# State of Misconsin 2005 - 2006 LEGISLATURE

LRB-2490/1 RAC/CMH/PJK:wlj:jf

## **2005 SENATE BILL 242**

June 15, 2005 – Introduced by Senators Darling, Grothman, Stepp and Brown, cosponsored by Representatives McCormick, Hines, Honadel, Wood, Van Roy, F. Lasee and Vos. Referred to Committee on Agriculture and Insurance.

AN ACT to amend 111.70 (1) (a); and to create 111.70 (4) (n), 111.70 (4) (o) and 601.41 (12) of the statutes; relating to: collective bargaining over health care coverage for municipal employees and allowing municipal employers to change health care coverage plan providers.

## Analysis by the Legislative Reference Bureau

Under the Municipal Employment Relations Act (MERA), all matters relating to wages, hours, and conditions of employment are subject to collective bargaining. This bill prohibits bargaining over the selection of a health care coverage plan if the employer offers to enroll its employees in a plan provided to local government employers by the Group Insurance Board or in a plan that is substantially similar to the plan offered by the Group Insurance Board. Under the bill, the Office of the Commissioner of Insurance must promulgate rules that set out standardized benefits under health care coverage plans and that may be used for determining whether any health care coverage plan is similar to the plan offered by the Group Insurance Board.

In addition, the bill provides that under MERA any employer may unilaterally change its employees' health care coverage plan provider if the benefits remain substantially the same and if either the actual providers of the health care are the same or cost savings will result from changing the health care coverage plan provider. The bill requires, however, that any employer savings that result from changing the health care coverage plan provider must be used to increase salaries paid to the employees affected by the change.

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For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

# The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

**Section 1.** 111.70 (1) (a) of the statutes is amended to read:

111.70 (1) (a) "Collective bargaining" means the performance of the mutual obligation of a municipal employer, through its officers and agents, and the representative of its municipal employees in a collective bargaining unit, to meet and confer at reasonable times, in good faith, with the intention of reaching an agreement, or to resolve questions arising under such an agreement, with respect to wages, hours, and conditions of employment, and with respect to a requirement of the municipal employer for a municipal employee to perform law enforcement and fire fighting services under s. 61.66, except as provided in sub. (4) (m), (n), and (o) and s. 40.81 (3) and except that a municipal employer shall not meet and confer with respect to any proposal to diminish or abridge the rights guaranteed to municipal employees under ch. 164. The duty to bargain, however, does not compel either party to agree to a proposal or require the making of a concession. Collective bargaining includes the reduction of any agreement reached to a written and signed document. The municipal employer shall not be required to bargain on subjects reserved to management and direction of the governmental unit except insofar as the manner of exercise of such functions affects the wages, hours, and conditions of employment of the municipal employees in a collective bargaining unit. In creating this subchapter the legislature recognizes that the municipal employer must exercise its powers and responsibilities to act for the government and good order of the jurisdiction which it serves, its commercial benefit, and the health, safety and

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welfare of the public to assure orderly operations and functions within its jurisdiction, subject to those rights secured to municipal employees by the constitutions of this state and of the United States and by this subchapter.

**SECTION 2.** 111.70 (4) (n) of the statutes is created to read:

111.70 (4) (n) Municipal employer-initiated change in health care coverage plan provider: 1. Notwithstanding the terms of a collective bargaining agreement, a municipal employer may unilaterally change its employees' health care coverage plan provider without the consent of any affected employee in the collective bargaining unit if the benefits provided by the new health care coverage plan provider are substantially similar to those provided by the former health care coverage plan provider and if either the persons who provide health care coverage under the new plan are the same as under the former plan or cost savings will result from changing the health care coverage plan provider. Any such unilateral change in health care coverage plan provider is not a violation of a collective bargaining agreement or a prohibited practice under sub. (3) (a) and, for purposes of a qualified economic offer, satisfies the requirement to maintain fringe benefits under sub. (1) (nc).

2. Any moneys saved by a municipal employer as a result of a change in health care coverage plan provider under subd. 1. shall be used to increase the wages paid to the affected employees during the period covered by their collective bargaining agreement and wage-related costs resulting from the increase in wages. Any such increase in wages and wage-related costs by the municipal employer is not a prohibited practice under sub. (3) (a).

**Section 3.** 111.70 (4) (o) of the statutes is created to read:

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111.70 (4) (o) *Prohibited subject of collective bargaining*. A municipal employer is prohibited from bargaining collectively with respect to the employer's selection of a health care coverage plan if the municipal employer offers to enroll the employees in a health care coverage plan under s. 40.51 (7) or in a health care coverage plan that is substantially similar to a plan offered under s. 40.51 (7). The commission shall use the criteria in rules promulgated by the commissioner of insurance under s. 601.41 (12) to determine if health care coverage plans are substantially similar.

**Section 4.** 601.41 (12) of the statutes is created to read:

601.41 (12) Substantially similar health care coverage plan. The commissioner shall promulgate rules that set out a standardized summary of benefits provided under health care coverage plans, including plans offered under s. 40.51 (7), for use in determining whether a health care coverage plan is substantially similar to a plan offered under s. 40.51 (7).

### SECTION 5. Initial applicability.

(1) The treatment of section 111.70 (1) (a) and (4) (n) and (o) of the statutes first applies to collective bargaining agreements entered into, extended, modified, or renewed, whichever occurs first, on the effective date of this subsection.

18 (END)