CITY OF VALLEJO

Summary of Benefits as of July 1, 2016

Confidential, Administrative, Managerial, and Professional Association Of Vallejo Employees (CAMP)

BENEFIT	PROVISION	WHEN ELIGIBLE	WHO ELIGIBLE	COST TO EMPLOYEE			
RETIREMENT – Classic Employees	PERS: 2.7% at 55 formula Social Security: Full benefits 7.65% of salary	Accrue upon hire. Service Retirement: 5 yrs and age 50	Employee	8% + 1% of Employer Share =9% of Reportable Compensation			
	pension formulas for employees hire S OR 2) having been out of the systematics.		w members of CalPERS. "New" i	s defined as 1) never having beer			
	2% @ 62 formula (PEPRA) With a highest benefit factor Of 2.5% at age 67	5 yrs and age 52	Employee	6.25% of Salary			
HOLIDAYS	Receive 13 paid holidays per year (including 2 floating hol	Accrue upon hire idays on a "use it or lose it" basis	Employee	-0-			
VACATION		May take paid leave upon accrual					
	80 Hours (10 working days)	0-4 years service	Employee	-0-			
	120 hours (15 working days)	more than 4-10 years service	Employee	-0-			
	160 hours (20 working days)	more than 10-20 years service	Employee	-0-			
	200 hours (25 working days)	20-26 years service	Employee	-0-			
	224 hours (28 working days)	more than 26 years service	Employee	-0-			
	May carry up to 3 years balance						
SICK LEAVE	3.70 hours per biweekly pay period (1 day for each full month of Employment based on 8 hour day) OR 12 hours for each full Month of employment	May take paid leave upon accrual					
	The 12 hour accrual is for employees who became a CAMP member on or after Feb 11, 2009 OR for employees hired prior to February 11, 2009 who elected to accrue at the higher level effective April 2009. If accruing at the higher level, the employee will not have a cash out option at the time of separation. They may convert entire sick leave balance to CalPERS service credit. Any remaining hours in the 8 hour accrual bank that is frozen if the 12 hour accrual was elected will have a cash out option.						
HEALTH							
INSURANCE	PERS Hospital and Medical Care Act (Administrator), Employee selects one of many different plans available.	First day of the month after hire (earliest). Must enroll within 60 days of hire.	Employee, spouse, and dependent children under age 26. Domestic Partner And Children included	See Cost below Employee pays any specific plan deductibles or co-payments.			
		etween the PEMHCA minimum ction 125 cafeteria/Flexible Bene		- ·			

NOTE: This is a summary of benefits extracted from the City CAMP Agreement dated July 1, 2014 – June 30, 2017

updated 1-19-17

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BENEFIT	PROVISION	WHEN ELIGIBLE	WHO ELIGIBLE	COST TO EMPLOYEE
MEDICAL FLEX	Employees who have Continuously waived coverage Since 12/31/13 shall receive \$550.00 per month in lieu of Cit medical insurance. Any other en who waives coverage shall receiper month.	nployee	Employee	-0-
DENTAL INSURANCE				
	Delta Dental Plan of California 2366-9, \$2,000 annual max., first dental visit responsib for \$50.00 deductible for each enrolled member. Delta pays 70% of covered benefits the first year. Orthodontic benefits \$2,000 lifetime max. For employ	ĭits	Employee, spouse, and idependent children under age 23. Domestic Partner and children included	City pays entire monthly premium for employee and dependents.
	and eligible dependents. 1			
WORKERS COMPENSATION	Up to 90 working days full salary and benefits, temporary disability afterwards.	Upon hire	Employee	City pays full cost.
LONG TERM DISABILITY	60 day waiting period. 60% of monthly salary max. monthly benefit \$5,500.	First day of month after six months of employment	Employee	City pays full premium.
VISION PLAN	Vision Service Plan, exam, lenses and frames every	First day of the month after hire.	Employee, spouse, dependent children under age 23	City pays full premium.
	12 months, if needed. 1		Domestic Partner and children included.	•
LIFE INSURANCE	Lincoln National \$40,000 Life/ \$40,000 AD&D	After 31 days	Employee	City pays full cost.
EMPLOYEE ASSISTANCE PROGRAM	5 visits per year for employee and each eligible family member. Counseling and referral service.	Upon hire	Employee, spouse, dependent children. Domestic Partner and children Included.	City pays full cost.

 $1\ No\ specifics\ in\ MOU,\ plan\ similar\ to\ that\ in\ effect\ on\ June\ 30,\ 2013.$ NOTE: This is a summary of benefits extracted from the City CAMP Agreement dated July 1, 2014 – June 30, 2017

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DEFERRED COMPENSATION	IRS 457, 3 different carriers available	Upon hire	Employee	Elective Benefit 100% employee contribution.		
•		0	nnual contribution for 457 Deferred C max for 2017 is \$36,000 and the Age	ompensation Program is \$18,000		
UNIFORM ALLOWANCE	Effective July 1, 2016, if employees in the CAMP bargaining unit are required to wear uniforms, the parties will meet and confer over the subject of a uniform allowance.					
BEREAVEMENT LEAVE	Up to 3 days	Upon hire	Employee	-0-		

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