

CITY OF VALLEJO
CURRENT BENEFITS COSTS

BARGAINING UNIT

Vision Service Plan

Premiums effective 1/1/17 \$11.05/EE Only \$24.10/EE+

CAMP	City pays 100% of premium
COUNCIL	*City pays 75% of premium
UNREPRESENTED	*City pays 75% of premium
IAFF	City pays 100% of premium
IBEW	City pays 100% of premium
VPOA	City pays 100% of premium
	*25% Employee Contribution effective February 1, 2010

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Delta Dental Plan (Self-Funded)

Rates Based on average of claims
Family Coverage – 7/1/16

CAMP	\$116.66 – City pays full premium
COUNCIL	*\$116.66– City pays 75% of premium \$87.50/\$29.16 EE Share
UNREPRESENTED	*\$116.66 – City pays 75% of premium\$87.50/\$29.16 EE Share
IAFF	\$158.33 – City pays full premium
IBEW	\$145.83 – City pays full premium
VPOA	\$137.50 – City pays full premium

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Long Term Disability Insurance

CAMP, IBEW	\$.29 per \$100
IAFF	\$24.50 (union policy)
VPOA	None
	100% Contribution by the City

CAMP and IBEW Rates Effective 2/1/16

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Employee Assistance Program

CAMP, COUNCIL, IBEW, UNREPRESENTED	\$4.46/Employee Paid by the City
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VPOA, IAFF	\$3.42/Employee Paid by the City
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Life Insurance

CAMP/IAFF/VPOA/IBEW

40,000 LIFE	40,000 AD&D
\$0.12 PER \$1,000	\$0.03 PER \$1,000
Monthly premium paid by the City	
Life Rate Effective 2/1/16	

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HEALTH INSURANCE

CalPERS Health Benefits - Kaiser Bay Area rates effective 1/1/17

<u>Level of Coverage</u>	<u>100% of Kaiser Premium</u>
Employee Only	\$733.29
Employee + 1 Dep	\$1,466.78
Family	\$1,906.81

CAMP

Effective July 1, 2016 City pays the PEMHCA Minimum. The 2017 PEMHCA Minimum \$128.00 and the difference between \$128 and maximum of 75%% of the Kaiser Bay Area rate paid through flex plan. Those retirees not participating in the Retiree Health Savings Plan receive up to \$300. The amount is paid in two parts, direct medical contribution of PEMHCA Minimum (\$128 for 2017) and a supplemental check in the amount of \$172 paid to the retiree.

<u>Level of Coverage</u>	<u>300.00 Contribution</u>	<u>Paid through Flex</u>
Employee Only	\$128.00	\$422.04
Employee + 1 Dep	\$128.00	\$972.09
Family	\$128.00	\$1,302.11

COUNCIL

Effective February 1, 2010 City pays \$300.00 and the difference between \$300 and maximum of 75%% of the Kaiser Bay Area rate paid through flex plan. Retirees are at \$300.00.

<u>Level of Coverage</u>	<u>\$300.00 Contribution</u>	<u>Paid through Flex</u>
Employee Only	\$300.00	\$250.04
Employee + 1 Dep	\$300.00	\$800.09
Family	\$300.00	\$1,130.11

UNREPRESENTED

Effective February 1, 2010 City pays \$300.00 and the difference between \$300 and maximum of 75%% of the Kaiser Bay Area rate paid through flex plan. Retirees are at \$300.00.

<u>Level of Coverage</u>	<u>\$300.00 Contribution</u>	<u>Paid through Flex</u>
Employee Only	\$300.00	\$250.04
Employee + 1 Dep	\$300.00	\$800.09
Family	\$300.00	\$1,130.11

IAFF Effective July 1, 2011 City pays \$300.00 and the difference between \$300 and maximum of 75%% of the Kaiser Bay Area rate paid through flex plan. Retirees are at \$300.00.

<u>Level of Coverage</u>	<u>\$300.00 Contribution</u>	<u>Paid through Flex</u>
Employee Only	\$300.00	\$250.04
Employee + 1 Dep	\$300.00	\$800.09
Family	\$300.00	\$1,130.11

IBEW Effective January 1, 2017 City pays the PEMHCA Minimum. The 2017 PEMHCA Minimum \$128.00 and the difference between \$128 and maximum of 75%% of the Kaiser Bay Area rate paid through flex plan. Those retirees not participating in the Retiree Health Savings Plan receive up to \$300. The amount is paid in two parts, direct medical contribution of PEMHCA Minimum (\$128 for 2017) and a supplemental check in the amount of \$172 paid to the retiree.

<u>Level of Coverage</u>	<u>300.00 Contribution</u>	<u>Paid through Flex</u>
Employee Only	\$128.00	\$422.04
Employee + 1 Dep	\$128.00	\$972.09
Family	\$128.00	\$1,302.11

VPOA Effective January 1, 2014 City pays \$300.00 and the difference between \$300 and maximum of 75%% of the Kaiser Bay Area rate paid through flex plan. Retirees are at \$300.00.

<u>Level of Coverage</u>	<u>\$300.00 Contribution</u>	<u>Paid through Flex</u>
Employee Only	\$300.00	\$250.04
Employee + 1 Dep	\$300.00	\$800.09
Family	\$300.00	\$1,130.11

BARGAINING UNIT

PERS RETIREMENT SYSTEM

	<u>Employer Contribution</u>	<u>EE Contribution</u>
IBEW, CAMP, UNREPRESENTED FY 2016/2017	33.72%	8% + 1% of Employer Cost
AB340 New Members 1/1/13	34.72%	6.25%
IAFF, FY 2016/2017	55.372%	9% + 4.4% of Employer Cost (no cost sharing for new hires)
AB340 New Members 1/1/13	59.772%	11.5% effective 7/1/16
VPOA FY 2016/2017	59.772%	9%

AB340 New Members 1/1/13 59.772% 12%

BARGAINING UNIT

SOCIAL SECURITY

City Contribution

EE Contribution

IBEW, UNREPRESENTED,
CAMP

7.65% (6.2% SS/1.45 Medicare)

7.65% (6.2% SS/1.45 Medicare)

IAFF, VPOA

1.45% Medicare Only
Employees hired after 4/1/86

1.45% Medicare only