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(ITEM ) From the Director of Employee Benefits, Department of Human Resources, recommending adoption of a resolution/ordinance to amend Chapter 17.14 (7) of the Milwaukee County Code of General Ordinances as it pertains to healthcare benefits to make them consistent with the provisions of the 2014 Adopted Budget by recommending adoption of the following:

**A RESOLUTION/ORDINANCE**

WHEREAS, the benefit modification adopted as part of Org. Unit 1950 – Employee Fringe Benefits in the 2014 Adopted Budget requires adoption of the attached conforming ordinances to effectuate those changes for all employees and retirees; and

WHEREAS, the benefit modification recommended in the 2014 Adopted Budget includes new revised monthly premiums; now, therefore,

BE IT RESOLVED, that the Milwaukee County Board of Supervisors hereby amends Section 17.14 (7) of the Milwaukee County Code of General Ordinances by adopting the following:

**AN ORDINANCE**

The County Board of Supervisors of the County of Milwaukee does ordain as follows:

**SECTION 1.** Section 17.14(7) of the General Ordinances of Milwaukee County is amended as follows:

- (7) *Milwaukee County Group Health Benefit Program.*
  - (a) Health ~~and dental~~ benefits shall be provided for in accordance with the terms and conditions of the current plan document and the group administrative agreement for the Milwaukee County Health ~~Insurance~~ Plan.
  - (b) All health care provided shall be subject to utilization review.
  - (c) Eligible employees may choose health benefits for themselves and their dependents under a Preferred Provider Organization (County health plan or PPO).
  - (d) Eligible employees enrolled in the PPO shall pay a monthly amount toward the monthly cost of health insurance as described below:
    - (1) Effective January 2013~~4~~ employees enrolled in the PPO comparable plan who would otherwise pay the premium contribution set forth in this subsection and who comply with the requirements of the wellness plan shall pay the following

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amounts per month toward the monthly cost of the respective plan:

Employee Only	<del>\$100.00</del> <u>\$80.00</u>
Employee + Child(ren)	<del>125.00</del> <u>\$100.00</u>
Employee + Spouse	<del>200.00</del> <u>\$160.00</u>
Employee + Family	<del>225.00</del> <u>\$180.00</u>

(2) Effective January 20134 employees enrolled in the PPO comparable plan who do not comply with the requirements of the wellness plan shall pay the following amounts per month toward the monthly cost of the respective plan:

<u>Employee Only</u>	<u>\$130.00</u>
<u>Employee + Child(ren)</u>	<u>\$150.00</u>
<u>Employee + Spouse</u>	<u>\$210.00</u>
<u>Employee + Family</u>	<u>\$230.00</u>

(3) The appropriate payment shall be made through payroll deductions. When there are not enough net earnings to cover such a required contribution, and the employee remains eligible to participate in a health care plan, the employee must make the payment due within ten (10) working days of the pay date such a contribution would have been deducted. Failure to make such a payment will cause the insurance coverage to be canceled effective the first of the month for which the premium has not been paid.

(4) The County shall deduct employees' contributions to health insurance on a pre-tax basis pursuant to a Section 125 Plan.

(5) The County shall establish and administer flexible spending accounts (FSAs) for those employees who desire to pre-fund their health ~~insurance- and dependent care~~ costs as governed by Internal Revenue Service (IRS) regulations. The County retains the right to select a third party administrator.

(a) The County shall ~~make~~ match the employees' an annual contributions to the FSA account on a dollar-for-dollar basis up to an annual maximum match of \$1200.00 for each active and enrolled eligible employee who is covered by Subsection 201.24(3.11) of the pension ordinance or who is covered by a collective bargaining agreement that includes a mandatory employee pension contribution consistent with Subsection 201.24(3.11) of the pension ordinance. ~~The contribution shall~~

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~~be based upon plan enrollment and will be funded as follows—  
per calendar year:~~

<del>Employee Only</del>	<del>————— \$600.00</del>
<del>Employee + Child(ren)</del>	<del>————— 1,440.00</del>
<del>Employee + Spouse</del>	<del>————— 1,200.00</del>
<del>Employee + Family</del>	<del>————— 1,800.00</del>

The contributions shall be subject to and in accordance with IRS regulations.

(e) In the event an employee who has exhausted accumulated sick leave is placed on leave of absence without pay status on account of illness, the County shall continue to pay the monthly cost or premium for the PPO in force at the time leave of absence without pay status is requested, if any, less the employee contribution during such leave for a period not to exceed one (1) year. The one-year period of limitation shall begin to run on the first day of the month following that during which the leave of absence begins. An employee must return to work for a period of sixty (60) calendar days with no absences for illness related to the original illness in order for a new one-year limitation period to commence.

(f) Where both husband and wife are employed by the County, either the husband or the wife shall be entitled to one (1) family plan. Further, if the husband elects to be the named insured, the wife shall be a dependent under the husband's plan, or if the wife elects to be the named insured, the husband shall be a dependent under the wife's plan. Should neither party make an election the County reserves the right to enroll the less senior employee in the plan of the more senior employee. Should one (1) spouse retire with health insurance coverage at no cost to the retiree, the employed spouse shall continue as a dependent on the retiree's policy, which shall be the dominant policy.

~~(g) Coverage of enrolled employees shall be in accordance with the monthly enrollment cycle administered by the County.~~

(g) Eligible employees may continue to apply to change their participation in the health plan on an annual basis. This open enrollment shall be held at a date to be determined by the County and announced at least forty-five (45) days in advance.

(h) The County shall have the right to require employees to sign an authorization enabling non-county employees to audit medical and dental records. Information obtained as a result of such audits shall

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not be released to the County with employe names unless necessary for billing, collection, or payment of claims.

- (i) Amendments to the Public Health Service Act apply to federal government (COBRA) provisions regarding the continuation of health insurance to municipal health plans. Milwaukee County, in complying with these provisions, shall collect the full premium from the insured, as allowed by law, in order to provide the continued benefits.
- (j) The County reserves the right to establish a network of providers. The network shall consist of hospitals, physicians, and other health care providers selected by the County. The County reserves the right to add, modify or delete any and all providers under the network.
- (k) Employees not covered by subsection ~~(m)~~(l) may, upon retirement, opt to continue their coverage in the County group health benefit program upon payment of the full monthly cost.
- (l) The provisions of this subsection are considered a part of an employe's vested benefit contract as more fully set forth in Subsection [201.24\(5.10\)](#). For the purpose of this subsection, service as a County employe not to exceed six (6) months under an emergency appointment, if continuous, may be included in calculating the fifteen (15) years of creditable pension service. The County shall pay the full monthly cost of providing county group health coverage under [Section 17.14](#) to the following individuals:
  - (1) Upon retirement, employes who were non-represented as of December 31, 2011, or who were represented, as of December 31, 2011, by the American Federation of State, County, and Municipal Employees, or by the International Association of Machinists and Aerospace Workers, or by the Technicians, Engineers, and Architects of Milwaukee County, or by the Milwaukee Building and Construction Trades Council, or by the Milwaukee County Fire Fighters Association, and who were hired prior to January 1, 1994, and who have fifteen (15) years or more of creditable pension service as a county employe, or who have at least seven and one-half (7½) years of creditable pension service as a county employe and have also retired after fifteen (15) or more years of service as a City of Milwaukee employe.

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(2) Employees who were represented as of December 31, 2011, by the Federation of Nurses and Health Professionals, and who were hired prior to September 27, 1995, and who have fifteen (15) years or more of creditable pension service as a county employe, or who have at least seven and one-half (7½) years of creditable pension service as a county employe and have also retired after fifteen (15) or more years of service as a City of Milwaukee employe.

(3) Employees who were represented as of December 31, 2011, by the Association of Milwaukee County Attorneys, and who were hired prior to January 1, 2006, and who have fifteen (15) years or more of creditable pension service as a county employe, or who have at least seven and one-half (7½) years of creditable pension service as a county employe and have also retired after fifteen (15) or more years of service as a City of Milwaukee employe.

(4) Employees who were represented as of December 31, 2011, by the Deputy Sheriffs Association, and who were hired prior to July 1, 1995, and who have fifteen (15) years or more of creditable pension service as a county employe, or who have at least seven and one-half (7½) years of creditable pension service as a county employe and have also retired after fifteen (15) or more years of service as a City of Milwaukee employe.

(5) Retired members of the county retirement system who became members due to a functional transfer from the City of Milwaukee and have a total of fifteen (15) or more years of creditable pension service, to retired former employes of United Regional Medical Services, Inc., who were employed by the County as of December 31, 1991, and who have fifteen (15) or more years of aggregate service with the County, United Regional Medical Services, Inc., United/Dynacare LLC, and Froedtert Memorial Lutheran Hospital (Radiology Department), and to retired employes with fifteen (15) or more years of service as a county employe in a teaching position.

(6) Beneficiaries of the foregoing employes in paragraphs (1)—(5) who continue to receive benefits from the county retirement system after the death of such employe, and to persons receiving survivorship benefits under Subsection [201.24\(6.4\)](#) of the county pension ordinance. Upon the death of any retiree, only those survivors eligible for health insurance

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benefits prior to such retiree's death shall retain continued eligibility in the county group health benefit program.

(m) Effective February 1, 2013, all eligible employees enrolled in the PPO shall have a deductible equal to the following:

(1) The in-network deductible for the PPO shall be based upon plan enrollment and shall be as follows per calendar year:

Employee Only	\$800.00
Employee + Child(ren)	1,050.00
Employee + Spouse	1,600.00
Employee + Family	1,850.00

(2) The out-of-network deductible for the PPO shall be based upon plan enrollment and shall be as follows per calendar year:

Employee Only	\$1,600.00
Employee + Child(ren)	2,100.00
Employee + Spouse	3,200.00
Employee + Family	3,700.00

(3) Co-payments do not apply towards meeting deductibles for the PPO.

(n) All eligible employees and/or their dependents enrolled in the PPO shall be subject to a thirty dollar (\$30.00) in-network office visit co-payment or a sixty dollar (\$60.00) out-of-network office visit for all illness or injury related office visits, including chiropractic visits. The in-network office visit co-payment shall not apply to preventative care, as determined by the plan.

(o) All eligible employees and/or their dependents enrolled in the PPO shall be subject to a co-insurance after application of the deductible.

(1) The in-network co-insurance shall be equal to twenty (20) percent of all charges subject to the applicable out-of-pocket maximum.

(2) The out-of-network co-insurance shall be equal to forty (40) percent of all charges subject to the applicable out-of-pocket maximum.

(3) Co-insurance does not apply to those services that require a fixed amount co-payment.

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(4) The in-network co-insurance shall not apply to preventative care, as determined by the plan.

- (p) All eligible employees enrolled in the PPO shall be subject to the following out-of-pocket maximums including any applicable deductible and percent co-insurance to a calendar year maximum of:
- (1) Two thousand five hundred dollars (\$2,500.00) in-network under a single plan.
  - (2) Five thousand dollars (\$5,000.00) in-network under an employee + child(ren), an employee + spouse, or a family plan.
  - (3) Six thousand dollars (\$6,000.00) out-of-network under a single plan.
  - (4) For the PPO, twelve thousand dollars (\$12,000.00) out-of-network under an employee + child(ren), an employee + spouse, or a family plan.
  - ~~(5) Office visit co-payments are not limited and do not count toward the calendar year out-of-pocket maximum(s).~~
  - (5) Charges that are over usual and customary do not count toward the calendar year out-of-pocket maximum(s).
  - (6) Prescription drug co-payments do not count toward the calendar year out-of-pocket maximum(s).
  - (7) Other medical benefits not described in Subsections (p)(5), ~~(6)~~, and (6) shall be paid by the health plan at one hundred (100) percent after the calendar year out-of-pocket maximum(s) has been satisfied.

(q) All eligible employees and/or their dependents enrolled in the PPO shall pay a two hundred dollar (\$200.00) emergency room co-payment (facility only) in-network or out-of-network. The co-payment shall be waived if the employee and/or their dependents are admitted directly to the hospital from the emergency room. In-network and out-of-network deductibles and co-insurance percentages then apply.

(r) All eligible employees and/or their dependents enrolled in the PPO shall pay the following for a thirty-day prescription drug supply at a participating pharmacy:

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(1) Ten dollar (\$10.00) co-payment for all generic drugs.

(2) Thirty dollar (\$30.00) co-payment for all brand name drugs on the formulary list.

(3) Fifty dollar (\$50.00) co-payment for all non-formulary brand name drugs.

~~(4) Non-legend drugs may be covered at the ten dollar (\$10.00) generic co-payment level at the discretion of the plan.~~

(4) Twenty dollar (\$20.00) co-payment for all diabetic covered supplies.

(5) Except as prohibited by Medicare, mail order is mandatory for all maintenance drugs. There is no coverage for maintenance drugs filled at retail pharmacy after the third fill.

(6) Effective February 1, 2013, co-payments for mail order maintenance drugs are two and one-half times (2.5x) retail but for a ninety-day supply.

(7) The plan shall determine all management protocols.

(8) Co-payments for retail prescription are for a thirty-day supply. Retail prescription shall not exceed a thirty-day supply.

(t) All eligible employees and/or their dependents enrolled in the PPO shall pay fifty (50) percent co-insurance on all durable medical equipment to a maximum of fifty dollars (\$50.00) per appliance or piece of equipment.

(u) In accordance with Wisconsin Act 218 that was passed by the State of Wisconsin in 2010, mental health care for all eligible employees and/or their dependents shall be provided in the same manner as regular health care as described in Subsection [17.14](#)(7). As such, all co-payments, co-insurance, deductibles, and out-of-pocket maximums shall apply accordingly.

(v) Each calendar year, the County shall pay a cash incentive of five hundred dollars (\$500.00) per contract (single or family plan) to each eligible employee who elects to dis-enroll or not to enroll in a PPO. Any employee who is hired on and after January 1, and who would be eligible to enroll in health insurance under the present County

350 guidelines who chooses not to enroll in a county health plan shall  
351 also receive five hundred dollars (\$500.00). Proof of coverage in a  
352 non-Milwaukee County Group Health Insurance Plan must be  
353 provided in order to qualify for the five hundred dollar (\$500.00)  
354 payment. Such proof shall consist of a current health enrollment card.

355 (1) The five hundred dollars (\$500.00) shall be paid on an  
356 after-tax basis. When administratively possible, the County  
357 may convert the five hundred dollar (\$500.00) payment to a  
358 pre-tax credit which the employe may use as a credit towards  
359 any employe benefit available within a flexible benefits plan.

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361 (2) The five hundred dollar (\$500.00) payment shall be paid on  
362 an annual basis by payroll check no later than April 1 of any  
363 given year to qualified employes on the county payroll as of  
364 January 1. An employe who loses his/her non-county health  
365 insurance coverage may elect to re-join the county health plan.  
366 The five hundred dollar (\$500.00) payment must be repaid in  
367 full to the County prior to coverage commencing. Should an  
368 employe re-join a health plan he/she would not be eligible to  
369 opt out of the plan in a subsequent calendar year.

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371 (w) The County shall implement a disease management program.

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373 (x) The provisions of C.G.O. [17.14](#)(7) shall apply to all employes in the  
374 unclassified service of Milwaukee County, except those in following  
375 title codes 83000, 83400, 83500, 83600, 83900, 85100, 85400,  
376 85410, 85590, 85631, and 85710.

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378 (y) The provisions of C.G.O. [17.14](#)(7) shall not apply to seasonal and  
379 hourly employes. An hourly employe shall be considered to be one  
380 who does not work a uniform period of time within each pay period  
381 and shall include an employe who works a uniform period of time of  
382 less than twenty (20) hours per week.

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384 (z) The provisions of [Section 17.14](#)(7) shall apply to employes on an  
385 unpaid leave of absence covered by workers compensation.

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387 (aa) Retired members of the county retirement system who were  
388 represented by the Federation of Nurses and Health Professionals,  
389 Local 5001, American Federation of Teachers, (AFT) American  
390 Federation of Labor and Congress of Industrial Organizations (AFL,  
391 CIO) and non-represented members of the employe retirement system  
392 who were Doyme employes when they voluntarily resigned their  
393 employment between September 1, 1995, and December 31, 1995,

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at the time of, and in lieu of, a layoff from county service as a direct result of the sale/lease of John L. Doyne Hospital and employees of the School of Nursing who resigned from county service, in lieu of being laid off due to the closure of the School of Nursing, who possess more than ten (10) but less than fifteen (15) years of creditable pension service credit may elect to file an appropriate application to become eligible to enroll in the county group health benefit program and the County shall pay the following fixed, not to exceed, below noted portion of the monthly cost of the benefit option selected with the pensioner paying the balance of the monthly cost:

Creditable Pension Service Monthly County Payment:

Ten (10) or more years	\$50.00
Eleven (11) or more years	125.00
Twelve (12) or more years	200.00
Thirteen (13) or more years	275.00
Fourteen (14) or more years	350.00

(bb) Retired members of the county retirement system who are eligible for continuing their health insurance benefits at County expense under the provision of this section shall be eligible for reimbursement of the cost of their Medicare Part B premiums, as well as the Medicare Part B premiums of their eligible spouse and dependents.

(1) The provisions of section (bb) shall not apply to members not represented by a collective bargaining unit who retired and began receiving benefits from the Milwaukee County Employees Retirement System after April 1, 2011, nor to members represented by the American Federation of State, County and Municipal Employees, the Association of Milwaukee County Attorneys, the Milwaukee Building and Trades Council, the Technicians, Engineers, and Architects of Milwaukee County, and the International Association of Machinists and Aerospace Workers who retired and began receiving benefits from the Milwaukee County Employees Retirement System after December 31, 2011, nor to members represented by the Federation of Nurses and Health Professionals who retired and began receiving benefits from the Milwaukee County Employees Retirement System after December 31, 2012. For members represented by the Deputy Sheriffs Association and the Milwaukee County Fire Fighters Association, the provisions of sections (aa) and (bb) shall be applicable in accordance with their respective labor contracts.

(cc) Retired members of the county retirement system with less than fifteen (15) years of creditable pension service credit may, upon retirement,

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opt to continue their membership in the county group health benefit program upon payment of the monthly cost. Upon the death of such a pensioner, the beneficiary(s) may continue as a member of the group, providing they pay the full monthly cost.

- (dd) Effective January 1, 2012, the County Medicare coordination methodology will be "non-duplication". Under this method, when Medicare is the primary health coverage, the benefit paid by Milwaukee County's plan will be the difference between the benefit provided in [Section 17.14](#)(7) and the amount paid by Medicare.
- (ee) Effective January 1, 2012, employees who are not represented by a collective bargaining unit or who are members of the American Federation of State, County, and Municipal Employees, the Association of Milwaukee County Attorneys, the Milwaukee Building and Construction Trades Council, the International Association of Machinists and Aerospace Workers, the Technicians, Engineers, and Architects of Milwaukee County or the Federation of Nurses and Health Professionals shall be subject to the provisions of [Section 17.14](#)(7).
- (ff) Effective January 1, 2012, employees who are members of the Milwaukee Deputy Sheriff's Association or the Milwaukee County Fire Fighters Association shall be subject to the provisions of [Section 17.14](#)(7), with the exception of subsection (d) which shall be in accordance with the provisions of the collective bargaining agreement.
- (gg) County Wellness Program – effective January 1, 2014, the County shall implement a wellness plan including biometric screenings, a health questionnaire, and up to four (4) individual health coaching sessions per year.
  - (1) An employee shall be deemed compliant with the program as soon as administratively feasible upon submission of the annual health questionnaire and completion of the annual biometric screening process.
  - (2) Employees deemed at risk by the administrator shall also be required to complete one (1) coaching session with the administrator per quarter to maintain compliance with the plan.

**SECTION 2.** Section 17.14(8) is created as follows.

481 (8) County dental benefit plan and dental maintenance organizations. Employees  
482 who are eligible for group medical benefits under the provision of subsection 7 of  
483 this section shall also be eligible to enroll in dental benefits coverage in accordance  
484 with enrollment procedures established by the County, except that retired members  
485 of the county retirement system shall not be eligible for dental benefit coverage.  
486 Eligible employees may enroll in the County's dental benefit plan or a dental  
487 maintenance organization approved by the County.

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- 489 (a) Dental benefits shall be provided for in accordance with the terms  
490 and conditions of the current plan document and the group  
491 administrative agreements for the Milwaukee County Dental Plan and  
492 the approved dental maintenance organization.
- 493 (b) Employees shall pay ten dollars (\$10.00) per month toward the cost of  
494 the single plan and twenty-five (\$25) per month toward the cost of a  
495 family plan. The appropriate payment shall be made through payroll  
496 deduction.
- 497 (c) Employees may continue their dental benefits coverage during a leave  
498 of absence under the same conditions as they may continue health  
499 benefits coverage.
- 500 (d) The County shall deduct employees' contributions to dental coverage  
501 on a pre-tax basis pursuant to a Section 125 Plan.
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503 **SECTION 3.** The provisions of this ordinance shall be effective January 1, 2014.  
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