



***GREEN LAKE COUNTY***  
*571 County Road A, Green Lake, WI 54941*

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**Original Post Date: 10/11/18**

**Amended\* Post Date:**

**The following documents are included in the packet for the Personnel Committee on October 16, 2018:**

- 1) Agenda
- 2) Minutes from 09/13/18 and 09/26/18
- 3) Resolution Relating to Modify Health Insurance Plan Design and Update Personnel Policies and Procedures Manual



# GREEN LAKE COUNTY OFFICE OF THE COUNTY CLERK

Elizabeth Otto  
County Clerk

Office: 920-294-4005  
FAX: 920-294-4009

## *Special Personnel Committee Meeting Notice*

**Date: Tuesday, October 16, 2018 Time: 5:30 PM**  
**Green Lake County Government Center, County Board Room**  
**571 County Rd A, Green Lake WI**

### AGENDA

#### **Committee Members**

*Joe Gonyo*  
*Robert Lyon*  
*Robert Schweder*  
*Curt Talma*  
*Sue Wendt*

*Elizabeth Otto,*  
*Secretary*

1. Call to Order
2. Certification of Open Meeting Law
3. Pledge of Allegiance
4. Minutes: 09/13/2018 & 09/26/18
5. Resolutions/Ordinances
  - Modify Health Insurance Plan Design and Update Personnel Policies and Procedures Manual
6. Committee Discussion
  - Future Meeting Dates: November 8, 2018 at 6:00PM
  - Future Agenda items for action & discussion
7. Adjourn

Kindly arrange to be present, if unable to do so, please notify our office. Sincerely, Elizabeth Otto

**Please note: Meeting area is accessible to the physically disabled. Anyone planning to attend who needs visual or Audio assistance, should contact the County Clerk's Office, 294-4005, not later than 3 days before date Of the meeting.**

**SPECIAL PERSONNEL COMMITTEE MEETING**  
**September 18, 2018**

The special meeting of the Personnel Committee was called to order by Vice Chair Bob Schweder at 5:30 PM on Tuesday, September 18, 2018 in the County Board Room, Green Lake County Government Center, Green Lake, WI. The requirements of the open meeting law were certified as being met. The Pledge of Allegiance was recited.

Present:        Robert Schweder  
                  Robert Lyon  
                  Curt Talma  
                  Sue Wendt

Absent: Joe Gonyo

Also Present:    Liz Otto, County Clerk; Dawn Klockow, Corporation Counsel; Cathy Schmit, County Administrator; Harley Reabe, County Board Chair

**MINUTES**

*Motion/second (Lyon/Wendt)* to approve the minutes of the August 9, 2018 meeting with no corrections or additions. All ayes. Motion carried.

**RESOLUTIONS/ORDINANCES**

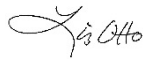
- **Resolution Relating to Offering Dental and Vision Insurance to Green Lake County Employees Through Cottingham & Butler**

*Motion/second (Lyon/Wendt)* to approve the resolution and forward to County Board for final approval. All ayes. Motion carried.

**ADJOURNMENT**

*Motion/second (Wendt/Talma)* to adjourn the meeting at 5:32 PM.

Submitted by,



Liz Otto  
County Clerk

**SPECIAL PERSONNEL COMMITTEE MEETING  
September 26, 2018**

The special meeting of the Personnel Committee was called to order by Vice Chair Bob Schweder at 6:00 PM on Wednesday, September 26, 2018 in the County Board Room, Green Lake County Government Center, Green Lake, WI. The requirements of the open meeting law were certified as being met. The Pledge of Allegiance was recited.

Present: Joe Gonyo  
Robert Schweder  
Curt Talma  
Sue Wendt

Absent: Robert Lyon

Also Present: Liz Otto, County Clerk; Cathy Schmit, County Administrator; Jason Jerome, HHS Director; Sheriff Mark Podoll; Lori Evans, SO Administrative Assistant

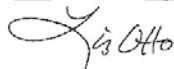
**DISCUSSION AND POSSIBLE ACTION REGARDING 2019 HEALTH INSURANCE**

County Administrator Cathy Schmit and County Clerk Liz Otto explained the preliminary proposed changes to the health insurance plan for 2019. Discussion held. A resolution will go before the Property & Insurance committee on October 2, 2018 with finalized numbers. The Personnel committee will meet again prior to the October County Board meeting.

**ADJOURNMENT**

Chair Gonyo adjourned the meeting at 6:48 PM.

Submitted by,



Liz Otto  
County Clerk

**RESOLUTION NUMBER 32-2018**

**Modify Health Insurance Plan Design and  
Update Personnel Policies and Procedures Manual**

The County Board of Supervisors of Green Lake County, Green Lake, Wisconsin, duly assembled at its regular meeting begun on the 16th day of October 2018, does resolve as follows:

- 1 **WHEREAS**, Green Lake County has negotiated a 1 year plan with the WCA Group
- 2 Health Trust for Employee Health Insurance Plan coverage at an overall premium cost
- 3 increase of 12.9%; and
- 4 **WHEREAS**, the current plan (Tier 1) would be retained with the deductible amounts at
- 5 \$2,000 Single/\$4,000 Family with the employee premium contribution increasing from
- 6 8% to 12% effective FY 2019 at an estimated fiscal impact to the County of
- 7 \$203,834.56; and
- 8 Majority vote is needed to pass.

Approved by Personnel       Disapproved by Personnel

Roll Call on Resolution No. 32-2018

Submitted by Property & Insurance  
Committee:

*/s/ Vicki Bernhagen*

Ayes    , Nays    , Absent    , Abstain    ,

\_\_\_\_\_  
Vicki Bernhagen, Chair  
*/s/ Patti Garro*

Passed and Adopted/Rejected this 16th  
day of October, 2018.

\_\_\_\_\_  
Patti Garro

*/s/ Keith Hess*

\_\_\_\_\_  
County Board Chairman

\_\_\_\_\_  
Keith Hess  
*/s/ David Abendroth*

\_\_\_\_\_  
ATTEST: County Clerk  
Approve as to Form:

\_\_\_\_\_  
David Abendroth

*/s/ Richard Trochinski*

\_\_\_\_\_  
Corporation Counsel

\_\_\_\_\_  
Richard Trochinski

9 **WHEREAS**, the WCA Group Health Trust has negotiated the option for the County to  
10 offer a second high deductible (Tier 2) plan design by increasing annual deductible  
11 amounts from the current amounts to \$3,000 Single/\$6,000 Family with all costs going  
12 first to the deductible and an overall premium cost increase of 7.9% with the employee  
13 premium contribution remaining at 8% at an estimated fiscal impact to the County of  
14 \$201,505.66; and

15 **WHEREAS** historically the County has contributed \$750 Single/\$1500 Family to a  
16 Health Reimbursement Account (HRA) at an estimated fiscal impact of \$204,750.00 for  
17 2019; and

18 **WHEREAS** historically the County has offered employees a payout for choosing to opt  
19 out of the County health plan at a rate of \$750 Single/\$1500 Family at an estimated  
20 fiscal impact of \$28,500.

21 **NOW THEREFORE BE IT RESOLVED** that the Green Lake County Board of  
22 Supervisors does approve changes to the WCA Group Health Trust health insurance  
23 plan design by adding a high deductible plan (Tier 2) as well as continuing the existing  
24 coverage available (Tier 1) including the proposed modification to the ER and Rx  
25 copays and generic drug mandate.

26 **BE IT FURTHER RESOLVED** that in order to cover the costs of increased health  
27 insurance coverages under the state imposed levy limits, effective FY 2019 the County  
28 will discontinue offering the HRA Contribution and opt out funds to employees in the  
29 amount of \$750 Single/\$1500 Family at a total estimated fiscal impact of \$233,250; and

30 **BE IT FURTHER RESOLVED** that effective FY 2019 the County will make available to  
31 eligible employees the option to contribute pre-tax funds to an established HSA account  
32 and the County will establish a "sunset" date of December 31, 2021 for the use of  
33 existing HRA fund balances by current and previous County employees. Effective  
34 January 1, 2022 any funds remaining will revert back to the County to be used to offset  
35 health insurance costs in future years; and

36 **BE IT FURTHER RESOLVED** that in recognition of the additional financial burden  
37 placed on employees due to the change in the health insurance plan design, effective  
38 FY 2019 Green Lake County will add 1 Personal Day for each employee; and

39 **BE IT FURTHER RESOLVED** that Health Insurance, Personal Days and Appendix  
40 sections of the Personnel Policies and Procedures Manual be modified to reflect the  
41 changes adopted herein.

APPENDIX K



WCA GROUP HEALTH TRUST  
**GREEN LAKE COUNTY**  
**BENEFIT COVERAGE – 1/01/19**

	HMO PLAN (Tier 1)
	In-Network Providers Only (United Healthcare - Choice+ Network)
Deductible	\$2,000 Individual \$4,000 Family
Coinsurance	100%
Out of Pocket Maximum (Including Deductible, Coinsurance & Medical Copays but not Rx Copays)	\$3,500 Individual \$7,000 Family
Lifetime Maximum	Unlimited
Inpatient Hospital & Outpatient Hospital	Deductible, then 100%
Ambulance Service	Deductible, then 100%
Emergency Room	\$250 Copay; Deductible Waived
Urgent Care	\$25 Copay/100%, Deductible Waived
Primary Care Provider	\$25 Copay/100%, Deductible Waived
Preventative Exam Annual Physical Reimbursement (Employee & Spouse)	100%, Deductible Waived \$50.00 Visa Gift Card
Diagnostic Lab	100%, Deductible Waived
High Tech Imaging (including MRI and CT) Smart Choice MRI	\$100 Copay; then 100% \$50.00 Visa Gift Card
Transplants	Deductible, then 100%
Chiropractic Care	\$25 Copay/100%, Deductible Waived
Mental Health, Alcohol, & Drug Benefits: Inpatient, Transitional, & Outpatient	Same As Any Other Illness
Treatment for Obesity	Not Covered
Hearing Exam (1 <sup>st</sup> per calendar year)	100% Deductible Waived
Routine Vision Exam (1 <sup>st</sup> per calendar year)	100%, Deductible Waived
Skilled Nursing Facility	Deductible, then 100%
Home Health Care	Deductible, then 100% (40 Per Year, May Approve More if Requested)
Physical, Speech, & Occupational Therapy	Deductible, then 100%
Durable Medical Equipment	Deductible, then 100% (No Maximum)
Prescription Drug Copays  Specialty Drugs limited to 30-Day Supply	(30 Day Supply- Retail) \$15 Generic; \$45 Formulary; \$75 Brand; \$100 Specialty (31-90 Day Supply Retail) \$45 Generic; \$135 Formulary; \$225 Brand (90-Day Mail Order-Thru CVS Caremark) \$30 Generic; \$90 Formulary; \$150 Brand Mandatory Generics Required
Maximum Out of Pocket (Pharmacy Only)	<u>\$3,150/\$6,300</u>
Dental Plan Benefits (You can Utilize Any Dental Provider, there are no network requirements for Dental)	100% Deductible Waived Preventative Only Exam/Cleaning/X-Ray
Oral Surgery	Deductible, then 100%
Annual Health Club Reimbursement	\$120 Individual, \$240 Family
Access Affordable Healthcare (Tom Willett, DO)	Copays Waived

**\*\*This is a summary only. Please refer to your Summary Plan Document for specific details of the Health Plan**

**Insurance Premium Base Contribution by Employee for 2019 HMO (Tier One):** Single \$94.46, Limited \$195.62, Family \$257.52

APPENDIX K



WCA GROUP HEALTH TRUST  
GREEN LAKE COUNTY

BENEFIT COVERAGE – 1/01/19

	HMO PLAN (Tier 2) – HSA Compatible
	In-Network Providers Only (United Healthcare - Choice+ Network)
Deductible/Coinsurance/Prescription	\$3,000 Individual \$6,000 Family
Coinsurance	100%
Out of Pocket Maximum	\$3,000 Individual \$6,000 Family
Lifetime Maximum	Unlimited
Inpatient Hospital & Outpatient Hospital	Deductible, then 100%
Ambulance Service	Deductible, then 100%
Emergency Room	Deductible, then 100%
Urgent Care	Deductible, then 100%
Primary Care Provider	Deductible, then 100%
Preventative Exam	100%, Deductible Waived
Annual Physical Reimbursement (Employee & Spouse)	\$50.00 Visa Gift Card
Diagnostic Lab	Deductible, then 100%
High Tech Imaging (including MRI and CT)	Deductible, then 100%
Smart Choice MRI	\$50.00 Visa Gift Card
Transplants	Deductible, then 100%
Chiropractic Care	Deductible, then 100%
Mental Health, Alcohol, & Drug Benefits: Inpatient, Transitional, & Outpatient	Same As Any Other Illness
Treatment for Obesity	Not Covered
Hearing Exam (1 <sup>st</sup> per calendar year)	100% Deductible Waived
Routine Vision Exam (1 <sup>st</sup> per calendar year)	100%, Deductible Waived
Skilled Nursing Facility	Deductible, then 100%
Home Health Care	Deductible, then 100% (40 Per Year, May Approve More if Requested)
Physical, Speech, & Occupational Therapy	Deductible, then 100%
Durable Medical Equipment	Deductible, then 100% (No Maximum)
Prescription Drug Copays	(30 Day Supply- Retail) Deductible, then 100% (31-90 Day Supply Retail) Deductible, then 100% (90-Day Mail Order-Thru CVS Caremark) Deductible, then 100% Mandatory Generics Required
Specialty Drugs limited to 30-Day Supply	
Dental Plan Benefits (You can Utilize Any Dental Provider, there are no network requirements for Dental)	100% Deductible Waived Preventative Only Exam/Cleaning/X-Ray
Oral Surgery	Deductible, then 100%
Annual Health Club Reimbursement	\$120 Individual, \$240 Family

**\*\*This is a summary only. Please refer to your Summary Plan Document for specific details of the Health Plan**

**Insurance Premium Base Contribution by Employee for 2019 HMO (Tier Two): Single \$60.18, Limited \$124.64, Family \$164.08**