



Probation

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Representation	San Bernardino County Probation Officers Association						
Contract Date	2016-2019						
Health and Welfare							
Benefit Level	Full Time (61 - 80 hours)						
Medical Premium Subsidy (MPS)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Employee Only</td> <td style="text-align: right;">\$166.00</td> </tr> <tr> <td>Employee + 1</td> <td style="text-align: right;">\$345.66</td> </tr> <tr> <td>Employee + 2</td> <td style="text-align: right;">\$473.70</td> </tr> </table>	Employee Only	\$166.00	Employee + 1	\$345.66	Employee + 2	\$473.70
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Medical Opt-Out	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Before 6/25/05</td> <td style="text-align: right;">\$85.00</td> </tr> <tr> <td>After 6/25/05</td> <td style="text-align: right;">\$25.00</td> </tr> </table>	Before 6/25/05	\$85.00	After 6/25/05	\$25.00		
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Medical Waive	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Before 5/16/15</td> <td style="text-align: right;">\$125.00</td> </tr> <tr> <td>After 5/16/15</td> <td style="text-align: right;">\$25.00</td> </tr> </table>	Before 5/16/15	\$125.00	After 5/16/15	\$25.00		
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Vision	<p>Employee Only coverage paid by Employer</p> <p>Employee may purchase dependent coverage:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Coverage Level</u></th> <th style="text-align: right;"><u>Bi-Weekly Rate</u></th> </tr> </thead> <tbody> <tr> <td>Employee +1</td> <td style="text-align: right;">\$3.57</td> </tr> <tr> <td>Employee +2 or more</td> <td style="text-align: right;">\$9.55</td> </tr> </tbody> </table>	<u>Coverage Level</u>	<u>Bi-Weekly Rate</u>	Employee +1	\$3.57	Employee +2 or more	\$9.55
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Employee +1	\$3.57						
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Life Insurance - Employer Paid	\$50,000						
Voluntary Term Life	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Employee: \$10,000 - \$700,000</td> </tr> <tr> <td>Spouse/Domestic Partner: \$10,000 - \$250,000</td> </tr> <tr> <td>Child(ren): \$5,000 - \$20,000</td> </tr> </table>	Employee: \$10,000 - \$700,000	Spouse/Domestic Partner: \$10,000 - \$250,000	Child(ren): \$5,000 - \$20,000			
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Voluntary AD&D	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Employee: \$10,000 - \$250,000</td> </tr> <tr> <td>Spouse/Domestic Partner: \$5,000 - \$125,000</td> </tr> <tr> <td>Child(ren): \$3,125 - \$25,000</td> </tr> </table>	Employee: \$10,000 - \$250,000	Spouse/Domestic Partner: \$5,000 - \$125,000	Child(ren): \$3,125 - \$25,000			
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Leave Provisions							
Vacation	80-160 hours/year, w/cash-out option up to 80 hours/year if 80 hours of vacation used in previous year						
Sick	3.39 hours/pay period						
Holiday	13 + 1 floating/year						
Perfect Attendance	<p>Reimbursement for Annual Gym Membership up to \$299</p> <p style="text-align: center;">-OR-</p> <p>16 hours of Perfect Attendance Leave</p>						
Retirement							
Tier 1 (Hired prior to 1/1/2013, reciprocity provision may apply)	2.0% at age 55						
Tier 2 (Hired on or after 1/1/2013, reciprocity provision may apply)	2.5% at age 67						

Retirement - Other	
457(b)	Eligible to enroll at any time
Retirement Medical Trust Fund – Sick Leave Conversion	Employees become eligible to convert a portion of their sick leave to the Retirement Medical Trust upon attaining 10 years of continuous County service from date of hire.
Retirement Medical Trust Fund – County Contribution	<u>County Contribution, based on years of completed regular County service:</u> 1-4 years = 0.5% of biweekly base salary 5+ years = 1.0% of biweekly base salary
Other	
529 Education Savings Plan	Eligible
Annual Tuition Reimbursement	First-come, first-served basis not to exceed \$2,000 per employee
Dependent Care Assistance Plan	Eligible
Long Term Disability	Eligible through SBCPOA
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	55% up to \$1,216/week, up to 90 days

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

Example #1: A Probation Officer elects Blue Shield HMO and DeltaCare USA DHMO plans with Employee Only coverage.

- \$250.96 (combined cost of premiums)
- \$166.00 (medical premium subsidy)
- \$ 84.96 (biweekly out-of-pocket cost)**

Example #2: A Probation Officer elects Kaiser Permanente and Delta Dental PPO plans with Employee + 2 or more coverage.

- \$898.55 (combined cost of premiums)
- \$473.70 (medical premium subsidy)
- \$424.85 (biweekly out-of-pocket cost)**

Example #3: A Probation Officer elects Blue Shield HMO and DeltaCare USA DHMO plans with Employee + 2 or more coverage.

- \$699.38 (combined cost of premiums)
- \$473.70 (medical premium subsidy)
- \$225.68 (biweekly out-of-pocket cost)**