

LAYTON CITY BENEFIT HIGHLIGHTS 2011-12

MUNICIPAL EMPLOYEE'S CHECKLIST

Nothing in the "Employee Checklist" shall constitute a contract or agreement between the City and the Employee.
The checklist summary is offered only for information purposes.

Additional specific information can be obtained in the employee handbook, benefit literature, and online.

CITY/EMPLOYEE PAID BENEFITS

1. Employee Premium Portion: (Includes Health, Dental, and Vision total premium)

Coverage:	<u>Employee Only</u>	<u>+1 dependent</u>	<u>Family 2 or more</u>
Cost per pay period:	\$68.25	\$70.22	\$72.74

Health/Hospitalization – Self-Funded program through Select Health

- Costs to employees may be higher at non-participating providers.
- Annual Deductible \$100 per person/\$300 per family
- In-patient hospital 100% paid / Out-patient surgery 100% paid / Preventative Services 100% paid
- Most eligible claims are payable at 80% insurance paid, 20% employee paid
- Tier 1 prescription drugs are covered at 80%, employee pays 20% at pharmacy. Tier 2 or Tier 3 prescription drugs have an annual deductible of \$50 per person/\$150 per family and are reimbursed at 80% through NBS Health Reimbursement Account, 20% employee paid

Dental – Self-Funded program through Select Health

- Annual deductible \$50 per person/\$150 per family
- \$1,000 maximum per person per year
- Preventive diagnostic services 100% of eligible expenses, 2 times per year
- Basic services 80%/20% of eligible expenses
- Prosthodontic services 50%/50% of eligible expenses
- Orthodontic services 50% up to \$1,000 per person, lifetime

There is a twelve-month pre-existing condition limitation for new enrollees for health, hospitalization and dental *unless they provide a **Certificate of Creditable Coverage** from their prior insurance provider (indicating no break in insurance coverage within the last 63 days prior to the start date with Layton City).*

Vision – Vision Service Plan (VSP) Employees may elect vision coverage only

Coverage:	<u>Employee Only</u>	<u>+1 dependent</u>	<u>Family 2 or more</u>
Cost per pay period:	\$0	\$1.97	\$4.49

- Exam co-pay \$20
- Eyeglasses: Frame replaced every twenty-four (24) months; lenses replaced every twelve (12) months; co-pay \$20
- Contacts: Plan pays a maximum of up to \$130 per year for elective and 100% for medically necessary, if a participating provider (up to \$210 per year if non-participating)

Flex Accounts – The employee's insurance premiums are deducted from their gross wages before taxes. In addition, employees may elect to have additional money deducted pre-tax and deposited into their Flexible Spending Account. This money reimburses qualified out-of-pocket expenses.

These include:

- Medical Expenses – Deductibles, Co-Insurance, Prescriptions, plus other qualified expenses
- Dependent Care – Cost of caring for children or other dependents while employee is at work

CITY PROVIDED

2. Life Insurance – Group coverage provided through Regence Life and elective policy optional through Lincoln Financial.

- Individual Life – City provides a \$30,000 life insurance policy for each employee
- Dependent Life – City provides life insurance coverage of \$2,000 for each dependent
- Additional elective supplemental insurance is available at the employee's expense (group rates & portable). Rates based on employee age in five (5) year increments.

3. Employee Assistance Program (EAP) – (801) 392-6833 Provided by Blomquist Hale Consulting

- Counseling service for the employee and family members living in the same home
- Counseling services include emotional/stress management, family and parenting issues, depression, substance abuse, financial planning, legal assistance, and other various topics.
- Crisis Intervention Hotline

- ___4. **Long Term Disability Program** – Provided through Standard
-Eligible for benefits following ninety (90) days of disability; Continuation Pay equal to 66.7% of salary for up to 2 years, and may be extended until retirement or age 65, if qualified.
Short Term Disability Program – Provided through Colonial Life
- Provide income replacement for up to 90 days if unable to work.
- Rates are determined by age & elimination period selected.
- ___5. **Retirement** – Tier 2 Utah Retirement System (35 year plan) – Hired after July 1, 2011
-Hybrid Plan – Employer contributes an amount equal to 10% of salary. Current year 7.59% to pension and 2.41% to 401(k). **After four (4) years service** 100% vested in the Public Employee's Hybrid Plan.
-Defined Contribution Plan – Employer contributes an amount equal to 10% of salary to 401(k).
- Tier 1 Utah Retirement System (30 year plan) – Hired before July 1, 2011 and employed with URS agency.
-General employee – bi-weekly contribution made at 13.77% of current salary. **After four (4) years service** 100% vested in the Public Employee's Defined Benefit Plan.
- Employees may also elect to contribute their own money to a tax deferred 457 or an after tax 457 retirement plan available from Utah Retirement System and/or ICMA Retirement Corp. The ICMA 457 offers Roth provisions.
- Employees may also elect to contribute their money to a Roth IRA plan available from the Utah Retirement System and/or ICMA Retirement Corp.
- ___6. **Leave Accrual**
Annual Leave – Accrual of **3.6924 hours/pay period** (8 hrs/month) during first five (5) years
-Accrual rates increase after five (5), ten (10) and fifteen (15) years of service
-May accrue up to a maximum of two-hundred and forty (**240**) hours (by the end of the 1st pay period in January) each year
Sick Leave – Accrual of **3.6924 hours/pay period** (8 hrs/month)
-May accrue up to maximum of 1000 hours
-**After five (5) years service**, one third (1/3) of accrual balance is paid upon termination
-May be used for illness and medical related issues for self and immediate family members
-Annually (each November) employees may convert up to one-third (1/3) of the current year unused sick leave accrual into 'cash', 457 account or to be transferred to annual leave. Employees with more than 480 hours accrued may convert up to two-thirds (2/3) cash, 457, or annual leave.
- ___7. **COMPENSATION**
Pay days –Employees are paid every other Friday
-There are twenty-six (**26**) **pay days**/year
-There is one week lag in payment for time worked
- 9/80 Schedule (every other Friday off)
Paid Holidays – **Twelve (12) paid eight (8) hour holidays per year**: Due to the 9/80 Schedule you may have to use one (1) hr of vacation on a holiday to cover the 9th hour. New Year's Day, Martin Luther King Day, President's Birthday, Memorial Day, Independence Day, Pioneer Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, Day after Thanksgiving, Christmas Day
Payroll Deductions – **Auto-Deposit** of the net paycheck, plus additional Auto-Deposits for Layton City Utility Bills, Deferred Compensation-457 Retirement Plans, IRA Plans, Sub-4-Santa, United Way, Exercise Facility, Surf-N-Swim family pass and Department Association dues.