EXECUTIVE MANAGEMENT

2024 BENEFIT SUMMARY

Benefit/Provider		Monthly Contributions	
Denemy 110 vide	Coverage Level	City Pays	Employee Pays
Kaiser HMO	Employee Only	\$529.16	\$108.26
	Employee + 1	\$1,058.34	\$216.50
	Family	\$1,494.46	\$309.40
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Kaiser HDHP w/HSA	Employee Only	\$435.46	\$78.72
Note: The City will contribute	Employee + 1	\$870.90	\$157.46
to an employee's HSA: \$800 for Employee Only coverage;	Family	\$1,229.46	\$225.64
\$1,600 for Employee + 1 or			
Family coverage			
Delta Preferred PPO	Employee Only	\$37.34	\$0.00
	Employee + 1	\$36.02	\$37.44
	Family	\$33.24	\$92.72
DeltaCare DMO	Employee Only	\$22.16	\$0.64
	Employee + 1	\$22.16	\$18.70
	Family	\$22.16	\$38.34
Anthem BlueView Vision	Employee Only	n/a	\$7.11
	Employee + 1	n/a	\$12.72
	Family	n/a	\$21.08
Critical Illness (The	Employee Only	n/a	Rates vary based on age
Hartford)	Employee + Spouse	n/a	and coverage-See
	One Parent Family	n/a	Benefits
	Two Parent Family	n/a	
Accident -Low Plan	Employee Only	n/a	\$5.20
(The Hartford)	Employee + Spouse	n/a	\$8.18
	Employee + Children	n/a	\$8.55
	Two Parent Family	n/a	\$13.51
Accident – High Plan	Employee Only	n/a	\$8.09
(The Hartford)	Employee + Spouse	n/a	\$12.74
	Employee + Children	n/a	\$13.46
	Two Parent Family	n/a	\$21.19
Hospital Indemnity Plan	Employee Only	n/a	Rates vary based on age
(The Hartford)	Employee + Spouse	n/a	and coverage
	One Parent Family	n/a	
ARAG – Legal Plan	Two Parent Family Plan Membership	n/a n/a	\$24.25
ARAG - Legal Plati	Plan Wembership	II/ d	324.23
Supplemental Life	Age rated coverage for self,	n/a	Rates vary based on
Insurance (The Hartford)	spouse and children		coverage
Group Life Insurance	Basic Life and AD&D: ½ base	City pays full cost	No cost to employee
(The Hartford)	annual earnings + \$25,000		
	Dependent Life: \$1,000		
Section 125	Provider: TRI-AD		
Pre-tax Premiums,	Employee may set aside tax-free FSA \$		
Medical and Dependent	Annual minimum (both FSAs): \$240		
Care Flexible Spending	Medical FSA annual max:	\$3,050	
Accounts	Dependent FSA annual max:	\$5,000	

EXECUTIVE MANAGEMENT

2024 BENEFIT SUMMARY

Employee pays .715% of salary		
Employee pays .50% of salary		
Employee and Employer share the cost		
Tier 1 Classic: 3% @ 60 Employee contribution rate = 8% Single Highest Year		
Tier 2 Classic: 2% @ 60 Employee contribution rate = 7% 3 Year Highest Avg		
Tier 3 PEPRA: 2% @ 62 Employee contribution rate = 7.75% 3 Year Highest Avg		
Employee contributions to plans are optional		
4% of monthly salary + \$125 (divided into the first two paychecks of each month)		
\$75 per month for waiving at least one level of health insurance		
10 per year		
Selected Executive Management positions receive \$375 - \$450 per month		
4 – 15 days annually, depending on position		
9 hours per month, no maximum accrual		
Years of Service Accrual		
1 to 5 96 hours		
6 to 10 136 hours 11 to 15 176 hours		
16 to 20 216 hours		
Plus, an additional 24 hours credited each July 1		
Plus, an additional 4 hours credited each October		
Employee Assistance Program (EAP) – counseling services		
The Hartford – Travel Assistance & Identity Theft Program		
529 College Savings Plan		
Gym Membership		
Dell Computers		
Apple Products		
AT&T, T-Mobile and Verizon Cellphones		
Working Advantage Program – entertainment discounts		
Fun Express – entertainment discounts Education Discounts: National University, Grand Canyon University and Waldorf		
University		

Revision Date: October 1, 2023