

**VILLAGE OF YELLOW SPRINGS, OHIO
RESOLUTION 2025-40**

**AUTHORIZING THE VILLAGE MANAGER TO RENEW
HEALTH INSURANCE FOR VILLAGE EMPLOYEES**

WHEREAS, the Village of Yellow Springs has retained the services of McGohan/Brabender, Inc. to act as a broker for employee health and welfare benefits, and per Resolution 2025-19, passed by Council on March 17, 2025, the Village is a member of the Ohio Benefits Cooperative (OBC); and

WHEREAS, the OBC, being a self-insured group, has retained the services of Jefferson Health Plan to administer the Anthem Blue Cross Blue Shield group plan and has negotiated an acceptable renewal for medical and prescription drug benefits for the benefit period beginning September 1, 2025 and continuing through August 31, 2026; and

WHEREAS, the quote for September 1, 2025 -August 31, 2026 coverage is detailed in Exhibit A, which is attached hereto and made a part hereof,

NOW, THEREFORE, be it resolved by Council for the Village of Yellow Springs, Ohio that:

Section 1. The Village Manager is authorized to execute a contract for health insurance with Anthem BC/BS for the plan year starting September 1, 2025 to August 31, 2026 under the terms specified in Exhibit A.

Section 2. This resolution shall be in full force and effect upon adoption.

Gavin DeVore Leonard, Vice President of Council

PASSED: 7-21-2025

Attest: _____
Judy Kintner, Clerk of Council

Roll Call:

Stokes _ABSENT_

Devore Leonard _Y_

Housh __Y_

Brown __Y_

Gustafson __Y_

Exhibit A to Resolution 2025-40

The Village is offering the following medical insurance plan through OBC: Anthem Blue Access PPO HSA6

Anthem Blue Cross/Blue Shield Insurance Premiums for 2025-2026 Plan Year (September-August).

Village pays 85%- Employee Pays 15% of premium cost.

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| Employee Only Coverage Cost Per Month | \$697.39 |
| Village Contribution | \$592.79 |
| Employee Contribution | \$104.61 |

| | |
|--|-------------------|
| Employee + Spouse Coverage Cost Per Month | \$1,499.40 |
| Village Contribution | \$1,274.49 |
| Employee Contribution | \$ 224.91 |

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| Employee + Children Coverage Cost Per Month | \$1,290.19 |
| Village Contribution | \$1,096.67 |
| Employee Contribution | \$ 193.53 |

| | |
|--|-------------------|
| Employee + Family Coverage Cost Per Month | \$2,127.04 |
| Village Contribution | \$1,807.99 |
| Employee Contribution | \$ 319.06 |

The Village will provide partial funding of the deductible for this HSA Plan as follows:

Single = \$ 2,000

Family= \$ 3,500