Rule # 4-20

Management and Executive Benefits

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§ 4-20-010 For Elected Officials and the District Attorney

Elected officials and the District Attorney receive the following benefits:

- A. Medical, Dental, and Life Insurance;
- B. Workers' Compensation;
- C. Flexible Spending Accounts;
- D. Deferred Compensation;
- E. TriMet Universal Pass;
- F. Retirement Pensions and Retiree Health Benefits;
- G. Long-Term Care Insurance; and
- H. Maintenance of Administration of Social Media.

§ 4-20-020 Domestic Partners and Other Non-IRS Eligible Dependents Enrolled for Health Plan Coverage

County health plan eligibility rules are broader than IRS eligible dependent rules. This creates situations where family members may be eligible for enrollment in County employee's health plan coverage, but that coverage may be taxable to the employee under IRS guidelines. For the purpose of benefit plan enrollment, domestic partners are treated the same as spouses.

The value of health plan benefits for enrolled non-IRS eligible individuals is treated as imputed income under the federal Internal Revenue Code. Imputed income is calculated based on the total premium for the coverage minus any post-tax employee cost share paid for the non-IRS eligible dependent's coverage. The balance is the imputed value of the coverage and is subject to taxation. Employee cost shares for non-IRS eligible dependents are taken from post-tax wages.

§ 4-20-030 Benefits Eligibility

All management, non-represented, executive employees, and elected official staff are eligible except:

- A. Employees regularly scheduled to work less than twenty (20) hours per week or .5 FTE will not receive benefits, except those required by state or federal law.
- B. Temporary employees regularly scheduled to work twenty (20) or more hours per week or at least .5 FTE will receive all the benefits described in this rule.
- C. A temporary employee who is a current member of a bargaining unit will receive the benefits negotiated as part of the applicable collective bargaining agreement instead of receiving benefits described in this rule.

§ 4-20-040 Health Care Benefits

- A. Medical and Dental
 - 1. Benefits start on the first day of the month on or following enrollment and submission of all required affidavits. Eligible employees can select a medical and dental plan. Employees who complete the enrollment process after the first day of the month following employment will be enrolled on the first day of the following month.

- 2. An eligible employee who has Minimum Essential Coverage (MEC) which is not coverage in the individual market may elect to opt out of medical coverage and receive the monthly opt out payment determined by the County. The monthly opt out payment to employees eligible for VEBA is paid to the employee through the employee's individual HRA VEBA account. An employee may opt out of medical coverage and still elect dental coverage.
- 3. An eligible employee who opts out of coverage and subsequently loses that other coverage may enroll in a County medical and/or dental plan (appropriate to the lost coverage) within sixty (60) days of loss of coverage. County coverage becomes effective the first day of the month coinciding with or following completion of the enrollment process.
- 4. Specific terms and conditions of the benefit programs are controlled by plan documents and federal and state law. Every effort has been made to ensure accuracy of these rules, however, where the rules differ, the plan documents control.
- 5. The County will determine the premium contribution rates to be paid by the County on behalf of eligible employees and dependents. The employee will pay any remaining premium contribution for medical and dental insurance.
- 6. County retiree medical benefit provisions are outlined in MCPR 4-20-140.
- 7. To the extent permitted by law, employee paid premium contributions toward the County's medical and dental plans will be paid with pre-tax dollars through payroll deduction according to guidelines for premium conversion in the <u>Internal Revenue Code Section 125</u>. Premium contributions not eligible to be paid with pre-tax dollars will be deducted in post-tax dollars through payroll deduction.
- 8. An employee may enroll a spouse or domestic partner, and/or eligible dependents in County medical and dental plans upon completion of the applicable enrollment. Enrollment times and other procedures for administration of the medical and dental benefit plans shall be applied to employees with domestic partners in the same manner as to married employees to the extent allowed by the law. Spouse or domestic partner and/or eligible dependents must be enrolled in the same plan as the employee.

- 9. Coverage at Termination:
 - a. If the employee's last regularly scheduled work day is worked or spent on sick, vacation, or personal holiday leave and falls on or before the 15th day of the month in which employment terminates, the employee's County coverage lapses at the end of that calendar month. If such workday is on or after the 16th day of the calendar month in which employment terminates, County coverage lapses at the end of the following calendar month. An employee whose last workday is on or after the 16th day of the calendar month will have payroll deductions for the additional full month of coverage withheld from their final paycheck.
 - b. Employees leaving County employment may elect to participate in County medical and dental benefit plans on a self-pay basis as provided by law (COBRA).
- B. Coverage on Unpaid Leave
 - 1. Employees' medical and dental benefit coverage is not affected by unpaid leaves of absence of less than thirty (30) days.
 - 2. The County contributes toward medical and dental insurance coverage during unpaid FMLA, OFLA, Paid Leave Oregon, and/or Washington Paid Family and Medical leaves as required by law. Upon return to County paid status, the employee is responsible for repayment of any payroll deductions for continued coverage that were paid by the County on behalf of the employee during the unpaid leave period. If the employee remains on unpaid leave for more than thirty (30) days after FMLA/OFLA, Paid Leave Oregon, and/or Washington Paid Family and Medical Leave is exhausted, the leave will be treated as an unpaid leave of absence, except that the last day of FMLA/OFLA, Paid Leave Oregon, and/or Washington Paid Family and Medical leave will be treated as an unpaid leave of absence, except that the last day of FMLA/OFLA, Paid Leave Oregon, and/or Washington Paid Family and Medical leave will be treated as an unpaid leave of absence, except that the last day of FMLA/OFLA, Paid Leave Oregon, and/or Washington Paid Family and Medical leave will be the employee's last day in paid status.
 - 3. The 31st day of the employee's unpaid leave of absence triggers calculation of when health plan coverage will end. If the 31st day occurs on or before the 15th day of a month: health plan coverage terminates at the end of that calendar month. If the 31st day occurs on or after the 16th day of a month, health plan coverage terminates at the end of the following calendar month.

- C. Return from Unpaid Leave when Medical and Dental Benefits Ended
 - Employees returning from a leave of absence without pay will be reinstated to the same medical and dental plans (or successor plans) they had when the unpaid leave began. Opt out enrollees must complete a new affidavit if reinstating coverage in a new plan year.
 - 2. If the 1st day of a month is a regularly scheduled working day and the employee returns from leave the first day of the month, coverage will begin upon their return from leave. If an employee returns after the first day of the month, or if the first day of the month is not a scheduled work day, coverage will begin the first day of the month following their return.
 - 3. Employees returning from unpaid non-FMLA/OFLA leave in a new plan year may enroll in different plans within thirty-one (31) days of their return to work. Such employee must complete a health plan enrollment upon their return to work. If enrollment is completed on the first (1st) day of the month, the changed coverage will be effective that day; otherwise, coverage will be in effect the first (1st) day of the month following completed enrollment.
- D. The County will pay for COBRA medical and dental insurance coverage for a period of up to six (6) months beyond the month in which benefits would normally terminate for an employee with an approved long-term disability claim. However, employees who "opt out" of benefits coverage under MCPR 4-20-040 (A)(2) will not be eligible for continued County-paid coverage under this subsection. Contributions while on time loss under workers' compensation law are covered under the employee-injured workers' program as defined under MCPR 4-40-060 Workers' Compensation.

§ 4-20-050 Flexible Spending Accounts

- A. Each employee may participate in the Medical Expense Reimbursement Plan (MERP), Dependent Care Assistance Plan (DCAP), and the Transportation Reimbursement Plans (TRP) under federal law.
- B. Employees on a leave of absence may continue contributing to DCAP while on leave if they remain in paid status. However, DCAP claims incurred while on leave are not eligible for reimbursement.

C. Employees on an unpaid leave of absence will have flexible spending account participation waived when there is no longer pay to make contributions. Employees may re-enroll in flexible spending accounts when they return from unpaid leave of absence, but must notify the <u>Employee</u> <u>Benefits Office</u> if they wish to re-enroll.

§ 4-20-060 Life Insurance

- A. The County will insure each employee, at no charge, under a term life insurance policy in the amount of the employee's base annual salary, to a maximum of \$250,000. Imputed income will be reflected as taxable income on employee payslips in an amount based on age and the amount of coverage in excess of \$50,000, according to Internal Revenue Service (IRS) regulations.
- B. The County will insure each management, non-represented, executive employee, and elected official staff retiree with at least ten (10) years of County service, at no charge, under a two thousand dollar (\$2,000) term life insurance policy upon retirement.
- C. Employees may purchase supplemental term life insurance coverage for themselves, their spouse or domestic partner consistent with insurance carrier contracts.

§ 4-20-070 Disability Program

- A. Employees are enrolled in County paid short-term and long-term disability programs. Specific terms and conditions of these programs are controlled by the plan documents.
- B. Elected officials are not eligible for the County's paid disability programs and are subject to the State of Oregon's rules regarding pay for elected officials.

§ 4-20-080 Education Assistance

- A. Each employee may be reimbursed for part or all of the cost of tuition for any course of study taken on the employee's own time which, in the judgment of the Director or supervisor, is related to the employee's position, will result in improved job performance, and is within existing budget limitations and priorities.
- B. In lieu of tuition reimbursement, the employee may be provided with time off with pay so that the employee may attend the course.

- C. Employees must apply for approval for reimbursement or time off at least thirty (30) days before the proposed enrollment, or as soon as the employee becomes aware of the training opportunity. If approved, the employee will be reimbursed within thirty (30) days after the employee presents proof of satisfactory completion of the course. Satisfactory completion is considered a "C" or above or a passing grade as defined by the institution. An employee may receive an advance payment to cover the cost of tuition and related incidental expenses under the following conditions:
 - 1. In the judgment of the Director or supervisor, such an advance is consistent with the County's financial and operational needs and priorities; and
 - 2. The employee signs and agrees that if the course is not completed, or County employment terminates before completion of the course, the County may deduct the amount of the advance from pay or use other means to collect the advance.

§ 4-20-090 Deferred Compensation Program

Each employee who has been employed by the County for at least thirty (30) days in a regular or limited duration position may participate in the County's deferred compensation program, a pre-tax retirement savings plan administered under federal law. Specific terms and conditions of the deferred compensation program are controlled by the plan document.

§ 4-20-100 TriMet Universal Pass Program

The County contributes 100% of the monthly cost of a TriMet Universal Pass. The monthly dollar amount will not exceed the maximum non-taxable amount allowed by IRS regulations.

§ 4-20-110 INCIDENTAL BENEFITS

- A. Directors may approve occasional use of personal credit cards by employees when it is necessary or convenient to make purchases for the County. Any benefits, including frequent flyer miles and credit points to employees from such use may be retained and redeemed by the employees as additional compensation.
- B. Directors may approve occasional frequent flyer miles accumulated as a result of County paid travel redeemed by employees as additional compensation.

C. Directors may approve infrequent and brief use of County computers, County cellular devices, telephones, fax machines, and copy machines by employees on their own time for personal non-business purposes, consistent with MCPR 3-35 and 3-37. Such use must not interfere with County duties and tasks. The benefit received by employees from such use is additional compensation.

§ 4-20-120 HRA VEBA

The County will contribute on behalf of each management and executive employee contributions to individual HRA VEBA accounts in accordance with federal law. Specific terms and conditions of the HRA VEBA program are controlled by the plan documents.

§ 4-20-130 PERS-OPSRP Membership

- A. Employees, except those returning to work as Oregon Public Employees' Retirement System (PERS) or the Oregon Public Service Retirement Plan (OPSRP) benefits-receiving retirees, are eligible for participation in the Oregon Public Employees' Retirement System (PERS) or the Oregon Public Service Retirement Plan (OPSRP) pursuant to <u>ORS 238 and 238A</u>.
- B. In accordance with the terms and limitations of <u>ORS 238.350</u>, one-half of the accumulated unused sick leave with pay will be applied to final average salary for the purpose of pension benefit determination for eligible employees.
- C. The County will "pick up" the employee contribution to PERS and OPSRP as permitted by <u>ORS 238.205 and ORS 238A.335</u> for participating employees.

§ 4-20-140 Retiree Medical Benefits

A. Retiree Medical Benefits Eligibility

A management or executive employee meeting the eligibility requirements specified in the <u>Multnomah County Code (MCC) 9.510 through 9.530</u> at the time of separation from County employment is eligible to enroll in the Multnomah County Retiree Health Plan at separation. Elected Officials and Elected Official Staff are also eligible to enroll under this rule, and bargaining unit members may also be eligible to enroll under this rule, subject to any applicable collective bargaining agreement limitations.

B. County Retiree

For purposes of MCPR 4-20-140 and in compliance with MCC 9.520 a County retiree is defined as a former employee who at separation from County employment was eligible to initiate a PERS pension and was a regular employee or an initial trial service employee.

- C. Deferred Enrollment Option
 - A County retiree who, at time of separation from County employment, has existing and ongoing County-sponsored medical and/or dental coverage through marriage or domestic partnership with another County employee or retiree, has the option to defer enrollment in the County Retiree Health Plan. Continuous and uninterrupted enrollment in a County-sponsored medical plan is required to retain eligibility to enroll in the County Retiree medical plan at some later time. Continuous and uninterrupted enrollment in a County-sponsored dental plan is required to retain eligibility to enroll in the County Retiree dental plan at some later time.
 - 2. A retiree will be allowed a one-time opportunity to leave County medical and County dental coverage and then opt back on to a County plan. To receive this benefit, the retiree must demonstrate continuous coverage under another dental plan or under a medical plan that meets the Minimum Essential Coverage (MEC) as defined under the Affordable Care Act (ACA) and is not coverage in the individual market. The retiree must enroll within sixty (60) calendar days of loss of coverage.
 - 3. A County retiree who has deferred their County Retiree Health Plan enrollment may choose to enroll in the County's Retiree Health Plan at the annual open enrollment period or when an IRS qualifying event occurs causing a loss of coverage under the other County-sponsored or other qualifying group health plan coverage the County retiree has relied upon to qualify for the deferral option. The effective date of coverage will be the first day of the month on or after receipt of all enrollment forms and documentation.
- D. County Retirees Returning to County Employment

County retirees who return to County employment in a regular or limited duration position receive all the benefits available to non-retired employees, including participating in the health plan options available to non-retired active employees. Benefits for County retirees who are enrolled in or have deferred enrollment in the County's Retiree Health Plan and return to County employment in a temporary position will be provided benefits as follows:

- When a retiree receiving a fifty percent (50%) retiree health benefit subsidy under MCC 9.530 or a collective bargaining agreement returns to County employment and works at least part-time, the retiree will continue to be enrolled in the Retiree Health Plans. The County will pay the retiree's portion of the medical premium and fifty (50%) of the dental premium, if enrolled in a retiree dental plan.
- 2. When a retiree who is purchasing retiree health benefits under MCC 9.530 or a collective bargaining agreement but receives no premium subsidy returns to County employment and works at least part-time, the retiree will continue to be enrolled in the Retiree Health Plans and the County will pay an amount equivalent to the County's medical/dental contribution for an active employee in the same working status (either part-time or full-time) towards the retiree's medical/dental premiums. The retiree will continue to be responsible for payment of the difference between the total retiree medical/dental premium costs and the County's contribution.
- 3. When a retiree who has deferred enrollment in the County's Retiree Health Plan returns to County employment, the retiree continues the deferred enrollment and does not participate in the health plan options available to non-retired active employees.
- 4. A retiree who returns to County employment at least part-time is eligible for County provided Long-Term Disability, Short Term Disability, Basic Life Insurance, Employee Assistance Program, management VEBA, and a TriMet Universal Pass.
- 5. A retiree who returns to County employment at least part-time is eligible to enroll in the optional employee and/or spouse/domestic partner life insurance.

Benefits provided under this section to retirees returning to work in a temporary position will cease at the end of the calendar month following the retiree's last day in working status.

§ 4-20-150 Long-Term Care Insurance

The County will offer employees the opportunity to apply for long-term care insurance for themselves, their spouse or domestic partner and other members of the employee's extended family. Employees approved for coverage may purchase Long-Term Care coverage for themselves and their spouse or domestic partner and make the monthly payment by post-tax payroll deductions. Should an employee elect additional coverage for other family members, those premium payments will be remitted directly by the covered individual to the long-term care insurance provider. Provisions of the long-term care plan govern enrollment, eligibility, coverage, and portability of the program.

§ 4-20-160 Wellness Program

- A. The County promotes employee well-being and a culture of wellness through its <u>Employee Wellness Office</u>. Employee Wellness provides opportunities to improve well-being through trainings, Countywide campaigns, communications, policy-development, and partner resources.
- B. Employee Wellness offers services which may include but are not limited to: mental health resources, Countywide fitness centers, discount programs, vaccine clinics, wellness trainings, work-life balance resources, information about community resources, and other activities.
- C. The County Central Human Resources Office is responsible for the development and administration of internal County wellness policies and programs.

REFERENCES

MCPR 4-40 Workers' Compensation

MCPR 3-35 Use of Information Technology

MCPR 3-37 Mobile Devices

IRS Code Section 125

ORS 238 and 238A

Multnomah County Code Chapter 9