DEPARTMENT: Personnel  By: Jeffrey G. Green  PHONE: 209/966-3222

RECOMMENDED ACTION AND JUSTIFICATION: Policy Item: Yes ( ) No ( )

Resolution increasing the employer’s contribution for Mariposa County Managerial and Confidential Organization (MCMCO) under the Public Employees’ Medical and Hospital Care Act. The Board, in its negotiations with MCMCO, agreed to contribute to the cost of employee medical insurance premiums at the employee+one rate under the County’s PacifiCare plan, not to exceed $369. At the time the MOU was negotiated, the monthly premium was $329.28 with the premium increasing to $349.04 effective January 1, 2000. Effective January 1, 2001, PacifiCare will be increasing their monthly rates and the employee+one rate will be increased to $376.34. Therefore, the County’s contribution will need to be increased to $369 as agreed upon in the MOU.

BACKGROUND AND HISTORY OF BOARD ACTIONS:

The Board has previously revised the County’s contribution. The attached Resolution accurately reflects the change to the County’s contribution and provides the required direction to the PERS Board of Administration.

LIST ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:

N/A. Pursuant to Government Code section 22825.6 and contractual obligations under the County’s PERS contract, the attached Resolution must be filed with PERS Board of Administration.

COSTS: ( ) Not Applicable
A. Budgeted current FY $__________
B. Total anticipated costs $__________
C. Required additional funding $__________
D. Internal transfers $__________

SOURCE: ( ) 4/5ths Vote Required
A. Unanticipated revenues $__________
B. Reserve for contingencies $__________
C. Source description: ____________________________
Balance in Reserve for Contingencies, if approved: $__________

SPECIAL INSTRUCTIONS: List the attachments and number the pages consecutively:

Resolution.

CLERK’S USE ONLY:
Res. No.: 00-440  Ord. No. ________
Vote: Ayes: ______  Noes: ______
Absent: ______  Abstained: ______
Approved ( ) Denied ( ) Minute Order Attached ( ) No Action Necessary

ADMINISTRATIVE OFFICER’S RECOMMENDATION:
This item on agenda as:

✓ Recommended
☐ Not Recommended
☐ For Policy Determination
☐ Submitted with Comment
☐ Returned for Further Action

Comment:

Attest: MARGIE WILLIAMS, Clerk of the Board
County of Mariposa, State of California
By: Deputy

A.O. Initials: ______

Action Form Revised 5/92
RESOLUTION NO. 00-440

RESOLUTION FIXING THE EMPLOYER’S CONTRIBUTION UNDER THE PUBLIC EMPLOYEE’S MEDICAL AND HOSPITAL CARE ACT

WHEREAS, Government Code Section 22825.6 provides that a local agency contracting under the Public Employees’ Medical and Hospital Care Act shall fix the amount of the employer’s contribution at an amount not less than the amount required under section 22825 of the Act, and

WHEREAS, Mariposa County (Agency Code 0453) is a local agency contracting under the Act;

NOW, THEREFORE, BE IT RESOLVED, that the employer’s contribution for each employee or annuitant shall be the amount necessary to pay the full cost of his/her enrollment, including the enrollment of family members, in a health benefits plan up to a maximum of:

<table>
<thead>
<tr>
<th>Code</th>
<th>Bargaining Unit</th>
<th>Contribution Per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Elected and Appointed Officials</td>
<td>$349.04</td>
</tr>
<tr>
<td>02</td>
<td>Management Employees</td>
<td>$369.00</td>
</tr>
<tr>
<td>03</td>
<td>General Employees</td>
<td>$255.25</td>
</tr>
<tr>
<td>04</td>
<td>Sheriff's Deputies and Jail Officers</td>
<td>$255.25</td>
</tr>
<tr>
<td>05</td>
<td>Sheriff’s Managers</td>
<td>$270.64</td>
</tr>
</tbody>
</table>

Plus administrative fees and Contingency Fund assessments.

PASSED AND ADOPTED by the Mariposa County Board of Supervisors this 19th day of December 2000, by the following vote:

AYES: REILLY, STEWART, PARKER, PICKARD
NOES: NONE
ABSENT: BALMAIN
ABSTAINED: NONE

GARRY R. PARKER, Chair
Mariposa County Board of Supervisors

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY:

MARGIE WILLIAMS
Clerk of the Board

JEFFREY G. GREEN
County Counsel