

**EXISTING EMPLOYER
OPTION SELECTION RESOLUTION
WISCONSIN PUBLIC EMPLOYERS' GROUP HEALTH INSURANCE PROGRAM**

RESOLVED, by the Town Board of the Town of Yorkville
(Governing Body) (Employer/Legal Name)

that pursuant to the provisions of Wis. Stat. § 40.51 (7) hereby determines to offer the Group Health Insurance program to eligible personnel through the program of the State of Wisconsin Group Insurance Board, and agrees to abide by the terms of the program as set forth in the contract between the Group Insurance Board and the participating health insurance providers.

All participants in the WPE Group Health Insurance program will need to be enrolled in a program option. An employer may elect participation in one, two or all program options listed below, with each program option **to be offered to different employee classifications. Individual employees cannot choose between program options.**

We choose to participate in the: (check applicable options)

- Traditional or Full Pay Uniform Benefits Option paired with the Standard PPO – P02
- Deductible Uniform Benefits Option paired with the Standard PPO – P04
- Coinsurance Uniform Benefits Option paired with the Standard PPO – P06

The resolution must be received by the Department of Employee Trust Funds (ETF) no later than October 1 for coverage to be effective the following January 1.

The proper officers are herewith authorized and directed to take all actions and make salary deductions for premiums and submit payments required by the State of Wisconsin Group Insurance Board to provide such Group Health Insurance.

CERTIFICATION

I hereby certify that the foregoing resolution is a true, correct and complete copy of the resolution duly and regularly passed by the above governing body on the 12 day of May, year 2014 and that said resolution has not been repealed or amended, and is now in full force and effect.

Dated this 12 day of May, year 2014.

I understand that Wis. Stat. § 943.395 provides criminal penalties for knowingly making false or fraudulent statements, and hereby certify that, to the best of my knowledge and belief, the above information is true and correct.

Federal Tax Identification Number (FEIN/TIN)

69-036-
ETF Employer Identification Number

Number of eligible employees 2

[Signature] Clerk-Treasurer
Employer Representative Title

925 15th Avenue, Union Grove WI 53182
Mailing Address

Racine
Employer County

michael@townofyorkville.com
Email Address