# INYO COUNTY BENEFITS AND COSTS 2021 NON-REPRESENTED, MANAGEMENT, DEPTARTMENT HEADS, & ELECTED OFFICIALS

## <u>HEALTH INSURANCE – MEDICAL</u>

#### PERS SELECT (PPO 80/20 Plan)

**Employee Only** 

Monthly Premium
County portion (80%)
Employee portion (20%)
\$476.92/mo.
\$381.54/mo.
\$44.02/payroll

**Employee + One Dependent** 

Monthly Premium\$953.84/mo.County portion (80%)\$763.07/mo.Employee portion (20%)\$88.05/payroll

**Employee + Family Coverage** 

 Monthly Premium
 \$1239.99/mo.

 County portion (80%)
 \$991.99/mo.

 Employee portion (20%)
 \$114.46/payroll

#### PERS CHOICE (PPO 80/20 Plan)

**Employee Only** 

Monthly Premium\$783.19/mo.County portion (80%)\$626.55/mo.Employee portion (20%)\$72.29/payroll

**Employee + One Dependent** 

 Monthly Premium
 \$1566.38/mo.

 County portion (80%)
 \$1253.10/mo.

 Employee portion (20%)
 \$144.59/payroll

**Employee + Family Coverage** 

Monthly Premium \$2036.29/mo.
County portion (80%) \$1629.03/mo.
Employee portion (20%) \$187.97/payroll

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## PERS CARE (PPO 90/10 Plan)

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<b>Monthly Premium</b>	\$1115.68/mo.
County portion (up to 80% of Choice Rate)	\$626.55/mo.
Employee portion (20% + balance)	\$225.75/payroll

#### **Employee + One Dependent**

<b>Monthly Premium</b>	\$2231.36/mo.
County portion (up to 80% of Choice Rate)	\$1253.10/mo.
Employee portion (20% + balance)	\$451.50/payroll

## **Employee + Family Coverage**

Monthly Premium	\$2900.77/mo.
County portion (up to 80% of Choice Rate)	\$1629.03/mo.
Employee portion (20% + balance)	\$586.96/payroll

County reimburses 50% of each deductible met for employee and dependent coverage enrolled in PPO plans.

County will pay \$92.31-employee only, \$184.62-employee + one or \$276.93-family per payroll to each employee who has other medical coverage and has opted out of the County's medical plan.

## <u>LIFE INSURANCE</u> \$4.04/mo.

County pays for \$20,000 of term life insurance on employee only.

#### **DENTAL INSURANCE- Delta Dental**

\$60.00/mo.

County pays 100% for employee and dependents.

### <u>VISION INSURANCE – Vision Service Plan</u>

\$15.00/mo.

County pays 100% for employee and dependents.

#### **SHORT-TERM DISABILITY (Excludes Elected Officials)**

County pays for employee (to a maximum of the current State of CA rate).

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#### PUBLIC EMPLOYEES RETIREMENT SYSTEM (CALPERS)

Classic Employees (existing CalPers member) 2% at 55 – Inyo County pays the employee contribution rate of 7% of base salary toward retirement.

**PEPRA Employees** (new CalPers members hired after January 1, 2013) 2% at 62. Employees will be required to pay 6.5% of base salary toward retirement.

## **VACATION**

10 days after 1 year of continuous service; 15 days after 3 years of continuous service; additional 1 day per year after 10 years, to a maximum of 25 days per year. May accrue up to a maximum of 35 days.

#### SICK LEAVE

15 days per year (accrues) – No max limit (exclude elected officials)

#### **FLEX DAYS**

5 days per fiscal year (does not accrue) (exclude elected officials)

#### LONGEVITY PAY

2% after 10 years of service Additional 2% (=4%) after 15 years of service Additional 2% (=6%) after 20 years of service Additional 2% (=8%) after 25 years of service

#### **HOLIDAYS**

11 days per year

#### **SAFETY SHOES**

Designated positions - \$150/yr.

## **OPTIONAL PLANS**

Deferred Compensation Plans Credit Unions Additional Life Insurance Flex Benefit 125 Program