



# Board of County Commissioners Agenda Request

**3A**  
Agenda Item #

**Requested Meeting Date:** 11/23/2021

**Title of Item:** Adopt 2022 Wage Scale and Health Insurance Premium Contributions

<input checked="" type="checkbox"/> REGULAR AGENDA <input type="checkbox"/> CONSENT AGENDA <input type="checkbox"/> INFORMATION ONLY	<b>Action Requested:</b> <input checked="" type="checkbox"/> Approve/Deny Motion <input type="checkbox"/> Adopt Resolution (attach draft)	<input type="checkbox"/> Direction Requested <input type="checkbox"/> Discussion Item <input type="checkbox"/> Hold Public Hearing* <i>*provide copy of hearing notice that was published</i>
<b>Submitted by:</b> Bobbie Danielson		<b>Department:</b> Human Resources
<b>Presenter (Name and Title):</b> Bobbie Danielson, HR Director		<b>Estimated Time Needed:</b> 3 minutes
<b>Summary of Issue:</b> Please find the 2022 open range pay scale and health insurance premium chart attached.  <b>Recommendations:</b>  2022 wages: On 1/1/2022, part-time and full-time non-union employees will receive a wage increase that is equivalent to a 2% general adjustment, plus a step increase, not to exceed the wage scale maximum. (LLCC, temporary, and seasonal employees will be reviewed on an individual basis with any increases subject to County Administrator approval.)  2022 insurance: The employer's contribution towards PEIP health insurance premiums is outlined on the attached chart.		
<b>Alternatives, Options, Effects on Others/Comments:</b>		
<b>Recommended Action/Motion:</b> Motion to adopt the 2022 wage scale and PEIP health insurance contributions as presented.		
<b>Financial Impact:</b> Is there a cost associated with this request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No What is the total cost, with tax and shipping? \$ As budgeted. Is this budgeted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please Explain:</i>		

Legally binding agreements must have County Attorney approval prior to submission.

**AITKIN COUNTY**

**OPEN RANGE SCALE EFFECTIVE JANUARY 1, 2022**

Grade	MIN	MAX	MIN	MAX
	<b>FLSA Non-Exempt</b>		<b>FLSA Exempt</b>	
20	\$ 46.18	\$ 68.96	\$ 96,048.46	\$ 143,436.44
19	\$ 44.47	\$ 66.40	\$ 92,500.98	\$ 138,115.22
18	\$ 42.77	\$ 63.84	\$ 88,953.50	\$ 132,794.00
17	\$ 41.06	\$ 61.28	\$ 85,406.02	\$ 127,472.78
16	\$ 39.36	\$ 58.73	\$ 81,858.54	\$ 122,151.56
15	\$ 37.65	\$ 56.17	\$ 78,311.06	\$ 116,830.34
14	\$ 35.94	\$ 53.61	\$ 74,763.58	\$ 111,509.12
13	\$ 34.24	\$ 51.05	\$ 71,216.10	\$ 106,187.90
12	\$ 32.53	\$ 48.49	\$ 67,668.62	\$ 100,866.68
11	\$ 30.83	\$ 45.94	\$ 64,121.14	\$ 95,545.46
10	\$ 29.12	\$ 43.38	\$ 60,573.66	\$ 90,224.24
9	\$ 27.42	\$ 40.82	\$ 57,026.18	\$ 84,903.02
8	\$ 25.71	\$ 38.26	\$ 53,478.70	\$ 79,581.80
7	\$ 24.01	\$ 35.70	\$ 49,931.22	\$ 74,260.58
6	\$ 22.30	\$ 33.14	\$ 46,383.74	\$ 68,939.36
5	\$ 20.59	\$ 30.59	\$ 42,836.26	\$ 63,618.14
4	\$ 18.89	\$ 28.03	\$ 39,288.78	\$ 58,296.92
3	\$ 17.18	\$ 25.47	\$ 35,741.30	\$ 52,975.70
2	\$ 15.48	\$ 22.91	\$ 32,193.82	\$ 47,654.48
1	\$ 13.77	\$ 20.35	\$ 28,646.34	\$ 42,333.26

Aitkin County 2022 PEIP Health Insurance Rates (Pending Board approval November 23, 2021.)

PEIP Plan	Total Premium per Month	Employer Pays per Month	Employee Pays per Month	Employer Annual HSA (or VEBA) Contribution	Employee 2022 HSA "Additional" Contribution Max ***	IRS 2022 Maximum HSA Contribution (Add \$1,000 Catch-up if 55 or older) ***
<b>Advantage Option</b>						
Single	\$ 965.88	\$ 675.74	\$ 290.14	\$ -	Plan not HSA-compatible	N/A
S+1	\$ 2,221.72	\$ 1,293.52	\$ 928.20	\$ -	Plan not HSA-compatible	N/A
Family	\$ 2,768.12	\$ 1,529.80	\$ 1,238.32	\$ -	Plan not HSA-compatible	N/A
<b>Value Option</b>						
Single	\$ 868.30	\$ 675.74	\$ 192.56	\$ -	Plan not HSA-compatible	N/A
S+1	\$ 1,996.24	\$ 1,293.52	\$ 702.72	\$ -	Plan not HSA-compatible	N/A
Family	\$ 2,492.70	\$ 1,529.80	\$ 962.90	\$ -	Plan not HSA-compatible	N/A
<b>HSA Compatible</b>						
Single	\$ 675.74	\$ 675.74	\$ -	\$ 2,260.00	\$ 1,390.00	\$ 3,650.00
S+1	\$ 1,553.52	\$ 1,293.52	\$ 260.00	\$ 3,260.00	\$ 4,040.00	\$ 7,300.00
Family	\$ 1,939.80	\$ 1,529.80	\$ 410.00	\$ 3,260.00	\$ 4,040.00	\$ 7,300.00

INSURANCE WAIVER OPTION: \$2750/YEAR - ASK HR FOR DETAILS

Add \$1k if 55 or older