

2010 City of Thousand Oaks Benefits Matrix
CITY-PAID MONTHLY CONTRIBUTION
 Effective January 9, 2010

City of Thousand Oaks City Benefits	General Employees	Professional Employees	Supervisory, Senior Managers, & Confidential Employees	Executive Employees
CAFETERIA PLAN: Total city contribution (to use toward medical premiums and/or optional programs, FSAs, life insurance, deferred compensation or cash back):	\$430	\$410	\$410	\$430
MEDICAL PROVIDER:	PERS	PERS	PERS	PERS
Cal PERS Health Plan?	yes	yes	yes	yes
Other Health Plan?	no	no	no	no
Employer medical contribution (mo. max.)	\$435	\$435	\$435	\$435
Maximum Cash Back Value	\$700	\$700	\$700	\$700
DENTAL PROVIDER:	Delta Dental	Delta Dental	Delta Dental	Delta Dental
Employer contribution (mo. max.)	\$174	\$174	\$174	\$174
VISION INSURANCE PROVIDER:	Medical Eye Services	Medical Eye Services	Medical Eye Services	Medical Eye Services
Employer contribution (mo. max.)	\$12	\$12	\$12	\$12
EAP PROVIDER:	MHN	MHN	MHN	MHN
Employer contribution (mo. max.)	\$2	\$2	\$2	\$2
LIFE INSURANCE PROVIDER:	The Standard	The Standard	The Standard	The Standard
Employee Policy (employer paid)	1x annual up to \$50,000 max./\$9	\$100,000 /\$18	\$100,000 /\$18	\$200,000 /\$35
Basic AD & D (employer paid)	.025 / 1,000	.025 / 1,000	.025 / 1,000	.025 / 1,000
Dependent Policy (employer paid)	n/a	\$5000/\$.80	\$5000/\$.80	\$5000/\$.80
LTD PROVIDER:	The Standard	The Standard	The Standard	The Standard
Elimination period	Later of 30 days or when all sick leave used	Later of 30 days or when empl. stops annual leave use	Later of 30 days or when empl. stops annual leave use	Later of 30 days or when empl. stops annual leave use
Benefit / max. mo. (employer paid)	66.67%	66.67%	66.67%	66.67%
DEFERRED COMPENSATION PROVIDER:	ICMA	ICMA	ICMA	ICMA
Plan / max. mo. (employer paid)	401(a) -- \$20/mo plus up to \$30 add'l matched contrib.	401(a) / .4% salary	401(a) / 3% salary	401(a) / 6% salary
RETIREMENT PROVIDER:	PERS	PERS	PERS	PERS
Employer pay 7% <u>employee</u> cost?	yes	yes	yes	yes
% Formula for Non-Safety?	2% @ 55	2% @ 55	2% @ 55	2% @ 55
EPMC reported as income?	yes	yes	yes	yes
Single Highest Year Benefit?	yes	yes	yes	yes
Retiree Medical (employer paid)	\$435/mo.	\$435/mo.	\$435/mo.	\$435/mo.
LEAVES, HOLIDAYS				
Holiday hours (# per year)	104	104	104	104
Floating holidays (# per year)	n/a	n/a	n/a	n/a
Vacation (based on service years)				
A. min. hrs. per yr./ # years	100 / up to 4 yrs.	n/a	n/a	n/a
B. max. hrs. per yr./ # years	228 / up to 28+ yrs.	n/a	n/a	n/a
Sick Leave (based on service years)				
A. min. hrs. per yr./ # years	96	n/a	n/a	n/a

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B. max. hrs. per yr./ # years	96	n/a	n/a	n/a
Sick Leave Conversion				
A. Upon termination	no cash out	no cash out	no cash out	no cash out
B. Upon retirement	credited to service yrs.	credited to service yrs.	credited to service yrs.	credited to service yrs.
Comprehensive Annual Leave (vacation/sick)				
A. min. hrs. per yr/ # years	n/a	190 / up to 4 yrs.	190 / up to 4 yrs.	190 / up to 4 yrs.
B. max. hrs. per yr/ # years	n/a	322 / 29+ yrs.	322 / 29+ yrs.	322 / 29+ yrs.
Administrative Leave	n/a	n/a	33 hrs.	100 hrs.
OTHER FRINGE BENEFITS				
Car Allowance	n/a	n/a	n/a	\$400/mo.
Mileage Reimbursement Amount	federal rate	federal rate	federal rate	0
Annual City Wellness	n/a	n/a	400/yr.	400/yr.
Physical - \$ max. paid / frequency	n/a	n/a	n/a	\$350/yr.
Tuition Reimbursement (max. amt.)	BA - \$600/Unit MA - \$600/Unit	BA - \$600/Unit MA - \$600/Unit	BA - \$600/Unit MA - \$600/Unit	BA - \$600/Unit MA - \$600/Unit
Computer Purchase Program Loan / Term (i.e., interest/repayment)	\$3000 0%/3 yrs.	\$3000 0%/3 yrs.	\$3000 0%/3 yrs.	\$3000 0%/3 yrs.
Relocation Assistance (max. amt.)	n/a	n/a	n/a	n/a
Safety Shoes	\$150/yr.	\$150/yr.	\$150/yr.	n/a
Bilingual Pay	\$50/mo.	\$50/mo.	n/a	n/a
PAY PROGRAM				
Is employee group on merit step increase? What % increase?	yes / 5%	no	no	no
Is employee group on flexible % increase or Pay for Performance?	no	Pay for Performance up to 8% annual. Max. 20% above midpoint	Pay for Performance up to 8% annual. Max. 20% above midpoint	Pay for Performance up to 8% annual. Max. 20% above midpoint
Does group receive Cost of Living Adjustment?	yes	no	no	no
EMPLOYEE-PAID OPTIONAL BENEFITS				
Term Life Insurance (ING)	Up to \$300,000	Up to \$300,000	Up to \$300,000	Up to \$300,000
Universal Life Insurance (ING)	Up to \$500,000	Up to \$500,000	Up to \$500,000	Up to \$500,000
Critical Illness Insurance (ING)	Empl. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Cancer Insurance (Allstate)	Empl. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Legal Club of America (Family Protection Plan)	Empl. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Personal Accident Insurance (AFLAC)	Empl. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Hospital Protection/Confinement (AFLAC)	Empl. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Hospital Intensive Care Protection (AFLAC)	Empl. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Dental Supplemental Plan (AFLAC)	Emp. only or family	Empl. only or family	Empl. only or family	Empl. only or family
Long Term Care (CalPERS)	Through CalPERS	Through CalPERS	Through CalPERS	Through CalPERS
Health Care Flexible Spending Account	\$5,000/yr. max.	\$5,000/yr. max.	\$5,000/yr. max.	\$5,000/yr. max.
Dependent Care Flexible Spending Account	\$5,000/yr. max.	\$5,000/yr. max.	\$5,000/yr. max.	\$5,000/yr. max.
457 Deferred Compensation (pre-tax)	Up to IRS max.	Up to IRS max.	Up to IRS max.	Up to IRS max.