

INYO COUNTY BENEFIT AND COST RATES 2016
PROBATION PEACE OFFICER'S ASSOCIATION (ICPPOA)

HEALTH INSURANCE – MEDICAL

PORAC (PPO 90/10 Plan)

Employee Only

Monthly Premium

County portion (80%)

Employee portion (20%)

\$699.00/mo.

\$559.20/mo.

\$64.52/payroll

Employee + One Dependent

Monthly Premium

County portion (80%)

Employee portion (20%)

\$1399.00/mo.

\$1119.20/mo.

\$129.14/payroll

Employee + Family Coverage

Monthly Premium

County portion (80%)

Employee portion (20%)

\$1789.00/mo.

\$1431.20/mo.

\$165.14/payroll

PERS SELECT (PPO 80/20 Plan)

Employee Only

Monthly Premium

County portion (80%)

Employee portion (20%)

\$625.20/mo.

\$500.16/mo.

\$57.71/payroll

Employee + One Dependent

Monthly Premium

County portion (80%)

Employee portion (20%)

\$1250.40/mo.

\$1000.32/mo.

\$115.42/payroll

Employee + Family Coverage

Monthly Premium

County portion (80%)

Employee portion (20%)

\$1625.52/mo.

\$1300.42/mo.

\$150.05/payroll

INYO COUNTY BENEFIT AND COST RATES 2016
PROBATION PEACE OFFICER'S ASSOCIATION (ICPPOA)

PERS CHOICE (PPO 80/20 Plan)

Employee Only

Monthly Premium

County portion (80%)	\$683.71/mo. \$546.97/mo.
Employee portion (20%)	\$63.11/payroll

Employee + One Dependent

Monthly Premium

County portion (80%)	\$1367.42/mo. \$1093.94/mo.
Employee portion (20%)	\$126.22/payroll

Employee + Family Coverage

Monthly Premium

County portion (80%)	\$1777.65/mo. \$1422.12/mo.
Employee portion (20%)	\$164.09/payroll

PERS CARE (PPO 90/10 Plan)

Employee Only

Monthly Premium

County portion (up to 80% of Choice Rate)	\$761.50/mo. \$546.97/mo.
Employee portion (20%)	\$99.01/payroll

Employee + One Dependent

Monthly Premium

County portion (up to 80% of Choice Rate)	\$1523.00/mo. \$1093.94/mo.
Employee portion (20%)	\$198.03/payroll

Employee + Family Coverage

Monthly Premium

County portion (up to 80% of Choice Rate)	\$1979.90/mo. \$1422.12/mo.
Employee portion (20%)	\$257.44/payroll

County reimburses 50% of each deductible met for employee and dependent coverage enrolled in PPO plans.

County will pay \$92.31-employee only, \$184.62-employee + one or \$276.93-family per payroll to each employee who has other medical coverage and has opted out of the County's medical plan.

INYO COUNTY BENEFIT AND COST RATES 2016
PROBATION PEACE OFFICER'S ASSOCIATION (ICPPOA)

LIFE INSURANCE

\$4.16/mo.

County pays for \$20,000 of term life insurance on employee only.

DENTAL INSURANCE- Delta Dental

\$35.00/mo.

County pays 100% for employee and dependents.

VISION INSURANCE-Vision Service Plan

\$5.00/mo.

County pays 100% for employee and dependents.

SHORT-TERM DISABILITY

County pays for employee (1% of gross pay to a maximum of the current State of CA rate).

PUBLIC EMPLOYEES RETIREMENT SYSTEM (CALPERS)

Classic Employees (existing CalPers member) 2% at 55 – Inyo County pays the employee contribution rate of 7% of base salary toward retirement.

PEPRA Employees (new CalPers members hired after January 1, 2013) 2% at 62. Employees will be required to pay 6.5% of base salary toward retirement.

VACATION

10 days after 1 year of continuous service;

15 days after 3 years of continuous service;

additional 1 day per year after 10 years, to a maximum of 25 days per year.

May accrue up to a maximum of 35 days.

SICK LEAVE

15 days per year (accrues) – No max

FLEX DAYS

5 days per fiscal year (does not accrue)

HOLIDAYS

11 days per year

CLOTHING ALLOWANCE

Paid \$100 twice a year first payroll in January and last payroll in July.

LONGEVITY PAY

2% after 10 years of service

Additional 2% (=4%) after 15 years of service

Additional 2% (=6%) after 20 years of service

Additional 2% (=8%) after 25 years of service

OPTIONAL PLANS

Deferred Compensation Plans

Credit Unions

Additional Life Insurance

Educational Allowance -\$350/yr.

Flex Benefit 125 Program