

# Clark County 2024 Benefits Summary

## Deputy Sheriffs Guild

**MEDICAL/VISION PLAN OPTIONS** - Eligible 1st of the month following hire date, ends the last day of month you work.

### Monthly Contributions for Employees

MEDICAL PROVIDER Click on the Provider link below to view a summary of benefits	Employee Only Full Time	Employee & One Dependent Full Time	Employee & Family Full Time
<a href="#">Regence BCBS PPO &amp; Vision Service Plan (VSP)</a>	49.62	97.74	141.66
<a href="#">Kaiser Permanente Traditional</a>	49.62	97.74	141.66
<a href="#">Regence BCBS HDHP &amp; Vision Service Plan (VSP)</a>	36.30	72.24	120.94
<a href="#">Kaiser Permanente HDHP</a>	36.30	72.24	120.94
<b>OPT-OUT AND RECEIVE CASH *</b>	\$130.00	\$130.00	\$130.00

\*To Opt-Out of medical coverage, proof of other group coverage is required. Please attach the Healthcare Opt-out form, [found here](#)

**Health Savings Account (HSA)** Employees enrolled in the HDHP plans must also be 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 1<sup>st</sup> of the month following 90 days, ends the last day of the month you work.

### Monthly Contributions for Employees

DENTAL PROVIDER Click on the Provider link below to view a summary of benefits	Employee Only	Employee & One Dependent	Employee & Family
<a href="#">Delta Dental of WA (DDWA)</a>	2.40	5.46	7.94
<a href="#">Kaiser Permanente Dental</a>	2.40	5.46	7.94
<b>OPT-OUT AND RECEIVE CASH *</b>	\$20.00	\$20.00	\$20.00

\*To Opt-Out of dental coverage, proof of other group coverage is required. Please attach the Healthcare Opt-out form, [found here](#)

**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 and project employee benefits may differ. Benefit Plans are subject to change.

**Additional Benefits:**

**Flexible Spending Accounts for Healthcare and Dependent Care** Allows employees to pay for qualified expenses with pre-tax dollars.

**Group Term Life Insurance** Employer paid, \$25,000 in coverage. 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 for \$5,000, \$7,500 or \$10,000. Evidence of insurability may be required.

**Employee Assistance Program** A free and confidential benefit that can assist you and your eligible dependents with services such as counseling, financial and life coaching, legal consultations, employee wellness, a discount program, and much more. Up to 6 individual counseling sessions per person, per issue, per year.

**Bereavement Leave** A full-time employee shall be granted up to five (5) consecutive calendar days of paid bereavement leave at the event of a death in the employee's immediate family.

**Jury Duty Leave** Allowing paid time for employees to serve as a member of a jury. See policy for more details.

**Military Leave** Providing military leave and reinstatement rights for employees. See policy for more details.

**Washington State Public Employees' Retirement System (LEOFF)** Participation and employer and employee contributions required. Contribution rates established by DRS.

**457 Deferred Compensation Plan (Optional)** Employee paid tax-deferred retirement savings plan.

**Legally Mandated Benefits** Social Security, Medicare, Unemployment Insurance, and Workers' Compensation.

**Paid Days Off (PDO) Accrual Schedule**

Paid vacation, illness, holidays, or personal time off after the completion of six (6) months of service.

**Sick Leave** Full-time employees accrue four (4) hours per month, or forty-eight (48) hours per year.

Completed Years of Service	Monthly Accrual (hours)	Hours per Year	Days per Year (based on 8 hr. day)	Maximum Accumulation (hours)
Start	18.68	224	28	298
1	20.68	248	31	330
5	22.00	264	33	351
10	23.34	280	35	372
15	24.68	296	37	394
20	26.00	312	39	415
25	27.34	328	41	436