

Benefits

Safety

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Union Code	Safety	
Representation	Safety Employee Benefit Association	
Contract Date	2012-2016	
Health and Welfare		
Medical Premium Subsidy (MPS) Blue Shield Signature HMO	Employee Only	\$166.30
	Employee + 1	\$355.45
	Employee + 2	\$487.09
Medical Premium Subsidy (MPS) Kaiser Permanente and Blue Shield PPO	Employee Only	\$191.64
	Employee + 1	\$381.41
	Employee + 2	\$538.92
Medical Opt-Out or Waive	\$138.46 (hired before 12/24/87)	\$20.00 (hired after 12/24/87)
Vision	Employer Paid for Employee & Dependent Coverage	
Life Insurance Employer Paid	Not Eligible	
Voluntary Term Life	\$10,000 - \$700,000	
Voluntary AD&D	Not Eligible	
Leave Provisions		
Annual Leave (instead of Vacation and Holiday)	176-256 hours/year	
Sick	3.69 hours	
Court Holidays	Must Use Annual Leave	
Retirement		
<u>Tier 1</u> (Hired prior to 1/1/2013, reciprocity provision may apply)	3.0% at age 50	
<u>Tier 2</u> (Hired on or after 1/1/2013, reciprocity provision may apply)	2.7% at age 57	
Retirement – Other		
457(b)	Eligible to enroll at any time	

Retirement Medical Trust Fund	<p align="center"><u>Sick Leave Conversion</u> Employees become eligible to convert a portion of their sick leave to the Retirement Medical Trust upon attaining 10 or more years of participation with SBCERA and/or other public retirement system(s).</p> <p align="center"><u>County Contribution, based on years of completed regular County service:</u> 10-15 years = 0.75% of biweekly base salary 16+ years = 2.00% of biweekly base salary</p>
Other	
Annual Tuition Reimbursement	First-come, first-served basis not to exceed \$2,000/year
Annual Uniform Allowance	\$675/year
Dependent Care Assistance Plan	Eligible
Long Term Disability	Eligible through SEBA
Medical Expense Reimbursement Plan (Flexible Spending Account)	\$25 - \$98.07, Employee Contribution
Qualified Transportation Plan	Pre-tax deductions of up to \$130/month for qualified transportation (commuter) expenses
Short Term Disability	Not Eligible

The County provides a *Medical Premium Subsidy* biweekly to help off-set the cost of your medical premium.

Example #1: A Sheriff's Deputy elects Blue Shield Signature HMO and Cigna Dental Care HMO plans with Employee Only coverage.

- \$235.54 (combined cost of premiums)
- \$166.30 (medical premium subsidy)
- \$69.24 (biweekly out-of-pocket cost)**

Example #2: A Sheriff's Deputy elects Kaiser Permanente and Cigna Dental PPO plans with Employee + 2 or more coverage.

- \$848.47 (combined cost of premiums)
- \$538.92 (medical premium subsidy)
- \$309.55 (biweekly out-of-pocket cost)**