

RESOLUTION NO. 15-69

RESOLUTION OF THE CITY COUNCIL OF THE CITY OF
RIPON ADOPTING AMENDMENT NO. 2 TO THE
MEMORANDUM OF UNDERSTANDING
FOR FISCAL YEARS 2014-15 and 2015-16 FOR ALL
EMPLOYEES OF THE CITY OF RIPON
POLICE OFFICER'S ASSOCIATION

WHEREAS, the City Council of the City of Ripon is desirous of adopting Amendment No. 2 to the Memorandum of Understanding for all employees of the City of Ripon Police Officer's Association (RPOA) for Fiscal Years 2014-15 and 2015-16; and

NOW, THEREFORE, BE IT RESOLVED that the City Council of the City of Ripon does hereby adopt Amendment No. 2 attached hereto as Exhibit "A" to the Memorandum of Understanding for the period July 1, 2014 through June 30, 2016, filed with the City Clerk of the City of Ripon this 10th day of November, 2015, as the current compensation plan for the City of Ripon for these employees.

PASSED AND ADOPTED at a regular meeting of the City Council of the City of Ripon this 10th day of November, 2015, by the following vote:

AYES:	RESTUCCIA, WINCHELL, PARKS, UECKER, ZUBER
NOES:	NONE
ABSENT:	NONE
ABSTAINING:	NONE

THE CITY OF RIPON, a Municipal Corporation

By: _____


Leo Zuber, Mayor

ATTEST:



LISA ROOS, City Clerk

AMENDMENT #2 TO
MEMORANDUM OF UNDERSTANDING

July 1, 2014 through June 30, 2016

BETWEEN THE CITY OF RIPON
AND
RIPON POLICE OFFICERS' ASSOCIATION

On June 17, 2014, the City Council of the City of Ripon adopted Resolution No. 14-33, approving the 2014-2016 Memorandum of Understanding (MOU). The adjustments to wages, hours and conditions of employment that are set forth in this Amendment have been discussed by and between the bargaining representatives of the City of Ripon (hereinafter, "City") and the bargaining representatives of the Ripon Police Officers Association (hereinafter, "Association") and shall apply to all employees of the City working in the classifications of Patrol Officer.

The City and Association agree as follows:

ARTICLE IX – Wage Supplements, Section A.3 is hereby amended to read in full as follows:

The City agrees to reimburse Association employees for 100 percent of the Blue Shield Silver Plan healthcare deductible cost and Co-insurance cost after \$2,000 paid by the Association Employee through ~~December 31, 2014~~ June 30, 2016. In order to receive reimbursement, requests shall be submitted to the City no later than 12 months from the date of service as shown on the Explanation of Benefits.


ARTICLE IX – Wage Supplements, Section A.4 is hereby amended to read in full as follows:

As of January 1, 2016, the City agrees to pay 50 percent of the premium increase above the current maximum monthly contribution of \$1,760 for Association employees enrolled with Kaiser Permanente and \$1,415 for Association employees enrolled with Blue Shield, not to exceed \$1,950 or \$1,565 per month, respectively, assuming a 10% increase in premiums. Actual amount shall be added by Sideletter when premiums are known. Based on the actual 2016 renewal quotes received (see Attachment A), the Association Employees enrolled in the Blue Shield "Employee plus family" category, shall be responsible for \$75 per month of the employees share of the additional premium above the current Blue Shield maximum through June 30, 2016. Association Employees enrolled in the Kaiser "Employee plus family" category shall be responsible for \$11.90 per month of the employee's share of the additional premium above the current Kaiser maximum through June 30, 2016.

Except as amended herein, the 2014-2016 MOU and each term and condition contained therein shall remain unchanged and shall continue in full force and effect.

Signatories to the Amendment of the 2014-2016 Memorandum of Understanding between the City and the Association:


FOR RIPON POLICE OFFICERS'
ASSOCIATION



Scott King, POA President

Date: 9/22/15

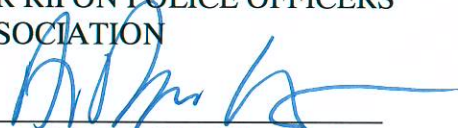
FOR THE CITY OF RIPON



Kevin Werner, City Administrator

Date: 9/22/15

FOR RIPON POLICE OFFICERS'
ASSOCIATION



Aaron Donato, Chief Negotiator

Date: 092215

ATTACHMENT A

CATEGORY	2015 PREMIUM ^b	2016 PREMIUM ^b	EMPLOYEE RESPONSIBILITY	CITY RESPONSIBILITY
<u>Employees w/ Blue Shield</u>				
Employee Only	\$562.02	\$609.96	\$0	\$609.96
Employee + Spouse	\$1,124.55	\$1,220.43	\$0	\$1,220.43
Employee + Children	n/a	n/a	n/a	n/a
Employee + Family	\$1,502.72	\$1,628.16	\$75	\$1,552.16
<u>Employees w/ Kaiser Plan</u>				
Employee Only	\$562.66	\$588.27	\$0	\$588.27
Employee + Spouse	\$1,226.20	\$1,282.53	\$0	\$1,282.53
Employee + Children	\$1,145.68	\$1,196.89	\$0	\$1,196.89
Employee + Family	\$1,706.96	\$1,783.79	\$11.90	\$1,771.89

Note(s):

- a. The maximum potential deductible reimbursement, as previously approved by the City Council, is not included.
- b. Includes healthcare, dental, vision, and chiropractic premiums.