NOTICE OF SPECIAL COUNCIL MEETING

Pursuant to Section 7.08 of the Charter of the Village of Oakwood, notice is hereby given of the calling of a **Special Council Meeting** by Mayor Gary Gottschalk to be held on **January 7**th, **2025**, at 6:00 p.m. in the Village Council Chambers, 24800 Broadway Avenue, Oakwood Village, Ohio 44146, to consider the following matter(s):

(See attached Agenda for further information)

In accordance with the provisions contained in the Village Charter no other matters will be considered by Village Council other than those listed herein.

Tanya A. Joseph, Clerk of Council

VILLAGE OF OAKWOOD COUNCIL SPECIAL MEETING

January 7th, 2025 6:00 P.M. AGENDA

Pursuant to Section 7.08 of the Charter of the Village of Oakwood, Mayor Gary Gottschalk is hereby calling a Special Meeting of Village Council to consider the following:

- 1. Call Meeting to Order
- 2. Pledge of Allegiance
- 3. Roll Call

Council President	Erica Nikolic	Mayor	Gary Gottschalk
Council-At-Large	Johnnie A. Warren	Law	James Climer
Ward 1 Councilperson	Taunya Scruggs	Finance	Brian L. Thompson
Ward 2 Councilperson	Eloise Hardin	Service	Tom Haba
Ward 3 Councilperson	Paggie Matlock	Fire	Dave Tapp
Ward 4 Councilperson	Mary Davis	Police	Mark Garratt
Ward 5 Councilperson	Candace S. Hill	Building	Daniel Marinucci
		Engineer	Ed Hren
		Recreation	Carlean Perez

4. To consider Ordinance

2025-01 Introduced 1-7-25 By the Mayor and Council As a whole 1st read 1-7-25 AN ORDINANCE AUTHORIZING THE MAYOR TO ENTER INTO A HEALTH INSURANCE CONTRACT COVERING ELIGIBLE OFFICALS AND EMPLOYEES OF THE VILLAGE AND DECLARING AN EMERGENCY

5. Adjournment

ORDINANCE NO. 2025-01

INTRODUCED BY MAYOR

AN ORDINANCE AUTHORIZING THE MAYOR TO ENTER INTO A HEALTH INSURANCE CONTRACT COVERING ELIGIBLE OFFICALS AND EMPLOYEES OF THE VILLAGE AND DECLARING AN EMERGENCY

WHEREAS, the Council of the Village of Oakwood deems it advisable to provide health insurance for eligible officials and employees of the Village; and,

WHEREAS, Council has reviewed and compared several options for the provision of said health insurance benefits and found the HSA 2500/0 Agg PD Rx SM1 (r22) policy described in Exhibit A attached hereto and incorporated herein to be the option most advantageous to the Village, its officials and employees;

NOW THEREFORE, BE IT RESOLVED by the Council of the Village of Oakwood, County of Cuyahoga, and State of Ohio that:

- **SECTION 1**. The Mayor be and is hereby authorized to enter into a contract for the provision of health insurance benefits with Medical Mutual consistent with the terms described in said Exhibit A.
- **SECTION 2.** Council hereby appropriates and authorizes the expenditure of funds necessary for the payment of the premiums for said policy of insurance as well as Health Savings Account contributions set forth in Exhibit B attached hereto and incorporated herein.
- SECTION 3. This Ordinance is hereby declared to be an emergency measure necessary for the immediate preservation of the public peace, health, safety and welfare of the inhabitants of the Village, the reason for the emergency being that the health insurance policy for eligible officials and employees of the Village must be renewed before January 31, 2025, therefore, provided it receives two-thirds (%) of the vote of all members of Council elected thereto, said Ordinance shall be in full force and effect immediately upon its adoption by this Council and approval by the Mayor, otherwise from and after the earliest period allowed by law.

PASSED:	
	Erica Nikolic, President of Council
Tanya Joseph, Clerk of Council	
	Presented to the Mayor
	Approved:
	Mayor, Gary V. Gottschalk
State of Ohio, do hereby certify that the for	of the Village of Oakwood, County of Cuyahoga and regoing Ordinance No. 2025-01 was duly and regularly on the day of, 2025.
	Tanya Joseph, Clerk of Council
<u>POSTIN</u>	IG CERTIFICATE
State of Ohio, do hereby certify that	of the Village of Oakwood, County of Cuyahoga and Ordinance No. 2025-01 was duly posted on the ain posted in accordance with the Oakwood Village
	Tanya Joseph, Clerk of Council
DATED:	

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EXHIBIT A



Contingent Premium Proposal For:

Village of Oakwood

Rates Effective:

January 1, 2025 - December 31, 2025

Discounted Premium %:

95% 100%

Contingent Premium %: Network

SuperMed Plus

		Stures =						
Standard Plant	Monthly Enrollment		imum es	THE RESERVE	kimum es	13 2 4	led mium	Sign OH/Initia
2020-500 Rx SM1 (r22)		DOMESTICAL STREET	NOW AND ADDRESS OF THE PARTY OF		MENTAL CONTRACTOR CONTRACTOR	CHICAGO CO	DO-9009000000000000000000000000000000000	3720432 3000000000000000000000000000000000
Employee	10	S	820.80	\$	864.00	\$	8,640.00	
Employee + Spouse	4	\$	1,805.75	\$	1,900.79	\$	7,603.16	. Value
Employee + Child(ren)	5	\$	1,477,44	\$	1,555,20	\$	7,776.00	
Family	14	\$	2,462.39	\$	2,591.99	\$	36,287.86	
Total						\$	60,307.02	
3020-1000 Rx SM1 (r22)		147 00 -	racing the same			- 15		
Employee	10	\$	796.33	\$	838.24	\$	8,382.40	
Employee + Spouse	4	\$	1,751.92	\$	1,844.13	\$	7,376.52	
Employee + Child(ren)	5	\$	1,433.39	\$	1,508.83	\$	7,544.15	
Family	14	\$	2,388.98	\$	2,514.72	\$	35,206.08	
Total						\$	58,509.15	L
HSA 3500/0 (r22)			The second of the					
Employee	10	\$	664.12	\$	699.07	\$	6,990.70	
Employee + Spouse	4	\$	1,455.34	\$	1,531.94	\$	6,127.76	11 11 11 11 11
Employee + Child(ren)	5	\$	1,191.62	\$	1,254.34	\$	6,271.70	
Family	14	\$	1,982.85	\$	2,087.21	\$	29,220.94	n = =
Total						\$	48,611.10	
HSA 2500/0 Agg PD Rx SM1 (r2	22)			7.00	Anna and a se	S-p		
Employee	10	\$	690.44	\$	726.78	\$	7,267.80	4
Employee + Spouse	4	\$	1,513.26	\$	1,592.91	\$	6,371.64	
Employee + Child(ren)	5	\$	1,239.00	\$	1,304.21	\$	6,521.05	
Family	14	\$	2,061.82	\$	2,170.34	\$	30,384.76	
Total						\$	50,545.25	3 1 1 1 1 1 1 1 1 1

This proposal includes a Contingent Premium arrangement. Any Contingent Premium settlement due will be applied to a monthly premium invoice in the contract period beginning 1/1/2026, provided the group renews for such time period.

	Network	Non-Network
Additional Services		
Ambulance	Coinsurance after deductible	Coinsurance after deductible
Autism Spectrum Disorders	Benefits paid are base	d on services rendered
Diabetic Education and Training	Coinsurance after deductible, unless the service is covered under Health Care Reform Preventive Benefits	Coinsurance after deductible
Durable Medical Equipment	Coinsurance after deductible	Coinsurance after deductible
DME—Wigs	Not covered	Not covered
Home Health Care (100 visits per benefit period)	Coinsurance after deductible	Coinsurance after deductible
Hospice	Coinsurance after deductible	Coinsurance after deductible
Organ and Tissue Transplants	Coinsurance after deductible	Coinsurance after deductible
Organ Transplant Services (Includes travel, meals, lodging and transportation)	Not covered	Not covered
Private Duty Nursing (90 days per benefit period)	Coinsurance after deductible	Coinsurance after deductible
Sterilization	Coinsurance after deductible	Coinsurance after deductible
Mental Health & Substance Abuse—Federal Mental Health Parity		
Inpatient Mental Health and Substance Abuse Services	Benefits paid are based on co	rresponding medical benefits
Outpatient Mental Health and Substance Abuse Services	Benefits paid are based on co	rresponding medical benefits
Prescription Drug Benefits		
Retail (30-day supply)	Generic Preferred Brand Non-Preferred Brand Specialty High-Cost Drugs	\$0 copay after deductible \$35 copay after deductible \$70 copay after deductible 25% up to \$350 after deductible
Home Delivery (90-day supply) (Specialty drugs limited to 30-day supply)	Generic Preferred Brand Non-Preferred Brand Specialty High-Cost Drugs	\$0 copay after deductible \$105 copay after deductible \$210 copay after deductible 25% up to \$350 after deductible

National Plus Network & Basic Plus Formulary

Generic Incentive- If a brand-name drug is requested when a generic equivalent exists, the member pays the brand-name copay plus the difference between to cost of the generic and the brand-name drug.

Home Delivery Incentive- Retail drug copays apply for the first three fills in 180 days. Starting on the 4th fill. Copay amount doubles unless mail order is used.

Specialty Drugs

Drugs and biologicals (specialty drugs and therapeutic injections). Members must use one of our dedicated pharmacies. Special rules apply to oral chemotherapy prescription drugs. The certificate booklet will have more information. Certain specialty drugs are part of a Specialty Prescription Drug Copay Offset program (SaveOnSP Exclusive) where they are considered non-essential health benefits and therefore do not apply to the out-of-pocket maximum. They will also be subject to higher cost-share if the member does not participate in SaveOnSP Exclusive. Once enrolled in the Medical Mutual health plan, call 1-800-683-1074 to enroll in copay assistance, with SaveOnSP monitoring, so that your responsibility could be as low as \$0.

- 1 Network level Out-of-Pocket includes deductible and coinsurance and flat dollar copayments.
- 2 Preventive services include evidence-based services that have a rating of "A" or "B" in the United States Preventive Services Task Force, routine immunizations, and other screenings, as provided for in the Patient Protection and Affordable Care Act.

I have reviewed and agree to the above information.	
Signature	Date

Benefits will be administered by Medical Mutual of Ohio. Benefits will be determined based on Medical Mutual's medical and administrative policies and procedures. This document is only a partial listing of benefits. This is not a contract of insurance. Only an officer of Medical Mutual may agree, orally or in writing, to change the benefits listed here. The contract or certificate will contain the complete listing of covered services. In certain instances, Medical Mutual's payment may not equal the percentage listed above. However, the covered person's coinsurance will always be based on the lesser of the provider's billed charges or Medical Mutual's negotiated rate with the provider.

EXHIBIT B

Village of Oakwood

HSA Plan Funding Annual

Plan Year 01/01/2024 thru 12/31/2024

Union Employees:

Single: \$3,175

Single plus one or more: \$6,350

Non-Union Employees:

Single: \$1,250

Single plus one or more: \$2,000