

**Health insurance proposals to date (pulled from table for now 2-9-16):**

***April 8 2015 opening health insurance proposal***

Effective September 1, 2015, for all full-time regular and full-time adjunct employees, the Employer will pay 84% of the full premium and 84% of the full premium for coverage of their dependents.

Effective January 1, 2016, for all full-time regular and full-time adjunct employees, Employer will pay 83% of the full premium and 83% of the full premium for coverage of their dependents.

Effective January 1, 2017, for all full-time regular and full-time adjunct employees, the Employer will pay 82% of the cost of the full premium coverage, and 82% of the full premium for coverage of their dependents.

Effective January 1, 2018, for all full-time regular and full-time adjunct employees, the Employer will pay 81% of the cost of the full premium coverage, and 81% of the full premium for coverage of their dependents.

Effective January 1, 2019, for all full-time regular and full-time adjunct employees, the Employer will pay 80% of the cost of the full premium coverage, and 80% of the full premium for coverage of their dependents.

Effective January 1, 2020, for all full-time regular and full-time adjunct employees, the Employer will pay 80% of the cost of the full premium coverage, and 80% of the full premium for the coverage of their dependents.

*Waiver of Benefit*

There will be a health insurance opt-out opportunity for employees who wish to waive or withdraw from participation in the health insurance plan because they have other health insurance coverage. In January of 2016, and thereafter in January of each calendar year, ~~a flat payment the sum of \$1,025 will be paid to each employee who chooses for each calendar year that the employee is does~~ distributed to employees who choose this opt-out and are eligible for coverage but do not elect to participate in the health plan evenly over twenty-four (24) pay periods.

Effective September 1, 2016, prescription card co-pays per prescription shall be as follows:

Generic drug	\$ <u>5-7.50</u>
Generic drug not available	\$ <u>5-7.50</u>
Brand name drug	\$ 20
Mail order maintenance	\$ 0

A Labor Management Committee shall be established to participate in a college taskforce whose purpose is to develop a proposal to reduce health insurance costs through health and wellness initiatives, to be shared with Broome County.

For employees hired March 1, 1979, or before, retiree health insurance eligibility shall be effective after 5 years of service. For employees hired ~~after~~ after March 4-2, 1979, through August 31, 2015, retiree health insurance eligibility shall be effective after 10 years of service. In either case, the employee must be retirement eligible. For eligible employees who retire after September 1, 1986, the County shall provide medical health insurance coverage. The rate and benefit levels shall be the same as in effect as for active employees, and will change if the plan for active employees changes.

Employees hired on or after 9/1/15 would require a cumulative of twenty (20) years of full-time equivalent employment or service and must have been enrolled in the College health insurance plan for a cumulative minimum of ten (10) years with two (2) of those years of enrollment immediately preceeding their retirement.

**October 15 2015 health proposal (intended to replace portion of April 8<sup>th</sup> proposal that covers employee share of health)**

Replace April 8, 2015 college opening proposals for Article 23 – health insurance 2 and 2a with this alternative. The intention of this change is to share cost increases rather than shift existing costs in scenarios where rates are not increasing:

Current employees would continue to share in 16% of current health insurance costs, and would pick up 20% of any cost increases that occur on or after September 1, 2015. New employees hired on or after September 1, 2015 will share 20% of health costs

**January 28 2016 health proposal (intended to replace portion of April 8<sup>th</sup> and October 15<sup>th</sup> proposal that covers employee share of health):**

This (replacement) proposal is intended to explicitly recognize health insurance affordability relative to wages earned. This replaces October 15, 2015 proposal.

Employees who earn the following annual base salary on January 1<sup>st</sup> of 2017, 2018, 2019, and 2020 will pay the following share of health insurance premiums effective each January 1<sup>st</sup> :

\$30,000 or less	employee share held at 16%
\$30,001 - 40,000	employee share increases by .25% (one quarter % point) Jan 1 <sup>st</sup> of each year (from current 16% to 17% over four years)
\$40,001 – 50,000	employee share increases by .5% (one half % point) Jan 1 <sup>st</sup> of each year (from current 16% to 18% over four years)
\$50,001 or more	employee share increases by .75% (three quarter % point) Jan 1 <sup>st</sup> of each year (from current 16% to 19% over four years)