

RESOLUTION

BEFORE THE BOARD OF COMMISSIONERS OF BENTON COUNTY, WASHINGTON

IN THE MATTER OF ADOPTING HEALTH REIMBURSEMENT ARRANGEMENT (HRA) VOLUNTARY EMPLOYEE BENEFICIARY ASSOCIATION (VEBA) POLICIES AND PROCEDURES FOR ELECTED OFFICIALS AND BENTON COUNTY FULL TIME BENEFIT ELIGIBLE NON-BARGAINING EMPLOYEES AND RESCINDING RESOLUTION 2016-397.

WHEREAS, Resolution 2016-397 established the policies and procedures for Elected Officials and Benton County full time benefit eligible non-bargaining employees; and

WHEREAS, Benton County seeks to change the monthly contribution amount from \$250 to \$300; **NOW, THEREFORE**

BE IT RESOLVED, that the Board of Benton County Commissioners authorize the Human Resources Manager to sign the Plan Design Change Form to reflect Elected Officials and Benton County full time benefit eligible non-bargaining employees monthly contribution shall be \$300 per month effective October 1, 2019; and,

BE IT FURTHER RESOLVED, that the Board of Benton County Commissioners retains the right to modify or repeal this determination at their discretion and without prior notification to employees, unless written resolution or employment contract for a particular position provides otherwise; and

BE IT FURTHER RESOLVED, that this Resolution, the HRA VEBA Plan, and/or the HRA Veba policies and procedures is not intended nor shall it be interpreted as limiting or compromising the County's "at will" employer status; and

BE IT FURTHER RESOLVED, that Resolution 2016-397 be rescinded.

Dated this 24th day of September 2019.

Chairman of the Board

JAMES BEAVER-ABSENT

Member

Member

Constituting the Board of Commissioners of Benton County, Washington

Attest Marile Flores
Clerk of the Board

Plan Design Change



HW12 8/17 PRC

Submit completed form to: dawson_mortimore@ajg.com | (509) 838-5613 fax
HRA VEBA Plan Consultant: Arthur J. Gallagher & Co., 906 West 2nd Avenue, Suite 400, Spokane WA 99201

From time to time, employers make changes to their HRA VEBA Plan program such as adding new groups, adding new funding methods, changing existing funding methods, adding an employer account, etc.

Prior to adopting and implementing such changes, employers must complete and submit this form with required attachments. If an employer's proposed plan design violates applicable IRS rules or guidelines pertaining to proper HRA plan design, participation will not be accepted by the HRA VEBA Plan.

Also, when groups renew participation without making any changes, please send copies of collective bargaining language or other documents to Arthur J. Gallagher & Co. This will help keep current information on file for you.

EMPLOYER INFORMATION

Benton County

YA251

EMPLOYER NAME

EMPLOYER ID NUMBER

7122 W Okanogan Place, Building A

Kennewick

WA 99336

MAILING ADDRESS

CITY

STATE

ZIP

2 AUTHORIZING SIGNATURE (REQUIRED)

Lexi Wingfield
AUTHORIZED SIGNATURE on behalf of Employer

10/9/2019

DATE MM/DD/YYYY

Lexi Wingfield

HR Manager

PRINTED NAME

TITLE

lexi.wingfield@co.benton.wa.us

509-737-2777

EMAIL ADDRESS

AREA CODE and PHONE NUMBER

TYPE OF CHANGE (CHECK AND COMPLETE ALL THAT APPLY)

- Definition of eligibility change New funding method(s) Change to existing funding method(s) or amount(s)
 Addition of employer account Other (describe below)
 New participating union/employee group

Number of employees in group: _____

Name of new participating union/employee group: _____

Describe: Change monthly contribution rate to \$300 per month effective October 1, 2019, for Elected Officials and Benton County full time benefit eligible non-bargaining employees

4 REQUIRED ATTACHMENTS

Please attach the following:

1. A copy of formal action taken to change or amend your original HRA VEBA Plan adoption, if any;
2. An updated list of participating unions/employee groups; and
3. Applicable excerpts from collective bargaining agreements, employer policies, etc. that define employee eligibility, funding source(s) or formula(s), and any vesting requirements.

Employers are responsible for tracking when an employee becomes eligible to file claims due to separation from service or retirement and/or after having met the employer's vesting requirements (if any).

QUESTIONS? dawson_mortimore@ajg.com | 1-800-888-VEBA (8322)