




**BOROUGH OF HIGHLANDS
COUNTY OF MONMOUTH
Resolution 20-098**

HR-0-026-0019
**State Health Benefits Program (SHBP)
School Employees' Health Benefits Program (SEHBP)
RESOLUTION**

A Resolution to Adopt the Provisions of Chapter 48 (N.J.S.A. 52:14.17.38) Under Which a Public Employer May Agree to Pay for the SHBP and/or SEHBP Coverage of Certain Retirees.

BE IT RESOLVED:

0220-00

- The BOROUGH OF HIGHLANDS Corporate Name of Employer 0220-00 SHBP/SEHBP Employer Location Number
hereby elects to adopt the provisions of N.J.S.A. 52:14-17.38 and adhere to the rules and regulations promulgated by the State Health Benefits Commission and School Employees' Health Benefits Commission to implement the provisions of that law.
- This resolution affects employees as shown on the attached *Chapter 48 Resolution Addendum*. It is effective on the 1st day of MAY Month, 2020 Year.
- We are aware that adoption of this resolution does not free us of the obligation to pay for post-retirement medical benefits of retirees or employees who qualified for those payments under any *Chapter 88 Resolution* or *Chapter 48 Resolution* adopted previously by this governing body.
- We agree that this resolution will remain in effect until properly amended or revoked with the SHBP and/or SEHBP. We recognize that while we participate with the SHBP and/or SEHBP, we are responsible for providing the payment for post-retirement medical coverage as listed in the attached *Chapter 48 Resolution Addendum* for all employees who qualify for this coverage while this resolution is in force.
- We understand that we are required to provide the New Jersey Division of Pensions & Benefits (NJDPB) complete copies of all contracts, ordinances, and resolutions that detail post-retirement medical payment obligations we undertake. We also recognize that we may be required to provide the NJDPB with information needed to carry out the terms of this resolution.

I hereby certify that the foregoing is a true and correct copy of a resolution duly adopted by the:

BOROUGH OF HIGHLANDS Corporate Name of Employer 03 / 18 2020 YYYY

42 SHORE DRIVE HIGHLANDS NJ 07701
Street Address City State Zip Code

732 872.1224
Area Code Telephone Number

Kim Gonzales Signature ADMINISTRATOR Official Title

50 Number of Employees 216000720 Employer's State Employer Identification Number (EIN)

Mail Completed Resolution to: **New Jersey Division of Pensions & Benefits
Health Benefits Bureau
P.O. Box 299
Trenton, NJ 08625-0299**



State Health Benefits Program (SHBP) and
School Employees' Health Benefits Program (SEHBP)
CHAPTER 48 RESOLUTION ADDENDUM

Please read instructions on reverse side before completing this form.

Effective Date of Resolution mm / dd / yyyy Form to be used for: Medical Dental ~~Both~~

Employer Name BOROUGH OF HIGHLANDS Corporate Name of Employer SHBP/SEHBP Employer Location Number _____

CLASS OF EMPLOYEES Examples: police officers, clerical workers, bargaining unit (PBA, CWA), nonaligned, or individual(s)	N.J.S.A. 52:14-17.38 Provisions Adopted				Premium Payment Retirees		Premium Payment Dependents		Medicare Reimbursement		Premium Payment Surviving Spouses		Do Benefits Apply to Current Retirees		If Benefits do Not Apply to Current Retirees, Give Effective Date
	1) Retired on a Disability Retirement	2) Retired w/25 or + years of service	2a) Number of years service w/employer	3) Retired age 65 + w/25 years service	3a) Number of years service w/employer	4) Retired 62 or older w/15 years or more service w/employer	If Yes Show %	No	If Yes Show %	No	If Yes Show %	No	If Yes Show %	No	
PBA	X	X	n/a			100%*		100%*	X		X		X		
CWA		X	15 yrs. for dependent			100%*		100%*	X		X		X		
UECW		X	25	X	15	100%*		100%*	X		X		X		
ADMINISTRATIVE		X	25	X	15	100%*		100%*	X		X		X		

Note: An age requirement is not permitted on Option 1 or 2; Option 3 and 4 already have an age requirement.

*Police retirees who did not have 20 years of service as of June 28, 2011 must pay 1.5% of their retirement allowance towards retiree health insurance.
*All other retirees who retire on a service retirement must pay contributions in accordance with Chapter 78.

Date Resolution Submitted / / Name of Certifying Officer Patrick Deblasio Area Code and Telephone Number

Motion to Approve March 18, 2020

	INTRODUCED	SECOND	AYE	NAY	ABSTAIN	ABSENT
BRASWELL			X			
MAZZOLA			X			
RYAN		X	X			
VALKOS			X			
BROULLON	X		X			

This is a Certified True copy of the Original Resolution on file in the Municipal Clerk's Office.
DATE OF VOTE: March 18, 2020


Matthew Conlon, RMC, Municipal Clerk

