



City of Chicago



R2021-1132

Office of the City Clerk

Document Tracking Sheet

Meeting Date: 10/25/2021

Sponsor(s): Burke (14)
Lopez (15)
O'Shea (19)
Tabares (23)
Sposato (38)
Beale (9)
Thompson (11)
Napolitano (41)
Gardiner (45)
Quinn (13)
Moore (17)
Hopkins (2)
Nugent (39)
Villegas (36)

Type: Resolution

Title: Call for Health Benefit Committee to guarantee continuation of health care benefits for non-pay status employees and their dependents during pending COVID-19 vaccination status dispute

Committee(s) Assignment: Committee on Committees and Rules

RESOLUTION

WHEREAS, The Mayor of the City of Chicago has initiated steps to place in non-pay status employees of the City of Chicago who fail to report their COVID-19 vaccination status; and

WHEREAS, This process has begun with members of the Chicago Police Department; and

WHEREAS, The leaders of collective bargaining units representing City workers including members of the Departments of Police and Fire have asserted that this action by the Mayor of Chicago violated Collective Bargaining agreements; and

WHEREAS, No provision of the Municipal Code authorizes the Mayor of Chicago to take this draconian action and furthermore no section of the Municipal Code requires City employees to submit the aforementioned information; and

WHEREAS, No provision of the Municipal Code requires City Employees to submit to vaccination for COVID illness, flu illness, polio disease or any other malady; and

WHEREAS, Submission to vaccination of any type or form was never a condition prerequisite for City employment; and

WHEREAS, Most if not all of the affected City employees are protected by career service; and

WHEREAS, These City employees by virtue of their city employment are entitled to health care insurance benefits negotiated by the Health Care Benefit Committee of the City of Chicago; and

WHEREAS, The healthcare insurance benefits currently in effect extend health care coverage to spouses, children and dependents of the city employees; and

WHEREAS, Tens of thousands of spouses, minor children, disabled persons and dependents rely on this health care protection; and

WHEREAS, The placing of these City employees in a "no pay" status will revoke the health care benefits of not only the employee but the health care benefits of the spouses and dependents of the said employees; and

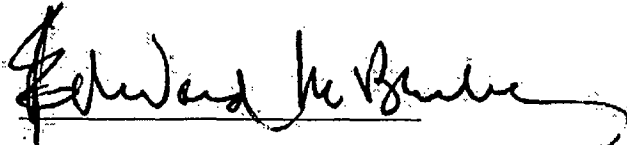
WHEREAS, Many of these beneficiaries are being treated for life threatening diseases, mental health illnesses, and are receiving hospital and in-patient treatment which will be at risk; and

WHEREAS, The City Council has enacted no resolution or ordinance to permit this to occur; and

WHEREAS, Humanitarian interests demand the continued care and treatment of these current dependents; and

WHEREAS, It is the obligation of the corporate authorities of the City of Chicago to insure the health care protection of these tens of thousands of spouses, minors, disabled and dependent individuals; now, therefore

BE IT RESOLVED, That the Health Benefit Committee of Chicago and the members thereof are hereby directed to immediately take the necessary actions to assure the continuation of health care benefits for these dependents during the pendency of this current dispute and the members of the Health Benefits Committee of the City of Chicago are directed to report to the City Clerk within 7 days the status of the matters aforementioned.

A handwritten signature in black ink, appearing to read "Edward M. Burke". The signature is written in a cursive style and is positioned above a horizontal line.

Edward M. Burke
Alderman, 14th Ward



CITY OF CHICAGO

OFFICE OF THE CITY CLERK
ANNA M. VALENCIA


Chicago City Council Co-Sponsor Form

Document No.:

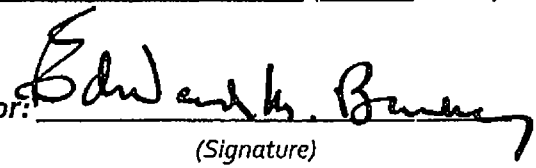
Subject: Non-pay status City of Chicago employees and their health care status

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman  Raymond Lopez (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: 10-20-21 Principal Sponsor: 
(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: _____

Final Copies To Be Filed With: • Chairman of Committee to which legislation was referred
• City Clerk



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Chicago City Council Co-Sponsor Form

Document No.:

Subject:

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman Matt O'Shea *Matt O'Shea* (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: 10/20/2021 Principal Sponsor: *Edward H. Burke*
(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

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CITY OF CHICAGO

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Chicago City Council Co-Sponsor Form

Document No.:

Subject: **Resolution to direct the Health Benefit Committee of Chicago and the men
immediate actions to assure continuation of health care benefits for non-pa
employees and their dependents.**

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Requ

Alderman Silvana Tabares

(Signature)

23

Ward

Alderman _____

(Signature)

Date Filed: 10-20-21

Principal Sponsor: Edward H. Ramirez

(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Re

Alderman _____

(Signature)

Alderman _____

(Signature)

Date Filed: _____

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Chicago City Council Co-Sponsor Form

Document No.:

Subject:

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Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman *Nicholas Spasato* Ward)
(Signature)

Alderman _____ Ward)
(Signature)

Date Filed: 10/20/2021 Principal Sponsor: *Edward L. Burke*
(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ Ward)
(Signature)

Alderman _____ Ward)
(Signature)

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CITY OF CHICAGO

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Chicago City Council Co-Sponsor Form

Document No.:

Subject: Resolution Non-Pay status Employees

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman *Anthony Beale* (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: 10-20-21 Principal Sponsor: *Edward H. Brennan*
(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

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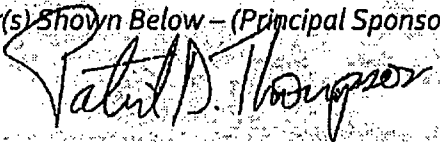
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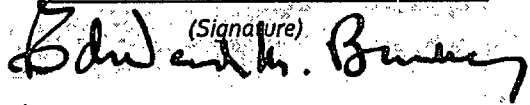
Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman Thompson  Ward
(Signature)

Alderman _____ Ward
(Signature)

Date Filed: 10-20-21

Principal Sponsor: Alderman Burke
 (Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ Ward
(Signature)

Alderman _____ Ward
(Signature)

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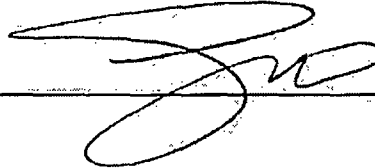
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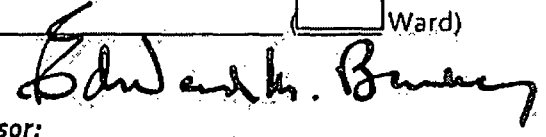
Subject: **NON-PAY STATUS EMPLOYEES**

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman  (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: 10-20-21 Principal Sponsor: 
(Signature)

Removing Co-Sponsor(s)

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Alderman _____ (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

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Chicago City Council Co-Sponsor Form

Document No.:

Subject: Resolution for non-pay employees

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman James Sudano Ward
(Signature)

Alderman _____ Ward
(Signature)

Date Filed: 10-20-21 Principal Sponsor: Edward L. Ramirez
(Signature)

Removing Co-Sponsor(s)

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Alderman _____ Ward
(Signature)

Alderman _____ Ward
(Signature)

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Document No.: R2021-1132

Subject: Resolution Non-Pay Status Employees

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman David Moore *[Signature]* (17 Ward)
Alderman _____ (Signature) _____ 17th Ward

Alderman _____ (Signature) _____ Ward

Date Filed: 10/21/21 Principal Sponsor: *[Signature]*
(Signature) _____

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ (Signature) _____ Ward

Alderman _____ (Signature) _____ Ward

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Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman Brian Hopkins (Per E-Mail) (2 Ward)
(Signature)

Alderman _____ (_____) Ward)
(Signature)

Date Filed: 10-21-21 Principal Sponsor: Edward H. Burke
(Signature)

Removing Co-Sponsor(s)

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Alderman _____ (_____) Ward)
(Signature)

Alderman _____ (_____) Ward)
(Signature)

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Subject: Call for Health Benefit Committee to guarantee continuation of health care benefits for non-pay status employees and their dependents during pending COVID-19 vaccination status dispute

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman: Samantha Nugent  39 Ward
(Signature)

Alderman: _____ Ward
(Signature)

Date Filed: 22 October 2021 Principal Sponsor: _____
(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ Ward
(Signature)

Alderman _____ Ward
(Signature)

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Document No.: R2021-1132

Subject: Call for Health Benefit Committee to guarantee continuation of health care benefits for non-pay status employees and their dependents during pending COVID-19 vaccination statute dispute

Adding Co-Sponsor(s)

Please ADD Co-Sponsor(s) Shown Below – (Principal Sponsor's Consent Required)

Alderman _____ [Signature] (36 Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: 10-26-21 Principal Sponsor: [Signature]
(Signature)

Removing Co-Sponsor(s)

Please REMOVE Co-Sponsor(s) Below – (Principal Sponsor's Consent NOT Required)

Alderman _____ (Ward)
(Signature)

Alderman _____ (Ward)
(Signature)

Date Filed: _____

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