a replacement medical or dental plan in the event that a plan listed in this Section 19 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. If the Benefit Committee is selecting a replacement medical or dental plan for a plan that is no longer available, 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.
- 3. The Union is a member of the Benefit Committee, but is not a member of the Healthcare Coalition. Once a new medical plan carrier replacement for Health Net is agreed upon by the County and the Benefit Committee representatives from the nine (9) Healthcare Coalition Union/Association members of the Benefit Committee, the new medical plan will replace Health Net for the Union the following January 1.
- 4 Each year, County will coordinate a team composed of the County, the County's benefits consultant, and Union/Association Benefit Committee representatives, to work as equal partners to provide input for the annual negotiations with the medical plan providers over the plan premiums for the next plan year. The team will have authority to make information requests, request and observe presentations by the County's healthcare consultant regarding premium rates and ask questions, and help guide the strategy of the County in the annual negotiations.
- 5. County and the Union will jointly work to educate employees regarding the cost benefits of lower cost plans, including the Kaiser High Deductible Health Plan.
- 6 County and Union/Association Benefit Committee representatives will jointly work as equal partners to seek plan design changes across all plans that would reduce costs and improve quality of care.

# 19.3 Retirement Coverage:

#### A. <u>Upon Retirement:</u>

1. Upon retirement, 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 premium subsidies set forth in Section 19.2 for eligible retirees and their eligible family members.

- 2. Any person who becomes age 65 on or after January 1, 2010 and who is eligible for Medicare must immediately enroll in Medicare Parts A and B.
- 3. For employees hired on or after January 1, 2010 and their eligible family members, no monthly premium subsidy will be paid by the County for any health and/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 and (ii) he or she pays the full premium cost under the health and/or dental plan without any County premium subsidy.
- B. Employees Who File For Deferred Retirement: Employees, who resign and file for a deferred retirement and their eligible family members, may continue in their County group health and/or dental plan under the following conditions and limitations.
  - Health and dental coverage during the deferred retirement period is totally at the expense of the employee, without any County contributions.
  - Life insurance coverage is not included.
  - To continue health and dental coverage, the employee must:
    - a. be qualified for a deferred retirement under the 1937 Retirement Act provisions;
    - 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;
    - be eligible for a monthly allowance from the Retirement System 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 4 of 13

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 10<sup>th</sup> of each month, to the Contra Costa County Human Resources Department-Employee Benefits Division. When the deferred retirees begin to receive retirement benefits, they will qualify for the same health and/or dental coverage pursuant to subsection (A) above, 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 health and/or dental coverage pursuant to subsection (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 and/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 retiree health/dental coverage, as similarly situated retirees who did not defer retirement.
- C. Employees Hired After December 31, 2006. Eligibility for Retiree Health Coverage: All employees hired after December 31, 2006 are eligible for retiree health/dental coverage pursuant to subsections (A) and (B), above, 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.
- D. Subject to the provisions of Section 19.3 subparts (A) (B), and (C) 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/or dental plans or are eligible to retain continuous coverage of such plans: employees, and each employee who retires from a position or classification that was represented by this

bargaining unit at the time of his or her retirement.

- E. For purposes of this Section 19.3 only, "eligible family members" does not include Survivors of employees or retirees.
- 19.4 <u>Health Plan Coverages and Provisions:</u> The following provisions are applicable regarding County Health and Dental Plan participation:
  - A. <u>Coverage Upon Separation:</u> 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.
- 19.5 <u>Family Member Eligibility Criteria:</u> The following persons may be enrolled as the eligible Family Members of a medical and/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 over age 26, unmarried, and 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. <u>Dental Insurance</u>

- Eligible Dependents all dental plans:
  - a. Employee's Legal Spouse
  - b. Employee's qualified domestic partner
  - c. Employee's Disabled Child who is over age 19, unmarried, and incapable of sustaining employment due to a physical or mental disability that existed prior to the child's attainment of age 19.

#### 2. Delta Dental PPO Only:

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.
- 3. Delta Care HMO Only Employee's Child to age 26.
- 4. "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.

#### 19.6 **Dual Coverage:**

- A. 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. All dependents, as defined in Section 19.5, 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 parents are County employees, all of their eligible children may be covered as dependents of either parent, but not both.
- C. For purposes of this Section 19.6 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.

# 19.7 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 19.2.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 19.2.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 19.7.C. below:

Madical Plans	Employee	Employee +1	Employee +2 or More
Medical Plans		Dependent	<u>Dependents</u>
Contra Costa Health Plans (CCHP), Plan A	\$530.56	\$1,049.81	\$1,646.89
Contra Costa Health Plans (CCHP), Plan B	\$549.42	\$1,068.65	\$1,737.03
Contra Costa Health Plans (COIII), Fland	\$435.38	\$803.96	\$1,493.79
Kaiser Permanente Health Plan A	\$445.04	\$881.68	\$1,407.40
Kaiser Permanente Health Plan B	\$590.00	\$1,120.00	\$1,561.00
Teamsters 856 Trust Fund KP Health Plan	\$669.34	\$1,131.34	\$2,280.09
Health Net HMO Plan A	\$662.01	\$1,280.20	\$2,060.75
Health Net HMO Plan B		\$1,112.03	\$2,755.43
Health Net PPO Plan A	\$727.94	\$1,144.40	\$2,623.86
Health Net PPO Plan B	\$715.64		11.00= 10
Kaiser High Deductible Health Plan	\$447.04	\$916.72	Ψ1,507.40

- C. For the plan years that begin on January 1, 2017, January 1, 2018, and January 1, 2019 (with the exception of the Teamsters 856 Trust Fund KP Health Plan Beginning January 1, 2019, described below), 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 19.7.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 19.7.B., above, for medical plans.
- D. Plan Premium Amounts: For purposes of calculating the County and Active Employee cost-sharing increases described in 19.7.C., above, the following are, unless otherwise indicated, the 2016 total monthly medical plan premium amounts for three tiers:

Madical Plans	Employee	Employee +1	Employee +2 or
Medical Plans		Dependent	More Dependents
Contra Costa Health Plans (CCHP), Plan A	\$657.08	\$1,314.15	\$1,971.23
Contra Costa Health Plans (CCHP), Plan B	\$728.38	\$1,456.77	\$2,185.15
Kaiser Permanente Health Plan A	\$749.80	\$1,499.60	\$2,249.39
Kaiser Permanente Health Plan B	\$585.68	\$1,171.36	\$1,757.04
Teamsters 856 Trust Fund KP Health Plan	\$655.00	\$1,245.00	\$1,736.00
(Premiums available as of 01/01/2017)		5 <b>2</b>	
Health Net HMO Plan A	\$1,208.76	\$2,417.52	\$3,626.27
Health Net HMO Plan B	\$840.55	\$1,681.10	\$2,521.65
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	\$4,438.40
Kaiser High Deductible Health Plan	\$470.10	\$940.21	\$1,410.32
Kaisei nigii Deductible Health Idii	27 M		

- E. For the plan year that begins on January 1, 2019, if there is an increase in the monthly premium for the Teamsters 856 Trust Fund KP Health Plan above the monthly premium in effect on January 1, 2018, the County will pay the increase of the monthly premium for the Teamsters 856 Trust Fund KP Health Plan up to ten percent (10%). If the increase in plan premium is greater than ten percent (10%), the active employee will pay the balance of the increase that is above ten percent (10%). The increased share of the monthly medical plan premium paid by the County is in addition to the amounts paid by the County in 19.7.B. and 19.7.C, above, for medical plans.
- F. Medical Plan Cost-Sharing for Active Employees on and after January 1, 2020.
  - 1. For active employees for the plan year that begins on January 1, 2020, the County will move to a percentage-based cost sharing approach for medical care premium subsidies. The County will pay seventy-five percent (75%) of the total medical plan premium for the Employee and Employee +1 Dependent tiers of the second lowest priced non-deductible/non-Teamsters-sponsored HMO plan. The County will pay 76.5% of the total medical plan premium for the Employee +2 or more Dependents tier of the second lowest priced non-deductible/non-Teamsters-sponsored HMO plan. These annual calculated dollar amounts will be applied to all plans and tiers, except as described in paragraph F.2., below.
  - 2. For active employees for the plan year that begins on January 1, 2020, and each year thereafter, for the Teamsters 856 Trust Fund KP Health Plan, employees will pay at least the share of the total medical plan premium paid by employees in 2019 as follows:

Teamsters Trust Fund KP Health Plan	2019 Employee Share of Monthly Premium Cost
Employee	\$65.00
Employee +1 Dependent	\$125.00
Employee + 2 or More Dependents	\$175.00

- 3. For active employees for the plan year that begins on January 1, 2021, the County will pay seventy-eight and a half percent (78.5%) of the total medical plan premium for each tier of the second lowest priced non-deductible/non-Teamsters-sponsored HMO plan. This annual calculated amount will be applied to all plans and tiers, except as described in paragraphs F.2. and F.5.
- 4. For active employees for the plan year that begins on January 1, 2022, and each year thereafter, the County will pay eighty percent (80%) of the total medical plan premium for each tier of the second lowest priced non-deductible/non-Teamsters-sponsored HMO plan.

This annual calculated dollar amount will be applied to all plans and tiers, except as described in paragraphs F.2. and F.5.

5. For active employees for the plan year that begins on January 1, 2021, and each year thereafter, for the Kaiser Permanente Health Plan B, employees will pay at least the following share of the total medical plan premium:

Kaiser Permanente Health Plan B	Employee Share of Monthly Premium Cost
Employee	\$20.00
Employee +1 Dependent	\$40.00
Employee + 1 Dependent Employee + 2 or More Dependents	\$60.00

- 6. In the event of a reduction in the premium for the second lowest priced non-deductible/non-Teamsters-sponsored HMO plan, the County will pay the premium subsidy for medical plans that the County paid in the previous plan year.
- G. Beginning 2022, the County will review technological advancements in the area of benefits administration and consider asking any eligible employee who waives County health insurance to provide proof of other health insurance coverage.
- 19.8 <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.
- 19.9 <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.
- 19.10 Health Care Spending Account. After six (6) months of permanent employment, full time and part time (20/40 or greater) employees may elect to participate in a Health Care Spending Account (HCSA) Program designed 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, of before tax dollars, 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.

- **19.11** Health Plan Participants: Permanent active employees, including project employees, regularly scheduled to work twenty (20) or more hours per week and who are enrolled in a County provided health plan as of June 1, 2016, will receive a lump sum payment of one thousand dollars (\$1,000) on August 10, 2016, or on the tenth day of the month following approval of the MOU, whichever is later. This provision does not apply to permanent-intermittent, temporary, or per diem employees.
- **19.12** <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.
- 19.13 <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.
- **19.14** <u>Premium Conversion Plan:</u> 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 pretax dollars to pay health and dental premiums.
- 19.15 <u>Prevailing Section:</u> To the extent that any provision of this Section (Section 19 Medical, Dental, & Life Insurance) 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 19 Medical, Dental, & Life Insurance) will prevail.
- **19.16** <u>Rate Information.</u> 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.
- 19.17 <u>Partial Month.</u> 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. The responsibility for this payment rests with the employee. If payment is not made, the employee shall be dropped from the health plan.

#### 19.18 Coverage During Absences

Employees shall be allowed to maintain their health plan coverage at the County group

rate for twelve (12) months if on approved leave of absence provided that the employee shall pay the entire premium (i.e. both employer and employee share) for the health plan during said leave. Said payment shall be made by the employee at a time and place specified by the County. Late payment shall result in cancellation of health plan coverage.

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 at a place and time specified by the County. Late payment may result in cancellation of health plan coverage with no reinstatement allowed.

19.19 <u>Health Benefit Coverage for Employees Not Otherwise Covered</u>. To access County health plans, an employee represented by the Union 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.

# 19.20 Health Savings Account with High Deductible Health Plan

A. Active employees who are enrolled in the Kaiser Permanente High Deductible Health Plan may select a Health Savings Account ("HSA") offered through Kaiser Permanente under the following conditions and subject to any other laws, regulations or rules governing HSAs:

- 1. Only active employees who are enrolled in the Kaiser High Deductible Health Plan may elect to initially enroll in the HSA. The HSA is not available to permanent-intermittent or temporary employees.
- 2. Employees may only contribute up to the maximum annual contribution rate for HSAs as set forth in the United States Internal Revenue Code.
- 3. Funds contributed to the HSA are invested as directed by the employee. The County does not provide any recommendations or advice on investment or use of HSA funds.
- 4. Employees are responsible for paying any HSA account management fees charged by the HSA administrator.
- 5. The County does not manage or administer the HSAs.
- B. For the 2020 Plan Year and each year thereafter, the County will contribute six hundred and twenty-five dollars (\$625) annually into the HSA for active employees who are enrolled in the Kaiser Permanente High Deductible Health Plan and have an HSA as of February 1 of the new plan year. The contribution will be made with the February 10 pay for the plan year.

### 19.21 <u>Voluntary Vision Plan</u>

The County will offer active employees the option to enroll in a voluntary vision plan during open enrollment. Employees will pay the full premium cost of the plan. The County will contract for a voluntary vision plan with no co-pays. The vision plan is not available to permanent-intermittent or temporary employees.

Date: <u>5 - / - / 9</u>	•
Contra Costa County: (Signature / Printed Name)	Teamsters, Local 856: (Signature / Printed Name)
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