

CITY OF ANTIOCH
CONFIDENTIAL
 FRINGE BENEFIT SUMMARY

October 1, 2013 – September 30, 2016

WAGES

5-Step Plan

CAFETERIA PLAN: (Eff. 1/01/15)

City contributes:

- \$ 620.39/mo – Single
- \$ 1,078.60/mo – Two-Party
- \$ 1,390.97/mo – Family

For the purchase of Health & Welfare Benefits:

Any unused funds will be split 50/50 between City and Employee if they take cash or 100% of unused funds to deferred comp.

City pays \$122.00/mo. for the PERS Minimum Employer Contribution (MEC)

Monthly Premium Rates (actual cost to emp)

Medical (PERS) (Optional w/proof)
of other coverage

	Single	2-Party	Family
Anthem Blue Cross Select HMO	540.41	1,202.82	1,600.27
Anthem Blue Cross Traditional HMO	705.57	1,533.14	2,029.68
Blue Shield Access+	806.87	1,735.74	2,293.06
Blue Shield NetValue	748.60	1,619.20	2,141.56
Kaiser Permanente	592.45	1,306.90	1,735.57
PERS Choice	578.84	1,279.68	1,700.18
PERS Select	568.43	1,258.86	1,673.12
PERSCare	653.08	1,428.16	1,893.21
UnitedHealthcare	728.67	1,579.34	2,089.74

Dental (Delta Dental) (Optional)

	Single	2-Party	Family
Delta Dental - Option A	127.16	127.16	127.16
Delta Dental - Option B	127.78	127.78	127.78
Delta Dental - Option C	134.55	134.55	134.55
Delta Dental - Option D	182.61	182.61	182.61

Vision (Medical Eye Services) (Optional)

	Single	2-Party	Family
Medical Eye Services - Option 1	4.89	9.65	12.56
Medical Eye Services - Option 2	10.56	21.02	27.36
Medical Eye Services - Option 3	13.22	21.26	34.06

Wellness Program (Optional)

\$ 27.00

LONG TERM DISABILITY (LTD) (Mandatory)

Employee pays.
Eff. 9/01/05 \$.495/100 of Salary
90 day waiting period, benefit = 60% of Salary

SHORT TERM DISABILITY (STD)

Optional at employee's expense

LIFE INSURANCE (Mandatory) 1X Annual Salary – Max. \$75,000 City pays - Eff. 7/01/10 \$.21-1/2 per \$1,000

SUPPLEMENTAL LIFE INSURANCE

Available at employee's cost

<u>EMPLOYEE ASST. PROGRAM</u> (Mandatory)	City pays \$ 4.00 Eff. 7/01/12
ACTING PAY FOR WORKING IN HIGHER CLASS	Minimum of 5% (After working cumulative total of 40 hours in higher class for training & absence of employee in higher class is for 40 or more continuous hours)
DEFERRED COMPENSATION	City contributes \$50/month plus City matches \$1 for \$1 up to an additional \$25.
EDUCATIONAL INCENTIVE	Reimbursement for books & tuition for approved classes up to a maximum of \$1,000/year.
HOLIDAYS	14/Year (Including 2 floating holidays)
VACATION	11 days date of hire thru 4th yr. 15 days start of 5th thru 9th yr. 18 days start of 10th thru 14th yr. 20 days start of 15th thru 19th yr. 25 days start of 20th yr.
VACATION BUY-BACK	Up to 40 hours per year.
COMPENSATORY TIME	Maximum accumulation of 60 hours
CALL-BACK TIME	Minimum of 2 hours or time and one-half, whichever is greater. 3 hours minimum on holidays. (Employee must be off the premises and must be called to return to work.)
SICK LEAVE UPON TERMINATION	Upon termination, employees with at least 10 consecutive years of service shall receive payment for 40% of their unused sick leave to a maximum of 40 days.
SICK LEAVE CONVERSION POLICY	At end of calendar yr. if employee has used less than 5 days of SL, they can convert up to 12 days of current unused SL to vac. or cash on a 3-1 ratio, providing that such conversion does not reduce bal. to less than 400 hrs. SL not converted will accumulate.
MEDICAL-AFTER-RETIREMENT	See Medical-after-Retirement Plan Hires on or after 9/1/07 = MARA defined contribution plan
RETIREMENT	Public Employees Retirement System (PERS): 2.0% @ 62 for new employees; 2.7% @ 55 for classic/legacy employees
Employer Contribution Rate	FY 2014-15 = 26.250% Employee pays \$2/mo. for 1959 Survivors