# MEDICAL/VISION PLAN OPTIONS. Eligible first of the month following date of hire.

MEDICAL PROVIDER	Employee Only		Employee & One Dependent		Employee & Family	
	Full-Time (30 + hrs. wk.)	Part-Time (20—29 hrs. wk.)	Full-Time (30 + hrs. wk.)	Part-Time (20—29 hrs. wk.)	Full-Time (30 + hrs. wk.)	Part-Time (20—29 hrs. wk.)
Regence BCBS PPO & <u>Vision Service Plan (VSP)</u>	\$95.78	\$320.72	\$192.20	\$636.60	\$277.32	\$903.38
Kaiser Permanente HMO	\$95.78	\$296.38	\$192.20	\$593.20	\$277.32	\$882.06
Regence BCBS HDHP & <u>Vision Service Plan (VSP)</u>	\$7.22	\$230.28	\$13.26	\$454.74	\$18.78	\$642.78
Kaiser Permanente HDHP	\$7.22	\$159.50	\$13.26	\$318.14	\$18.78	\$476.44
OPT-OUT AND RECEIVE CASH	\$130.00	\$91.00	\$130.00	\$91.00	\$130.00	\$91.00

### **Monthly Contributions for Employees**

To Opt Out of medical coverage you must provide proof of other group coverage.

**Health Saving Account (HSA)** Employees enrolled in the HDHP plans will be automatically enrolled in the HSA. The county will contribute \$20.83 per pay period for single coverage or \$41.66 per pay period for family coverage. You may also contribute per pay period an amount up to the annual maximum allowed.

DENTAL PLAN OPTIONS. Eligible the first of the month following 90 calendar days of employment.

#### **Monthly Contributions for Employees**

DENTAL PROVIDER	Employee Only		Employee & One Dependent		Employee & Family	
	<b>Full-Time</b> (30 + hrs. wk.)	Part-Time (20—29 hrs. wk.)	Full-Time (30 + hrs. wk.)	Part-Time (20—29 hrs. wk.)	Full-Time (30 + hrs. wk.)	Part-Time (20—29 hrs. wk.)
Delta Dental of WA (DDWA)	\$5.68	\$16.14	\$10.92	\$30.60	\$16.74	\$47.24
Kaiser Permanente Dental	\$5.68	\$21.86	\$10.92	\$43.40	\$16.74	\$65.36
OPT-OUT AND RECEIVE	\$20.00	\$14.00	\$20.00	\$14.00	\$20.00	\$14.00

# To find out more in-depth information concerning any of our health coverage plans, click on the plans name to be taken to a link that will provide you with their "Summary of Benefits Coverages".

# Additional Benefits:

FLEXIBLE SPENDING ACCOUNTS FOR HEALTH CARE AND DEPENDENT CARE\* Allows employees to pay for qualified expenses with pre-tax dollars.

GROUP TERM LIFE INSURANCE\* Employer paid 1x annual salary up to \$150,000. Plan includes Accidental Death & Dismemberment (AD&D).

**ADDITIONAL TERM LIFE INSURANCE\* (OPTIONAL)** Purchase increments of \$10,000 up to a maximum of \$500,000. Spouse coverage available in \$10,000 increments up to 100% of the employee's total coverage. Dependent child coverage available. Evidence of insurability may be required.

**LONG TERM DISABILITY INSURANCE\*** Employer paid benefit. Pays 60% of covered salary up to a maximum monthly benefit of \$9,000 following a 60 calendar day waiting period or total length of accrued PTO and/or sick leave, whichever is longer.

LONG TERM DISABILITY BUY-UP\* (OPTIONAL) Purchase an additional 6 2/3% benefit to increase total long term disability benefit to 66 2/3%.

**EMPLOYEE ASSISTANCE PROGRAM** Referral and short term counseling service for employees and their covered dependents. Up to 6 individual counseling sessions per issue; legal and financial counseling available.

**HOLIDAYS** Eleven (11) Holidays.

**BEREAVEMENT LEAVE** Up to three (3) days or maximum of 24 hours upon death of covered family member. Up to an additional two (2) days or sixteen (16) hours for air travel or one-way land travel of four (4) or more hours when necessary, with prior approval.

# JURY DUTY LEAVE

#### MILITARY LEAVE

**WASHINGTON STATE PUBLIC EMPLOYEES' RETIREMENT SYSTEM (PERS or PSERS)** Employee choice between PERS Plan 2 and Plan 3. Participation and employee and employee contributions required. Contribution rates are established by DRS.

DEFERRED COMPENSATION (457 PLAN)-OPTIONAL Employee paid tax deferred retirement savings plan.

**LEGALLY MANDATED BENEFITS** Social Security, Medicare, Unemployment Insurance, and Workers' Compensation.

\* Not available to project employees

### Paid Time Off PTO Accrual Schedule

PTO for vacation after the completion of 6 months of service; PTO use for sick leave immediate. Part-time employees accrue pro-rated share.

Completed Years of Service	Monthly Accrual (hours)	Hours per Year	Days per Year (based on 8 hours per day)	Maximum Accumulation (hours)	Maximum Payout (hours)
Start	16.00	192	24	192	192
1	18.00	216	27	432	324
5	20.68	248	31	496	372
10	22.68	272	34	544	416
15	24.68	296	37	592	464
20	26.00	312	39	624	512

Employees receive one (1) floating holiday per year. The floating holiday shall be credited on January 1 of each year, and must be used by the end of the calendar year. Floating holidays may not be carried forward to the next calendar year. New employees shall receive a pro-rata share of the floating holiday at a rate of 1/24th up to a maximum of 8 hours of the annual entitlement.

**NOTE:** This is a summary of benefits only; details are contained in the HR County Policy Manual, Collective Bargaining Agreement, Summary Plan Descriptions or other plan materials. This summary reflects benefits for full-time employees. Part-time, job-share, and project employee benefits may differ. Benefit Plans are subject to change.