

THE BOARD OF COMMISSIONERS
OF
GRAND TRAVERSE COUNTY
FOR
GRAND TRAVERSE COUNTY HEALTH DEPARTMENT
AND
MICHIGAN FRATERNAL ORDER OF POLICE LABOR COUNCIL

HEALTH BARGAINING UNIT

WHEREAS, the parties are signatories to a Collective Bargaining Agreement with a term of January 1, 2020 through December 31, 2021.

WHEREAS, the parties agree to increase the employer's HSA contribution to eligible employee's HSA account for 2020 to a total for the year from \$2,000.00 to \$2,500.00 for family and double coverage; and

WHEREAS, the parties agree to increase the employer's HSA contribution to eligible employee's HSA account for 2020 to a total for the year from \$1,000.00 to \$1,250.00 for single coverage.

THEREFORE, it is agreed as follows:

1. For those employees enrolled in the Health Savings Account (HSA) plan the payroll period after January 1, 2020, each employee will receive a total payment for 2020, subject to the requirements of 2011 PA 152, to their HSA account as follows:

- a.) \$1,250.00 for single subscriber coverage; or
- b.) \$2,500.00 for family and double subscriber coverage.

This amount will be pro-rated based on the number of hours the employee is regularly scheduled to work and the eligible months of service.

2. The parties acknowledge and agree that the coverage status of the eligible employee on the date of the first payment for 2020 will be used to determine the amount

of the additional funds deposited; specifically, an additional \$250 for single coverage or \$500 for family and double coverage.

3. The Employer will deposit the additional funds as follows: the additional amount due from the first quarter payment will be included with the increased amount for the second quarter (50% of total) with the remaining increase paid in a equal percentage (25% each) over the third and fourth quarter payments (e.g. payments of \$375/single and \$750/family respectively for the second quarter and then \$312.50/single and \$625/family for the third and fourth quarter payments).

4. All other terms of the collective bargaining agreement between the parties will govern the terms and conditions of employment for the employees. It is expressly understood that this Letter of Understanding will be without precedent or prejudice for any future circumstances.

IN WITNESS WHEREOF the parties hereto by their duly authorized representatives agree to this Letter of Understanding effective the date it is fully executed.

FOR THE EMPLOYER

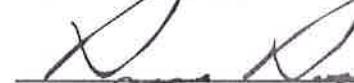


Rob Hentschel, Chairperson Date
Board of Commissioners



Nate Alger, Administrator Date
Grand Traverse County

FOR THE UNION



Paul Postal Date
Business Representative

Approved as to Form
For County of Grand Traverse
Cohl, Stoker & Toskey, P.C.
By: Mattis D. Nordfjord