Foster City / Estero Municipal Improvement District Benefits Summary



HEALTH AND WELLNESS

Flexible Benefits Plan	apply toward their amount leftover wil elect no plan, must	e the monthly am choice of the em Il be paid to the e t provide proof o	Employee Only \$1,624 \$1,858 \$1,946 \$1,845 rount stated above, de ployer provided health employee as taxable in f group insurance cove ess contributed to a p	n insurance plan pre ncome. Additionally, erage, annually, and	miums, any employees who		
Medical Insurance	CalPERS health.	The CalPERS	nce to employees a program provides e O) and Preferred Pr	employees with se	veral Health		
Dental Insurance <i>(Delta Dental)</i>	Monthly Premium Employee Only Employee +1 Employee +2 or 1		<u>HMO</u> \$19.40 \$34.60 \$51.00	PPO \$70.20 \$135.10 \$217.70			
Vision Insurance (VSP Vision Care)	Employee Only Employee +1 Employee +2+	\$13.95 \$21.68 \$34.38					
Employee Assistance Program	The full cost of the program and reserves the right to modify benefits and change providers of the EAP at its discretion, based on cost and service considerations.						
FINANCIAL WELL BEING							
Retirement Plan California Public Employees' Retirement System (CalPERS) Pension:	Classic PEPRA	EPRA 2.0% @ 62 hired after 01/01/2013 ublic Safety members: classic 3.0% @ 50 hired on of before 12/31/2011 classic Tier 2 2.0% @ 50 hired from 1/1/2012 to 12/31/2012					

Deferred Compensation 401(a) (Management) 457 Plan	Voluntary Plan Matching contributions of 1% of earnings up to 4% of salary Voluntary plan in accordance with IRS section 457						
Life Insurance / AD&D	Minimum Maximum	<u>Management</u> \$50,000 \$150,000	<u>FCP</u> \$75,	0A/AFSCME ,000	<u>Sworn Employee</u> \$50,000		
Long Term Disability	The City/District	shall pay the fu	III amount to	o provide Long Ter	m Disability (LTD)		
Employee Service Recognition Plan or	minimum maximum	<u>Employees</u> Year 10 - 14 Year 25 and t	hereafter	\$125 \$350			
Longevity Recognition Plan	minimum maximum	<u>Public Safety</u> Year 10 - 14 Year 25 and t	-	\$140 \$345			
Voluntary Employee Beneficiary Association (VEBA)	A trust under Internal Revenue Code Section 501(c)(9) for the purpose of providing a defined contribution post-retirement medical benefit for employees. Per the City's contract with VEBA. Contribution amounts: Minimum: \$50 per pay period Maximum: \$150 per pay period						
DEVELOPMENT							
Education Reimbursement	\$1,000/year						
TIME OFF							
Holiday	12 paid holidays	per year					
Vacation Leave	<u>Executive:</u> Management / A	FSCME:	15 to 23 days per year of vacation accrued. 11 to 23 days per year of vacation accrued.				
	After six months full-time employment						
Administrative Leave (Management)	80 hours annually (Exempt employees) 32 hours annually (Non-exempt)						
Discretionary Leave	AFSCME 32 hrs (Credited at the begi year allows 12 hours over)	-	<u>Non-Sworr</u> 32 hrs	<u>n Personnel</u>	<u>Sworn Personnel</u> 28 hrs		
Sick Leave	Management FCPOA (Sworn F AFSCME/FCPO/	,	Personnel)	5.66 hours/mo 6.66 hours/mo 8.66 hours/mo			
REIMBURSEMENTS							
Vision Professional Development Gym (Management)	\$200						
Uniform Alowance	Public Safety me \$900 annually	mbers:	<u>AFSCME</u> \$300 annu	ally for safety boo	<u>CSOs</u> ots \$650 annually		