

**Attachment to Ordinance #2640-2023
Amending Management Compensation Plan (MCP) #2713-2013,
as amended**

Amend all appropriate sections where necessary and as specified by replacing gender-specific pronoun language with gender-neutral pronoun language and any and all associated subject-verb agreement language and any and all singular or plural noun language as necessary throughout.

Amend all appropriate sections where necessary and as specified by replacing references to “vacation” with “Paid Time Off” or “PTO” throughout.

Amend Section 5(F) to read as follows:

(F) Seasonal Classifications.

Ord. Sec.	Job Code	Class Title	Range
A199	3184	Aquatics Supervisor (Seasonal)	\$17.00/hour to \$23.50/hour
L130	3183	Lifeguard (Seasonal)	\$15.00/hour to \$20.00/hour
R063	3684	Recreation and Parks Aide (Seasonal)	\$10.40 45 /hour to \$17.00/hour
S305	3680	Summer Worker	\$10.40 45 /hour to \$15.00/hour

Amend Section 7(E) to read as follows:

SECTION 7. ADDITIONAL ALLOWANCES AND COMPENSATION.

(E) Tuition Reimbursement. All full-time employees ~~with one (1) or more years of continuous active service prior to the start date of the course(s)~~ shall be eligible for reimbursement of instructional fees, books, **and course laboratory fees, and associated fees.** **Annually, full-time employees are eligible for tuition reimbursement** up to ~~four~~ **five** thousand ~~five~~ **two** hundred **fifty** dollars (~~\$5,250~~**\$5,250**,500) for undergraduate studies, ~~or~~ up to five thousand five hundred dollars (\$5,500) per calendar year for graduate

studies; and of up to two thousand dollars (\$2,000) for courses for continuing education voluntarily undertaken by the employee which are directly related to the employee's job duties or may lead to career advancement within the City as determined by the Director of Human Resources. The tuition reimbursement program shall be subject to the following conditions:

- (1) No employee on an unpaid leave of absence, unauthorized leave of absence, disability leave, injury leave or workers' compensation **shall be eligible to apply for tuition reimbursement under this Article unless that employee shall be able to return from leave no later than the date the course commences. However, employees on injury leave who had a course approved by the Human Resources Director or designee prior to being injured may apply for tuition reimbursement for that course.** ~~may apply for tuition reimbursement.~~
- (2) All undergraduate and graduate courses must be taken at times other than scheduled working hours. Continuing education courses may be taken during scheduled working hours with the approval of the Appointing Authority. All scheduled hours for courses of instruction must be filed with the Appointing Authority or designee and with the Department of Human Resources. There must be a correlation between the employee's duties and responsibilities **or courses that may lead to career advancement within the City** and the courses taken or the degree program pursued. All scheduled times of courses must be approved by the Appointing Authority or designee. Any situation which, in the discretion of the Appointing Authority or designee, would require an employee's presence on the job shall take complete and final precedence over any time scheduled for courses.
- (3) ~~Institutions and courses of instruction must be attended within Franklin County or adjoining counties.~~ Courses must be taken at colleges, universities, technical and business institutes or at their established extension centers **held within Franklin County or adjoining counties, or online, which shall be accredited by either the U.S. Department of Education or the Council for Higher Education Accreditation (CHEA).** ~~and accredited by the U.S. Department of Education.~~ Courses taken via the Internet **Online courses** may be approved by the Human Resources Department provided the institution meets criteria similar to that for residential education programs.

Seminars, conferences and workshops will only be considered for reimbursement for continuing education.

- (4) The Department of Human Resources shall determine the approved institutions for which reimbursement for instructional fees, books, and course ~~laboratory and associated~~ fees may be made under this Section. Only those institutions approved by the Department of Human Resources shall establish eligibility of the employee to receive reimbursement. Additional institutions may be added by forwarding an application for reimbursement to the Department of Human Resources. Application for approval of institutions and courses must be made to the Department of Human Resources **not less than fourteen (14) days** ~~not more than thirty (30) days or less than ten (10) days~~ prior to the first day of the scheduled course(s).
- (5) Any financial assistance from any governmental or private agency available to an employee, whether or not applied for and regardless of when such assistance may have been received, shall be deducted in the entire amount from the full tuition reimbursement the employee is eligible for under this Section. If an employee's tuition is fully covered by another governmental or private agency, then the employee is not entitled to payment from the City.
- (6) Reimbursement will be made when the employee satisfactorily completes a course and presents an official certificate or its equivalent and an original receipt of payment or unpaid bill from the institution confirming completion of the approved course. The employee must submit this documentation within four (4) weeks of the course completion, unless unable to do so through no fault of their own.
- (7) No reimbursement will be granted for paper, supplies of whatever nature, transportation, meals, or any other expense connected with any course except the cost of instructional fees, books, and course ~~laboratory fees, and associated~~ fees. "Distance learning" and similar fees related to enrollment in online ~~internet~~ courses will not be reimbursed. **Deferred payment charges, late fees or any other fees associated with an employee's deferral of tuition payment will not be reimbursed.**
- (8) Any employee participating in the tuition reimbursement program who resigns or retires or is discharged for cause must repay the tuition reimbursement paid by the City for undergraduate courses and continuing education courses taken less than two (2) years prior to the date of termination or discharge and for graduate courses taken less than three (3) years prior to the date of termination or discharge. If necessary, this amount will be deducted from the employee's final paycheck. Employees who are separated from the

City involuntarily, e.g., laid off, or through no fault of their own, during the time periods set forth above will not be required to reimburse the City.

- (9) The administration of the tuition reimbursement program will require the Director of Human Resources or designee to be responsible for establishing rules, devising forms and keeping records for the program.

Amend Section 9(A) to read as follows:

SECTION 9. HOLIDAY ELIGIBILITY PAY.

- (A) Holidays Observed. The legal holidays observed by the City and for which full-time, non-seasonal employees are to be compensated shall be as follows:

- (1) New Year's Day, January 1.
- (2) Martin Luther King's Birthday, the third Monday in January.
- (3) Washington's Birthday, the third Monday in February.
- (4) Memorial Day, the last Monday in May.
- (5) Juneteenth, June 19.
- (6) Independence Day, July 4.
- (7) Labor Day, the first Monday in September.
- (8) Indigenous People's Day, second Monday in October (effective 2024)**
- ~~(98)~~ Veterans Day, November 11.
- ~~(109)~~ Thanksgiving Day, the fourth Thursday in November.
- ~~(110)~~ Christmas Day, December 25.
- ~~(121)~~ Any other holidays proclaimed by the Mayor.
- ~~(132)~~ Employee's Birthday. If the employee's birthday falls on an above-named holiday, the employee shall be granted and compensated for one additional holiday. The Appointing Authority will allow the employee to take his/her **their** birthday holiday on the employee's birthday or within 365 days from the date on which the employee's birthday occurs. If the employee's birthday falls on February 29, the holiday for purposes of this Section shall be considered as February 28 unless otherwise authorized by the Appointing Authority.
Beginning the PTO year of 2024 and with the transition to Paid Time Off under Section 12 and its increased paid leave allowances, "birthday holidays" will no longer be granted or compensated.

Amend Section 10(F), 10(I), 10(J), and repeal 10(K) to read as follows:

SECTION 10. SPECIAL LEAVE WITH PAY.

(F) Personal Business Day.

- (1) **Continuing through the end of the 2023 vacation year,** Full-time employees in the classified and unclassified service, except for Elected Officials, Directors, unclassified Deputy Directors and Department Assistant Directors, shall receive three (3), eight (8) hour personal business days **in the 2023** each vacation year, upon reasonable notice to and approval by their Appointing Authorities or designee.
- (2) Part-time regular employees in the classified and unclassified services shall receive three (3), four (4) hour personal business days each **in the 2023** vacation year, upon reasonable notice to and approval by their Appointing Authorities or designees.
- (3) The personal business days are available to employees who have personal business matters to attend to, and cannot do that business outside of regular working hours.
- (4) Personal Business Days may be used in increments of four (4) hours. The days must be used during the **2023** vacation year and may not be carried over from year to year. The personal business days will not be subject to buy-back or cashing in at the end of the **2023** vacation year.
- (5) **At the start of the 2024 PTO year and with the transition to Paid Time Off under Section 12, Personal Business Days will no longer be granted in PTO years.**

~~(I) Paid Time Off (PTO). Elected officials may, at their discretion, adopt the provisions of this Paragraph (I). If adopted by the elected officials, they shall so notify the City Auditor's office.~~

- ~~(1) Each part-time regular employee will receive paid time off each vacation year as defined in Section 12(A) of this Ordinance, regardless of effective date of the part-time regular appointment.~~
- ~~(2) The number of hours of paid time off will be determined at the time of hire based on the number of hours an employee is scheduled to work each week as follows:~~

- ~~(a) For employees scheduled to work more than eight (8) hours per week up to twenty (20) hours per week will receive twenty (20) hours of paid time off per vacation year.~~
- ~~(b) For employees scheduled to work more than twenty (20) hours per week will receive forty (40) hours of paid time off per vacation year.~~

~~In the event the scheduled number of hours changes from one year to the next, an appointing authority must notify the Office of the City Auditor of that change before the first payperiod of each payroll year.~~

- ~~(3) A part-time regular employee may request paid time off upon reasonable notice to and approval by the Appointing Authority or designee. Paid time off may be approved in increments of one (1) hour.~~

- ~~(4) Any balance of paid time off remaining at the end of the vacation year will not be carried over from year to year. Paid time off will not be subject to buy-back or cashing in at the end of the vacation year or at time of separation from City service.~~

- ~~(J) Paid Parental Leave (PPL). Full-time City employees in classifications listed in Sections 5(C), (D) and (E) of this Ordinance, who meet the following criteria, are eligible for up to six (6) weeks of PPL. Upon the effective date of the Paid Family Leave benefit on October 1, 2023, Paid Parental Leave (PPL) shall immediately terminate. Any employee on leave for an eligible use of PFL shall, upon the initial rollout of PFL, be entitled to use PFL to cover any remaining leave, provided the length of leave does not exceed twelve (12) total weeks, inclusive of any unpaid leave, STD-covered leave and paid PFL leave.~~

- ~~(1) Employees must have:~~

- ~~(a) Completed one (1) year of continuous full-time City service;~~
- ~~(b) Worked for at least one thousand two hundred fifty (1,250) hours over the twelve (12) month period preceding the leave;~~
- ~~(c) Not taken any PPL in the preceding rolling twelve (12) month period measured backward from the date PPL is used.~~

- ~~(2) PPL qualifying events are the following:~~

- ~~(a) Birth of a child, provided the employee is the biological parent, or the spouse or domestic partner of the biological parent, or a legal guardian of the child.~~

~~(b) Permanent placement of an adoptive child, provided the employee is the adoptive parent, or the spouse or partner of the adoptive parent, and must reside in the same household as the newly adopted child.~~

~~(3) PPL benefits are as follows:~~

~~(a) The eligible leave period of six (6) weeks begins on the date of the qualifying event (i.e., birth of a child or permanent placement of an adoptive child). PPL is not intended to extend disability leave, and therefore will not be used at the end of disability leave following the same event.~~

~~(b) Eligible employees may receive a total PPL benefit of six (6) weeks. This program shall provide for payment to the employee from the fifteenth (15th) day of the qualifying event for a maximum of four (4) weeks of PPL benefits at seventy percent (70%) of the employee's current salary.~~

~~(c) Notwithstanding the provisions of Section 11(C) of this Ordinance, during the waiting period only, employees may elect to use sick leave, vacation leave, compensatory time or unpaid leave time.~~

~~(d) During the six (6) weeks of PPL, the employee may, if he/she so desires, elect to use all, or part, of his/her accumulated but unused sick leave in order to make up any difference between one hundred percent (100%) of his/her gross wages and the amount which he/she receives under the PPL program, provided that all new (current year) sick leave accruals are exhausted before an employee may use the available balance in his/her old sick leave bank. If an employee exhausts all sick leave benefits, other approved leave may be granted by the Appointing Authority.~~

~~(e) PPL must be taken as one continuous block of leave and may not be taken intermittently.~~

~~(f) Any PPL which is granted for reasons permissible under FMLA leave shall count toward the twelve- (12) week per year limitation.~~

~~(g) While an employee is paid PPL benefits, vacation accruals shall cease. Holidays shall be paid at the PPL benefit rate as set forth in Section 10(J)(3)(b) of this Ordinance.~~

~~(K) — Paid Caregiver Leave (PCL). Full-time City employees in classifications listed in Sections 5(C), (D) and (E) of this Ordinance, who meet the following criteria, are eligible for up to four (4) weeks of PCL. Upon the effective date of the Paid Family Leave benefit on October 1, 2023, Paid Caregiver Leave (PCL) shall immediately terminate. Any employee on leave for an eligible use of PFL shall, upon the initial rollout of PFL, be entitled to use PFL to cover any remaining leave, provided the length of leave does not exceed twelve (12) total weeks, inclusive of any unpaid leave, STD-covered leave and paid PFL leave.~~

~~(1) — Employees must have:~~

~~(a) — Completed one (1) year of continuous full-time City service;~~

~~(b) — Worked for at least one thousand two hundred fifty (1,250) hours over the twelve (12) month period preceding the leave;~~

~~(c) — Not taken any PCL in the preceding rolling twelve (12) month period measured backward from the date PCL is used.~~

~~— (2) — PCL may be taken when the employee's covered family member has a serious medical condition as defined by the Family and Medical Leave Act (FMLA) requiring the employee's care.~~

~~— (3) — Covered family members under the FMLA are the employee's spouse, son, daughter or parent as defined in the FMLA regulations.~~

~~(4) — PCL benefits are as follows:~~

~~(a) — The eligible leave period of four (4) weeks begins on the date the employee requests leave to care for an eligible family member with a serious health condition.~~

~~(b) — Eligible employees may receive a total PCL benefit of four (4) weeks. This program shall provide for payment to the employee from the fifteenth (15th) day of the qualifying event for a maximum of two (2) weeks of PCL benefits at seventy percent (70%) of the employee's current salary.~~

~~(c) — Notwithstanding the provisions of Section 11(C) of this Ordinance, during the waiting period only, employees may elect to use sick leave, vacation leave, compensatory time or unpaid leave time.~~

~~(d) — During the four (4) weeks of PCL, the employee may, if he/she so desires, elect to use all, or part, of his/her accumulated but~~

~~unused sick leave in order to make up any difference between one hundred percent (100%) of his/her gross wages and the amount which he/she receives under the PCL program, provided that all new (current year) sick leave accruals are exhausted before an employee may use the available balance in his/her old sick leave bank. If an employee exhausts all sick leave benefits, other approved leave may be granted by the Appointing Authority.~~

- ~~(e) PCL must be taken as one continuous block of leave and may not be taken intermittently.~~
- ~~(f) Any PCL which is granted for reasons permissible under FMLA leave shall count toward the twelve- (12) week per year limitation.~~
- ~~(g) While an employee is paid PCL benefits, vacation accruals shall cease. Holidays shall be paid at the PCL benefit rate as set forth in Section 10(K)(4)(b) of this Ordinance.~~

~~(L-I)~~ Bereavement Leave. Full-time employees may be granted up to five (5) days of leave of the employee's choice (i.e., compensatory time, **PTO** vacation leave, or sick leave in accordance with Sections 8, 12, and 14) for the death of a member of the employee's family. Up to three (3) of the five (5) days of leave shall be paid as bereavement leave and not deducted from the employee's leave bank(s). In the event of no available leave balances, the employee may be granted leave without pay in accordance with Section 11 of this Ordinance.

~~(M-J)~~ Paid Family Leave (PFL). ~~Effective October 1, 2023,~~ eEach full-time employee shall be granted up to twelve (12) weeks of Paid Family Leave (PFL), on a gender neutral basis, at one hundred percent (100%) of the employee's regular straight time wage per rolling twelve (12) month period measured backward from the date leave begins. The City shall comply with the Family Medical Leave Act ("FMLA") and any current or future amendments to the Act.

Amend Section 12(A), 12(B), 12(G), and enact 12(I) to read as follows:

SECTION 12. VACATION LEAVE PAID TIME OFF (PTO).

- (A) ~~Vacation~~ **PTO** Year. The **2023** vacation year for full-time, non-seasonal employees shall end at the close of business on the last day of the first pay period that begins in the month of January, **2024**. **Effective the beginning of the 2024 PTO year, all references to vacation in this Ordinance shall apply to PTO and vice versa except where otherwise specifically stated.**

- (B) ~~Vacation~~ **PTO** Accruals. Each full-time non-seasonal employee working a forty (40) hour workweek, except as otherwise provided in this Section, shall earn ~~vacation~~ **PTO** in accordance with the following schedule:

<u>Years of Service</u>	<u>Hours Per Pay Period</u>	<u>Days Per Year</u>
Less than 3 years	3.077 hours	10 days
3 years but less than 6 years	4.924 hours	16 days
6 years but less than 13 years	7.077 hours	23 days
13 years but less than 20 years	8.000 hours	26 days
20 years but less than 25 years	8.616 hours	28 days
25 years or more	9.231 hours	30 days

Effective the beginning of the 2024 vacation/PTO year, with the transition from vacation leave to PTO, the PTO schedule and accrual for full-time employees shall be as follows:

<u>Years of Service</u>	<u>Hours Per Pay Period</u>	<u>Days Per Year</u>
<u>Less than 3 years</u>	<u>4.615 hours</u>	<u>15 days</u>
<u>3 years but less than 6 years</u>	<u>6.462 hours</u>	<u>21 days</u>
<u>6 years but less than 13 years</u>	<u>8.615 hours</u>	<u>28 days</u>
<u>13 years but less than 20 years</u>	<u>9.538 hours</u>	<u>31 days</u>
<u>20 years but less than 25 years</u>	<u>10.154 hours</u>	<u>33 days</u>
<u>25 years or more</u>	<u>10.769 hours</u>	<u>35 days</u>

- (1) In order to recruit qualified persons to positions of responsibility, appointing authorities, in their discretion, may give a new employee receiving initial appointment to a position in the classified or unclassified service under Section 5(E) of this Ordinance more ~~vacation-leave~~ **PTO** ~~than stated above.~~ **Appointing Authorities, in their discretion, may provide,**
- a. **Up to ten (10) days of PTO (in a one-time deposit to the employee's PTO bank) to a new employee upon initial appointment, or**
 - b. **An advanced accrual rate of sixteen (16) ~~twenty one (21)~~ days or twenty-eight ~~three (283)~~ days per year, but not to exceed twenty-eight ~~three (283)~~ days per year, in appropriate circumstances.**

When awarding more ~~vacation-leave~~ **PTO** to a new employee, an Appointing Authority should consider the employee's qualifications and work experience, in both the private and public sectors; the level of responsibility required in the position, including the exercise of

independent judgment, the need for discretion and confidentiality, and the ability to bind ~~his/her~~ **their** Appointing Authority; as well as the availability of qualified persons to perform such jobs, and other pertinent market factors. If an Appointing Authority wishes to give a newly hired employee more ~~vacation leave~~ **PTO**, ~~his/her~~ **their** decision must be reviewed and approved by the Human Resources Director or designee before it takes effect.

- (2) If an employee is or has been awarded ~~vacation leave~~ **PTO** at a rate greater than ~~ten (10)~~ **fifteen (15)** days pursuant to the preceding paragraph, the employee will move to each next accrual rate after each three (3) years of service, but not to exceed ~~twenty-six (26)~~ **thirty-one (31)** days of ~~vacation~~ **PTO**. The employee will move to ~~twenty-eight (28)~~ **thirty-three (33)** days of ~~vacation~~ **PTO** upon twenty (20) years of service.

- (G) Payment Upon Death. When an employee dies, any unused ~~vacation leave~~ **PTO** to ~~his/her~~ **their** credit shall be paid to their designated beneficiary surviving spouse. In the event that the employee has no **designated beneficiary** surviving spouse, said unused ~~vacation leave~~ **PTO** shall be paid to the employee's **surviving spouse**. **In the event the employee has no designated beneficiary or surviving spouse, said unused PTO shall be paid to the employee's** estate. Such payment shall be paid at the employee's hourly rate of pay at time of death.

(I) PTO For Part-Time Employees.

Effective the beginning of the 2024 PTO year, each part-time employee (non-seasonal and/or non-temporary) will receive twenty (20) hours of paid time off per PTO year. A part-time employee may request PTO upon reasonable notice to and approval by the Appointing Authority of designee. PTO may be approved in increments of one (1) hour. Any balance of PTO remaining at the end of the PTO year will not be carried over from year-to-year. Paid time off will not be subject to buy-back or cashing in at the end of the PTO year, at the time of separation from City Service, or upon the employee's death.

Amend Section 14(B), 14(D), and 14(F) to read as follows:

SECTION 14. SICK LEAVE.

- (B) Eligible Uses of Sick Leave with Pay; Procedures.

- (1) Sick leave with pay will be at an employee's regular straight-time hourly rate and shall be allowed to full-time employees in one-tenth (1/10th) of an hour increments for the following purposes:

~~(f) Maternity, paternity and adoption leave for employees until the effective date of the Paid Family Leave benefit under Section 10; thereafter, employees will no longer be able to use sick leave benefits for maternity, paternity, and adoption leave.~~

(D) Annual Sick Leave Reciprocity Payment.

(1) During November of each year, each employee shall elect one of the following:

(a) To be paid, at his/her ~~the employee's~~ regular straight-time hourly rate in effect on the last day of the last payperiod of the year, for any unused sick leave hours awarded during the preceding payroll year, up to a maximum of eighty (80) hours, on a one-for-one basis; or

(F) Payment Upon Death. If an employee dies during employment with the City, his/her ~~their~~ unused sick leave account balances as defined herein shall be paid to ~~a surviving spouse~~ **their designated beneficiary**. In the event that the employee has no ~~designated beneficiary~~ surviving spouse, said balance shall be paid to the employee's ~~surviving spouse~~. **In the event the employee has no designated beneficiary or surviving spouse, said balance shall be paid to the employee's estate.** The employee's sick leave balances shall be valued at the time of death in accordance with the applicable provisions of this Section.

Amend Section 15(A) to read as follows:

SECTION 15. DISABILITY PROGRAM.

(A) Disability Program Eligibility. The City will provide, at no cost to employees, a disability program covering full-time employees who are eligible to accrue leaves for non-work related illnesses and injuries. Employees must complete one (1) year of continuous City service before qualifying for disability; such benefits will become available at the first of the month following completion of one (1) year of continuous service. ~~This program shall provide for payment to the employee from the twelfth (12th) day of accident or illness for employees in classifications listed in Sections 5(C), (D) and (E) of this Ordinance, for a maximum of twenty-six (26) weeks per disability per calendar year, at eighty-nine percent (89%) of the employee's standard gross wages. Effective September 1, 2013, t~~ **This program shall provide for payment to the employee from the twelfth (12th) day of accident or illness for employees in classifications listed in Sections 5(C), (D) and (E) of this Ordinance, for a maximum of twenty-six (26) weeks of disability**

benefits within a **rolling** 365-day period, at eighty-nine percent (89%) of the employee's standard gross wages. Applicable federal, state and local flat tax rates and applicable Medicare charge(s) will be deducted. The employee may, if **they** ~~he/she~~ so desires, elect to use all, or part, of ~~his/her~~ **their** accumulated but unused sick or Paid Family Leave, if applicable, leave in order to make up any difference between one hundred percent (100%) of **their** ~~his/her~~ gross wages and the amount which **they** ~~he/she~~ receives under the disability program, provided that all new (current year) sick leave accruals are exhausted before an employee may use the available balance in ~~his/her~~ **their** Old Sick Leave Bank. If an employee exhausts all sick leave benefits, other approved leave may be granted by the Appointing Authority. During the period in which an employee receives such payments, he/she shall suffer no reduction in paid sick leave entitlement set forth in Section 14 of this Ordinance, as applicable. If, while receiving such payments, the employee performs work for the City or another employer, the amount of payment under the disability program shall be reduced by the compensation which he/she receives during that time period. The proper forms must be submitted to the City no later than forty-five (45) days from the commencement of the disability.

Amend Section 16 to read as follows:

SECTION 16. INSURANCE .

- (A) Health Insurance. The City shall continue to provide comprehensive major medical, dental, vision care, life insurance and prescription drug benefits for all full-time employees as are now in effect, with modifications as detailed below, for both the employee and family coverage. Employees shall become eligible for such benefits on the first of the month following their hire date. If hired on the first day of the first month, the employee's coverage will begin immediately. This coverage shall also comply with all pertinent state and federal statutes, including the Health Insurance Portability and Accountability Act (HIPAA) and the Newborns' and Mothers' Health Protection Act (NMHPA) of 1996.
- (B) Comprehensive Major Medical.
 - (1) If the employee and/or dependent receives services from a preferred provider (PPO), reimbursements will be at an eighty/twenty percent (80/20%) co-insurance and will be subject to single and family deductible and out-of-pocket maximums listed in Table 1.

Deductibles, Out-of-Pocket Maximums and visit limits will fully reset on January 1st of each year.

- (2) If a preferred provider is not used, coinsurance will be reduced to sixty/forty percent (60/40%) of one hundred forty percent (140%) of the published reimbursement rates allowed by Medicare and subject to the single and family deductibles and out-of-pocket maximums listed in **Table 1** Appendix F. Any network modifications made by the plan administrator will apply.

Deductibles, Out-of-Pocket Maximums and visit limits will fully reset on January 1st of each year.

- (3) Physician office visits will be subject to co-payments per in-network primary care physician visits listed in Table 1. Eligible services, which shall include diagnostic, surgical and/or specialty services provided in the network physician's office and billed by that office shall be covered at one hundred percent (100%) after office visit co-payment.
- (4) The office co-payment does not apply to the annual deductible, however, office co-payments will apply to the annual out-of-pocket maximum. Care rendered by non-network providers shall be subject to the annual deductible, co-insurance, and out-of-pocket maximum as specified in Section 16(B)(1) and 16(B)(2), and a twenty percent (20%) penalty.
- (5) Pursuant to the **Mental Health Parity and Addiction Equity Act (MHPAEA)** NMHPA, all inpatient and outpatient treatment for psychiatric and/or alcohol or drug treatment (substance abuse) services will not be subject to treatment limits **or co-pays**, and will be covered as standard medical treatment. Coverage is subject to deductible, co-insurance, and out-of-pocket maximums.
- (6) In-Patient Hospital Coverage. After satisfying the annual deductible, the plan pays eighty percent (80%) of reasonable charges for a semi-private room and ancillary services for medical stays at an in-network hospital. Once out-of-pocket expenses and reasonable charge provisions have been met, the plan will reimburse the hospital at one hundred percent (100%) for covered services.

For utilization at a non-network hospital, an additional twenty percent (20%) penalty and any excess charges above reasonable rates are the employee's responsibility. Any charges for medically unnecessary care, non-covered services or charges beyond plan limitations are the employee's responsibility.

The Healthcare Plan will require “medical necessity” for all services.

- (7) In accordance with the Patient Protection and Affordable Care Act of 2010, insured members are eligible to receive certain preventive care services, based upon age, gender and other factors, without cost-sharing (co-payments, co-insurance and deductibles). These preventive services must be provided by doctors and health care professionals within the City’s plan provider network. The preventive health services that must be covered without cost-sharing requirements are those based on the requirements stated below:
- (a) Evidence-based items or services that have in effect a rating of “A” or “B” in the current recommendations of the United States Preventive Services Task Force (USPSTF), including certain preventive care for women, such as mammograms, cervical cancer screenings and prenatal care;
 - (b) Immunizations for routine use in children, adolescents and adults that are currently recommended by the Centers for Disease Control and Prevention (CDC) and included on the CDC’s immunization schedules;
 - (c) Strong scientific evidence-informed preventive care and screenings for infants, children and adolescents, as provided for in the Health Resources and Services Administration (HRSA) guidelines; and
 - (d) As noted above, a set of additional scientific evidence-based preventive services for women recommended by the Institute of Medicine and supported by HRSA.

Preventive services that are excluded from the above agencies’ recommended lists shall be subject to the annual deductible, co-insurance, and out-of-pocket maximum as specified in Sections 16(B)(1) and 16(B)(2).

Preventive services rendered by non-network providers shall be subject to the annual deductible, co-insurance, and out-of-pocket maximum as specified in Table 1.

Insured members should contact the City’s health plan administrator prior to obtaining preventive services for determination of preventive services coverage.

In addition to the preventive services provided for under the ACA, the City shall maintain preventive coverage and limits for the following services:

- (a) Provide coverage for an annual (one (1) per calendar year) routine prostate/colon rectal cancer tests for men age 40 and over.
 - (b) For men age 40 and over, an annual (one per calendar year) PSA blood test will be covered.
 - (c) Provide coverage for one (1) baseline mammogram for women 35-39 years old.
- (8) An ~~e~~ **Emergency room and urgent care visits** will be subject to a dollar ~~(\$75.00)~~ co-payment per visit **as listed in Table 1**. If admitted, the **emergency room** co-payment will be waived. An **In-network urgent care visits** will **not** be subject to **deductible and co-insurance payments**. ~~a thirty-dollar (\$30.00) co-payment per visit.~~ **Co-payments do not apply to the annual deductible, however, co-payments will apply to the annual out-of-pocket maximum.**

- (9) Miscellaneous benefits with specified limits:

Physical therapy, occupational therapy, and/or chiropractic visits will be covered up to a combined annual maximum for thirty (30) visits per person, based on medical necessity.

Prescription drug deductible charges are not payable under this medical provision.

The City will provide the following minimum coverage for maternity benefits: At least forty-eight (48) hours of inpatient hospital care following a normal vaginal delivery; and at least ninety-six (96) hours of inpatient hospital care following a caesarean section and physician-directed aftercare. These minimum stay requirements are not applicable if the mother and her health care provider mutually agree that the mother and her child may be discharged earlier.

A weight loss schedule is limited to examination charges only. Food supplements in the treatment of obesity are excluded.

- (C) Prescription Drugs. The City will provide a prescription drug coverage plan that provides for the use of a formulary, step therapy, quantity level limits, exclusions and prior authorization.

(1) CO-PAYMENTS AND OUT-OF-POCKET MAXIMUMS

The employee shall be responsible for a five-dollar (\$5.00) co-payment for a Tier 1 drug. For a Tier 2 drug, the co-payment is fifteen dollars (\$15.00). For a Tier 3 drug, or if a prescription is written “dispense as written” and a lower tier drug exists, the co-payment is thirty dollars (\$30.00). The annual out-of-pocket maximum per single contract per year will be two thousand dollars (\$2,000.00). The annual out-of-pocket maximum per family contract per year will be four thousand dollars (\$4,000.00).

(2) MAIL ORDER

Mail order prescription drugs will be limited to a thirty (30) day minimum and a ninety (90) day maximum supply. The out-of-pocket maximum for prescription drugs filled through mail order will be the same as described in Section 16(C)(1). Under the mail order program, the employee shall be responsible for a twelve dollars and fifty cents (\$12.50) co-payment for a Tier 1 drug. For a Tier 2 drug, the co-payment is twenty-five dollars (\$25.00). For a Tier 3 drug, or the prescription is written “dispense as written” and a generic equivalent exists, the co-payment is sixty dollars (\$60.00).

Maintenance drugs may be obtained through the mail order program. The original prescription with no refills may be purchased locally and subsequent refills may use the mail order program.

The prescription drug program will include prior authorization requirements for certain types of drugs. Some drugs will require the employee and/or dependent to undergo step therapy (trial of a lower cost drug before a higher cost drug is covered). The prescription drug program administrator will determine which drugs require prior authorization and/or step therapy.

(3) The City’s prescription drug coverage plan will include the following clinical programs:

- (a) Formulary.
Tier changes to the formulary will happen once per year, customarily in January.
- (b) Exclusions.
Under the exclusion program prescription drugs may be excluded from the formulary only if an equivalent generic or

therapeutically equivalent prescription drug remains available on the formulary or over-the-counter.

- (c) **Prior Authorization.**
Prior authorization (PA) requires your doctor to explain why you are taking a medication to determine if it will be covered under the pharmacy benefit.
- (d) **Step Therapy.**
Trial of a lower cost drug before a higher cost drug is covered.
- (e) **Specialty Pharmacy.**
The City's Pharmacy Benefits Manager (PBM) will determine which drugs are included in any or all of these clinical programs and the applicable quantity level limits subject to the restrictions noted above.

(4) SERVICES NOT COVERED

- Experimental drugs.
- Drugs that may be dispensed without prescription.
- Non-prescription items.
- Medications which are covered under the terms of any other employer, sponsored group plan, or for which the individual is entitled to receive reimbursement under Workers' Compensation or any other Federal, State or Local governmental program.
- Immunization Agents (except as provided in Section 16(B)(7)(b)).
- Drugs deemed not medically necessary.
- Administration of prescription drugs.
- Any prescription refill in excess of the number specified by the physician, or any refill dispensed after one year from date of the physician's original order.
- Medication taken by, or administered to, the individual while a patient is in a licensed hospital, extended care facility, nursing home or similar institution which operates, or allows to be operated, on its premises, a facility for dispensing drugs.
- Anti-obesity drugs.
- Dietary and food supplements.

(5) DISPENSING LIMITATION

Each retail prescription may be filled up to a maximum of a thirty (30) day supply and a maximum of a ninety (90) day supply for mail order.

(6) MISUSE OF PRESCRIPTION DRUG PROGRAM

Control Drug Management Program. The City's prescription drug program administrator will review prescriptions to assess whether abuse of narcotics and similar drugs may be occurring and will follow up with prescribing physicians as appropriate to further evaluate any suspected instances of abuse.

Misuse or abuse of the prescription drug program, verified by the appropriate law enforcement agency, shall result in suspension of the employee's prescription drug card for a period of twelve (12) months. As used herein, verification of misuse or abuse of the prescription drug program occurs when the appropriate law enforcement agency files criminal charges against the employee or dependent, or refers (diverts) the employee or dependent to a counseling and rehabilitation program in lieu of criminal charges. If the employee/dependent is found not guilty, the prescription drug card shall be reinstated.

(D) High Deductible Health Plan/Health Savings Account Design Option.

Effective for the plan year beginning January 1, 2024~~3~~, the City shall offer a non-mandatory HDHP to all benefit eligible employees. The plan will be based on the medical plan coverage design, except as follows:

<u>Benefit</u>		
<u>Deductible</u>	<u>Single</u>	<u>Family</u>
In-Network	\$ 16 500	\$ 32 000
Non-Network	\$ 32 000	\$ 64 000
Out of Pocket		
Maximum		
In-Network	\$3000	\$6000
Non-Network	\$6000	\$9000

If more than one person in a family is covered under the policy, the single deductible and out-of-pocket limit does not apply. The HDHP has a combined Medical and Pharmacy Deductible and Out of Pocket Maximum and the Out-of-Pocket Maximum includes Deductible and Coinsurance for both Medical and Pharmacy Claims. After the deductible is met, both Medical and Pharmacy claims are paid at the coinsurance level until the Out of Pocket Maximum is met.

During each plan year, the annual deductibles and out-of-pocket maximums will be increased if and to the extent necessary to

maintain the option's status as a high deductible health plan under the Internal Revenue Code.

~~For each employee that elects HDHP coverage the City shall contribute into an employee established health savings account at a financial institution chosen by the City and contribute five hundred dollars (\$500.00) for single coverage and one thousand dollars (\$1,000.00) for family coverage in 2023.~~

In 2024 **and 2025**, the City contributions will be made on a semi-annual basis in January and July in the amount of three hundred dollars (\$300.00) for single coverage and six hundred dollars (\$600.00) for family coverage.

~~In 2025, the City shall contribute quarterly deposits in January, April, July and October in the amount of one hundred fifty dollars (\$150.00) for single coverage and three hundred dollars (\$300.00) for family coverage.~~

For those employees who do not elect coverage under the HDHP, there will be no health savings account contribution from the City. **Any employee who fails to establish a health savings account, or who funds a health savings account to a level where a City contribution would exceed the Internal Revenue Code maximum limits, will not receive health savings account contribution(s) from the City for the applicable time period.**

(E) Dental.

(1) DENTAL ANESTHESIA

Dental general anesthesia administered by the dentist is a Covered Service. ~~Osseous surgery is not covered under the dental plan, but is payable under the medical plan.~~

(2) ANNUAL DENTAL MAXIMUM

The maximum amount payable for covered dental expenses, except orthodontics, for one (1) eligible person in one (1) benefit year is fifteen hundred dollars (\$1,500.00).

(3) ORTHODONTIC MAXIMUM

The lifetime maximum payable for dependent orthodontia services for any covered child is eighteen hundred-fifty dollars (\$1,850.00).

- (4) A dental PPO shall be available to employees which allow voluntary selection of a participating network provider which will result in no-balance billing over reasonable charges. All existing coinsurance levels and exclusions continue to apply.
- (5) The following preventative dental services are paid at 100% of the reasonable charge:
 - (a) Routine oral examinations – twice in any calendar year, January 1 through December 31.
 - (b) Routine prophylaxis (cleaning of teeth) – twice in any calendar year, January 1 through December 31.
 - (c) Topical application of fluoride –in any calendar year, January 1 through December 31.
- (F) Vision. The City shall maintain the current vision care plan for all eligible employees as follows:

(1) In-Network Plan

Copayments:

Eye Examination \$5.00

Lenses \$12.50

Contact Lenses Fit and Follow-Up Examination Up to \$40.00

Contact Lens Allowance
\$150.00

Retail Frame Allowance
\$150.00

Polycarbonate Lenses Covered in Full

Contact Lenses in place of all other plan benefits for the benefit period

Cosmetic (elective)	\$150.00 plus exam
Medically Necessary	Covered in full

(2) Out-of-Network Plan Reimbursement Schedule

Eye Examination up to	\$35.00
Frames up to	\$35.00
Single Vision up to	\$35.00
Bifocals up to	\$50.00
Trifocals up to	\$60.00
Lenticular up to	\$90.00

Contact Lenses	
Cosmetic (elective)	\$90.00
Medically Necessary	\$210.00

- (G) Life Insurance. The City shall maintain term life insurance in the amount of one and a half times the employee's annual salary in effect at the time of death for all full-time employees less than sixty-five (65) years of age, not to exceed two hundred thousand dollars (\$200,000). Full-time employees, sixty-five (65) to seventy (70) years of age shall receive term life insurance in the amount of sixty-five percent (65%) of one and a half times the employee's annual salary in effect at the time of death not to exceed sixty-five thousand dollars (\$65,000). Full-time employees seventy (70) years of age and over shall receive term life insurance in the amount of thirty-nine percent (39%) of one and a half times the employee's annual salary in effect at the time of death not to exceed thirty-nine thousand dollars (\$39,000).

Employees who have health insurance from other sources may elect to purchase life insurance coverage only, and shall pay a monthly premium of five dollars and fifty cents (\$5.50) for such life insurance coverage. Employees are eligible to purchase additional life insurance through a program established by the Department of Human Resources. Upon termination, employees would be eligible to continue life insurance coverage at the market rate at their own expense.

- (H) Eligibility. Eligibility for enrolling new employees for health insurance, dental insurance, vision care, prescription drug and life insurance shall be based upon an employee's active service in a position or employment, which is to be performed in accordance with an established scheduled working time, such schedule to be based upon not less than forty (40) hours per seven (7) consecutive calendar days for fifty-two (52) consecutive seven (7) day periods per annum unless otherwise required by Federal Law or Regulations. Employees shall become eligible for the benefits outlined in this Section 16, pursuant to the provisions herein, on the first of the month following their hire date, unless hired on the first of the month coverage is effective immediately.

- (1) Full-time employees may waive coverage in the employee insurance programs during the annual Open Enrollment period. Once the waiver is executed, the employee must wait until the next annual Open Enrollment period in a subsequent year to re-enroll in the benefit plans. In the event of a divorce, legal separation, the death of a spouse or the spouse involuntarily loses family coverage through the spouse's employer, the employee may enroll with the City of Columbus insurance program within thirty (30) days of such event.

- (2) Part-time regular employees who have worked a minimum of one thousand forty (1,040) hours the previous calendar year shall be eligible for medical, prescription drug, dental, and vision. The employee's share of the cost of the medical and prescription insurance will be thirty percent (30%) of the established funding rate established by the Department of Finance and Management. The employee's share will be converted into a single and family premium. An open enrollment will be held each year for employee enrollment. In the event of a divorce, legal separation, the death of a spouse, or the spouse involuntarily loses family coverage through the spouse's employer, the eligible employee may enroll with the City of Columbus insurance program within thirty (30) days of such event.

For purposes of this paragraph (F) (2), "hours" counted toward part-time eligibility will include hours worked, Paid Time Off, ~~Personal Business Day~~, Injury Leave, Workers' Compensation, Military Leave, and FMLA.

- (l) Premium Contribution. The monthly premium will be an amount equal to seventeen percent (17%) of the funding rate established by the actuary for the City for single and family coverage. For all employees hired on or after October 1, 2017, the monthly premium shall be an amount equal to twenty percent (20%) of the funding rate established by the actuary for the City for single and family coverage.

The monthly premium contribution for the HDHP/Health Savings Account design option shall be fifty dollars (\$50.00) per month less than the single rate established as the funding rate and one hundred thirty dollars (\$130.00) per month less than the family rate established as the funding rate.

Such premiums shall be paid through an automatic payroll deduction. Half of the monthly premium will be deducted each pay period not to exceed the total monthly premium.

Providing an employee continues monthly premium coverage payments, insurance coverage for which an employee is eligible will be extended ninety (90) days beyond the end of the month during which an employee's approved leave without pay or leave of absence status became effective. The employee's insurance will then be terminated with an option to participate in the City's insurance continuation program, COBRA, at the employee's expense.

Employees on disability leave, or employees receiving payments in lieu of wages from the Ohio Bureau of Workers' Compensation, must keep their premium payments current. If at the conclusion of the ninety (90) day period as specified in the previous paragraph, the premium payments are not

current, an employee's insurance will then be terminated with an option to participate in the City's insurance continuation program, COBRA, at the employee's expense.

(J) Tobacco Surcharge. If an employee hired on or after January 1, 2018 who participates in the City's insurance program uses tobacco, the employee will be charged a twenty-five dollar (\$25.00) per month surcharge.

(K) Employees are eligible to pre-tax insurance premium contributions.

The City will continue to maintain an IRC Section 125 Plan whereby employees will be able to pay for their share of health insurance premiums with pre-tax earnings. This plan will remain in effect so long as it continues to be permitted by the Internal Revenue Code. Such premiums shall be paid through an automatic payroll deduction.

(L) The City may afford employees the opportunity to participate in a voluntary pre-paid legal services plan payable through payroll deduction.

(M) Cancer Advocacy.

The City ~~shall~~ engages a cancer treatment advocate that provides effective plan year 2022. ~~The cancer advocacy program~~ ing to supports employees and family members with the diagnosis of cancer.

(N) Appeal Process. The extent of coverage under the insurance policies (including self-insured plans) shall be governed by the terms and conditions set forth in said policies or plans. Any questions or disputes concerning an employee's claim for benefits under said insurance policies or plans shall be resolved in accordance with the terms and conditions set forth in said policies or plans, including the claims appeal process available through the insurance company or third party administrator. In the event the plan summaries, booklets, certificates and this Ordinance are not specific, the plan administrator's administrative guidelines will prevail; provided, however, that this shall not prejudice the right of the employee to appeal a claim dispute to the plan administrator and to the Ohio Department of Insurance.

(O) Table 1.

Table 1	PPO	HDHP
Deductible		
In-Network	\$300 single / \$600 family	\$1600 1500 single / \$3200 3000 family
Non-Network	\$800 single / \$1,600 family	\$3200 3000 single / \$6400 6000 family
Co-insurance		
In-Network	80% / 20%	20% after D deductible is met
Non-Network	60% / 40%	40% after D deductible is met
Out-of-Pocket Maximum		
In-Network	\$700 single / \$1,200 family	\$3000 single / \$6000 family
Non-Network	\$1,600 single / \$3,200 family	\$6000 single / \$9000 family
Office Visit <u>In-Network</u> Co-pay		
Primary Care	\$20 co-pay	N/A <u>20% after deductible</u>
Specialist	\$30 co-pay	N/A <u>20% after deductible</u>
Hospital Inpatient Stay		
In-Network	20% after deductible	20% after deductible
Non-Network	40% after deductible	40% after deductible
Outpatient Surgery		
In-Network	20% after deductible	20% after deductible
Non-Network	40% after deductible	40% after deductible
Emergency Room Co-pay		
In-Network	\$75 150 co-pay, 20% after co-pay and deductible (co-pay waived if admitted)	20% after D deductible is met
Non-Network	same as in-network	20% after D deductible is met
Urgent Care Co-pay		
In-Network	\$30 co-pay, 20% after co-pay and deductible	20% after D deductible is met
Non-Network	\$30 co-pay, 40% after co-pay and deductible	40% after D deductible is met
Lifetime Maximum	No maximum	No maximum
Pre-Notification Penalty	Benefits reduced to 50% of eligible expenses	Benefits reduced to 50% of eligible expenses
Rx Co-pays	Retail/Mail	
Tier 1	\$5/\$12.50	20% after D deductible is met
Tier 2	\$15/\$25	20% after D deductible is met
Tier 3/ Dispense as Written	\$30/\$60	20% after D deductible is met
Rx Co-pays Accumulate	Yes	Yes
Rx OOP Max	\$2,000 single/ \$4,000 family	Medical and RX Combined
Tobacco Surcharge	\$25.00 monthly for new hires as of January 1, 2018	\$25.00 monthly for new hires as of January 1, 2018