



Attorneys

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Representation	San Bernardino County Public Attorneys Association
Contract Date	2016-2021
Health and Welfare	
Benefit Level	Full Time (61 - 80 hours)
Medical Premium Subsidy (MPS)	Employee Only \$194.90 Employee + 1 \$350.16 Employee + 2 \$486.11
Medical Opt-Out or Waive	\$40.00
Vision	Employer-Paid for Employee Only Coverage
Life Insurance - Employer Paid	\$50,000
Voluntary Term Life	Employee: \$10,000 - \$700,000 Spouse/Domestic Partner: \$10,000 - \$250,000 Child(ren): \$5,000 - \$20,000
Voluntary AD&D	Employee: \$10,000 - \$250,000 Spouse/Domestic Partner: \$5,000 - \$125,000 Child(ren): \$3,125 - \$25,000
Leave Provisions	
Vacation	80-160 hours/year, w/cash-out option up to 60 hours/year if 80 hours of vacation used in previous year
Sick	3.39 hours/pay period
Bereavement	2 days/per occurrence
Holiday	13 + 1 floating/year
Attorney	80 hours/year
Perfect Attendance	Annual Gym Membership Reimbursement up to \$299 –OR– 16 hours of Perfect Attendance Leave
Retirement	
Tier 1 (Hired prior to 1/1/2013, reciprocity provision may apply)	2% at age 55
Tier 2 (Hired prior to 1/1/2013, reciprocity provision may apply)	2.5% at age 67

Retirement – Other	
457(b) Eligible to enroll at any time	County Contribution, based on continuous years of service: 1 Year = ½ for 1 Match up to 0.50% of Salary 15 Years = ½ for 1 Match up to 0.75% of Salary 20+ years = ½ for 1 Match up to 1.00% of Salary
Retirement Medical Trust Fund – Sick Leave Conversion	Employees become eligible to convert a portion of their sick leave to the RMT upon attaining 10 or more years of participation with SBCERA and/or other public retirement system(s).
Retirement Medical Trust Fund – County Contribution	County Contribution, based on continuous years of service: 10-14 years = 1.00% of bi-weekly base salary 15-19 years = 1.25% of bi-weekly base salary 20+ years = 1.50% of bi-weekly base salary
Other	
529 Education Savings Plan	Eligible
Bar Dues	Up to \$400/year
Dependent Care Assistance Plan	Eligible
Flexible Spending Account (FSA)	Annual maximum contribution of \$2,600
Qualified Transportation Plan	Pre-tax deductions of up to \$260/month for qualified transportation (commuter) expenses
Short Term Disability Benefit	55% up to \$1,216/week

The County provides a *Medical Premium Subsidy* biweekly to help offset the cost of your medical premium.

Example #1: A Child Support Attorney I elects Blue Shield Signature HMO and DeltaCare USA DHMO plans with Employee Only coverage.

\$250.96 (combined cost of premiums)
- \$194.90 (medical premium subsidy)
\$ 56.06 (biweekly out-of-pocket cost)

Example #2: A Deputy District Attorney II elects Kaiser Permanente and Delta Dental PPO plans with Employee + 2 or more coverage.

\$898.55 (combined cost of premiums)
- \$486.11 (medical premium subsidy)
\$412.44 (biweekly out-of-pocket cost)

Example #3: A Deputy Public Defender III elects Blue Shield Signature HMO and DeltaCare USA DHMO plans with Employee + 1 or more coverage.

\$496.11 (combined cost of premiums)
- \$350.16 (medical premium subsidy)
\$145.95 (biweekly out-of-pocket cost)