

2011 City of Springfield Benefit Package for Police Management (Sworn) Employees



City Provided Benefits

Medical (Required for employee)	Choice of Pacific Source HIP or PPO (See Benefit Handbook for details) (See attached premium table for employee share of premiums)
Health Reimbursement Account	City pays into HRA to offset out of pocket costs on HIP (High deductible plan) only. <ul style="list-style-type: none"> • \$75 per month for single (\$900 total annual) • \$150 per month for Two Party and Family (\$1800 total annual)
Dental (Required for employee)	Oregon Dental Service (ODS) (Employee pays a portion of the premium)
Vision	Part of Pacific Source Medical Plans
Basic Life Insurance (Standard Insurance Co)	1 x Annual Salary up to \$100,000 maximum
AD/D Insurance (Standard Insurance Co)	1 x Annual Salary up to \$100,000 maximum
Mandatory Life (Assurant)	\$10,000 for job related death.
Long Term Disability (Standard Insurance Co.)	60% Wage replacement coverage for full-time employees who are active in the City Retirement Plan (Not active in PERS) and disabled for more than 60 days.
Pre-Retirement Life (Standard Insurance Co.)	Pre-retirement life insurance for active employees on the City Retirement Plan. \$150,000 maximum decreasing based on age and annual salary.
Retirement	<ul style="list-style-type: none"> • City Retirement Plan if hired before April 1996. • PERS if hired after April 1, 1996. • Employee pick-up of 6% of salary paid by the City after 6 months
Employee Assistance Program (DIRECTION)	Confidential personal and mental health counseling for all members of the employee's household. <ul style="list-style-type: none"> • 6 free visits per problem per calendar year
Holidays	Ten (10) regular scheduled holidays plus one (1) floating holiday (prorated for partial year)
Vacation	<ul style="list-style-type: none"> • Beginning accrual 4.616 hours bi-weekly (15 days/year) • Available month following accrual • Maximum accrual 500 hours • Pay-out at termination or retirement limited to 80 hours more than one year's accrual
Sick Leave	<ul style="list-style-type: none"> • Accrue 3.693 hours bi-weekly (12 days/year) • Available month following accrual • Prorated for partial months • No accrual limit for management • Maximum payout at retirement 480 hours

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Voluntary Benefits (Employee Paid)

Sick Leave Reserve Program	<p>A bank of sick leave available to employees who exhaust all forms of paid leave due to a serious illness.</p> <ul style="list-style-type: none"> • Must donate one day of sick leave each year to participate in the program • Must reenroll each year • Eligibility for leave determined by years of service and approval by Human Resources.
Flexible Spending Account (FSA) (Manley Administrative Services)	<p>A voluntary pre-tax payroll deduction for out of pocket medical and/or childcare expenses under IRC Section 125</p> <ul style="list-style-type: none"> • Must be used within the plan year • Cannot change deduction mid-year (except for childcare)
Supplemental Life Insurance (Standard Insurance Co.)	<p>Term life insurance for employee, spouse and children</p> <ul style="list-style-type: none"> • Cost increases with age • Guaranteed coverage if purchased within 30 days of hire.
Accidental Death & Dismemberment Insurance (Standard Insurance Co.)	<p>Employee only or family accidental death and dismemberment coverage</p> <ul style="list-style-type: none"> • Up to \$300,000 • Family coverage available
Short Term Disability Insurance (Sun Life Assurance Co.)	<p>60% Gross wage replacement coverage for employees disabled for more than 15 days and a maximum of 90 days.</p>
<p>Deferred Compensation:</p> <ul style="list-style-type: none"> • ING-Financial Planning • ICMA/RC • Oregon Saving Growth Plan 	<p>Retirement investment options under IRC Section 457 provided through:</p> <ul style="list-style-type: none"> • Pretax deferral of wages • Employee manages the funds • No withdrawal until termination of employment • \$16,500 limit per year limit • Additional \$5,500 annual catch-up option if over age 50

Medical and Dental Rates

Total Medical/Dental Amount per Month	HIP	PPO
Single	\$ 590.76	\$ 916.36
Two Party	\$ 1,262.12	\$ 1,977.86
Family	\$ 1,748.44	\$ 2,724.04
City Total Premium Share		
Single	\$ 531.69	\$ 531.69
Two Party	\$ 1,135.91	\$ 1,135.91
Family	\$ 1,573.60	\$ 1,573.60
Employee Total Premium Share		
Single	\$ 59.07	\$ 384.67
Two Party	\$ 126.21	\$ 841.95
Family	\$ 174.84	\$ 1,150.44