

RESOLUTION NO. 60-14
AMENDING RESOLUTIONS 03-14 AND 67-13
HEALTH INSURANCE CONTRIBUTIONS AND
1.68% COLA FOR ELECTED OFFICIALS AND NON-REPRESENTED EMPLOYEES

WHEREAS, RCW 36.40.080 states that the Board of County Commissioners shall fix and determine each item of the budget separately and shall by resolution adopt the budget; and

WHEREAS, RCS 36.16.070 states that the Board shall fix the compensation of all employees; and

WHEREAS, the Board has determined that the County's contribution towards health insurance premiums for Elected Officials and eligible Non-Represented employees should be adjusted; and

NOW THEREFORE BE IT RESOLVED, effective January 1, 2015, the Board of County Commissioners does hereby establish the County's health insurance contribution rate for Elected Officials and eligible Non-Represented Employees at \$1,050 (One Thousand fifty dollars) per month utilizing the pooling method, and resulting in a distribution as follows:

\$741 per month per Elected Official/Employee for those individuals enrolled on medical as an employee only (no dependent coverage). This contribution also covers dental, vision, basic life, and basic long-term disability insurance.

\$1,199 per month per Elected Official/Employee for those individuals enrolled on medical as an employee with one or more dependents. This contribution also covers dental, vision, basic life, and basic long-term disability insurance.

WHEREAS, the Board has determined that a 1.68% COLA for all Elected Officials (whose compensation is under the purview of the Board) and Non-Represented employees is warranted based on 80% of the June to June 2014 Consumer Price Index (CPI) as reflected by the US Government BLS for "US All Cities" Index as the majority of the Union Bargaining Units are receiving the same compensation adjustment in order to reduce the adverse effect of inflation; and

WHEREAS, consistent with Board Resolution No. 67-13, the modification and amendment to limiting the salary of certain Elected Officials to a percentage of that which is paid to the County Commissioner(s), will continue as necessary to accomplish the afore-mentioned COLA adjustment.

WHEREAS, consistent with the Board Resolution No. 67-13, the modification and amendment to limiting the changes in salary without specific approval of the Board, will continue to allow step increases for Non-Represented employees, consistent with policy; and

NOW THEREFORE BE IT RESOLVED, effective January 1, 2015, the Board of County Commissioners does hereby amend the Non-Represented Salary Range Table by 1.68% to be equitable and consistent with the majority of those employees under collective bargaining agreements.

RESOLUTION NO. 600-14
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Approved this 4 day of November 2014

BOARD OF COUNTY COMMISSIONERS



Terri Jeffrey, Chairperson

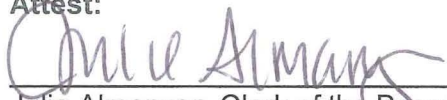


Randy Neatherlin, Commissioner



Tim Sheldon, Commissioner

Attest:



Julie Almanzor, Clerk of the Board

Approved as to Form:



Tim Whitehead, Chief Deputy Prosecutor

CC: Financial Services, Payroll
Human Resources
All Elected Officials and Department Heads

**PEBB
NON-REPRESENTED EMPLOYEES, ELECTED OFFICIALS,
COMMUNITY & FAMILY HEALTH TEAMSTERS, AND IWA DEPUTY PROSECUTORS
January 2015
County Contribution Calculations (\$1,050 Pooled)**

Headcount as of October 2013

Single coverage @ \$1,050 minus actual of \$741* = \$309 savings each per month	
\$309 x 26 Singles =	\$8,034.00
1 Medical Waiver @ \$1,050 minus \$145.90 for PEBB Dental, LTD, Life =	904.10
1 Medical Waiver that cannot have double PEBB coverage, & enrolled on WCIF dental, vision, life (\$1,050 minus \$132.56)	<u>917.44</u>
<u>Total per month for dependent coverage =</u>	<u>\$9,855.54</u>
\$9,855.54 divided by 66 dependent coverages =	\$ 149.32

* \$726 is the largest potential premium for a single coverage except for Dep. Prosecutors who have added premium for WCIF dental, vision, life (approximately \$45 more).

Pooled County Contributions

\$1,050 + \$149 = **\$1,199** County Contribution for Dependent Coverages
\$ 741 County Contribution for Single Coverage

NON - REPRESENTED EMPLOYEES AND COMMUNITY HEALTH TEAMSTERS

The County premium contribution change to \$1050/month with pooling method for non-represented employees is pending approval by resolution.

	Employee	Employee & Spouse	Employee & Child(ren)	Employee Spouse & Child(ren)

Group Health Classic	\$740.45	\$1,335.00	\$1,186.36	\$1,780.91
County Contribution	(741.00)	(1,199.00)	(1,199.00)	(1,199.00)
Employee Pays (payroll deduction)	None	\$136.00	None	\$581.91

Group Health Value	\$709.03	\$1,272.16	\$1,131.38	\$1,694.51
County Contribution	(741.00)	(1,199.00)	(1,199.00)	(1,199.00)
Employee Pays (payroll deduction)	None	\$73.16	None	\$495.51

Group Health High Deductible CDHP	\$669.75	\$1,184.39	\$1,070.31	\$1,526.62
County Contribution	(741.00)	(1,199.00)	(1,199.00)	(1,199.00)
Employee Pays (payroll deduction)	None	None	None	\$327.62

Uniform Medical Classic	\$718.16	\$1,290.42	\$1,147.36	\$1,719.62
County Contribution	(741.00)	(1,199.00)	(1,199.00)	(1,199.00)
Employee Pays (payroll deduction)	None	\$91.42	None	\$520.62

Uniform Medical High Deductible CDHP	\$675.47	\$1,195.83	\$1,080.32	\$1,542.35
County Contribution	(741.00)	(1,199.00)	(1,199.00)	(1,199.00)
Employee Pays (payroll deduction)	None	None	None	\$343.35

Smoking surcharge of \$25/mo and spouse enrollment surcharge of \$50/mo if spouse declined medical coverage with another employer

Medical Waived: \$145.90/month for Dental, Life, LTD

Annual deductibles (Don't apply to preventative care):

- Group Health Classic - \$250/person, \$750/family
- Group Health Value - \$350/person, \$1,050/family
- Group Health High Deductible - \$1,400/person or \$2,800/family
- Uniform Medical Classic - \$250/person, \$750/family
- Uniform High Deductible - \$1,400/person or \$2,800/family

2015 Potential reduction in deductible for wellness attestation participants

Co-pays:

- Group Health Classic - \$15 for regular office visit, \$30 for specialist
- Group Health Value - \$20 for regular office visit, \$40 for specialist
- Group Health High Deductible - 10%, 30% for extended network
- Uniform Medical Classic - 15%
- Uniform Medical High Deductible - 15%

Dental Plan Selections:

- Uniform Dental Group #3000 (WDS dentist network), Delta Care Group #3100 (managed care, limited dentists)
- Willamett Dental (managed care, their facilities)

PEBB dental plans will not coordinate benefits with another plan unless the other plan pays less than PEBB would pay for a procedure. PEBB will only pay up to their maximum allowable for a procedure, minus amount paid by primary plan.

Vision Benefit (subject to annual deductible): \$150 for glasses or contacts every 2 yrs.

Use participating clinics with medical plan network

NON-REPRESENTED SALARY RANGES
EFFECTIVE JANUARY 1, 2015

Attachment C

Range	ENTRY	STEP A	STEP B	STEP C	STEP D	STEP E
45	\$6,895.94	\$7,239.62	\$7,602.62	\$7,792.76	\$7,987.98	\$8,186.26
44	\$6,730.20	\$7,067.78	\$7,421.62	\$7,606.68	\$7,796.82	\$7,992.04
43	\$6,565.48	\$6,893.90	\$7,238.60	\$7,420.60	\$7,604.64	\$7,795.80
42	\$6,411.94	\$6,732.24	\$7,067.78	\$7,245.72	\$7,426.70	\$7,611.76
41	\$6,253.32	\$6,565.48	\$6,894.92	\$7,066.76	\$7,243.68	\$7,424.68
40	\$6,105.88	\$6,411.94	\$6,731.22	\$6,900.00	\$7,072.86	\$7,249.78
39	\$5,956.42	\$6,255.36	\$6,567.52	\$6,731.22	\$6,900.00	\$7,072.86
38	\$5,814.06	\$6,104.86	\$6,409.90	\$6,571.58	\$6,733.24	\$6,903.06
37	\$5,671.72	\$5,955.40	\$6,254.34	\$6,409.90	\$6,570.56	\$6,734.26
36	\$5,536.48	\$5,814.06	\$6,104.86	\$6,258.40	\$6,415.00	\$6,575.64
35	\$5,403.28	\$5,673.74	\$5,957.44	\$6,105.88	\$6,259.42	\$6,416.00
34	\$5,275.16	\$5,537.50	\$5,815.08	\$5,960.48	\$6,109.96	\$6,262.48
33	\$5,146.02	\$5,403.28	\$5,673.74	\$5,815.08	\$5,960.48	\$6,109.96
32	\$5,025.02	\$5,276.18	\$5,538.50	\$5,676.80	\$5,819.14	\$5,964.54
31	\$4,898.94	\$5,145.00	\$5,402.26	\$5,536.48	\$5,675.78	\$5,818.12
30	\$4,785.06	\$5,024.00	\$5,275.16	\$5,407.34	\$5,540.54	\$5,679.84
29	\$4,669.14	\$4,900.98	\$5,146.02	\$5,276.18	\$5,407.34	\$5,542.58
28	\$4,547.30	\$4,785.06	\$5,024.00	\$5,149.08	\$5,279.22	\$5,411.40
27	\$4,446.46	\$4,668.12	\$4,899.96	\$5,024.00	\$5,149.08	\$5,277.20
26	\$4,340.72	\$4,557.30	\$4,785.06	\$4,903.00	\$5,027.06	\$5,153.14
25	\$4,233.96	\$4,445.44	\$4,667.12	\$4,784.04	\$4,902.00	\$5,026.04
24	\$4,134.30	\$4,340.72	\$4,557.30	\$4,671.18	\$4,787.10	\$4,908.10
23	\$4,032.62	\$4,233.96	\$4,445.44	\$4,557.30	\$4,671.18	\$4,787.10
22	\$3,937.04	\$4,134.30	\$4,341.74	\$4,449.52	\$4,560.34	\$4,674.22
21	\$3,840.46	\$4,032.62	\$4,234.98	\$4,340.72	\$4,448.50	\$4,559.34
20	\$3,747.92	\$3,936.04	\$4,133.30	\$4,235.98	\$4,342.76	\$4,450.54
19	\$3,657.42	\$3,840.46	\$4,032.62	\$4,134.30	\$4,237.00	\$4,343.76
18	\$3,571.00	\$3,748.94	\$3,937.04	\$4,034.66	\$4,136.34	\$4,239.04
17	\$3,483.56	\$3,658.44	\$3,841.48	\$3,938.06	\$4,035.68	\$4,137.36
16	\$3,400.18	\$3,571.00	\$3,748.94	\$3,843.50	\$3,939.08	\$4,036.70
15	\$3,317.82	\$3,484.58	\$3,657.42	\$3,747.92	\$3,840.46	\$3,937.04
14	\$3,237.50	\$3,399.16	\$3,568.96	\$3,658.44	\$3,749.96	\$3,844.52
13	\$3,159.20	\$3,316.80	\$3,483.56	\$3,569.98	\$3,659.46	\$3,750.98
12	\$3,082.94	\$3,237.50	\$3,399.16	\$3,484.58	\$3,572.02	\$3,660.48
11	\$3,008.72	\$3,159.20	\$3,316.80	\$3,400.18	\$3,485.60	\$3,572.02
10	\$2,937.54	\$3,082.94	\$3,237.50	\$3,317.82	\$3,401.20	\$3,486.60
9	\$2,865.34	\$3,008.72	\$3,159.20	\$3,237.50	\$3,318.84	\$3,401.20
8	\$2,797.22	\$2,935.50	\$3,082.94	\$3,160.22	\$3,238.50	\$3,319.86
7	\$2,728.08	\$2,865.34	\$3,008.72	\$3,082.94	\$3,160.22	\$3,240.54
6	\$2,664.02	\$2,798.24	\$2,937.54	\$3,010.74	\$3,085.98	\$3,163.26
5	\$2,598.94	\$2,728.08	\$2,865.34	\$2,937.54	\$3,010.74	\$3,085.98
4	\$2,537.94	\$2,664.02	\$2,798.24	\$2,868.40	\$2,940.58	\$3,012.78
3	\$2,475.90	\$2,599.96	\$2,729.10	\$2,798.24	\$2,868.40	\$2,940.58
2	\$2,415.92	\$2,536.92	\$2,664.02	\$2,730.10	\$2,799.26	\$2,868.40
1	\$2,358.98	\$2,475.90	\$2,598.94	\$2,664.02	\$2,730.10	\$2,799.26

NON-UNION SALARY RANGE ALIGNMENT

<u>SALARY RANGE NUMBER</u>	<u>CLASSIFICATION TITLE</u>
45	Chief Deputy Prosecuting Attorney Public Health & Human Services Director Public Works Director Utilities & Waste Management Director Human Resources Director Support Services Director
44	Deputy Director Public Works/County Engineer
43	Chief Criminal Prosecuting Attorney Public Defense Administrator
40	Deputy Director Public Works/ER&R Manager Deputy Director Public Works/Utilities & Waste Mgmt
39	Community Development Director Facilities, Parks and Trails Director
38	Emergency and Information Services Manager
37	Administrator, Probation Services
35	District Court Administrator Engineering and Construction Manager Engineer IV Land Use Attorney
34	Road Operations & Maintenance Manager Parks & Trails Manager
33	Deputy Administrator, Detention Deputy Administrator, Probation Engineer III Technical Services Manager
32	Planning Manager Permit Assistance Center Manager Construction Services Supervisor Project Support Services Manager Transportation Planning Supervisor Facilities Manager Chief Finance Manager Budget Manager
31	Program Manager II Assistant Road Operations & Maintenance Manager

NON-UNION SALARY RANGE ALIGNMENT

<u>SALARY RANGE NUMBER</u>	<u>CLASSIFICATION TITLE</u>
30	Personal Health Manager Building Official GIS Manager Right of Way Manager/Property Manager
29	Equipment Maintenance Supervisor Finance Manager Road Operations & Maintenance Supervisor Chief Accountant Senior Financial Analyst Chief Deputy Treasurer Administrative Services Manager Human Resources/Risk Manager
28	Engineer II Survey Supervisor
27	Administrative Supervisor Chief Appraiser Chief Deputy Elections Superintendent Superior Court Administrator
26	Human Resources Analyst
25	Program Manager I Operations & Maintenance/ER&R Administrator
22	Engineer I
21	Assistant to the Commissioners
20	Deputy Court Administrator Office Manager
19	Official Court Recorder/Judicial Assistant Official Court Recorder/Family Law Facilitator Personnel Analyst
17	Administrative Assistant Clerk of the Board/Claims Administrator
13	Administrative Secretary Legal Secretary
10	Receptionist/Secretary
1	PBX Operator Office Assistant

**MASON COUNTY
DEPUTY PUBLIC DEFENDER SALARY PLAN
2015**

ATTACHMENT C

	Step A	Step B	Step C	Step D	Step E	Step F
Deputy Public Defender I	\$4,393.60	\$4,636.60	\$4,832.86	\$4,965.04	\$5,092.14	\$5,218.22
Deputy Public Defender II	\$5,348.36	\$5,482.58	\$5,618.84	\$5,759.16	\$5,903.54	NA
Deputy Public Defender III	\$6,050.98	\$6,202.48	\$6,358.06	\$6,516.68	\$6,679.36	NA