CITY COUNCIL BENEFIT SUMMARY SHEET

COMPENSATION: \$1,900.00/month

FRINGE BENEFITS AND WELLNESS

MEDICAL

City medical plan premium contribution up to \$730.00/month for member, plus additional contribution if enrolling eligible dependent(s)

- DENTAL INSURANCE
 Employer paid family coverage
- EMPLOYEE ASSISTANCE PROGRAM (EAP)
 Available to member and dependents
- VISION PLAN
 City paid for member only
 Dependents may be added at additional cost
- LIFE INSURANCE
 City paid \$100,000 policy

- ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE
 Covered accident/injury/loss up to \$102,000
 Work-related accident up to an additional \$50,000
- MEDICARE COVERAGE
 Provided for members elected after April 1, 1986
- WELLNESS
 Up to \$1,000/per fiscal year for costs associated with participation in a Wellness Program or a supervised health promoting activity
- WELLNESS CENTER AND LAP SWIM
 Available to all active members at no cost

RETIREMENT BENEFITS

RETIREMENT – PERS (Optional Enrollment)
 2.5% @ 55 OR 2.0% @ 62 up to 2.5% @ 67 (depending on PERS membership date and election date with the City)

PERS will determine Classic or New membership status

- RETIREMENT HEALTH SAVINGS PLAN (RHS)
 City contributes \$100.00/month
- RETIREE MEDICAL TRUST (BERMT) \$50.00/pay period City contribution
- §457 DEFERRED COMPENSATION PLAN
 City matches §457 deferred compensation member contribution up to \$100.00/month

MISCELLANEOUS

- WORKERS COMPENSATION
 City is self insured and provides coverage to member
- CHILD CARE AND FAMILY CARE sourcing assistance through Bright Horizons

 TRANSPORTATION ALLOWANCE \$250.00/month

THIS IS PROVIDED AS A SUMMARY OF BENEFITS AND DOES NOT CONFER ANY RIGHTS UPON ANY EMPLOYEE. PLEASE REFER TO THE APPROPRIATE RESOLUTION FOR A MORE DETAILED DISCUSSION OF THESE BENEFITS.