



Probation

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Representation	San Bernardino County Probation Officers Association	
Contract Date	2018-2022	
Health and Welfare		
Benefit Level	Full Time (61 - 80 hours)	
Medical Premium Subsidy (MPS)	Employee Only	\$176.00
	Employee + 1	\$356.83
	Employee + 2	\$497.20
Medical Opt-Out	Before 6/25/05	\$85.00
	After 6/25/05	\$25.00
Medical Waive	Before 5/16/15	\$125.00
	After 5/16/15	\$25.00
Vision	Employee Only coverage paid by Employer Employee may purchase dependent coverage:	
	<u>Coverage Level</u>	<u>Bi-Weekly Rate</u>
	Employee +1	\$3.16
	Employee +2 or more	\$8.81
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 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	Reimbursement for Annual Gym Membership up to \$299 -OR- 16 hours of Perfect Attendance Leave	
Retirement		
Retirement Formulas <i>Reciprocity provision may apply</i>	Tier I 2.0% at age 55 Hired PRIOR TO January 1, 2013	Tier II 2.5% at age 67 Hired ON or AFTER January 1, 2013

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 = 0.50% of biweekly base salary 5+ years = 1.00% 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: \$2,700 or \$103.84 per pay period for 26 pay periods
Qualified Transportation Plan	Pre-tax deductions of up to \$265/month for qualified transportation (commuter) expenses
Short Term Disability	55% up to \$1,252/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 I elects Blue Shield Access+ HMO and DeltaCare USA DHMO plans with Employee Only coverage.

- \$269.30 (combined cost of premiums)
- ~~\$176.00~~ (medical premium subsidy)
- \$ 59.28 (biweekly out-of-pocket cost)**

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

- \$923.15 (combined cost of premiums)
- ~~\$497.20~~ (medical premium subsidy)
- \$425.95 (biweekly out-of-pocket cost)**

Example #3: A Probation Officer III elects Blue Shield Signature HMO and DeltaCare USA DHMO plans with Employee Only coverage.

- \$269.30 (combined cost of premiums)
- ~~\$176.00~~ (medical premium subsidy)
- \$ 93.30 (biweekly out-of-pocket cost)**

Example #4: A Probation Officer I elects Blue Shield Signature HMO and Delta Dental PPO plans with Employee + 2 or more coverage.

- \$811.61 (combined cost of premiums)
- ~~\$497.20~~ (medical premium subsidy)
- \$314.41 (biweekly out-of-pocket cost)**