

# Summary of Benefits



## OREGON PUBLIC EMPLOYEES UNION 2016

*This summary does not constitute an offer of a contract and should not be construed as a contractual agreement between the City and its employees. The City reserves the right at any time to withdraw or amend any portion of these benefits as they apply to current or future employees.*

*This summary is intended to provide only a general overview of the City of Tigard benefits. Please refer to individual benefit booklets for answers to specific questions regarding benefits and coverage.*

*MEDICAL/ VISION (see plan summaries/flyers for more detail)*  
Effective: 1<sup>st</sup> day of month following 1 full months of employment

<b>Regence Plan I-C</b>			
Deductible:	\$300/claimant; \$900/family		
	<b>Category 1</b>	<b>Category 2</b>	<b>Category 3</b>
Maximum co-insurance Per calendar year	\$2,300/claimant	\$2,300/claimant	\$4,300/claimant
Claimant Responsibility	20%	40%	40%
Covered Services	Please review to Plan I-C PPP Rx2 plan summary for more specific service information		
VSP	Please refer to applicable benefit summaries		
Alternative Care			
Prescription Coverage			
<b>Regence Plan V-E</b>			
Deductible:	\$500/claimant; \$1,500/family		
	<b>Category 1</b>	<b>Category 2</b>	<b>Category 3</b>
Maximum co-insurance Per calendar year	\$1,000/claimant	\$1,000/claimant	\$2,000/claimant
Claimant Responsibility	10%	30%	30%
Covered Services	Please review to Plan V-E PPP Rx4 plan summary for more specific service information		
VSP	Please refer to applicable benefit summaries		
Alternative Care			
Prescription Coverage			
<b>Kaiser</b>			
Deductible:	Not Applicable		
Maximum co-insurance Per calendar year	\$600/claimant; \$1,200/family		
Claimant Responsibility	\$10 co-pay per visit*		
Covered Services*	Please refer to Kaiser plan summary for more specific service information including vision, alternative care, and prescription coverage		

*DENTAL (see plan summaries/flyers for more detail)*  
Effective: 1<sup>st</sup> day of month following 1 full months of employment

<b>Kaiser Dental</b>	Benefit Maximum/year:	Unlimited
	Deductible:	None
	Preventative Services:	\$10/visit
	Basic Services:	\$10/visit
	Major Services:	Co-pay depends on service
	Orthodontia Services:	n/a
<b>Delta Dental</b>	Benefit Maximum/year:	\$1,500
	Deductible:	None
	Preventative Services:	70-100%
	Basic Services:	70-100%
	Major Services:	50%
	Orthodontia Services:	n/a
<b>Willamette Dental</b>	Benefit Maximum/year:	Unlimited
	Deductible:	None
	Preventative Services:	\$10/visit
	Basic Services:	\$10/visit
	Major Services:	\$10/visit
	Orthodontia Services:	\$1,500/co-pay

**VEBA** (see plan summary)/flyer for details)  
Effective: 1<sup>st</sup> day of employment; 1<sup>st</sup> month pro-rated

**Voluntary Employee Beneficiary Account**

- \$75/month contributed by the City
- Maximum benefit of \$900/year

**LIFE INSURANCE PROGRAMS** (see plan summaries/flyers for details)

**Life Insurance (City-sponsored)**

- Effective: 1<sup>st</sup> of month following 2 full months of employment
- \$25,000 Life w/AD & D

**Voluntary Life Insurance**  
• Additional Employee  
• Spouse  
• Dependent

- Effective: 1<sup>st</sup> of month following 2 full months of employment
- Must apply within 30 days of hire

**RETIREMENT PROGRAMS**

Effective: 6 months after date of hire

**ICMA 401(a)**

- City contributes 10% of monthly salary
- Employee can contribute up to 6% of base salary after tax

**DEFERRED COMPENSATION (457)**

Effective: 1<sup>st</sup> day of employment

**ICMA 457**

- Employee can contribute pre-tax dollars into optional retirement plan(s);

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**SICK LEAVE**

Effective: 1st day of employment

**Sick Leave**

- Available for illnesses/injuries
- Accrual: 96 hours per year
- First 40 hours accrue on January 1, remaining hours accrue equally in each of 26 pay periods
- Part-time employee benefits are prorated based on hours worked
- See SEIU Collective Bargaining Agreement

**VACATION**

Effective: 1st day of employment

**Vacation**

- Benefits are prorated based on 26 pay periods
- Part-time employee benefits are prorated based on hours worked using the schedule below
- See SEIU Bargaining Agreement

<u>Years of Service</u>	<u>Accrual Rate/Month</u>
0 - 6 month	No accrual 20 hours credited to full-time employees upon successful completion of probationary period
6 months to 1 year of service	7.0 hours/month
After the 1 <sup>st</sup> anniversary of service	8.0 hours/month
After the 5 <sup>th</sup> anniversary of service	10.0 hours/month
After the 10 <sup>th</sup> anniversary of service	12.5 hours/month
After the 15 <sup>th</sup> anniversary of service	14.0 hours/month
After the 20 <sup>th</sup> anniversary of service	16.0 hours/month

***OTHER LEAVE***

<b>Leaves of Absence</b> <ul style="list-style-type: none"><li>• FLMA</li><li>• Bereavement</li><li>• Jury</li><li>• Leave w/o Pay</li></ul>	See SEIU Bargaining Agreement and Citywide Personnel Policies
<b>Holidays</b>	<ul style="list-style-type: none"><li>• Effective: 1<sup>st</sup> day of employment</li><li>• 10 paid holidays per year;</li><li>• 1 floating holiday per fiscal year; pro-rated for 1<sup>st</sup> fiscal year</li><li>• Holiday time is pro-rated for part-time employees</li><li>• See SEIU Bargaining Agreement</li></ul>
<b>Library Holidays</b>	<ul style="list-style-type: none"><li>• Effective: 1<sup>st</sup> day of employment</li><li>• 7 scheduled holidays per year</li><li>• 4 floating holidays credited each July 1<sup>st</sup>; pro-rated for 1<sup>st</sup> fiscal year</li><li>• Holiday time is pro-rated for part-time employees</li><li>• See SEIU Bargaining Agreement</li></ul>

***OTHER BENEFITS***

<b>Long Term Disability</b>	<ul style="list-style-type: none"><li>• Effective: 1st day of the month following 6 full months of employment</li><li>• 66-2/3% of base salary; maximum benefit of \$2,000 per month</li><li>• See plan document</li></ul>
<b>Flexible Spending Account (ASI Flex)</b>	<ul style="list-style-type: none"><li>• Effective: 1st day of the month following two full months of employment</li><li>• Employees can use pre-tax dollars for health premiums, reimbursement of medical expenses, and child/elder care</li></ul>
<b>Employee Assistance Program (EAP)</b>	<ul style="list-style-type: none"><li>• Effective: 1<sup>st</sup> day of employment</li><li>• 5 sessions per situation per year for employee &amp; dependents covered under City's health insurance</li></ul>
<b>Educational Assistance</b>	<ul style="list-style-type: none"><li>• Effective: 6 months after employment</li><li>• See SEIU Bargaining Agreement and Citywide Personnel Policies</li></ul>
<b>Credit Union</b>	<ul style="list-style-type: none"><li>• Effective: 1<sup>st</sup> day of employment</li><li>• Choice of 2 – optional participation</li></ul>