

## ELECTED OFFICIALS

### FULL TIME EMPLOYEES (30+ HOURS PER WEEK) BENEFITS INFORMATION SUMMARY 2017

MEDICAL PLANS & MONTHLY COST	<i>Single</i>	<i>Married</i>	<i>Single w/ Child/ren</i>	<i>Family</i>
Kaiser	\$32.61	\$65.22	\$58.70	\$97.83
Providence Open Option/VSP Vision	\$37.90	\$75.80	\$68.35	\$113.85
Providence Personal Option/VSP Vision	\$34.05	\$68.15	\$61.45	\$102.40
Medical Opt Out - Cash Back	\$75.00	\$149.00	\$134.00	\$224.00

DENTAL PLANS & MONTHLY COST	<i>Single</i>	<i>Married</i>	<i>Single w/ 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	\$45.00	\$88.00	\$61.00	\$107.00
Dental Opt Out Cash Back	\$46.00	\$89.00	\$62.00	\$108.00

#### WELLNESS AND EMPLOYEE ASSISTANCE PROGRAM

*Numerous programs and classes for you to invest in your well-being  
Up to 6 visits per incident for crisis intervention and short-term counseling*

#### LIFE INSURANCE

	<i>Coverage</i>	<i>Premium</i>				
Employee	\$150,000.00	\$0.00	<i>opt down to</i>	\$50,000.00	<i>cash back</i>	\$16.00
Dependents	\$5,000.00	\$2.39				

*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**

#### RETIREMENT

Social Security	7.65%
Deferred Comp	6.27%
PERS "Pickup"	6.00%

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

#### OPTIONAL EMPLOYEE-PAID PLANS

*Section 457 Deferred Compensation, Long Term Care, Home & Auto, Legal Insurance, Pet Insurance, 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.