BENEFIT			ELIGIBILITY	EFFECTIVE DATE	CONTACT	
				Health and Wellness		
Medical Insurance Monthly Premiums			Employees with appointments that are at least 6 months and 1 day	Effective date is the first of the month following the	CalPERS: www.calpers.ca.gov 1-888-225-7377	
<b>Monthly Premiums</b>	EE Only	EE + 1	Family	and half time or greater are	received by the Human	
*Anthem Select HMO	\$1,138.86	\$2,277.72	\$2,961.04	eligible to enroll. Enrollment must be requested within	Resources.	
Anthem Traditional HMO	\$1,339.70	\$2,679.40	\$3,483.22	60 days from the date of the		
Blue Shield Access+ HMO	\$1,076.84	\$2,153.68	\$2,799.78	qualifying appointment.		
*Blue Shield Trio HMO	\$946.84	\$1,893.68	\$2,461.78	Monthly City Contribution		
Kaiser	\$1,021.41	\$2,042.82	\$2,655.67	Amount		
United Healthcare Alliance HMO	\$1,091.13	\$2,182.26	\$2,836.94	\$1,085.91 (employee only) \$1,848.64 (employee + 1)		
*United Healthcare Harmony HMO	\$937.39	\$1,874.78	\$2,437.21	\$2,233.67 (family coverage)		
PERS Platinum PPO	\$1,314.27	\$2,628.54	\$3,417.10			
PERS Gold PPO	\$914.82	\$1,829.64	\$2,378.53			
*limited service areas; check plan availability for your ZIP code			е			
Alternate Medical Benefit Program  Employees who have medical health coverage (group coverage) through another source with benefits comparable to the City plan may waive City coverage. The City will pay the employee an amount equal to the current employee only contribution to the Section 125 Plan for each month that the employee continues to receive health insurance through their spouse or other source.			Employees eligible for medical coverage through CalPERS. Must complete "Waiver of City Sponsored Medical Benefits Form" and provide proof of other group health coverage.	First of the month following the date completed form and proof of group health coverage is received by Human Resources.	Human Resources	
<b>Dental</b> The Cities Group Dental Reimbursement Plan \$2,000 fiscal year maximum per person			Regular full-time employees who work 30+ hours per week. Enrollment form required.	Coverage begins on the first day of the month following a 30-day waiting period.	The Cities Group Keith Chiu: 650-343-1428 kchiu1@citiesgroup.net	
First \$400 of claims covered at 100% Next \$1,600 of claims covered at 80%			The City pays the full monthly premium for			

BENEFIT	ELIGIBILITY	<b>EFFECTIVE DATE</b>	CONTACT
	employee and dependent coverage.		
Vision Vision Service Plan (VSP)  WellVision Exam - every 12 months Lenses - every 12 months Frames - every 12 months -or-	Employees with appointments that are at least 6 months and 1 day and half time or greater are eligible for coverage. No enrollment form needed.	Coverage begins on the first day of the month following a 30-day waiting period.	VSP <u>www.vsp.com</u> 1-800-877-7195
Contact Lens Care - every 12 months  Laser Vision Correction Discounts	The City pays the full monthly premium for employee only. Dependent coverage paid by employee.	EE only: \$0 EE+1: \$7.86/month EE+family: \$23.32/month	
Employee Assistance Program (EAP) Aetna Resources for Living  Free, confidential referrals to professional counselors who can help resolve personal problems affecting your emotional health, family life, and work life: Counseling sessions - Face-to-Face, televideo or chat Telephone Consultations Online Resources	Employees with appointments that are at least 6 months and 1 day and half time or greater are eligible for coverage. No enrollment form needed.  The City pays the full monthly premium.	Coverage begins on the first day of hire.	Aetna Resources for Living 1-800-342-8111 https://www.resourcesforliving.com Username: San Carlos Password: EAP
Workers' Compensation The Cities Group Workers' Compensation Program  If you are injured on the job, please notify your Supervisor immediately.	All employees are covered by Workers' Compensation. If medical treatment needed, you will be sent to one of our Industrial Injury Medical Clinics. You also have the option to predesignate your personal physician for treatment.	Coverage begins on the first day of hire.	The Cities Group 650-343-1428

Updated: 01/01/2024				
BENEFIT	ELIGIBILITY	EFFECTIVE DATE	CONTACT	
	Pre-designation form must be submitted prior to injury.			
	Retirement			
Retirement California Public Employees' Retirement System (CalPERS) 3 factors are multiplied together to calculate service retirement: Service Credit Benefit Factor Final Compensation  Retirement Formulas: 2.0% @ 62 ("new" members as defined by CalPERS hired on or after 01/01/13) – 8% employee contribution  2.7% @ 57 Fire Safety ("new" members as defined by CalPERS hired on or after 01/01/13) – 13.75% employee contribution  2.0% @ 55 (hired 04/23/12 – 12/31/12 or "classic members as defined by CalPERS) – 7% employee contribution  2.5% @ 55 (hired 03/16/09 – 04/22/12) – 8% employee contribution  2.7% @ 55 (hired before 03/16/09) – 8% employee contribution  Employees also contribute to Social Security and Medicare.	Eligibility:  1. Persons who are already members of CalPERS and are not excluded from membership because they are working less than full-time.  2. Position has one of the following conditions:  a. Full-time continuous employment in excess of 6 months.  b. Requires regular, part-time service for at least an average of 20 hours per week for one year or longer.	Coverage begins on the first day of hire.	CalPERS: www.calpers.ca.gov 1-888-225-7377	
Retiree Dental & Vision Plans The City will allow the retiree only to stay on the City's dental and vision insurance plans provided the employee pays the full premium(s) plus a 2% administration fee	Employees who retire from San Carlos through CalPERS and have at least 10 years of total City service.	Upon retirement	The Cities Group 650-343-1428	

DENIERIT	Updated: 01/01/2024		
BENEFIT	ELIGIBILITY	EFFECTIVE DATE	CONTACT
Retiree Health Plan The City shall contribute the minimum amount required by law toward the monthly premium for hospital and medical care under the CalPERS (PEMHCA) Health Plan for individuals who retire from the City through CalPERS.	This option must be exercised at the time of retirement.	Upon retirement	CalPERS: www.calpers.ca.gov 1-888-225-7377
Employee may be eligible for a monthly payment following retirement and continuing until the employee's death.	Employees hired before 1/1/09 who retire from the City through CalPERS and have completed at least 10 years continuous City service immediately preceding retirement may be eligible for a monthly payment in the amount equal to the City's current Section 125 Plan contribution for active employees selecting employee-only medical coverage.  Former AFSCME Clerical employees hired on or after 1/1/09 but before 02/28/11 and former AFSCME Mid-Management employees hired on or after 1/1/09 but before 12/13/10 with at least 15 years of continuous City service immediately preceding retirement may be eligible for a monthly payment of \$350. This amount shall not change after retirement.	Upon retirement	Public Agency Retirement Services (PARS) 1-800-731-7884

Updated: 01/01/2024

Li	fe Insurance & Disability		
Life Insurance \$200,000 coverage Premium for the amount over \$50,000 is subject to Federal and State taxes.  Accidental Death & Dismemberment Maximum benefit up to \$200,000 for employee	Any regularly-scheduled employee who works 20 hours or more per week. Beneficiary form required.  The City pays the full monthly premium.	Coverage begins on the first day of the month following hire date.	The Cities Group 650-343-1428
Long Term Disability Insurance 45-day elimination period Maximum benefit up to \$6,000/month			
	Tax Deferred Benefits		
457(b) Deferred Compensation Optional enrollment. Employee only pre-tax contributions.  2024 Maximum Annual Contribution: \$23,000 Age 50 Catch-Up: \$7,500  The City shall provide a contribution to an employee's deferred compensation account in an amount equal to the employee's contribution at a ratio of 1:1, to a maximum of two hundred twenty-five dollars (\$225) per month.	Regular full-time employees	Upon date of hire	CalPERS 457 Supplemental Income 1-877-499-7832 www.calpers.gov  VALIC John Lee 1-800-892-5558, Ext. 87363 john.lee@valic.com www.valic.com  MissionSquare (formerly ICMA-RC) 1-800-669-7400 www.icmarc.org
Health Care Reimbursement Account & Dependent Care Reimbursement Account Navia Benefit Solutions Optional enrollment. Employee elects an anticipated amount for eligible expenses. This amount is deducted in equal increments from employee's paycheck every pay period on a pre-tax basis. Reimbursement claims may be submitted to Navia when eligible expenses are incurred. Up to \$640 of the unused money in health care account can be carried over to the following plan year.	Any regularly-scheduled employee who works 20 hours or more per week  Account Maximums: Health Care: \$3,200 per Plan Year Dependent Care: \$5,000 per Plan Year	Enroll within 30 days of hire date. Effective first of the month following hire date.  May also enroll during Flexible Spending Account Open Enrollment period. Effective date would be January 1st.	Navia Benefit Solutions 1-800-669-3539 www.naviabenefits.com

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The preceding information is not intended for use as a summary plan description, nor designed to serve as an Evidence of Coverage. For more information, refer to the summary plan description for the plan or contact Human Resources. For benefits not administered through a plan, refer to the Personnel Policies Manual or MOU, as appropriate. The City is an Equal Opportunity Employer.

Commuter Benefits Navia Benefit Solutions Optional enrollment. Employees who use public transit or transit parking can use pre-tax income to pay for these expenses.	Employee who worked at least 20 hours per week within the previous calendar month, excluding employees who work 120 days of less within the calendar year.	Account Maximums: Transit vehicles/passes: \$315 per month Parking: \$315 per month  Year-round enrollment	Navia Benefit Solutions 1-800-669-3539 www.naviabenefits.com
	Paid Leave		
Vacation Employees accrue 12 - 25 days of vacation per year depending on length of service.	Regular full-time employees	Upon date of hire	
If more than 2 years' vacation is accrued, the excess will be liquidated by monetary payment every year through payroll during the month of October.			
Vacation Cash Out An employee may make an irrevocable election to sell back to the City forty (40) hours in a calendar year of accumulated vacation at the employee's base rate of pay.	Sell back requests must be received by Payroll no later than December 31 for the following calendar year's elections.		
Sick Leave Employees accrue up to 12 days of sick leave per year. May use up to 6 of these 12 days to care for an eligible family member who is ill.  May be accrued without limit. The City's PERS contract provides the option of allowing employees to convert unused sick leave to service credit upon retirement.	Regular full-time employees	Upon date of hire	
Float Time Employees are given up to 40 hours of float time per year. Hours must be used each calendar year or the balance is forfeited.  Administrative Leave Sr. Systems Analyst, Recreation Supervisor, Recreation Coordinator, Assistant Public Works Superintendent, Associate Planner and Associate Engineer are given 60 hours of admin. leave due to exempt status.	Regular full-time employees  New employees' float/admin. hours will be pro-rated based on number of payroll periods remaining in the year.	Upon date of hire	

Holiday Pay	Regular full-time employees	Upon date of hire		
Employees are entitled to 11 paid holidays per year. See MOU for				
list.				
Education Reimbursement				
Tuition Reimbursement	Regular full-time employees	After probationary period		
\$3,000 per year for expenses incurred in job-related educational				
programs	City Manager approval			
	required			