

**MEMORANDUM OF UNDERSTANDING
BETWEEN
LINCOLN COUNTY
AND
LOCAL 1254, WSCCCE-AFSCME**

This Memorandum of Understanding (MOU) is entered into by and between Lincoln County, WA (the “Employer”) and the WSCCCE-AFSCME Local Union 1254 (the “Union”) and pertains specifically to the current Labor Agreement which exists between the parties as listed above for the period 2022 to 2024.

ARTICLE XXIII – MEDICAL PLAN are deleted and the following language is agreed to:

The Employer agrees to contribute the maximum dollar amounts listed below, per month, toward the employee and dependent medical insurance premium cost for County approved plans, for all regular employees who have completed thirty (30) days of continuous service.

Effective January 1, 2023, through December 31, 2024 the County agrees to pay a maximum of:

Employee Only	\$1,000.00
Employee & Spouse	\$1,234.73
Employee & Child(ren)	\$1,087.49
Employee & Family	\$1,676.44

monthly toward the employee’s County approved medical only insurance plan through the Public Employees Benefits Board Program. Any greater cost difference in the cost of the employee’s selected health plan above the described amount of the County contribution above, will be the sole responsibility of and at the expense of the employee.

Any amount in excess of the insurance premium will be contributed to a Health Reimbursement Arrangement (HRA) via a Voluntary Employees’ Beneficiary Association (VEBA), in the name of the employee. In the event that an employee’s spouse also works for Lincoln County and one or both of those individuals are covered under this agreement, each individual may choose from the following options:

Option 1: Spouse A covers both employees under Employee & Spouse or Employee & Family, And Spouse B receives County contribution under Employee Only level of the same plan, towards the total cost of Spouse A’s chosen plan. Any amount in excess of the insurance premium will be contributed to an HRA VEBA in the name of Spouse B.

Option 2: Spouse A covered under Employee & Spouse or Employee & Family, and Spouse B receives the current HRA VEBA contribution.

Option 3: Spouse A covered under Employee Only and Spouse B Covered under Employee Only. Any respective excess in the chosen plan will be contributed to an HRA VEBA in each employee’s name.

Option 4: Employees with a Spouse covered under the Sheriff's Office, Teamsters IETT Medical Plan, shall be enrolled in the HRA VEBA plan.

Employees may decide not to take county provided insurance through PEBB, on the condition that they provide proof of alternate insurance that complies with the minimum requirements for coverage as outlined in the County Policy and Procedures Manual. If an employee elects not to sign up for County approved medical insurance, \$800.00 monthly will be contributed to a Health Reimbursement Arrangement (HRA) via a Voluntary Employees' Beneficiary Association (VEBA), which will be in the employee's name. It is understood that the union proposed, voted on and selected the provisions of this article and their selection shall not be automatically amended or otherwise affected by the selection of different options by other County bargaining units or other groups of employees.

Both parties agree that a medical opener for medical insurance will be part of the contract negotiation for 2024.

Both parties agree that the County will provide a benefit to each full time employee to enroll in the LifeFlight Network Membership Program for the life of the contract.

Dated this 8th day of November, 2022.

LOCAL 1254 UNION:

Jim Buchanan, President

Scott Davies, Representative
WSCCCE, AFSCME



BOARD OF LINCOLN
COUNTY COMMISSIONERS

Scott M. Hutsell, Chairman

Rob Coffman, Vice Chairman

Mark R. Stedman, Commissioner

Approved to Form:

Adam Walser, Prosecuting Attorney