



OFFICE OF
LABOR RELATIONS

CITY OF SACRAMENTO
CALIFORNIA

921 10TH STREET
ROOM 601
SACRAMENTO, CA
95814-2711

PH 916-264-5424
FAX 916-264-8110

November 3, 1997

Lt. Steve Campas, President
Sacramento Police Officers Association
201 Lathrop Way Suite I
Sacramento, CA 95815

Re: Modification of Definition of Child for Health Insurance

Dear Steve:

This is to confirm the agreement of the City of Sacramento and Sacramento Police Officers Association to modify the definition of child to include grandchild for health and dental insurance purposes for employees in the Police Department Unit.

Specifically, it is agreed to define child and implement eligibility requirements as follows:

1. The definition of dependent children for purposes of health and dental insurance shall be an unmarried dependent children from birth to age 24 if the child qualifies as an exemption under Internal Revenue Service rules and regulations. Dependent children include grandchildren living in the grandparent's home, step-children, adopted children, wards and foster children provided they qualify as Subscriber's or Subscriber's lawful spouse's dependent under Internal Revenue Service rules and regulations.
2. There shall be no change to the standard wording for medical child support order and coverage of mental and physically handicapped children.
3. The following guidelines shall be applicable to include grandchildren on the City's insurance:
 - a. The employee must provide the City with an affidavit swearing that the child is the employee's grandchild who resides with the employee and for whom the employee is financially responsible and the employee claims the child on his income tax return as a legitimate tax exemption.

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Steve Campas

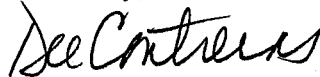
Re: Definition of Child

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- b. The employee agrees to provide upon request by the City a copy of the employee's income tax return claiming the child as an exemption.
- c. In addition to the information required in 3(b) above, the employee must provide a copy of the employee's tax return claiming the child as an exemption at the time the employee enrolls the child if the grandparent is currently claiming the child on his/her tax return or at the end of the first year in which the employee claims the child as an exemption on the income tax return.
4. The grandchild may be removed from the grandparent's coverage at open enrollment; and shall be removed when the child no longer resides with the employee, and, the employee is no longer financially responsible for the child, and, the employee no longer claims the child on his/her income tax return as a legitimate tax exemption; when the child marries; or, when the child reaches the maximum age as defined in the contract between the City and the carrier.
5. The inclusion of grandchildren in the definition of children applies only to the medical and dental plans offered through the City of Sacramento and the inclusion of grandchildren in the definition of children does not apply to the definition of child or children in any other use of the term child in any other of the City's contracts or statutory obligations.

If this is your understanding of the agreement reached, please sign as indicated below and return one copy to my office. I have enclosed an additional copy with original signature for your files.

Sincerely,




Dee Contreras

Director of Labor Relations

AGREED TO:

DATE:



Steve Campas, President
Sacramento Police Officers Association

11-17-97

cc: June Niigata, Benefits Officer



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MEMORANDUM

TO: Recognized Employee Organizations

Re: 1998 Insurance Meeting

This is to follow-up on the issues raised at the meeting on October 27, 1997 regarding changes in insurance to be effective January 1, 1998. The use of city dollars within the Section 125 Cafeteria Plan is authorized for coverage of the grandchild. I have enclosed the letter of understanding for implementation of the expansion of the definition of child to include grandchild for purposes of enrolling the child for health and dental insurance only. Please sign and return the letter to this office by November 14, 1997 to allow employees to benefit from this expanded definition. I have also enclosed a copy of the affidavit which will be used to cover grandchildren within the definition of children.


As agreed to at the meeting, the Delta Dental rates for employees will increase effective January 1, 1998 by five percent (5%) to the following:

Employee	\$26.80
Employee + 1 dependent	53.38
Employee + family	72.28

The Delta Dental rates for retirees will decrease to the following:

Retiree	\$21.02
Retiree + 1 dependent	39.60
Retiree + family	73.00

Please feel free to contact me or the Labor Relations staff if you have any further questions.


Dee Contreras
Director of Labor Relations

cc: June Niigata, Benefits Officer
Tom Sher, Sher Company

City of Sacramento

AFFIDAVIT OF ELIGIBILITY
(Economically Dependent Grandchild)

The City of Sacramento allows for the enrollment of a grandchild (other than natural or adopted child or stepchild) in a City of Sacramento-sponsored health plan when the employee/retiree assumes the responsibilities of the grandchild's parent (a parent-child relationship) and assumes financial support for the grandchild. The grandchild must be unmarried and under the age of 24 years.

I, therefore, swear (or affirm) under penalty of perjury that _____ (grandchild's name), who was born on _____ (date of birth) is my grandchild, resides with me as a member of my household in a parent/child relationship, and that I am responsible for his/her financial support and maintenance. I also swear (or affirm) under penalty of perjury that the above mentioned grandchild is not now, nor has ever been married and came to live with me in my household on _____ (date of acquisition).

I recognize that this affidavit is a legally-binding document and accept responsibility for notifying the City of Sacramento Personnel Services Division immediately if there are any changes pertaining to this grandchild's status as my dependent. I also agree to provide supporting documentation, such as tax, court, or notarized custody records when requested by the City of Sacramento at any time as long as the grandchild is enrolled as my dependent.

Employee/Retiree Signature: _____ Date Signed: _____

Print Name: _____ Social Security No.: _____ - -

Daytime Phone No: (____) _____

Please return this form with your health plan application for enrollment change to Personnel Services Division within 30 days of dependent grandchild's eligibility.

* * * * *

Witness

FOR CITY OF SACRAMENTO USE ONLY

Affidavit received by _____ on _____
(PSD authorized signature)

Medical Plan: _____ Dental Plan: _____

Insurance enrollment effective date: _____

c:gcaff98