

**INYO COUNTY BENEFITS AND COSTS 2018**  
**NON-REPRESENTED, MANAGEMENT, DEPARTMENT HEADS,**  
**& ELECTED OFFICIALS**

**HEALTH INSURANCE – MEDICAL**

**PERS SELECT (PPO 80/20 Plan)**

**Employee Only**

**Monthly Premium**

**\$654.74/mo.**

County portion (80%)

\$523.79/mo.

Employee portion (20%)

\$60.44/payroll

**Employee + One Dependent**

**Monthly Premium**

**\$1309.48/mo.**

County portion (80%)

\$1047.58/mo.

Employee portion (20%)

\$120.88/payroll

**Employee + Family Coverage**

**Monthly Premium**

**\$1702.32/mo.**

County portion (80%)

\$1361.86/mo.

Employee portion (20%)

\$157.14/payroll

**PERS CHOICE (PPO 80/20 Plan)**

**Employee Only**

**Monthly Premium**

**\$698.96/mo.**

County portion (80%)

\$559.17/mo.

Employee portion (20%)

\$64.52/payroll

**Employee + One Dependent**

**Monthly Premium**

**\$1397.92/mo.**

County portion (80%)

\$1118.34/mo.

Employee portion (20%)

\$129.04/payroll

**Employee + Family Coverage**

**Monthly Premium**

**\$1817.30/mo.**

County portion (80%)

\$1453.84/mo.

Employee portion (20%)

\$167.75/payroll

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**PERS CARE (PPO 90/10 Plan)**

**Employee Only**

**Monthly Premium**

**\$733.50/mo.**

County portion (up to 80% of Choice Rate)

\$559.17/mo.

Employee portion (20% + balance)

\$80.46/payroll

**Employee + One Dependent**

**Monthly Premium**

**\$1467.00/mo.**

County portion (up to 80% of Choice Rate)

\$1118.34/mo.

Employee portion (20% + balance)

\$160.92/payroll

**Employee + Family Coverage**

**Monthly Premium**

**\$1907.10/mo.**

County portion (up to 80% of Choice Rate)

\$1453.84/mo.

Employee portion (20% + balance)

\$209.20/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.

**LIFE INSURANCE**

**\$4.16/mo.**

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

**DENTAL INSURANCE- Delta Dental**

**\$45.00/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 (Excludes Elected Officials)**

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

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**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 limit  
(exclude elected officials)

**FLEX DAYS**

5 days per fiscal year (does not accrue)  
(exclude elected officials)

**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

**HOLIDAYS**

11 days per year

**SAFETY SHOES**

Designated positions - \$150/yr.

**OPTIONAL PLANS**

Deferred Compensation Plans  
Credit Unions  
Additional Life Insurance  
Educational Allowance -\$350/yr.  
Flex Benefit 125 Program