

NONREPRESENTED GROUP 1

**FULLTIME EMPLOYEES (30+ HOURS PER WEEK)
BENEFITS INFORMATION SUMMARY
2024**

MEDICAL PLANS & MONTHLY COST	<i>Single w/</i>			
	<i>Single</i>	<i>Married</i>	<i>Child/ren</i>	<i>Family</i>
Kaiser	\$38.70	\$77.40	\$69.66	\$116.10
Providence Open Option/VSP Vision	\$45.66	\$91.10	\$82.16	\$136.70
Providence Personal Option/VSP Vision	\$41.50	\$82.90	\$74.76	\$124.46
Medical Opt Out - Cash Back	\$83.00	\$164.00	\$148.00	\$247.00

DENTAL PLANS & MONTHLY COST	<i>Single w/</i>			
	<i>Single</i>	<i>Married</i>	<i>Child/ren</i>	<i>Family</i>
Kaiser	\$0.00	\$0.00	\$0.00	\$0.00
MODA Preventive	\$0.00	\$0.00	\$0.00	\$0.00
MODA Incentive	\$0.00	\$0.00	\$0.00	\$0.00
MODA 50% Cash Back	\$48.00	\$94.00	\$65.00	\$113.00
Dental Opt Out Cash Back	\$49.00	\$95.00	\$66.00	\$114.00

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

	Coverage	Premium			
Employee	\$150,000.00	\$0.00	<i>opt down to</i>	\$50,000.00	<i>cash back</i> \$11.00
Dependents	\$5,000.00	\$2.38			

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

DISABILITY INSURANCE *After 30 days, plan pays 60% of your base salary up to a maximum monthly benefit of* \$1,999.80
Also available for purchase: Supplemental Disability coverage up to a maximum covered monthly salary of \$8,333.00

PAID TIME OFF *Monthly accruals (prorated for less than 1.0 FTE)*

Vacation	Service Accrual Plan*	Sellback Plan	Maximum Carryover	LONGEVITY	
< 5 Years	12.7	16.0	280	5 - 9 Years	1.0%
5 - 9 Years	14.0	16.0	280	10-14 Years	1.5%
10-14 Years	16.0	16.0	280	15-19 Years	2.0%
15-19 Years	18.0	16.0	280	20-24 Years	2.5%
20+ Years	19.3	16.0	280	25-30 Years	3.5%
Sick Leave	8.0	8.0	No limit	30+ Years	4.0%

*Service accrual plan available only to employees hired before January 1, 2001

Additional paid days

Holidays	10	Bereavement <i>Up to 3 days per incident</i>
Personal Day	1	Military <i>2 weeks per Federal budget year (October - September)</i>

RETIREMENT

Social Security	7.65%	PERS "Pickup" 6.00%
Deferred Comp	6.27%	<i>Plus the County contributes to the PERS/OPSRP defined benefit retirement fund (percent varies)</i>

SURVIVORS' BENEFITS

County-paid health insurance for eligible family members for 6 months following the death of the employee

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 and County Employment Policies & Practices.