

City of Meridian FY2022 Budget Amendment Form



Personnel Costs

Full Time Equivalent (FTE):

Fund#	Dept.#	G/L#	Proj.#	G/L# Description	Total
01	1540	41200	0	Wages	
01	1540	41206	0	PT/Seasonal Wages	
01	1540	41210	0	Overtime	
01	1540	41304	0	Uniform Allowance	
01	1540	42021	0	FICA	\$ -
01	1540	42022	0	PERSI	\$ -
01	1540	42023	0	Worker's Comp	\$ -
01	1540	42025	0	Employee Insurance	\$ 254,000
Total Personnel Costs					\$ 254,000

Please only complete the fields highlighted in Orange.

Amendment Details

Title: Employee Health Benefits Trust

Department Name: Human Resources

Presenting Department Name: Legal and Human Resources

Department #: 1540

Primary Funding Source: 1

CIP#:

Project #:

Is this for an Emergency? Yes No

New Level of Service? Yes No

Clerks Office Stamp

Date of Council Approval

Operating Expenditures

Fund#	Dept.#	G/L#	Proj.#	G/L# Description	One-Time	On-Going	Total
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
01	1540		0				\$ -
Total Operating Expenditures					\$ -	\$ -	\$ -

Capital Outlay

Fund#	Dept.#	G/L#	Proj.#	G/L# Description	Total
01	1540		0		
01	1540		0		
01	1540		0		
01	1540		0		
01	1540		0		
Total Capital Outlay					\$ -

Revenue/Donations

Fund#	Dept.#	G/L#	Proj.#	G/L# Description	Total
01	1540		0		
01	1540		0		
01	1540		0		
Total Revenue/Donations					\$ -

Acknowledgement	Date
Department Director	2.25.22
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> REVIEWED By Todd Lavoie at 9:25 am, Feb 28, 2022 </div>	
Approved Brad Hoaglun 8:17 am 03/01/2022	
Council Liaison	3-1-22
Mayor	

BP 2/28/2022

Total Amendment Request \$ 254,000

Total Amendment Cost - Lifetime

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	Prior Year(s) Funding	Fiscal Year 2022	Fiscal Year 2023	Fiscal Year 2024	Fiscal Year 2025	Fiscal Year 2026	
Personnel		\$ 254,000	\$ -	\$ -	\$ -	\$ -	Department Name: <u>Human Resources</u> Title: <u>Employee Health Benefits Trust</u> Instructions for Submitting Budget Amendments: > Department will send Amendment with Directors signature to Finance (Budget Analyst) for review > Finance will send Amendment to Council Liaison for signature > Council Liaison will send signed Amendment to Mayor > Mayor will send signed Amendment to Finance (Budget Analyst) > Finance (Budget Analyst) will send approved copy of Amendment to Department > Department will add copy of Amendment to Council Agenda using Novus Agenda Manager
Operating		\$ -	\$ -	\$ -	\$ -	\$ -	
Capital		\$ -	\$ -	\$ -	\$ -	\$ -	
Total	\$ -	\$ 254,000	\$ -	\$ -	\$ -	\$ -	
Total Estimated Project Cost:							

Evaluation Questions

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

1. Describe what is being requested? Since the implementation of the Health Benefits Trust the Trust has paid for actuarial services to determine the needs to funds the City of Meridian Employee Health Benefits. Since the implementation in 2020 the Trust has experienced a once in lifetime worldwide pandemic. The Trust incurred significant unanticipated expenses related to the pandemic, its effects, treatments, testing, vaccinations, hospitalizations, and on-going treatment. Additionally in 2021 in addition to the mounting costs for the pandemic the Trust realized a higher than anticipated cost for treatments and pharmaceuticals for employee needs.	
2. Why was this budget request not submitted during the current fiscal year budget cycle? These costs have been on-going and the most recent audit, at the end of 2021, by the Department of Insurance has raised their concern as to the deficit in the program at this time.	
3. What is the explanation for not submitting this budget request during the next fiscal year budget cycle? The need to correct that deficit at this time rather than wait for another budget cycle to maintain the program under the Idaho Code requirements.	
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	
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? N/A	
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. N/A	
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)	No
9. Any additional comments?	

Total Amendment Request \$ 254,000

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.