

1 FROM THE OFFICE OF JOSPEH J. CZARNEZKI

2
3 MILWAUKEE COUNTY CLERK

4
5 County Ordinance No. 13-2

6
7 File No. 12-1016

8
9
10 AN AMENDED ORDINANCE

11 The County Board of Supervisors of the County of Milwaukee does ordain as follows:

12
13 **SECTION 1.** Section 17.14 of the General Ordinances of Milwaukee County is amended
14 as follows:

15
16 (7) Milwaukee County Group Health Benefit Program.

17 (a) Health and dental benefits shall be provided for in accordance with the
18 terms and conditions of the current plan document and the group
19 administrative agreement for the Milwaukee County Health Insurance
20 Plan.

21
22 (b) All health care provided shall be subject to utilization review.

23
24 (c) Eligible employees may choose health benefits for themselves and their
25 dependents under a preferred provider organization (county health plan or
26 PPO).

27
28 (d) Eligible employees enrolled in the PPO shall pay a monthly amount
29 toward the monthly cost of health insurance as described below:

30
31 (1) Effective January 2013~~2~~ employees enrolled in the PPO
32 comparable plan shall pay the following amounts ~~eighty five dollars~~
33 ~~(\$85.00)~~ per month toward the monthly cost of the respective
34 ~~plan; a single plan and one hundred seventy dollars (\$170.00) per~~
35 ~~month toward the monthly cost of a family plan.~~

36

Employee Only	\$100
Employee + Child(ren)	\$125
Employee + Spouse	\$200
Employee + Family	\$225

37
38
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40

41
42 (2) The appropriate payment shall be made through payroll
43 deductions. When there are not enough net earnings to cover such
44 a required contribution, and the employee remains eligible to
45 participate in a health care plan, the employee must make the

46 payment due within ten (10) working days of the pay date such a
47 contribution would have been deducted. Failure to make such a
48 payment will cause the insurance coverage to be canceled
49 effective the first of the month for which the premium has not been
50 paid.

- 51
- 52 (3) The county shall deduct employees' contributions to health
53 insurance on a pre-tax basis pursuant to a Section 125 Plan.
- 54
- 55 (4) The county shall establish and administer flexible spending
56 accounts (FSAs) for those employees who desire to pre-fund their
57 health insurance costs as governed by IRS regulations. The county
58 retains the right to select a third party administrator.

- 59
- 60 a. The county shall make an annual contribution to the FSA
61 account of each active and enrolled eligible employee who is
62 covered by subsection 201.24(3.11) of the pension
63 ordinance or who is covered by a collective bargaining
64 agreement that includes a mandatory employee pension
65 contribution consistent with subsection 201.24(3.11) of the
66 pension ordinance. The contribution shall be based upon
67 plan enrollment and will be funded as follows per calendar
68 year:

69

70 Employee Only	\$600
71 Employee + Child(ren)	\$1,440
72 Employee + Spouse	\$1,200
73 Employee + Family	\$1,800

74

75 equal to the in-network deductible applicable to employees enrolled
76 under the PPO plan, as defined under
77 subsection 17.14(7)(n). The contributions shall be subject to
78 and in accordance with IRS regulations.

- 79 (e) In the event an employee who has exhausted accumulated sick leave is
80 placed on leave of absence without pay status on account of illness, the
81 county shall continue to pay the monthly cost or premium for the PPO in
82 force at the time leave of absence without pay status is requested, if any,
83 less the employee contribution during such leave for a period not to
84 exceed one (1) year. The one-year period of limitation shall begin to run
85 on the first day of the month following that during which the leave of
86 absence begins. An employee must return to work for a period of sixty
87 (60) calendar days with no absences for illness related to the original
88 illness in order for a new one-year limitation period to commence.
- 89
- 90 (f) Where both husband and wife are employed by the county, either the
91 husband or the wife shall be entitled to one (1) family plan. Further, if the

92 husband elects to be the named insured, the wife shall be a dependent
93 under the husband's plan, or if the wife elects to be the named insured,
94 the husband shall be a dependent under the wife's plan. Should neither
95 party make an election the county reserves the right to enroll the less
96 senior employee in the plan of the more senior employee. Should one (1)
97 spouse retire with health insurance coverage at no cost to the retiree, the
98 employed spouse shall continue as a dependent on the retiree's policy,
99 which shall be the dominant policy.

100

101 (g) Coverage of enrolled employees shall be in accordance with the monthly
102 enrollment cycle administered by the county.

103

104 (h) Eligible employees may continue to apply to change their participation in
105 the health plan on an annual basis. This open enrollment shall be held at
106 a date to be determined by the county and announced at least forty-five
107 (45) days in advance.

108

109 (i) The county shall have the right to require employees to sign an
110 authorization enabling non-county employees to audit medical and dental
111 records. Information obtained as a result of such audits shall not be
112 released to the county with employee names unless necessary for billing,
113 collection, or payment of claims.

114

115 (j) Amendments to the Public Health Service Act applies federal government
116 (COBRA) provisions regarding the continuation of health insurance to
117 municipal health plans. Milwaukee County, in complying with these
118 provisions, shall collect the full premium from the insured, as allowed by
119 law, in order to provide the continued benefits.

120

121 (k) The county reserves the right to establish a network of providers. The
122 network shall consist of hospitals, physicians, and other health care
123 providers selected by the county. The county reserves the right to add,
124 modify or delete any and all providers under the network.

125

126 (l) Employees not covered by subsection (m) may, upon retirement, opt to
127 continue their coverage in the county group health benefit program upon
128 payment of the full monthly cost.

129

130 (m) The provisions of this subsection are considered a part of an employee's
131 vested benefit contract as more fully set forth in subsection 201.24(5.10).
132 For the purpose of this subsection, service as a county employee not to
133 exceed six (6) months under an emergency appointment, if continuous,
134 may be included in calculating the fifteen (15) years of creditable pension
135 service. The county shall pay the full monthly cost of providing county
136 group health coverage under section 17.14 to the following individuals:
137

- 138 (1) Upon retirement, employees who were non-represented as of
139 December 31, 2011, or who were represented, as of December 31,
140 2011, by the American Federation of State, County and Municipal
141 Workers, or by the International Association of Machinists and
142 Aerospace Workers, or by the Technicians, Engineers and
143 Architects of Milwaukee County, or by the Milwaukee Building and
144 Construction Trades Council, or by the Milwaukee County
145 Firefighters Association, and who were hired prior to January 1,
146 1994, and who have fifteen (15) years or more of creditable
147 pension service as a county employee, or who have at least seven
148 and one-half (7½) years of creditable pension service as a county
149 employee and have also retired after fifteen (15) or more years of
150 service as a City of Milwaukee employee.
151
- 152 (2) Employees who were represented as of December 31, 2011 by the
153 Federation of Nurses and Health Professionals, and who were
154 hired prior to September 27, 1995, and who have fifteen (15) years
155 or more of creditable pension service as a county employee, or
156 who have at least seven and one-half (7½) years of creditable
157 pension service as a county employee and have also retired after
158 fifteen (15) or more years of service as a City of Milwaukee
159 employee.
160
- 161 (3) Employees who were represented as of December 31, 2011 by the
162 Association of Milwaukee County Attorneys, and who were hired
163 prior to January 1, 2006, and who have fifteen (15) years or more
164 of creditable pension service as a county employee, or who have at
165 least seven and one-half (7½) years of creditable pension service
166 as a county employee and have also retired after fifteen (15) or
167 more years of service as a City of Milwaukee employee.
168
- 169 (4) Employees who were represented as of December 31, 2011 by the
170 Deputy Sheriffs Association, and who were hired prior to July 1,
171 1995, and who have fifteen (15) years or more of creditable
172 pension service as a county employee, or who have at least seven
173 and one-half (7½) years of creditable pension service as a county
174 employee and have also retired after fifteen (15) or more years of
175 service as a City of Milwaukee employee.
176
- 177 (5) Retired members of the county retirement system who became
178 members due to a functional transfer from the City of Milwaukee
179 and have a total of fifteen (15) or more years of creditable pension
180 service, to retired former employees of United Regional Medical
181 Services, Inc., who were employed by the county as of December
182 31, 1991, and who have fifteen (15) or more years of aggregate
183 service with the county, United Regional Medical Services, Inc.,
United/Dynacare LLC, and Froedtert Memorial Lutheran Hospital

184 (Radiology Department), and to retired employees with fifteen (15)
 185 or more years of service as a county employee in a teaching
 186 position.
 187
 188 (6) Beneficiaries of the foregoing employees in paragraphs (1)—(5)
 189 who continue to receive benefits from the county retirement system
 190 after the death of such employee, and to persons receiving
 191 survivorship benefits under subsection 201.24(6.4) of the county
 192 pension ordinance. Upon the death of any retiree, only those
 193 survivors eligible for health insurance benefits prior to such retiree's
 194 death shall retain continued eligibility in the county group health
 195 benefit program.
 196
 197 (n) Effective February 1, 2013 aAll eligible employees enrolled in the PPO
 198 shall have a deductible equal to the following:
 199 (1) The in-network deductible for the PPO shall be based upon plan
 200 enrollment and shall be as follows per calendar year:
 201
 202

Employee Only	\$ 800
Employee + Child(ren)	\$1,050
Employee + Spouse	\$1,600
Employee + Family	\$1,850

 206
 207 ~~five hundred dollars (\$500.00) per insured, per calendar year; one~~
 208 ~~thousand dollars (\$1,000.00) for a two member family, per calendar~~
 209 ~~year; or one thousand five hundred dollars (\$1,500.00) for a three-~~
 210 ~~member or more family, per calendar year.~~
 211 (2) The out-of-network deductible for the PPO shall be based upon
 212 plan enrollment and shall be as follows per calendar year:
 213
 214

Employee Only	\$1,600
Employee + Child(ren)	\$2,100
Employee + Spouse	\$3,200
Employee + Family	\$3,700

 218 ~~one thousand dollars (\$1,000.00) per insured, per calendar year; two~~
 219 ~~thousand dollars (\$2,000.00) for a two member family, per calendar~~
 220 ~~year; or three thousand dollars (\$3,000.00) for a three member or~~
 221 ~~more family, per calendar year.~~
 222
 223 (3) Co-payments do not apply towards meeting deductibles for the
 224 PPO.
 225
 226 (o) All eligible employees and/or their dependents enrolled in the PPO shall
 227 be subject to a thirty dollar (\$30.00) in-network office visit co-payment or a
 228 sixty dollar (\$60.00) out-of-network office visit for all illness or injury
 229 related office visits, including chiropractic visits. The in-network office visit

230 co-payment shall not apply to preventative care, as determined by the
 231 plan.
 232
 233 (p) All eligible employees and/or their dependents enrolled in the PPO shall
 234 be subject to a co-insurance after application of the deductible.
 235
 236 (1) The in-network co-insurance shall be equal to twenty (20) percent
 237 of all charges subject to the applicable out-of-pocket maximum.
 238 (2) The out-of-network co-insurance shall be equal to forty (40) percent
 239 of all charges subject to the applicable out-of-pocket maximum.
 240 (3) Co-insurance does not apply to those services that require a fixed
 241 amount co-payment.
 242 (4) The in-network co-insurance shall not apply to preventative care,
 243 as determined by the plan.
 244
 245 (q) All eligible employees enrolled in the PPO shall be subject to the following
 246 out-of-pocket maximums including any applicable deductible and percent
 247 co-insurance to a calendar year maximum of:
 248 (1) Two thousand five hundred dollars (\$2,500.00) in-network under a
 249 single plan.
 250 (2) Five thousand dollars (\$5,000.00) in-network under an
 251 employee+child(ren), an employee + spouse, or a family plan.
 252 (3) Six thousand dollars (\$6,000.00) out-of-network under a single
 253 plan.
 254 (4) For the PPO, twelve thousand dollars (\$12,000.00) out-of-network
 255 under an employee+child(ren), an employee + spouse, or a family
 256 plan.
 257 (5) Office visit co-payments are not limited and do not count toward the
 258 calendar year out-of-pocket maximum(s).
 259 (6) Charges that are over usual and customary do not count toward
 260 the calendar year out-of-pocket maximum(s).
 261 (7) Prescription drug co-payments do not count toward the calendar
 262 year out-of-pocket maximum(s).
 263 (8) Other medical benefits not described in subsections (q)(5), (6), and
 264 (7) shall be paid by the health plan at one hundred (100) percent
 265 after the calendar year out-of-pocket maximum(s) has been
 266 satisfied.
 267
 268 (r) All eligible employees and/or their dependents enrolled in the PPO shall
 269 pay a two hundred dollar (\$200.00) emergency room co-payment (facility
 270 only) in-network or out-of-network. The co-payment shall be waived if the
 271 employee and/or their dependents are admitted directly to the hospital
 272 from the emergency room. In-network and out-of-network deductibles and
 273 co-insurance percentages then apply.
 274

- 275 (s) All eligible employees and/or their dependents enrolled in the PPO shall
276 pay the following for a thirty-day prescription drug supply at a participating
277 pharmacy:
278
- 279 (1) Ten dollar (\$10.00) co-payment for all generic drugs.
 - 280 (2) Thirty dollar (\$30.00) co-payment for all brand name drugs on the
281 formulary list.
 - 282 (3) Fifty dollar (\$50.00) co-payment for all non-formulary brand name
283 drugs.
 - 284 (4) Non-legend drugs may be covered at the ten dollar (\$10.00)
285 generic co-payment level at the discretion of the plan.
 - 286 (5) Twenty dollar (\$20.00) co-payment for all diabetic covered
287 supplies.
 - 288 (6) Except as prohibited by Medicare, Mail order is mandatory for all
289 maintenance drugs. There is no coverage for maintenance drugs
290 filled at retail pharmacy after the third fill.
 - 291 (7) Effective February 1, 2013, Co-payments for mail order
292 maintenance drugs are two and one-half times (2.5×) retail but for
293 a ninety-day supply.
 - 294 (8) The plan shall determine all management protocols.
 - 295 (9) Co-payments for retail prescription are for a thirty-day supply.
296 Retail prescription shall not exceed a thirty-day supply.
297
- 298 (t) All eligible employees and/or their dependents enrolled in the PPO shall
299 pay fifty (50) percent co-insurance on all durable medical equipment to a
300 maximum of fifty dollars (\$50.00) per appliance or piece of equipment.
301
- 302 (u) In accordance with Wisconsin Act 218 that was passed by the State of
303 Wisconsin in 2010, mental health care for all eligible employees and/or
304 their dependents shall be provided in the same manner as regular health
305 care as described in subsection 17.14(7). As such, all co-payments, co-
306 insurance, deductibles, and out-of-pocket maximums shall apply
307 accordingly.
- 308 (v) Each calendar year, the county shall pay a cash incentive of five hundred
309 dollars (\$500.00) per contract (single or family plan) to each eligible
310 employee who elects to dis-enroll or not to enroll in a PPO. Any employee
311 who is hired on and after January 1, and who would be eligible to enroll in
312 health insurance under the present county guidelines who chooses not to
313 enroll in a county health plan shall also receive five hundred dollars
314 (\$500.00). Proof of coverage in a non-Milwaukee County Group Health
315 Insurance Plan must be provided in order to qualify for the five hundred
316 dollar (\$500.00) payment. Such proof shall consist of a current health
317 enrollment card.
- 318 (1) The five hundred dollars (\$500.00) shall be paid on an after-tax
319 basis. When administratively possible, the county may convert the
320

321 five hundred dollar (\$500.00) payment to a pre-tax credit which the
 322 employee may use as a credit towards any employee benefit
 323 available within a flexible benefits plan.

324 (2) The five hundred dollar (\$500.00) payment shall be paid on an
 325 annual basis by payroll check no later than April 1 of any given year
 326 to qualified employees on the county payroll as of January 1. An
 327 employee who loses his/her non-county health insurance coverage
 328 may elect to re-join the county health plan. The five hundred dollar
 329 (\$500.00) payment must be repaid in full to the county prior to
 330 coverage commencing. Should an employee re-join a health plan
 331 he/she would not be eligible to opt out of the plan in a subsequent
 332 calendar year.

333

334 (w) The county shall implement a disease management program.

335

336 (x) The provisions of C.G.O. 17.14(7) shall apply to all employees in the
 337 unclassified service of Milwaukee County, except those in following title
 338 codes 83000, 83400, 83500, 83600, 83900, 85100, 85400, 85410, 85590,
 339 85631, 85710.

340

341 (y) The provisions of C.G.O. 17.14(7) shall not apply to seasonal and hourly
 342 employees. An hourly employee shall be considered to be one who does
 343 not work a uniform period of time within each pay period and shall include
 344 an employee who works a uniform period of time of less than twenty (20)
 345 hours per week.

346

347 (z) The provisions of section 17.14(7) shall apply to employees on an unpaid
 348 leave of absence covered by workers compensation.

349

350 (aa) Retired members of the county retirement system who were represented
 351 by the Federation of Nurses & Health Professionals, Local 5001, AFT,
 352 AFL-CIO and non-represented members of the employee retirement
 353 system who were Doyme employees when they voluntarily resigned their
 354 employment between September 1, 1995 and December 31, 1995, at the
 355 time of, and in lieu of, a layoff from county service as a direct result of the
 356 sale/lease of John L. Doyme Hospital and employees of the School of
 357 Nursing who resigned from county service, in lieu of being laid off due to
 358 the closure of the School of Nursing, who possess more than ten (10) but
 359 less than fifteen (15) years of creditable pension service credit may elect
 360 to file an appropriate application to become eligible to enroll in the county
 361 group health benefit program and the county shall pay the following fixed,
 362 not to exceed, below noted portion of the monthly cost of the benefit
 363 option selected with the pensioner paying the balance of the monthly cost:

364

365 Creditable Pension Service Monthly County Payment:

366 Ten (10) or more years \$50.00

367	Eleven (11) or more years	125.00
368	Twelve (12) or more years	200.00
369	Thirteen (13) or more years	275.00
370	Fourteen (14) or more years	350.00

371

372 (bb) Retired members of the county retirement system who are eligible for
 373 continuing their health insurance benefits at county expense under the
 374 provision of this section shall be eligible for reimbursement of the cost of
 375 their Medicare Part B premiums, as well as the Medicare Part B premiums
 376 of their eligible spouse and dependents.

377

378 (1) The provisions of section (bb) shall not apply to members not
 379 represented by a collective bargaining unit who retired and began
 380 receiving benefits from the Milwaukee County Employees
 381 Retirement System after April 1, 2011, nor to members represented
 382 by the American Federation of State, County and Municipal
 383 Employees, the Association of Milwaukee County Attorneys, the
 384 Milwaukee Building and Trades Council, the Technicians,
 385 Engineers, and Architects of Milwaukee County, and the
 386 International Association of Machinists and Aerospace Workers
 387 who retired and began receiving benefits from the Milwaukee
 388 County Employees Retirement System after December 31, 2011,
 389 nor to members represented by the Federation of Nurses and
 390 Health Professionals who retired and began receiving benefits from
 391 the Milwaukee County Employees Retirement System after
 392 December 31, 2012. For members represented by the Deputy
 393 Sheriffs Association and the Milwaukee County Firefighters
 394 Association, the provisions of sections (aa) and (bb) shall be
 395 applicable in accordance with their respective labor contracts.

396

397 (cc) Retired members of the county retirement system with less than fifteen
 398 (15) years of creditable pension service credit may, upon retirement, opt
 399 to continue their membership in the county group health benefit program
 400 upon payment of the monthly cost. Upon the death of such a pensioner,
 401 the beneficiary(s) may continue as a member of the group, providing they
 402 pay the full monthly cost.

403

404 (dd) Effective January 1, 2012, the county Medicare coordination methodology
 405 will be "non-duplication". Under this method, when Medicare is the primary
 406 health coverage, the benefit paid by Milwaukee County's plan will be the
 407 difference between the benefit provided in section 17.14(7) and the
 408 amount paid by Medicare.

409

410 (ee) Effective January 1, 2012, employees who are not represented by a
 411 collective bargaining unit or who are members of the American Federation
 412 of State, County and Municipal Employees, the Association of Milwaukee

413 County Attorneys, the Milwaukee Building and Construction Trades
414 Council, the International Association of Machinists and Aerospace
415 Workers, the Technicians, Engineers and Architects of Milwaukee County
416 or the Federation of Nurses and Health Professionals shall be subject to
417 the provisions of section 17.14(7).
418

419 (ff) Effective January 1, 2012, employees who are members of the Milwaukee
420 Deputy Sheriff's Association or the Milwaukee County Fire Fighters'
421 Association shall be subject to the provisions of section 17.14(7), with the
422 exception of subsection (d) which shall be in accordance with the
423 provisions of the collective bargaining agreement.
424

425 **SECTION 2.** The provisions of this ordinance shall be effective January 1, 2013.

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**Adopted by the Milwaukee County Board of Supervisors
December 20, 2012**