

Vacation

Full time employees receive ten (10) days of vacation for the first five years of employment. Full time employees with five (5) years of continuous service will receive eleven (11) days per year. Full time employees with seven (7) years of continuous service will receive thirteen (13) days per year of vacation. Full time employees with ten (10) years of continuous service will receive fifteen (15) days per year of vacation. (See section 11.1 personnel rules and regulations for additional information) – LPOA should see MOU.

Sick Leave

A regular employee accrues sick leave on the first day of employment; sick leave hours may be used beginning on the 90th day of employment. Sick leave is accrued at the rate of 3.08 hours pay period (10 days per year). Upon separation from the City, sick leave is lost.

Part-time, temporary, or seasonal employees will be provided 24 hours of sick leave on the first day of employment; sick leave hours may be used beginning on the 90th day of employment.

An employee that retires from the City of Lindsay can elect to roll their sick leave into service credit with CalPERS.

Holiday Pay

Please see Holiday Posting or MOU for specific group.

Health Insurance

Open Enrollment is November

The health insurance provider for the City of Lindsay is Anthem Blue Cross. Employees may choose between a PPO 250 plan and PPO 500 plan based on individual needs. New full-time employees will be eligible for benefits the first of the month following 30 days from hire date. If an employee is hired part-time, temporary, or seasonal and moved to a benefit eligible class, the employee is eligible the first of the month following 30 days in the eligible class.

Gallagher

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Questions?

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Table 1: Anthem Blue Cross 250/500 Deductible Comparison Chart

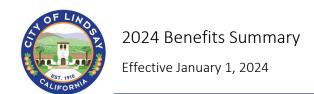
	PPO 250/20/10		PPO 50	00/30/20
	In Network	Out of Network	In Network	Out of Network
Annual Deductible (Individual/Family)	\$250/\$750	\$250/\$750	\$500/\$1,500	\$750/\$2,250
Coinsurance	10%	30%	20%	40%
Annual Out-of- pocket Maximum (Individual/Family)	\$2,500/\$5,000	\$6,500/\$13,000	\$3,500/\$7,000	\$7,000/\$14,000
Preventive Care	\$0 copay	Not covered	\$0 copay	Not covered
Office Visits Virtual Visits Primary Care Urgent Care Specialist	\$0 copay \$20 copay \$20 copay \$20 copay	Not covered 30% after deductible 30% after deductible 30% after deductible	\$0 copay \$30 copay \$30 copay \$30 copay	Not covered 40% after deductible 40% after deductible 40% after deductible
Emergency Room	\$150 copay	10% after deductible	\$150 copay	20% after deductible

Insurance Costs

All Rates effective January 1, 2024 (Health, Dental and Vison Included)

PPO	HEALTH	EMPLOYEE COST/	CITY CONTRIBUTION/ PAY
250		PAY PERIOD	PERIOD
	Employee only	\$0	\$476.22
	Employee + Spouse	\$250.02	\$726.23
	Employee +Children	\$202.40	\$678.61
	Employee + Family	\$428.60	\$904.82

PPO	HEALTH	EMPLOYEE COST/	CITY CONTRIBUTION/ PAY
500		PAY PERIOD	PERIOD
	Employee only	\$0	\$454.79
	Employee + Spouse	\$238.77	\$693.55
	Employee +Children	\$193.29	\$648.07
	Employee + Family	\$409.32	\$864.10



Dental	Dental	EMPLOYEE COST/	CITY CONTRIBUTION/ PAY
Low		PAY PERIOD	PERIOD
Plan			
	Employee only	\$0	\$13.94
	Employee + Spouse	\$7.98	\$21.92
	Employee +Children	\$7.98	\$21.92
	Employee + Family	\$16.97	\$30.91

Dental High Plan	Dental	EMPLOYEE COST/ PAY PERIOD	CITY CONTRIBUTION/ PAY PERIOD
	Employee only	\$0	\$18.09
	Employee + Spouse	\$10.35	\$28.45
	Employee +Children	\$10.35	\$28.45
	Employee + Family	\$22.02	\$40.12

Vision	Vision	EMPLOYEE COST/	CITY CONTRIBUTION/ PAY
Plan		PAY PERIOD	PERIOD
	Employee only	\$0	\$2.84
	Employee + Spouse	\$1.34	\$4.18
	Employee +Children	\$1.39	\$4.24
	Employee + Family	\$2.77	\$5.62

The Anthem Blue Cross PPO 250 plan is the City's primary plan. The City will contribute based on the PPO 250 plan regardless if an employee selects the optional PPO 500 plan.

Rx Plan – Prescription Insurance

The City's vision plan is offered through EmpiRx Health prescription benefit program provides you with access to an extensive national pharmacy network, including all chain pharmacies, and most independents. Your ID cards provides all the information your pharmacist will need to process your prescription through EmpiRx Health. To locate a participating network pharmacy, log onto www.empirxhealth.com or call EmpiRX Health Member Services toll-free 1-877-262-7435 24 hours a day, 7 days a week.

	PPO 250/20/10		PPO 500/30/20	
	In Network	Out of Network	In Network	Out of Network
Retail (30-day Supply)				
Tier 1	\$10 copay	Not Covered	\$10 copay	Not Covered
Tier 2	\$30 copay	Not Covered	\$30 copay	Not Covered
Tier 3	\$50 copay	Not Covered	\$50 copay	Not Covered
Preferred Specialty*				
Tier 1	30%, max \$150	Not Covered	30%, max \$150	Not Covered
Tier 2	30%, max \$150	Not Covered	30%, max \$150	Not Covered
Tier 3	30%, max \$150	Not Covered	30%, max \$150	Not Covered
Mail-order (90-day Supply)				
Tier 1	\$10 copay	Not covered	\$10 copay	Not covered
Tier 2	\$60 copay	Not covered	\$60 copay	Not covered
Tier 3	\$100 copay	Not covered	\$100 copay	Not covered
Preferred Specialty				
Tier 1	30%, max \$150	Not covered	30%, max \$150	Not covered
Tier 2	30%, max \$150	Not covered	30%, max \$150	Not covered
Tier 3	30%, max \$150	Not covered	30%, max \$150	Not covered

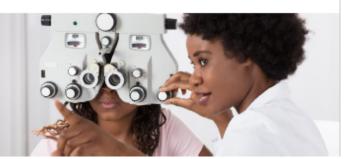
Vision

Open Enrollment is November

The City's vision plan is offered through SUPERIOR VISION. Employee and City contributions are covered in the health insurance costs noted above. Answers to specific questions are available by calling Gallagher Company at (559) 741-4427 for further information or you may call SUPERIOR VISION customer service number at 1-800-507-3800.

In Network S0 copay	Out of Network Up to \$40
\$0 copay	Un to \$40
	Op 10 340
\$25 copay	Up to \$35
\$25copay	Up to \$50
\$25 copay	Up to \$60
\$25 copay	Up to \$70
\$130 allowance	Up to \$63
\$120 allowance	Up to \$100
Covered in full	Up to \$210
	\$25copay \$25 copay \$25 copay \$130 allowance

Finding In-network Eye Doctors You can find an in-network eye doctor in the Superior Vision network by visiting www.superiorvision.com



Dental

Open Enrollment is December

The City's dental plan is offered through Premier Access, which offers two plans a HIGH and a LOW plan see below for details. Employee and City contributions are covered in the health insurance costs noted above. Answers to specific questions are available by calling Gallagher Company at (559) 741-4427 for further information or you may call PREMIER ACCESS customer service number at 888-715-0760.

- Increased calendar year maximum on "LOW" dental plan from \$3,000 to \$5,000.
- Increased orthodontic benefit from \$1,000 Lifetime Maximum to \$1,500 Lifetime Maximum Dental NOTE: The "Low" dental plan is the recommended option if your dental provider is contracted with the plan. The "High" dental plan is the recommended option if your dental provider is NOT contracted. To determine if your provider is or is not contracted, please select the Lincoln Dental Directory link from the Dental benefit when making your selections in Bernie Portal.

	Option 1: Low Option PPO		Option 2: H	ligh Option PPO
	In Network	Out of Network	In Network	Out of Network
Annual Deductible (Individual/Family)	\$25/\$75	\$25/\$75	\$25/\$75	\$25/\$75
Annual Maximum (Per Person)	\$5,000	\$5,000	\$1,000	\$1,000
Preventive Care (Routine Exams (2 per 12 months), Prophylaxis (2 per 12 months) – (1 additional cleaning or periodontal maintenance per 12 months, if member is in 2nd or 3rd trimester of pregnancy), Bitewing X-Rays (maximum of 4 films; 1 per 12 months), Fluoride Treatment for Children up to age 16 (1 per 12 months), Sealants for Children up to age 16 (permanent molars, 1 per 36 months), Space Maintainers, Emergency Treatment (1 per 12 months), Full Mouth/Panoramic X-Rays (1 per 36 months))	100%	100%	100%	100%
Basic Services (Simple Restorative Services (fillings) – Posterior composite restorations, Simple Extractions, Oral Surgery (extractions and impacted teeth), Anesthesia (subject to review, covered with complex oral surgery), Repair of Crown, Denture or Bridge, Non-Surgical Periodontics, Surgical Periodontics (gum treatments), Periodontal Maintenance (2 per 12 month in combination with prophylaxis), Endodontics (root canals))	100% after deductible	100% after deductible	100% after deductible	100% after deductit
Major Services (Inlays and Onlays, Crowns, Bridges, Dentures and Implants)	50% after deductible	50% after deductible	50% after deductible	50% after deductible
Orthodontia (Adult & Children up to age 26)	50%	50%	50%	50%
Orthodontia Lifetime Maximum Per Person)	\$1,500	\$1,500	\$1,500	\$1,500

Employee Assistance Program

The EAP is a **confidential** service designed to help employees and their household members resolve personal and workplace challenges. Counseling services are available free of charge to employees 24/7 via 800-535-4985 TDD callers please dial 866-726-1785. Through the EAP, employees may receive telephone or face to face counseling services up to eight times per year per incident.

Employees use the EAP to access information and additional services by calling the number above or online at members.mhn.com and register with the company code: **csjvrma**.

Life Insurance

City employees are covered under term life insurance program through Lincoln Financial Group. An optional employee paid group supplemental life insurance program is also available to City employees. The employee paid term life insurance policy covers the employee and dependents and is portable (may be continued after individual is not employed by the City).

Effective 1.1.2023

The City of Lindsay has also adjusted the benefit associated with the Basic Life benefit. Please see below for details concerning the changes to both Management and All Other employees effective January 1st, 2023: Management: 1.5x salary with a \$225,000 maximum (previously the benefit was 1x salary with a \$225,000 maximum) All Others: 1x salary with a \$150,000 maximum (previously the benefit was \$15,000)

PERS Retirement

City of Lindsay employees participate in the CalPERS retirement system.

MEMBER CATEGORY	% AT AGE	EMPLOYEE
		CONTRIBUTION
MISCELLANEOUS		
TIER 1 (CLASSIC)	2.7% @ 55	9.00%
TIER 2 (PEPRA) EFF1/1/13	2% @ 62	8.75%
PUBLIC SAFETY		
TIER 1 (CLASSIC)	3% @ 55	9.00%
TIER 2 (PEPRA) EFF 1/1/13	2.7% @ 57	18.75%



Deferred Compensation

The deferred compensation plan is a voluntary retirement program through Lincoln Life. City employees determine how much of their pay is to be directed towards the deferred compensation plan. The City will match the employee's contribution up to 3% of the employee's total annual income.

AFLAC Benefits

AFLAC services pay cash benefits when a covered person has the following plans: Accident Indemnity Advantage Plan

- Cancer Care
- Short-Term Disability Insurance
- Hospital Advantage
- Specified Health Event Protection Plan



AFLAC is voluntary. Rates may vary depending on age and income levels. Please see your representative for individual quotes.

Daniel J. Fernandez Jr. | Agent An Independent Agent Representing Aflac California Central; CA License #0K05932

American Family Life Assurance Company of Columbus (Aflac)
Mob: 559.471.39962 | Fax: 559.205.9180
525 W. Main St, Suite 210, Visalia CA, 93291
daniel fernandez@us.aflac.com |
aflac.com

Worker's Comp Carrier

IN CASE OF LIFE OR LIMB THREATENING INJURY DIAL 9-1-1

The worker's comp carrier for the city is:
Acclamation Insurance Management
Services (AIMS)
P.O. Box 269120, Sacramento, CA 95826

For on the job injuries, report to: (559)227-9972 (main); (559)473-4917 (direct) (559) 227-1579 (fax)

Employer Name: <u>City of Lindsay</u> Group Code: <u>CSJVRMA</u>

- 1 INJURED WORKER NOTIFIES SUPERVISOR
- 2 –INJURED WORKER OF SUPERVISOR CALL IMMEDIATELY CALL INJURY HOTLINE:



Cafeteria Plan Section 125

Flexible Spending Accounts provided by City of Lindsay



How does it work?

- During your open enrollment estimate your expenses for the plan year and enroll in the plan.
- Your annual election amount will be evenly deducted pre-tax from your paycheck throughout the plan year.
- You cannot change your annual election amount after the plan start unless you have a qualified change in status. For example, birth, death, marriage or divorce.
- Check out your Navigate My Benefits and Pre-Tax Solutions pages for more details on how your plan works.

Visit or contact us:

www.naviabenefits.com customerservice@naviabenefits.com (800) 669-3539 | (425) 452-3500 Spend less on day care expenses and more on the things you love. Enroll now!

PACE-HEALTHY REWARDS | Wellness Program



Move. Record. Win!

What is WellSteps?

It's a wellness program designed to help you realize and achieve the benefits of healthy living. By participating, you will learn life-changing tips on how to find balance and incorporate wellness into your daily life.

How it Works:

Get healthy. Throughout the program, you will be challenged to complete a variety of healthy activities which will be available online in your WellSteps program center.

Earn points. Each time you complete an activity, you'll track it in WellSteps to earn points.

Be rewarded. At the end of the year, your points will allow you to earn a gift card!

Prizes:

Each time you check off a completed activity under the "Rewards" tab, you will earn a point. If you earn enough points by the end of the program year, you will qualify to win one of the following prizes:

(WellSteps has confirmed that they can accommodate this new points structure.)

To earn rewards:

- i. 1,700-2,500 points = \$175 reward
- ii. 1,200-1,699 points = \$150 reward
- iii. 900-1,199 points = \$100 reward
- iv. 600-900 points = \$50 reward

How to Join:

Step 1. Register by visiting www.wellsteps.com/PACE and enter your company assigned username. Your username will be your first initial, last initial, and date of birth. Example: John Doe born on July 5, 1980 would have the username of JD070580. If you are a spouse of a PACE employee, your username will be your spouse's username with -s at the end. Example, John Doe's spouse's username would be JD070580-s. If you are a PACE spouse, if asked, select PACE as your company, then enter your own birthdate and any other additional information.

Step 2. Complete the Personal Health Assessment (PHA). You will then have access to the full online program center.

Step 3. Take a look at the "Rewards" page to start completing activities to earn points.

Employee be enrolled and active in your health insurance to be eligible.



COMPLETE CARE

The City offers employees who are insured by their dependents plans to opt out of the City's insurance plan and get reimbursed from Complete Care. For more information contact Jason Simpson Account Executive, Central Valley at 559.741.4436 or Jason Simpson@ajg.com.



CompleteCare Benefits

- Co-pays, deductibles and co-insurance paid by CompleteCare up to \$7,350/single and \$14,700/family per year.
- No premium contribution deducted from employee's paycheck.
- The employee will be reimbursed for the premium contribution paid for the alternate coverage if it exceeds the
 premium contribution the PACE employee would have paid to remain on the PACE medical plan up to a monthly
 maximum of \$100/single, \$200/2-party and \$300/family. If the cost of alternate coverage is less than the employee
 would have paid for the PACE medical plan, premium contribution reimbursement is \$0.

Eligibility

- · Current employees must be enrolled in the PACE Medical Plan
- New employees: must satisfy eligibility requirements
- Qualifying event or newly eligible: marriage, birth of child, part time to full time, etc.

Opportunities for Enrollment

- PACE open enrollment
- · Qualifying event: marriage, spouse's change in employment status, birth of child, part time to full time, etc.
- Spouse's open enrollment

IRS Rules

- You may be enrolled in an HRA or FSA. You CANNOT be reimbursed from both CompleteCare and your HRA or FSA.
- Employees are NOT eligible for CompleteCare if their alternate coverage is:
 - a high deductible health plan (HDHP) with active contributions to a Health Savings Account (HSA);
 - Medicare, Tricare (retiree only); or
 - an Individual Policy.
 - Limited benefit health plan

Enrollment

- Enroll in alternate coverage and waive coverage on PACE's medical plan
- · Complete the CompleteCare enrollment form
- Complete Attestation form
- Provide proof of premium contribution paid by spouse

METLIFE

A voluntary legal plan for City Employees from \$9.62 high plan, or for \$5.71- low plan per month you get legal assistance— with no waiting periods, no deductibles, and no claim forms.

	High	Plan	Low Plan
Money Matters	Debt Collection Defense Identity Theft Defense Negotiations with Creditors Promissory Notes Tax Collection Defense	Identity Management Services ² Personal Bankruptcy Tax Audit Representation	Debt Collection Defense Identity Theft Defense Negotiations with Creditors Promissory Notes Tax Collection Defense
Home & Real Estate	Deeds Eviction Defense Foreclosure Mortgages Security Deposit Assistance Tenant Negotiations	Boundary & Title Disputes Property Tax Assessments Refinancing & Home Equity Loan Sale or Purchase of Home Zoning Applications	Deeds Eviction Defense Foreclosure Mortgages Security Deposit Assistance Tenant Negotiations
Estate Planning	Codicils Complex Wills Healthcare Proxies Living Wills Powers of Attorney (Healthcare, Financial, Childcare, Immigration) Simple Wills	Revocable & Irrevocable Trusts	Codicils Complex Wills Healthcare Proxies Living Wills Powers of Attorney (Healthcare, Financial, Childcare, Immigration) Simple Wills
Family & Personal	Affidavits Conservatorship Demand Letters Garnishment Defense Guardianship Name Change Personal Properties Protection Protection from Domestic Violence Review of ANY Personal Legal Document School Hearings	Adoption Immigration Assistance Juvenile Court Defense, Including Criminal Matters Parental Responsibility Matters Prenuptial Agreement	Affidavits Conservatorship Demand Letters Garnishment Defense Guardianship Name Change Personal Properties Issues Protection from Domestic Violence Review of ANY Personal Legal Document School Hearings
Civil Lawsuits	Administrative Hearings Disputes Over Consumer Goods & Services Incompetency Defense	Civil Litigation DefensePet LiabilitiesSmall Claims Assistance	Administrative Hearings Disputes Over Consumer Goods & Services Incompetency Defense
Elder-Care Issues	Consultation & Document Review for Issues Related to Your Parents: • Deeds • Leases • Medicaid • Medicare	Notes Nursing Home Agreements Powers of Attorney Prescription Plans Wills	Same as High Plan
Vehicle & Driving	Defense of Traffic Tickets* Driving Privileges Restoration	License Suspension Due to DUI Repossession	Same as High Plan

To learn more, visit info.legalplans.com and enter access code 0951010 for the high plan or 0950010 for the low plan or call 800.821.6400 Monday – Friday 8:00 am – 8:00 pm (EST/EDT).

All-State Accident Insurance

The City offers employees additional accidental insurance from Allstate for all full-time employees and their families.

Incident	Payout
Emergency Room	\$250
Ambulance Benefit (Ground/Air)	\$250/\$750
Hospital Admission	\$1,500
Daily Hospital Confinement	Up to \$300/day
Intensive Care Unit	Up to \$600/day
Follow Up Treatment by Physician	\$50
PhysicalTherapy	Up to \$75 Per Visit
Major Diagnostic Testing (CT Scan, MRI, EEG, CAT)	\$125
Fracture/Dislocation	Up to \$5,000
Wellness	\$50 twice per year



	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Cost Per Pay Period	\$0	\$4.73	\$10.00	\$15.04
Wellness	\$50 twice per year	\$50 each twice per year	\$50 each twice per year maximum \$200	\$50 each twice per year maximum \$200

Voluntary Long Term Disability Benefit

Effective January 1, 2023 employees will have the option of enrolling in a Voluntary Long-Term Disability Benefit with Lincoln Financial.

Long-Term Disability Benefits			
Option	1		
Class	1		
Class Description	All Active Full Time Employees		
Benefit Percent	60%		
Benefit Increment	None		
Maximum Monthly Benefit Amount	\$6000		
Minimum Monthly Benefit Amount	Greater of \$100 or 10% of Benefit		
Elimination Period	90 Days		

Example: 40 year old with annual salary of \$63,000 would be able to purchase Voluntary LTD policy for a roughly \$17.79 per pay period

Health Care 24/7 Live Health Online

To help you save money and keep you healthy, the City offers Healthy Care 24/7 – Live Health services at no cost to you:



More Information

To learn more about LiveHealth Online, visit **www.livehealthonline.com**. You can register by downloading the app for free from iTunes or Google Play store and signing-up.

ASPCA Health Insurance

The City of Lindsay is offering pet insurance at a discounted rate through the ASPCA. Rates are based on breed and age.

Complete Coverage[™]

With ASPCA Pet Health Insurance, you can choose the care you want when your pet is hurt or sick and take comfort in knowing they have coverage.

EXAM FEES, DIAGNOSTICS, AND TREATMENTS

- Accidents
- Illnesses
- · Hereditary Conditions

- Cancer
- Dental Disease
- Behavioral Issues

CUSTOMIZABLE OPTIONS

Annual Limit - from \$5,000 to unlimited.

Reimbursement Percentage - 90%, 80%, or 70% of your vet bill.

Deductible - select \$100, \$250, or \$500. You'll only need to satisfy it once per 12-month policy period.

Add Preventive Care - Get reimbursed scheduled amounts for things that protect their pet from getting sick, like vaccines, dental cleanings, and screenings for a little more per month.

Select Accident-Only Coverage - If you're just looking to have some cushion when your pet gets hurt, you can choose coverage that only includes care for accidents.

SIMPLE TO USE

Just pay your vet bill, submit claims, and get reimbursed! You're free to visit any vet, specialist, or emergency clinic you want, and you can choose to receive reimbursement by direct deposit or mail.

CITY OF LINDSAY - SAVE WITH YOUR DISCOUNT!

Get your customized quote and enroll today!

https://www.aspcapetinsurance.com/COL | 1-877-343-5314 YOUR PRIORITY CODE: EB20COL





All-State ID Theft Protection

The City of Lindsay is offering Identity theft protection through All-State.



Frequently asked questions



How do you protect my identity?

We use our proprietary software to proactively monitor various sources. Through Allstate Identity Protection, you will also have the power to create thresholds for your bank accounts, allowing you to receive alerts for suspicious financial transactions outside of your set limits. We monitor your credit reports and credit-related accounts to ensure no one is using your name fraudulently, and we monitor the dark web to check for compromised credentials and unauthorized account access. While we can't prevent fraud, we can and do alert you at its very first sign, then resolve the fraud and restore your identity.

We know that tracking your own identity is cumbersome and fraught with unknowns, so we're here to take the burden off your shoulders so you can live your life.

- Financial Account and Credit Monitoring
- 24/7 Alerts and Fraud Recovery
- Up to \$1 Million Identity Theft Expense Reimbursement

The cost per pay period for **Employee Only** coverage is **\$6.44** and the cost for **Employee + Family** coverage is **\$11.52**

NOTE: Additional details are available via BerniePortal