

# 2016 City of Springfield Benefit Package for SPA Employees



## City Provided Benefits

| <b>Medical</b><br>(Required for employee)                     | Pacific Source HIP (See Benefit Handbook for details)<br>(See premium table below for employee share of premiums)   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
|---|---|------------------|---------------|--|--|-----------|---------|--------|--------|-------|---|----|--------|-------|----|-----|----------|-------|----|-----|----------|-------|----|-----|------|-------|----|-----|--|--|
| <b>Health Reimbursement Account</b>                           | City pays into HRA for HIP (High deductible plan) enrollment only. <ul style="list-style-type: none"> <li>\$100 per month for single (\$1200 total annual)</li> <li>\$200 per month for Two Party and Family (\$2400 total annual)</li> </ul>   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Dental</b><br>(Required for employee)                      | Oregon Dental Service (ODS) (Employee pays a portion of the premium)  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Vision</b>   | Part of Pacific Source Medical Plans  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Basic Life Insurance</b><br>(Standard Insurance Co)        | \$20,000 Group Life Insurance policy  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>AD/D Insurance</b><br>(Standard Insurance Co)              | \$20,000 Accidental Death and Dismemberment policy  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Mandatory Life</b><br>(Assurant Employee Benefits)         | \$10,000 for job related death. (Sworn employees only)  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Long Term Disability</b><br>(Standard Insurance Co)        | 60% Wage replacement coverage for full-time employees who are disabled for more than 60 days.   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Pre-Retirement Life</b><br>(Employees hired before 4/1/96) | Pre-retirement life insurance for active employees on the City Retirement Plan. \$150,000 maximum decreasing based on age and annual salary.  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Retirement</b>   | <ul style="list-style-type: none"> <li>City Retirement Plan if hired before April 1996.</li> <li>PERS if hired after April 1, 1996.</li> </ul>  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Employee Assistance Program (DIRECTION)</b>                | Confidential personal and mental health counseling for all members of the employee's household. <ul style="list-style-type: none"> <li>6 free visits per problem per calendar year</li> </ul>   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Willamalane</b>  | Willamalane Center membership to all employees.   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Floating Holidays</b>                                      | <ul style="list-style-type: none"> <li>Accrue 4.308 hours bi-weekly</li> <li>Available to use the month following accrual</li> <li>Maximum accrual is 112 hours, payout each month for balance above Maximum</li> <li>Payout upon termination</li> </ul>  |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Vacation</b>   | <table border="1"> <thead> <tr> <th rowspan="2">Years of Service</th> <th colspan="3">Accrual Rate:</th> </tr> <tr> <th>Bi-weekly</th> <th>Monthly</th> <th>Annual</th> </tr> </thead> <tbody> <tr> <td>0 to 4</td> <td>3.693</td> <td>8</td> <td>96</td> </tr> <tr> <td>5 to 9</td> <td>4.616</td> <td>10</td> <td>120</td> </tr> <tr> <td>10 to 14</td> <td>5.539</td> <td>12</td> <td>144</td> </tr> <tr> <td>15 to 19</td> <td>6.462</td> <td>14</td> <td>168</td> </tr> <tr> <td>20 +</td> <td>7.385</td> <td>16</td> <td>192</td> </tr> </tbody> </table> | Years of Service | Accrual Rate: |  |  | Bi-weekly | Monthly | Annual | 0 to 4 | 3.693 | 8 | 96 | 5 to 9 | 4.616 | 10 | 120 | 10 to 14 | 5.539 | 12 | 144 | 15 to 19 | 6.462 | 14 | 168 | 20 + | 7.385 | 16 | 192 | <ul style="list-style-type: none"> <li>Available to use the month following accrual, after 6 months of initial employment</li> <li>Maximum accrual is two years of current accrual rate</li> <li>Payout upon termination if after 6 month of employment</li> </ul> |  |
| Years of Service  | Accrual Rate:   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
|   | Bi-weekly   | Monthly          | Annual        |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| 0 to 4  | 3.693   | 8                | 96            |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| 5 to 9  | 4.616   | 10               | 120           |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| 10 to 14  | 5.539   | 12               | 144           |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| 15 to 19  | 6.462   | 14               | 168           |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| 20 +  | 7.385   | 16               | 192           |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |
| <b>Sick Leave</b>   | <ul style="list-style-type: none"> <li>Accrue 3.693 hours per bi-weekly pay period</li> </ul>   |                  |               |  |  |           |         |        |        |       |   |    |        |       |    |     |          |       |    |     |          |       |    |     |      |       |    |     |  |  |

## 2016 City of Springfield Benefit Package for SPA Employees



- Available to use the month following accrual
- Maximum accrual is 1200 hours
- Payout 50% of accrued balance but only at time of retirement

### Voluntary Benefits (Employee Paid)

|   |   |
|---|---|
| <b>Flexible Spending Account (FSA)</b><br>(PacificSource Administrators)  | A voluntary pre-tax payroll deduction for out of pocket medical and/or childcare expenses under IRC Section 125 <ul style="list-style-type: none"> <li>• Must be used within the plan year</li> <li>• Cannot change deduction mid-year. (except for childcare)</li> </ul>   |
| <b>Supplemental Life Insurance</b><br>(Standard Insurance Co)   | Term life insurance for employee, spouse and children <ul style="list-style-type: none"> <li>• Cost increases with age</li> <li>• Guaranteed coverage if purchased within 30 days of hire.</li> </ul>   |
| <b>Accidental Death &amp; Dismemberment Insurance</b><br>(Standard Insurance Co)  | Employee only or family accidental death and dismemberment coverage <ul style="list-style-type: none"> <li>• Up to \$300,000</li> <li>• Family coverage available</li> </ul>  |
| <b>Short Term Disability Insurance</b><br>(Sun Life Assurance Co.)  | 60% Gross wage replacement coverage for employees disabled for more than 15 days and a maximum of 90 days.  |
| <b>Deferred Compensation:</b> <ul style="list-style-type: none"> <li>• <b>ING-Financial Planning</b></li> <li>• <b>ICMA/RC</b></li> <li>• <b>Oregon Saving Growth Plan</b></li> </ul> | Retirement investment options under IRC Section 457 provided through: <ul style="list-style-type: none"> <li>• Pre-tax deferral of wages</li> <li>• Employee manages the funds</li> <li>• No withdrawal until termination of employment</li> <li>• \$18,000 limit per year limit</li> <li>• Additional \$6,000 annual catch-up option if over age 50</li> </ul> |

### Medical and Dental Rates

| Total Medical/Dental Amount per Month | HIP         |
|---------------------------------------|-------------|
| Single                                | \$ 660.38   |
| Two Party                             | \$ 1,413.04 |
| Family                                | \$ 1,955.78 |
| <b>City Total Premium Share</b>       |             |
| Single                                | \$ 640.57   |
| Two Party                             | \$ 1,370.65 |
| Family                                | \$ 1,897.11 |
| <b>Employee Total Premium Share</b>   |             |
| Single                                | \$ 19.81    |
| Two Party                             | \$ 42.39    |
| Family                                | \$ 58.67    |