

**MEMORANDUM OF UNDERSTANDING BETWEEN THE
CITY OF NORTH MIAMI AND THE DADE COUNTY
POLICE BENEVOLENT ASSOCIATION, INC.**

This Memorandum of Understanding (“MOU”) is entered into this 3 day of December 2018 by the City of North Miami, Florida, a Florida municipal corporation (the “City”), and the Dade County Police Benevolent Association (“PBA”) (collectively referred to as the “Parties”).

WHEREAS, the City and PBA are parties to a Collective Bargaining Agreement (“CBA”) for the period October 1, 2018 through September 30, 2021 covering the City’s police officers and sergeants (“Bargaining Unit Employees”); and

WHEREAS, Article 30 of the CBA provides sets forth the Parties’ agreement as it relates to employee access to City sponsored health insurance; and

WHEREAS, Article 30, Sections 2 and 3 detail that employees pay a weekly contribution for health insurance and the City subsidizes the balance of the premium; and

WHEREAS, the Parties have agreed that, for the 2019 calendar year, weekly premiums will be waived and the City will increase its monthly health insurance subsidy.

NOW, THEREFORE, the Parties intending to be legally bound, do hereby stipulate and agree as follows:

1. The above recitals are true and correct and incorporated herein by reference.
2. Article 30, Sections 2 and 3 of the CBA are amended as follows:¹

* * *

2. INDIVIDUAL COVERAGE.
 - a. The City will pay Single coverage as follows:
 1. Single health Coverage (HMO): The employee will pay \$10.00 per week for single health coverage, except that this weekly payment

¹ Proposed additions to the CBA are indicated by underline and deletions indicated by ~~strike~~.

will be waived for the entire 2019 calendar year (January 1, 2019 through December 31, 2019). The City will pay the balance of the monthly medical premium for the individual coverage of each bargaining unit member who elects such coverage. If the employee selects the lowest cost HMO plan. Employee pays the difference for higher HMO plan.

2. Single Coverage (POS): The employee will pay \$10.00 per week for single health coverage, except that this weekly payment will be waived for the entire 2019 calendar year (January 1, 2019 through December 31, 2019). The City will contribute the amount of the Single Coverage HMO medical premium to the medical premium for the individual coverage of each Bargaining Unit members who elect coverage under the POS plan. The employee shall pay the difference between the Single Coverage HMO medical premium and the Single Coverage POS medical premium plus the additional \$10.00 per week, though this \$10 payment will be waived for the entire 2019 calendar year.

3. DEPENDENT COVERAGE.

a. HMO Dependent Coverage: The City will contribute the equivalent of its share of the Single HMO medical premium toward HMO Couple and Family coverage for bargaining unit members who elect such coverage. Through the duration of this Contract, except as modified for the 2019 calendar year, the City will additionally contribute \$150.00 per month toward the dependent medical premium for HMO Couple employee and spouse/partner or employee and child(ren) coverage and \$250.00 per month toward the dependent medical premium for HMO Family coverage for members who elect such coverage. For the 2019 calendar year, the City will increase its monthly contribution to \$200.00 per month for HMO Couple employee and spouse/partner or employee and child(ren) coverage and \$350.00 per month toward the dependent medical premium for HMO Family coverage. See Appendix "C".

b. POS Dependent Coverage: The City will contribute the equivalent of its share of the cost of the Single HMO medical premium toward POS Couple Child(ren) and Family coverage for Bargaining Unit members who elect such coverage. For the duration of this Contract except as modified for the 2019 calendar year, the City will additionally contribute \$150.00 per month toward the dependent medical premium for POS Couple Child(ren) coverage and \$250.00 per month toward the dependent medical premium for POS Family coverage for members who elect such coverage. For the 2019 calendar year, the City will increase its monthly contribution to \$200.00 per month for POS Couple Child(ren) coverage and \$350.00 per month for POS Family coverage. See Appendix "C".

* * *

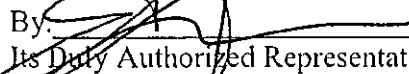
3. This MOU only modifies portions of Articles 30 of the CBA (as detailed herein) and does not modify any other sections or Articles contained in the CBA, nor shall any

other modification not mentioned herein be incorporated into any successor CBA between the Parties unless mutually agreed to in writing.


4. If the Parties ratify a successor collective bargaining agreement that contradicts this MOU, the terms of the ratified successor collective bargaining agreement shall apply and this MOU shall be of no force and effect.
5. The Parties agree that this MOU represents the Parties' entire agreement and it cannot be amended or modified without the express consent of the Parties.
6. The Parties signify their agreement with this MOU by affixing their signatures below.
7. This MOU shall become effective upon the execution by the Parties.

IN WITNESS WHEREOF, the parties hereto have made and executed this MOU on the respective dates under each signature: City, signing by and through its City Manager, attested to and duly authorized to execute same by the City Council of the City of North Miami and by the Union, by and through its appointed representative, attested to and duly authorized to execute same.

DADE COUNTY PBA


By: 
Its Duly Authorized Representative

ATTEST:




Michael A. Etienne, Esq.
City Clerk

CITY OF NORTH MIAMI


By: 

Larry M. Spring, CPA
City Manager

APPROVED AS TO FORM:



Jeff P. H. Cazeau, Esq.
City Attorney

To: The Honorable Mayor and City Council
From: Joseph Roglieri, Jr., Personnel Director 
Date: November 13, 2018
RE: Memo of Understanding/PBA Collective Bargaining Agreement

RECOMMENDATION

Approve the terms of the Memorandum of Understanding between the City of North Miami and the PBA.

BACKGROUND

We have reached an agreement with the PBA for a memorandum of understanding concerning the increase in the amount of the City's contribution towards employee and dependent health insurance for calendar year 2019. The following is a summary of the MOU:

- Waive \$10 weekly cost for employee only coverage.
 - Increase City contribution towards employee and spouse and employee and children coverage from \$150 to \$200.
 - Increase City contribution towards family coverage from \$250 to \$350.
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COSTS

The cost for the above increases based on current utilizations is \$78,155, which is a portion of the savings achieved through this year's carrier change process.

ATTACHMENT(s)

The MOU is attached.