City of Meridian FY2026 Budget Amendment Form

Personn	el Costs			Full Time Equivalent (FTE)	:				0		DIAN 7
Fund#	Dept.#	G/L#	Proj.#	G/L# Description	Total	-			AAE	$RI\Gamma$)IAN *
Various	Various	41200	0	Wages					YLL	1/12	171111
Various	Various	41206	0	PT/Seasonal Wages							DAHO
Various	Various	41210	0	Overtime				only complete th	-		
Various	Various	41304	0	Uniform Allowance			hig	hlighted in Oran	ge.		
Various	Various	42021	0	FICA	\$ -					Ame	ndment Details
Various	Various	42022	0	PERSI	\$ -		Title:	City of Meridian	Employee B	enefits Pl	an Trust (COMEBPT)
Various	Various	42023	0	Worker's Comp	\$ -			Depart	ment Name:	C	OMEBP Trust
Various	Various	42025	0	Employee Insurance	\$ -	Presenting Department Name: COMEBP Trust					
Total Personnel Costs \$ - Department #: Various											
Operatin	ng Expendit	ures							Primary Fu	ınding Sou	rce: Various
Fund#	Dept.#	G/L#	Proj.#	G/L# Description	One-Time	On	n-Going	Total	, , , ,		CIP#:
Various	Various	-,	0	Surplus Funding for COMEBPT	\$ 781,110		0	\$ 781,110		Proje	
Various	Various		0		ψ /01/110			\$ -			
Various	Various		0					\$ -	Is this for	an Emerge	ncy? Yes V No
Various	Various		0					\$ -			vice? Yes V No
Various	Various		0					\$ -			
Various	Various		0					\$ -		Clerks Offi	ce Stamp
Various	Various		0					\$ -			
Various	Various		0					\$ -			
Various	Various		0					\$ -			
Various	Various		0					\$ -			
Various	Various		0					\$ -			
Various	Various		0					\$ -			
Various	Various		0					\$ -	Date of Co	uncil Annre	oval
Carrital C	\+1 <i></i> -			Total Operating Expenditure	s \$ 781,110	\$	-	\$ 781,110			
Capital C	Dept.#	G/L#	Proj.#	G/L# Description	Total	_	Acknowle	edgement			Date
Various	Various	3, 2	0	C, I.i. Description	. ota.	ı i					
Various	Various		0								
Various	Various		0			-	Departme	nt Director			
Various	Various		0				2 3	3.00.			
Various	Various		0								
Various	Various		0				Chief Fina	ncial Officer			
			!	Total Capital Outla	y \$ -						
Revenue	/Donations	3		•		•					
Fund#	Dept.#	G/L#	Proj.#	G/L# Description	Total		Council Li	aison			
Various	Various	-,	0	,			Council Li	u13011			
Various	Various		0								
Various	Various		0			-	Mayor				
741.043			<u> </u>	Total Revenue/Donation	s Ś -	l	iviayui				
					·		Total A	\mendment	Request	Ċ	781,110
							i Otai F	ienumem	. nequest	7	701,110

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Total Amendment Cost - Lifetime

	Prior Year(s)	Fiscal Yea	r	Fiscal Year			Fiscal Year F		Fiscal Year F		iscal Year	Department Name: COMEBP Trust			
	Funding	2026		2027	•	2028		2029		2030		Title: City of Meridian Employee Benefits Plan Trust (COMEBPT)			
Personnel		\$ -		\$	- ;	\$	-	\$	-	\$	-	Instructions for Submitting Budget Amendments:			
Operating		\$ 781,11	0	\$	- !	\$	-	\$	-	\$	-	> Department will send Amendment with Directors signature to Finance (Budget Manager) for review			
Capital		\$ -										➤ Finance will send Amendment to Council Liaison for signature			
Total	\$ -	\$ 781,11	.0	\$	- !	\$	-	\$	-	\$	-	➤ Council Liaison will send signed Amendment to Mayor			
							Total Estimated Project Cost		\$	781,110	<u> </u>				

Evaluation Questions

Please answer all Evaluation Questions using the financial data referenced above.

Mayor will send signed Amendment to Finance (Budget Manager)

- > Finance (Budget Manager) will send approved copy of Amendment to Department
- > Department will add copy of Amendment to Council Agenda using Municode Agenda Manager

1. Describe what is being requested?

Due to additional health care claims costs the COMEBPT has a deficit in the surplus that is required by the Department of Insurance (DOI) nder Idaho Code, 41-4010(3). The amount requested includes the current deficit in the surplus through year-end 2025.

2. Why was this budget request not submitted during the current fiscal year budget cycle?

Health benefit costs are incurred throughout the calendar year and cannot always be adequately anticipated despite acturial studies, audits, benchmarks and reviews.

3. What is the explanation for not submitting this budget request during the next fiscal year budget cycle?

The deficit needs to be maintained per DOI requirements under Idaho State Code Chapter 40 Title 41 throughout the current year. Speficically Section 7: The trust fund shall maintain the minimum surplus requirements at all times throughout the year.

4. Describe the proposed method of funding? If funding is split between Funds (i.e. .General ,Enterprise, Grant), please include the percentage split. List the amounts and sources of anticipated additional revenue that will result from approval of this request.

General Fund and Enterprise Fund.

5. Does this request align with the Department/City's strategic plan? If not, please explain how this request was not included in the Department/City strategic plan?

Yes, Government excellence in attracting and retaining employees.

6. Does this request require resources to be provided by other departments? If yes, please describe the necessary resources to be provided by other departments.

No

7. Does this Amendment include any needed Equipment or Software that will utilize the City's network? (Yes or No)

No

8. Is the amendment going to result in the disposal of an asset? (Yes or No)

9. Any additional comments?

The City of Meridian has contributed \$2,702,063 to the Trust for State Reserve requirements to date. Adding this \$781,110 will put the additional contribution from the City at \$3,483,173.

Total Amendment Request \$

No

781.110

Every effort should be made to avoid reopening the budget for an amendment. Departments will need to provide back up and appear before the City Council to justify budget amendments. Budget amendments are intended for emergency or mandatory changes to the original balanced budget. Changes to the original balanced budget may cause a funding shortfall.