MEMORANDUM OF UNDERSTANDING BETWEEN THE SAN ANTONIO POLICE OFFICERS' ASSOCIATION & THE CITY OF SAN ANTONIO, TEXAS

The San Antonio Police Officers' Association (SAPOA) enters into the following Memorandum of Understanding (MOU) with the City of San Antonio in conjunction with the Collective Bargaining Agreement, more in particular, Article 30 – Health Benefits, Section 6, that became effective May 12, 2022.

The SAPOA and the City of San Antonio shall be referred to collectively as the "Parties."

Background: The Collective Bargaining Agreement between the Parties reflects that the Annual Deductible under the Police Consumer Driven Health Plan ("CDHP) for an Individual is \$3,000 and \$6,000 for a Family Plan. Included in the Family Plan is an Individual Deductible of \$3,000.

Revised CDHP Individual Deductibles and Health Savings Accounts Contributions: New IRS regulations require an increase of the amount of that Individual Deductible within the Family Plan of \$200 to \$3,200 effective January 1, 2024. In light of that requirement, the Parties agree that the Individual Deductible within a Family plan will increase to \$3,200. At the request of SAPOA to treat all members equally, the Individual Deductible, outside of the Family plan, will also increase by \$200 to \$3,200.

To mitigate the effects of the IRS required change, the City will contribute an additional amount of \$175 to the Health Savings Accounts for the total sum of \$1,675.00 each calendar year beginning January 1, 2024 for all officers under the Police Consumer Driven Health Plan ("CDHP") only.

Article 30 Section 6, Effective January 1, 2024:

Effective January 1, 2024, Article 30 Section 6 will reflect the two health plans with plan designs and employee contributions described below:

Cost Sharing Item		VAL	UE PLAN	CDHP		
		IN Network.	Out of Network	IN Network.	Out of Network	
Annual Deductible	Individual	\$500	\$1,500	\$3,200	\$4,500	
	Family	\$1,000	\$3,000	\$6,000 ¹	\$9,000	
Coinsurance Percentage	THE RESERVE SAME AND THE	20%	40%	0%	0%	
Max. Out-of- Pocket (Includes	Individual	\$1,500	\$3,000	\$3,200	\$4,500	
deductible and co- pays)	Family	\$3,000	\$6,000	\$6,000	\$9,000	
Office Visit Co-Pay		\$25 PCP-\$50 SPEC	40% after deductible	0% after deductible	0% after deductible	
Emergency Room Co-Pay		\$250	40% after deductible	0% after deductible	0% after deductible	
Urgent Care Center Co-Pay	e i a sere ariossa acteur	\$50	40% after deductible	0% after deductible	0% after deductible	
o al statistico a	Separate Brand Drug Deductible or out of pocket cap	\$100	40% after deductible	0% after deductible	0% after deductible	

¹ In the CDHP Family Plan, the maximum annual deductible for one Individual is \$3,200.



Pharmacy	Rx - 30 day Tier 1/Tier 2 / Tier 3	\$10/\$25/\$40		0% After Ded. Preventive Drugs Subject to Co-Pay \$10/\$25/\$40	
	Rx - 90 day Tier 1/ Tier 2 / Tier 3	\$20/\$50/\$80	if, to a talky water	0% After Ded. Preventive Drugs Subject to Co-Pay	essent sail of
ger (1.1911 A.) A.S. Semenaud verklass	i ilijev postavana Samanas prikasa			\$20/\$50/\$80	ambattarkildika id Jawa i satuaksala

The two plans are covered in detail in Attachment 5 and the Master Contract Document (Attachment 6) which are the controlling documents. Effective January 1, 2024, the Health Savings Account Annual Contributions (only for CDHP) shall increase by \$175 as reflected below and shall be reflected in CBA ATTACHMENT 5 – BENEFITS as noted below:

KILLE HERD			Empl	oyee Mon	thly Contr	ibutions				Marine.
	2022		2023		2024		2025		2026	
	<u>Value</u>	<u>CDHP</u>	<u>Value</u>	<u>CDHP</u>	Value	CDHP	Value	CDHP	Value	CDHF
EE Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
EE & Spouse	\$121.12	\$0.00	\$133.23	\$0.00	\$146.56	\$0.00	\$161.22	\$0.00	\$177.34	\$0.00
EE & Children	\$81.19	\$0.00	\$89.31	\$0.00	\$98.24	\$0.00	\$108.06	\$0.00	\$118.87	\$0.00
EE &Family	\$200.98	\$0.00	\$221.08	\$0.00	\$243.19	\$0.00	\$267.51	\$0.00	\$294.26	\$0.00

Health Savings Account Annual Contributions (only for CDHP)								
america (Alicelo	2022	2023	2024	2025	2026			
(2-86-c) (1-96-c) (1-96-c)	Value / CDHP	Value / CDHP	Value / CDHP	Value / CDHP	Value / CDHP			
EE Only	\$0.00 /\$1,500.00	\$0.00 /\$1,500.00	\$0.00 /\$1,675	\$0.00 /\$1,675	\$0.00 /\$1,675			
EE & Spouse	\$0.00 /\$1,500.00	\$0.00 /\$1,500.00	\$0.00 / \$1,675	\$0.00 / \$1,675	\$0.00 /\$1,675			
EE & Children	\$0.00 /\$1,500.00	\$0.00 /\$1,500.00	\$0.00 / \$1,675	\$0.00 /\$1,675	\$0.00 /\$1,675			
EE & Family	\$0.00 /\$1,500.00	\$0.00 /\$1,500.00	\$0.00 / \$1,675	\$0.00 /\$1,675	\$0.00 /\$1,675			

Health Savings Account Contributions for **CDHP** will continue during evergreen. Employee contributions beyond 2026 will increase by 10% annually during evergreen.

The above years are plan (currently calendar) years. Employee monthly contributions will increase by 10% over the prior year's contribution every year during the life of the agreement (including during evergreen). Out of network claims will be capped at the in network allowable amounts under both the Value and CDHP plans.

CBA ATTACHMENT 5 - BENEFITS (page 134 of CBA)

Provides in part:

(Voluntary	Health Sa employee co	vings Accou ntributions	may be ma		ible Spend			oloyee is not
	20	2023		024	2	025	2	2026
	<u>Value</u>	CDHP	<u>Value</u>	<u>CDHP</u>	<u>Value</u>	<u>CDHP</u>	<u>Value</u>	<u>CDHP</u>

2083

EE Only	\$0.00	\$1,500.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00
EE & Spouse	\$0.00	\$1,500.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00
EE & Children	\$0.00	\$1,500.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00
EE & Family	\$0.00	\$1,500.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00	\$0.00	\$1,675.00

Signed and agreed to by the duly authorized representatives of the Parties on this of <u>October</u> , 2023.	13th	day
of October, 2023.		

FOR THE SAPOA:

Danny Diaz, President

10-13-23

Date

Ronald G DeLord, Counsel

Date

FOR THE CITY: WM

Erik J. Walsh, City Manager

Date

Andy Segovia, City Attorney

Date

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