SILVER LAKE WATER AND SEWER DISTRICT SNOHOMISH COUNTY, WASHINGTON RESOLUTION NO. 818

A RESOLUTION OF THE BOARD OF COMMISSIONERS OF THE SILVER LAKE WATER AND SEWER DISTRICT, SNOHOMISH COUNTY, WASHINGTON, AMENDING CHAPTER 3.25.010, ENTITLED "HEALTH INSURANCE" OF THE DISTRICT CODE

WHEREAS, RCW 57.08.100 authorizes the Silver Lake Water and Sewer District to provide health care plans to provide health care services and/or group insurance to its employees; and

WHEREAS, the Board of Commissioners adopted Resolution No. 801 on November 12, 2020, which changed the District's HRA VEBA Program as required under the Affordable Healthcare Act, and authorized the monthly amount of \$2,240.00 to be provided to each covered employee and Commissioner for medical, dental, vision, and HRA VEBA deposits; and

WHEREAS, on October 28, 2021 and November 10, 2021, the Board of Commissioners reviewed increased health care insurance costs and directed staff to prepare a resolution that increased the monthly stipend amount by \$25.00 per month to address the increased costs.

BE IT RESOLVED by the Board of Commissioners of the Silver Lake Water and Sewer District, Snohomish County, Washington as follows:

Section 1: Chapter 3.25.010 of the District's Code, entitled "Health Insurance", Sections 1 and 2, are hereby amended as set forth in Exhibit 1 attached hereto and incorporated by reference.

Section 2: The General Manager is authorized to apply the monthly stipend amount, insurance rates, and coverage plans authorized by Resolution No. 818 with the District's regular December 2021 payroll process, employee and vendor payment checks issued on December 30, 2021, to provide payment to insurance providers effective January 1, 2022.

ADOPTED by the Board of Commissioners at a public meeting of the Silver Lake Water and Sewer District, Snohomish County, Washington this 23rd day of November 2021.

ident and Commissioner

ce President and Commissioner

Secretary and Commissioner

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I CERTIFY the above to be a true and correct copy of Resolution No. 818 adopted by the Board of Commissioners of the Silver Lake Water and Sewer District this this 23rd day of November 2021, as said Resolution appears in the records of the Silver Lake Water and Sewer District.

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Secretary of the Silver Lake Water and Sewer District

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EXHIBIT 1 TO RESOLUTION NO. 818

Chapter 3.25.010 Health Insurance

Amended Chapter 3.25.010 - Subsections 1 and 2:

The District shall provide to each eligible employee an amount up to \$2,265.00 per month to
pay directly for medical, dental, and vision insurance coverage. Employees that select
medical, dental, and vision coverage that costs less than the monthly amount provided by the
District, shall then deposit seventy-five percent of the remaining amount to their HRA VEBA
Trust Account. Should the cost of such health care plan or policy exceed the amount paid by
the District, the employee or Commissioner must cover the excess cost through personal funds
to obtain the insurance coverage selected by said employee or Commissioner.

Calculation Example				
District's Monthly Stipend		\$	2,265.00	
Cost of Employee's Medical Coverage	1,522.44			
Cost of Employee's Dental Coverage	112.65			
Cost of Employee's Vision Coverage	0			
Less Total Cost of Employee's Health Coverage			1,635.09	
Employee's Remaining Amount		\$	629.91	
District Factor			75%	
Employee's Deposit Amount to HRA VEBA		\$	472.43	

2. Regular part-time employees who are expected to work 30 hours or more per week or more than an average of 130 hours per month, will be eligible to a prorated medical, dental, vision, and HRA VEBA contribution based on their monthly hours worked divided by 168 hours per month.

Calculation Example			
District's Monthly Stipend		\$	2,265.00
Hours Worked	135		
Hours per Month	168		
Part-Time Hours Worked Factor	80.36%		
Part-Time Employee's Monthly Stipend		\$	1,820.09
Cost of Employee's Medical Coverage	1,522.44		
Cost of Employee's Dental Coverage	112.65		
Cost of Employee's Vision Coverage			
Less Total Cost of Employee's Health Coverage			1,635.09
Employee's Remaining Amount	1	\$	185.00
District Factor			75%
Employee's Deposit Amount to HRA VEBA		\$	138.75

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