



**City of Orinda
Benefits Summary Matrix
January 1, 2019**

Benefit	Teamsters, Local No. 856	Unrepresented Employee Group	City Manager
Term of Memorandum of Understanding (MOU), Resolution or Contract	7/1/2017 - 6/30/2019	7/1/2017 - 6/30/2019	10/1/2017 - 6/30/2019, Salary & all benefits pro-rated to reflect .9 FTE
Scheduled Salary Increases	3% increase effective 11/1/2017; 3% effective 7/1/2018	3% increase effective 7/1/2017; 3% increase effective 7/1/2018	Potential for salary increase
Medical Benefits: Provider is CalPERS Health: The City agrees to increase City contributions for insurance premiums by an amount equal to 7% (based on Kaiser rates for each premium level during each calendar).	Effective 1/1/2019 - 12/31/2019 Employee: \$768.25/mo. Employee + 1: \$1,536.50/mo. Employee + 2: \$1,997.45/mo.	Effective 1/1/2019 - 12/31/2019 Employee: \$768.25/mo. Employee + 1: \$1,536.50/mo. Employee + 2: \$1,997.45/mo.	Effective 1/1/2019 - 12/31/2019 Employee: \$768.25/mo. Employee + 1: \$1,536.50/mo. Employee + 2: \$1,997.45/mo.
Medical In-Lieu Payment: For employees who certify they have current medical coverage for them self and all dependents, employee can elect to receive cash in-lieu payment.	\$474.93/mo.	\$474.93/mo.	\$474.93/mo.
Retiree Medical Benefits: Provider is CalPERS Health: Medical coverage may be carried into retirement after 7 years of service & minimum 55 years of age.	2019 Employer Contribution \$115.60/mo.	2019 Employer Contribution \$115.60/mo.	2019 Employer Contribution \$115.60/mo.
Dental Benefits: Provider is Delta Dental. The City pays the dental premiums.	Effective 1/1/2019 - 12/31/2019 Employee: \$56.04/mo. Employee + 1: \$103.43/mo. Employee + Family: \$136.94/mo.	Effective 1/1/2019 - 12/31/2019 Employee: \$56.04/mo. Employee + 1: \$103.43/mo. Employee + Family: \$136.94/mo.	Effective 1/1/2019 - 12/31/2019 Employee: \$56.04/mo. Employee + 1: \$103.43/mo. Employee + Family: \$136.94/mo.
Vision Benefits: Provider is Vision Service Plan (VSP). The City pays the vision premiums.	Effective 1/1/2019 - 12/31/2020 Employee: \$8.96/mo. Employee + 1: \$14.93/mo. Employee + Family: \$26.78/mo.	Effective 1/1/2019 - 12/31/2020 Employee: \$8.96/mo. Employee + 1: \$14.93/mo. Employee + Family: \$26.78/mo.	Effective 1/1/2019 - 12/31/2020 Employee: \$8.96/mo. Employee + 1: \$14.93/mo. Employee + Family: \$26.78/mo.
Retirement Benefits: Provider is ICMA-RC. <i>CalPERS retirement benefits <u>are not</u> provided.</i>	401(a) defined contribution plan. Employer contributes 13% of base monthly salary.	401(a) defined contribution plan. Employer contributes 13% of base monthly salary, plus Employer will match up to 3% of Employee contribution.	401(a) defined contribution plan. Employer contributes 13% of base monthly salary, plus Employer will match up to 3% of Employee contribution.
Deferred Compensation: Provider is ICMA-RC.	457 Plan. Employer will match up to 3% of Employee contribution.	457 Plan. Employee voluntary contribution with no Employer match.	457 Plan. Employee voluntary contribution with no Employer match.
Social Security	City does not participate	City does not participate	City does not participate

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Medicare	Employer and Employee pay 1.45% of salary.	Employer and Employee pay 1.45% of salary.	Employer and Employee pay 1.45% of salary.
Life Insurance & Accidental Death & Dismemberment: Provider is The Standard.	1X annual salary	1x annual salary	\$100,000
Long Term Disability: Provider is The Standard	Employer Paid	Employer Paid	Employer Paid
State Disability Insurance (SDI): Provider is the State of California Employment Development Department	Employee Paid	Employee Paid	Employee Paid
Flexible Benefits Plan: (Cafeteria plan pursuant to Section 125). Provider is Benefits Administration Corporation (BAC). This plan offers Dependent Care Assistance (DCAP) and Unreimbursed Medical Expense accounts.	DCAP: \$5,000 annual maximum Unreimbursed Medical: \$2,650 annual maximum	DCAP: \$5,000 annual maximum Unreimbursed Medical: \$2,650 annual maximum	DCAP: \$5,000 annual maximum Unreimbursed Medical: \$2,650 annual maximum
General Leave: Annual General Leave Accrual is according to years of service.	19 days during 1st year 20 days during 2nd year 21 days during 3rd year 22 days during 4th year 23 days during 5th year 24 days during 6th year 25 days after 7 or more years	19 days during 1st year 20 days during 2nd year 21 days during 3rd year 22 days during 4th year 23 days during 5th year 24 days during 6th year 25 days after 7 or more years	19 days during 1st year 20 days during 2nd year 21 days during 3rd year 22 days during 4th year 23 days during 5th year 24 days during 6th year 25 days after 7 or more years
Administrative Leave: Leave granted to FLSA exempt personnel, based on level of position.	None	Directors: 80 hours per fiscal year (no carry-over) Mid-Managers: 60 hours per fiscal year (no carry over). City Manager can approve up to 20 additional hours.	None
Bereavement Leave: In case of a death in an employee's immediate family.	3 days of paid leave	3 days of paid leave	3 days of paid leave
Holidays and Holiday Pay	10.5 holidays <i>plus</i> 2 floating holidays	10.5 holidays <i>plus</i> 2 floating holidays	10.5 holidays <i>plus</i> 2 floating holidays
CA Parent Leave Act	Up to 12 weeks off for New Baby Bonding. Employer pays full health insurance during time off. See Human Resources for requirements.	Up to 12 weeks off for New Baby Bonding. Employer pays full health insurance during time off. See Human Resources for requirements.	Up to 12 weeks off for New Baby Bonding. Employer pays full health insurance during time off. See Human Resources for requirements.
Uniform Allowance & Boots: See MOU for applicable classifications.	Uniforms: as deemed appropriate. Boots: Up to \$200/once every year <i>OR</i> every other year depending upon job classification.	Not applicable	Not applicable
Standby Pay	\$200/week	Not applicable	Not applicable
Call Out Pay	1 1/2 times hourly rate with 2 hour minimum pay	Not applicable	Not applicable

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Professional Growth	\$1,200/fiscal year	\$1,200/fiscal year	As deemed necessary
Acting Pay / Working in Higher Classification	At least 5% increase	At least 5% increase	Not Applicable
Recreation Classes: Classes are partially subsidized.	Employee pays 50% of resident fee	Employee pays 50% of resident fee	Employee pays 50% of resident fee
Vehicle Allowance	Current IRS standard mileage reimbursement rates apply	Current IRS standard mileage reimbursement rates apply	\$800/mo.

Notes:

Rates and coverage are calculated based on regular, full-time employees.

Full-time employees are classified as working 40 hours per week.

Part-time employees receive pro-rated benefits.