ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team at MileHighOrdinance@DenverGov.org by **3:00pm on Monday.**

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

				Date of Request: June 29, 2018
Please mark one:		Bill Request	or	☐ Resolution Request
1.	Has your agency	submitted this request in	n the last 12 m	nonths?
	☐ Yes	⊠ No		
	If yes, please	explain:		
2.	•	modify the city's 2019 cont hapter 18, Article VI, Division		e medical insurance and wellness vised Municipal Code.
3.	Requesting Ager	ocy: Office of Human	Resources	
4.	Name: HeatherPhone: 720-91		oosed ordinance,	/resolution.)
5.	• Name: Heather Phone: 720-91	ill be available for first and see er Britton		/resolution <u>who will present the item at Mayor-</u> f necessary.)
6.	General descript	ion of proposed ordinanc	e including c	ontract scope of work if applicable:
	Insurance Co	mmittee (EHIC), the Office	e of Human R	ns – On behalf of the Employee Health esources (OHR) respectfully requests the nd County of Denver benefit premiums that

1. For enrollees in the HDHP plans, the City should pay monthly: 94.5% of the employee only premium, 87% of the employee plus spouse premium, 89.5% of the employee plus child(ren) premium and 84.5% of the family premium.

For Civilian and Sheriff employees, the City should subsidize the monthly premiums as follows

were approved at the June 21, 2018 Career Service Board Public Hearing as follows:

(also summarized in the pages proceeding this posting):

2. For enrollees in the DHMO plans, the City should pay monthly: 84% of the employee only premium, 76.5% of the employee plus spouse premium, 79% of the employee plus child(ren) premium and 74% of the family premium.

2019 Wellness Incentive – On behalf of the Employee Health Insurance Committee (EHIC), the Office of Human Resources respectfully requests the approval of the following wellness incentive structure:

- 1. For eligible DHMO civilian and sheriff participants who complete the established requirements of the wellness program administered by the Office of Human Resources prior to the program deadline of November 30, 2018, the City will provide a \$50 per month premium reduction in 2019, up from \$25 per month provided in 2018.
- 2. For eligible HDHP civilian and sheriff participants who complete the established requirements of the wellness program, administered by the Office of Human Resources, prior to the program deadline of November 30, 2018, the City will provide an annual contribution of \$600 in 2019, up from \$300 annually provided in 2018.

Eligible employee definition – OHR respectfully requests the an update to ordinance to reflect the intention of OHR to provide consistent benefits to all eligible employees.

7. Is there any controversy surrounding this ordinance? (groups or individuals who may have concerns about it?) Please explain.

There is no controversy surrounding this ordinance.

Executive Summary:

This is part of the annual approval process OHR conducts every year in conjunction with the City's annual budget process and open enrollment.

DHMO – Monthly Rates

	Tier	2018 City Share	2018 Employee Cost/month	Increase needed by Insurer	2019 City Share	2019 Employee Cost/month
	Employee Only	85%	\$81.70	5.37%	84%	\$91.83
Ser	Employee + Spouse	77.5%	\$269.62	5.37%	76.5%	\$296.72
Kaiser DHMO	Employee + Children	80%	\$217.87	5.37%	79%	\$241.05
	Family	75%	\$435.75	5.37%	74%	\$477.51
e	Employee Only	85%	\$107.47	5.65%	84%	\$121.11
UHC	Employee + Spouse	77.5%	\$354.66	5.65%	76.5%	\$391.35
UHC	Employee + Children	80%	\$286.60	5.65%	79%	\$317.93
Z	Family	75%	\$573.29	5.65%	74%	\$629.90
	Employee Only	85%	\$104.07	7.73%	84%	\$119.59
M M	Employee + Spouse	77.5%	\$343.42	7.73%	76.5%	\$386.42
DHMP	Employee + Children	80%	\$277.51	7.73%	79%	\$313.91
	Family	75%	\$573.29	7.73%	74%	\$621.85



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HDHP – Monthly Rates

		Tier	2018 City Share	2018 Employee Cost/month	Increase needed by Insurer	2019 City Share	2019 Employee Cost/month
	Kaiser HDHP	Employee Only	95%	\$21.97	5.45%	94.5%	\$25.48
(Employee + Spouse	87.5%	\$120.82	5.45%	87%	\$132.50
2		Employee + Children	90%	\$87.87	5.45%	89.5%	\$97.29
		Family	85%	\$210.85	5.45%	84.5%	\$229.75
9	инс нрнр	Employee Only	95%	\$34.21	5.65%	94.5%	\$39.76
5		Employee + Spouse	87.5%	\$188.18	5.65%	87%	\$206.76
		Employee + Children	90%	\$136.86	5.65%	89.5%	\$151.82
		Family	85%	\$328.44	5.65%	84.5%	\$358.57
	рнмр НБНР	Employee Only	95%	\$25.96	7.73%	94.5%	\$30.77
2		Employee + Spouse	87.5%	\$142.80	7.73%	87%	\$160.00
2		Employee + Children	90%	\$103.86	7.73%	89.5%	\$117.48
		Family	85%	\$249.26	7.73%	84.5%	\$277.48



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