





**“We don’t offer health care, but we’ll validate parking at the Free Clinic.”**

medical services don't qualify for minimal essential coverage and if you have only these types of coverage, you may have to pay the fee.

In general, employees who are offered health insurance that is "affordable and meets minimum value" through their employers are not eligible for subsidized health insurance through the Marketplace, subject to two important exceptions: 1) Your employer's health plan covers less than 60 percent of the cost of covered benefits, or 2) Your share of the employer's premium amount you must pay for coverage for an *individual employee* costs over 9.5 percent of your household income. If you are a family member of an employee who has an offer of health coverage through his or her employer, whether that plan is affordable is still determined based on the cost of coverage for an *individual employee*, even though family coverage may be more expensive. If either exception applies, you may enroll in a plan through the Marketplace.

Most people that have job-based health insurance will keep it. Employees that have job-based health insurance are considered covered and will not have to change to a Marketplace plan in order to avoid the fee that uninsured people will have to pay in 2014. If you are not satisfied with the insurance your employer offers, and want to consider a Marketplace plan, you should be aware that with most job-based health insurance plans, your employer pays a portion of your premiums. If you choose a Marketplace plan instead, your employer does not need to make a contribution to your premiums.

If you apply for coverage through [www.healthcare.gov](http://www.healthcare.gov), you will find out if you are eligible for Marketplace plans. When you get health

insurance coverage in the Marketplace, you may be able to get lower costs on monthly premiums. This depends on your income and family size. These lower costs are handled with a tax credit called Advance Premium Tax Credit that can be applied directly to your monthly premiums, so you don't have to wait until you file taxes to get the savings.

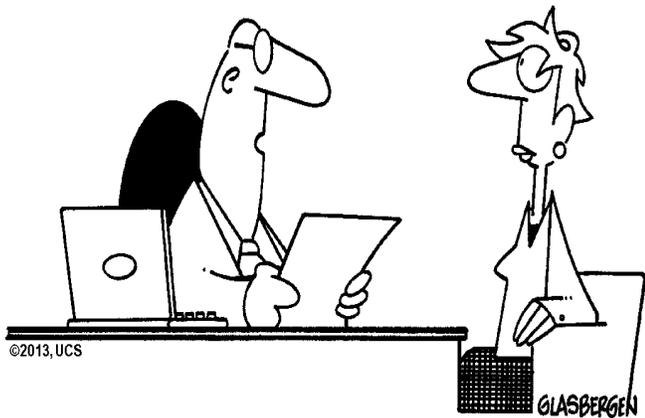
After open enrollment ends on March 31, 2014, those eligible for Marketplace plans won't be able to get health coverage through the Marketplace until the next annual enrollment period unless they have a qualifying life event. Qualifying life events include: moving to a new state, changes in family size (getting married, divorced, or having a baby), or certain changes in income.

### **PGO Council 10 Negotiates Raises**

Following prolonged negotiations, PGO represented Child Welfare Caseworkers in Greene County have approved salary increases for the last two years of their three year collective bargaining agreement. Reopener negotiations began in January and weren't settled until a third and final session conducted by a SERB fact finder on August 1<sup>st</sup>. The agreement will provide a two percent salary increase retroactive to May 18<sup>th</sup> this year and another two percent increase the first pay period in February, 2014.

Many thanks goes out to the Union bargaining committee members for their patience and hard work: **Jennifer Otto**, council president; **Shane Caldwell**, vice president; **Karen Kibler**, secretary/treasurer; **Elizabeth Jackson**, PGO delegate; **Greg Yoxthimer**, PGO delegate; **Kate Mezera** immediate past president; **Beth Keller**; immediate past vice president and, **Chauncey Mason**, PGO executive director.





“If you are willing to take a 25 percent pay cut, I’m willing to give you a 10 percent raise!”

**PGO Council 14 Settles Negotiations Dispute**

It wasn’t easy, but PGO members working at the Aurora Academy of Toledo recently ratified an agreement that sets wages and insurance benefits for the 2013-2014 contract year. Negotiations had been going smoothly until the Aurora Board of Education rejected the tentative agreement with the Union last June. In response, the Union filed an Unfair Labor Practice Charge when the board unilaterally implemented changes to the insurance plan and failed to provide experience step increases at the beginning of the school year. Fortunately, the parties were able to resolve their differences settling both the contract negotiations and the ULP.

Returning members will receive a one-year two percent service step increase retroactive to the beginning of the school year. As part of the health insurance cost containment effort, Union members agreed to increase deductibles and co-pays to reduce premium costs.

The Union was represented by Council 14 President **Kimberlie Todd** and PGO Executive Director **Chauncey Mason**.

**PGO Council 15 Approves New CBA**

PGO represented Correctional Officers working at the Lucas County Correctional Treatment Facility have approved a new two-year contract covering July 1, 2013 through June 30, 2015. The agreement

will provide step increases of four and one-half to five percent to eligible employees. Negotiations will be reopened in 2014 to determine wages for the 2014-2015 contract year.

The maximum amount of compensatory time that can be accrued by members was increased from twenty-one hours to thirty-five hours. And, there will be a reduction in the length of time that disciplinary action remains active in a member’s personnel file: written reprimands were reduced from two years to one year; and, suspensions were reduced from three years to two years.

Members of the Union’s bargaining committee were **Henry King**, council president, **Jason Brown**, steward and **Chauncey Mason**, PGO executive director.

**PGO Council 16 Settlement**

PGO members working at the Athens Board of Developmental Disabilities have ratified a new two-year contract. Among other things, the agreement will provide eligible members with a wage step increase both years while members at the top of the salary schedule will receive a 2.5 percent raise in 2013 and 2014. Medical insurance coverage was maintained at current levels but deductibles were increased from \$100/\$200 to \$200/\$400.

During negotiations, the Union was represented by Council President **Mark Shrivvers**, Vice President **Audra Harrison**, Second Vice President **Greg Brown** and PGO Executive Director **Chauncey Mason**.



“I have all my money tied up in breakfast.”

**OPERS: Pension and Health Care Changes**

*By Nicole Jackson, Esq., PGO Field Representative*

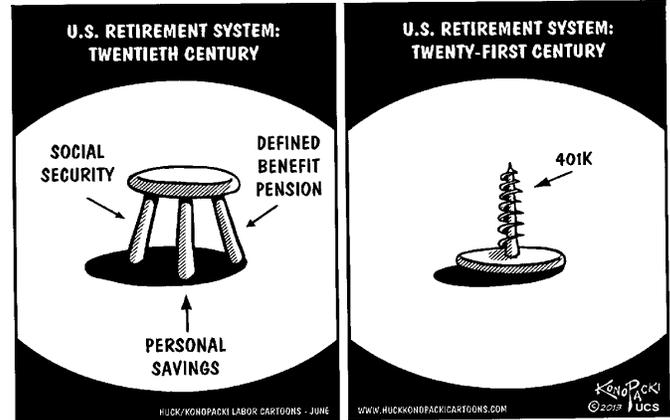
In order to stay within the statutory 30 year funding requirements, in September 2012, the Ohio Legislature unanimously passed S.B. 343 approving changes to the OPERS pension plan. At the same time, OPERS made changes to its health care plan for retirees. The pension changes took effect January 7, 2013, and most of the health care benefit changes will take effect January 1, 2015. One of the biggest changes to OPERS (the Ohio Public Employees Retirement System) is the new retirement transition groups that establish minimum age and service eligibility.

In the past, employees that obtain 30 years of service were eligible for unreduced benefits no matter what age they retired. Now, there are three transition groups that establish minimum age and service eligibility. Group A is public employees that are closest to retirement, within 0-5 years of retirement; Group B is public employees within 10 years of retirement, or have already acquired 20 years of service; and Group C is those public employees that do not fall within Group A or B.

There is also a change in the minimum earnable salary to earn full-time credit. Some part-time public employees may find that they no longer qualify for 100 percent benefits when they retire because of these changes. The minimum earnable salary to earn full-time credit is now \$600/month, an increase from the \$250/month in the past.

The law also changes the cost of living adjustment (COLA), modifying the annual COLA from a fixed simple three percent each year, to a COLA formula based on the Consumer Price Index, not to exceed three percent. The final average salary (FAS) of a retiree is now calculated using the final average salary of highest five years salary instead of the highest three years.

Also, in September of 2012, the OPERS Board of Trustees adopted a set of changes to the OPERS health care plan that will allow OPERS to continue offering retirees access to health coverage. However, in March of 2013, the Board voted to delay the effective date of some of these changes.



Health care eligibility requirements will now begin Jan. 1, 2015. This means if your effective date for retirement is Jan. 1, 2015 or later, you must have at least 20 years of qualifying service and be age 60 or have 30 or more years of qualifying service at any age to qualify for OPERS health care coverage. Those in pension transition Group B will need 31 years of service and those in Group C will need 32 years of service to qualify for health care coverage.

A complete summary of the changes, and the Transition Plan grid can be found at [www.opers.org](http://www.opers.org).

**PGO Council 13 Elects Officers**

Lucas County Children Services members have elected officers to serve for the next two years. Re-elected officers include: President **Joe DeStazio**; Executive Vice President **Lynn Pinkelman**; Professional Vice President **Dave Rudebock**; Clerical Vice President **Amy Kunkel**; Service Vice President **Mike Hiltman**; and, Secretary **Joy Taylor**. **Regina Garmon-Brown** is the new council treasurer replacing **Nancy Reineke**. PGO congratulates all these officers and thanks Nancy for her loyal service as council treasurer.



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