AFSCME-CCOM (PT)

PARTTIME EMPLOYEES (20-29 HOURS PER WEEK) BENEFITS INFORMATION SUMMARY 2026

MEDICAL DI ANG G MONTHI V COST	Single w/				
MEDICAL PLANS & MONTHLY COST	Single	Married	Child/ren	Family	
Kaiser	\$93.60	\$93.60	\$93.60	\$93.60	
Providence Open Option/VSP Vision	\$111.70	\$111.70	\$111.70	\$111.70	
Providence Personal Option/VSP Vision	\$91.18	\$91.18	\$91.18	\$91.18	
Medical Opt Out - Cash Back	\$185.00	\$185.00	\$185.00	\$185.00	
DENTAL PLANS & MONTHLY COST			Single w/		
	Single	Married	Child/ren	Family	
Kaiser	\$106.46	\$210.78	\$146.92	\$252.28	
MODA Preventive	\$87.00	\$174.00	\$124.00	\$213.00	
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MODA Incentive	\$98.00	\$200.00	\$140.00	\$240.00	

WELLNESS AND EMPLOYEE ASSISTANCE PROGRAM

Numerous programs and classes for you to invest in your well-being EAP includes 6 visits per issue for counseling, 24/7 unlimited phone, research retrieval, financial coaching, and more

LIFE INSURANCE

Available for purchase: Group Universal Life, Accidental Death & Dismemberment.

Vacation		Maximum			
	Non-Dispatch	Dispatch	Carryover		
< 5 Years	10.7	19.1	240.0	5 - 9 Years	1.5%
5 - 9 Years	12.7	21.1	240.0	10-14 Years	2.0%
10-14 Years	14.7	23.1	280.0	15-19 Years	2.5%
15-19 Years	16.0	24.4	280.0	20-24 Years	3.0%
20+ Years	16.7	25.1	280.0	25-30 Years	3.0%
Sick Leave	8.0	8.0	No limit	30+ Years	3.5%

Holidays 10 0
Personal Day 1 0
Bereavement Up to 3 days per incident

Military 2 weeks per Federal budget year (October - September)

RETIREMENT

Social Security 7.65% PERS "Pickup" 6.00%

Deferred Comp 457 Retirement Plan 1-3.5% Match on employee contributions

Plus the County contributes to the PERS/OPSRP defined benefit retirement fund (percent varies)

OPTIONAL EMPLOYEE-PAID PLANS

Section 457 Deferred Compensation, Flexible Spending Account, Long Term Care, Legal Insurance, HRA VEBA, AFLAC

NOTE: This summary is general in nature. Specific terms of benefits are contained in insurance policies, the Personnel Ordinance, County Employment Policies & Practices, and collective bargaining agreements.