

**MEMORANDUM OF UNDERSTANDING
BETWEEN THE CITY OF RAMSEY AND LELS-PATROL**

ARTICLE (19): MOU HEALTH INSURANCE

January 1, 2015 to December 31, 2016 as described below:

1) City contributions for 2015 health insurance, as follows:

The employer will make the following contributions toward group health insurance coverage for employees enrolled in the City’s plan during 2015. In addition, the City will purchase \$20,000 of basic life insurance for full-time regular employees.

Health Plan Tier (Per Month)	City Contribution to Premium	City Contribution to *VEBA	Total Monthly City Contribution
Single Plans	\$741.74	\$130.00	\$871.74
Employee + Spouse Plans	\$982.00	\$160.00	\$1,142.00
Employee + Children Plans	\$1,066.00	\$160.00	\$1,226.00
Family Plans	\$1,166.00	\$192.00	\$1,358.00
* The above listed City VEBA contribution includes a \$4.30 per month VEBA administration fee.			

Or

Provide cash in lieu of City’s insurance contribution of \$345 per month in 2015. Employees receiving the waiving benefit prior to 2013 will continue to be grandfathered in to the waiving benefit. New employees to the program are subject to the following terms:

- Employee shows proof of other coverage, and
- Employee agrees to the terms of the waiving benefit as described within the City’s policy and signs the acknowledgement form

2) City contributions for 2016 health insurance, as follows:

The employer will make the following contributions toward group health insurance coverage for employees enrolled in the City’s plan during 2016. In addition, the City will purchase \$20,000 of basic life insurance for full-time regular employees.

Health Plan Tier (Per Month)	City Contribution to Premium	City Contribution to *VEBA	Total Monthly City Contribution
Single Plans	*TBD	\$130.00	*TBD
Employee + Spouse Plans	\$1007.00	\$160.00	\$1,167.00
Employee + Children Plans	\$1,091.00	\$160.00	\$1,251.00
Family Plans	\$1,166.00	\$192.00	\$1,358.00
* The above listed City VEBA contribution includes a \$4.30 per month VEBA administration fee. In 2016, the least expensive single plan (the \$4000 deductible plan/accord network) will be paid in full			

Or

Provide cash in lieu of City’s insurance contribution of \$370 per month in 2016. Employees receiving the waiving benefit prior to 2013 will continue to be grandfathered in to the waiving benefit. New employees to the program are subject to the following terms:

- Employee shows proof of other coverage, and
- Employee agrees to the terms of the waiving benefit as described within the City’s policy and signs the acknowledgement form, and

All other provisions of Article XVIII shall apply normally.

FOR THE CITY OF RAMSEY:

BY: _____
 Sarah Strommen, Mayor _____
 Date

ATTEST: _____
 Kurtis G. Ulrich, City Administrator _____
 Date

BY: _____
 Richard Webb, Steward _____
 Date

BY: _____
 Kim Sobiak, LELS _____
 Date