

City of Springfield Benefit Year 2010
Benefit Package for OPEU/SEIU Employees

City Provided Benefits

Medical <i>(Required for employee)</i>	Choice of Pacific Source HIP or PPO (See Benefit Handbook for details) (See attached premium table for employee share of premiums)
Health Reimbursement Account	City pays into HRA to offset out of pocket costs on HIP (High deductible plan) only. \$75 per month for single (\$900 total annual), \$150 per month for Two Party and Family (\$1800 total annual)
Dental <i>(Required for employee)</i>	Oregon Dental Service (ODS) (Employee pays a portion of the premium)
Vision	Part of Pacific Source Medical Plans
Basic Life Insurance (Standard Insurance Co)	1 x Annual Salary up to \$100,000 maximum
AD/D Insurance (Standard Insurance Co)	1 x Annual Salary up to \$100,000 maximum
Long Term Disability (Assurant Employee Benefits)	60% Wage replacement coverage for full-time employees disabled for more than 90 days.
Retirement	<ul style="list-style-type: none"> • Oregon Public Employee's Retirement System (OPERS) • Employee pick-up of 6% of salary paid by the City after 6 months
Employee Assistance Program (DIRECTION)	Confidential personal and mental health counseling for all members of the employee's household. <ul style="list-style-type: none"> • 6 free visits per problem per calendar year
Holidays	Ten (10) regular scheduled holidays plus one (1) floating holiday (prorated for partial year)
Vacation	<ul style="list-style-type: none"> • 0-3 years = Accrue 3.693 hours bi-weekly, 96 hrs annually • 4-8 years = Accrue 4.308 hours bi-weekly, 111.96 hrs annually • 9-13 years = Accrue 4.925 hours bi-weekly, 128.04 hrs annually • 14-18 years = Accrue 5.858 hours bi-weekly, 152.04 hrs annually • 19+ years = Accrue 6.154 hours bi-weekly, 159.96 hrs annually, plus .309 hours bi-weekly or 8.0 annually for each year beyond 19 • Maximum Accrual 500 hours • Maximum payout (after 6 months employment) 80 hours more than annual accrual
Sick Leave	<ul style="list-style-type: none"> • Accrue 3.693 hours per bi-weekly pay period, 96 hrs annually • Available month following accrual • Prorated for partial months • Maximum accrual 960 hours • Maximum payout at retirement 480 hours

More Information on Back

This is only a brief summary of benefits.
Please refer to the original plan documents for details, limitations and exclusions.

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Voluntary Benefits (Employee Paid)

Sick Leave Reserve Program	<p>A bank of sick leave available to employees who exhaust all forms of paid leave due to a serious illness.</p> <ul style="list-style-type: none"> • Must donate one day of sick leave each year to participate in the program • Must re-enroll each year • Eligibility for leave determined by years of service and approval by HR Director
Flexible Spending Account (FSA) (Manley Administrative Services)	<p>A voluntary pre-tax payroll deduction for out of pocket medical and/or childcare expenses under IRC Section 125</p> <ul style="list-style-type: none"> • Must be used within the plan year • Can not change deduction (except for childcare)
Supplemental Life Insurance (Standard Insurance Co)	<p>Term life insurance for employee, spouse and children</p> <ul style="list-style-type: none"> • Cost increases with age • Guaranteed coverage if purchased within 30 days of hire
Accidental Death & Dismemberment Insurance (Standard Insurance Co)	<p>Employee only or family accidental death and dismemberment coverage</p> <ul style="list-style-type: none"> • Up to \$300,000 • Family coverage available
<p>Deferred Compensation:</p> <ul style="list-style-type: none"> • ING-Financial Planning • ICMA/RC • Oregon Saving Growth Plan (OSGP) 	<p>Retirement investment options under IRC Section 457 provided through:</p> <ul style="list-style-type: none"> • Pretax deferral of wages • Employee manages the funds • No withdrawal until termination of employment • \$16,500 limit per year limit • Additional \$5,500 annual catch-up option if over age 50

Total Medical/Dental Amount per Month	HIP		PPO	
	Single	Two Party	Family	Family
Single	\$527.20		\$814.56	
Two Party		\$1123.24		\$1754.90
Family		\$1558.50		\$2419.50

City Total Premium Share			
Single	Two Party	Family	Family
\$474.50	\$1010.92	\$1402.64	\$1402.64

Employee Total Premium Share			
Single	Two Party	Family	Family
\$52.70	\$112.32	\$155.86	\$1016.86

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