

BENEFITS MANUAL 2019

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INTRODUCTION

TVMWD has established a number of benefit programs for its eligible employees. Although this summary does not state all of the features of these benefit programs, it provides brief summaries to acquaint employees with some of the key features of the programs. It is important that employees remember that additional terms, conditions, and limitations regarding program eligibility and benefit entitlements often exist. Official plan documents and, where applicable, actual insurance policies should be consulted for further information regarding each benefit program. In the case of actual or apparent conflict between the benefit summaries set forth in this summary and the terms of the official plan documents, the provisions of the official plan documents, as interpreted in the sole and absolute discretion of the plan administrator, shall control.

In addition, while it is TVMWD's present intention to continue the benefits described in this summary, TVMWD expressly reserves the right, whether in an individual case or, more generally, to modify, supplement, curtail, reduce, or eliminate any benefit, in whole or in part, either with or without notice, to the fullest extent permitted by law, if TVMWD determines, in the exercise of its sole discretion, that such action is warranted. Neither the benefit program nor their descriptions contained in this summary are intended to create any guarantees regarding continued and/or future availability.

BENEFIT	<u>DETAILS</u>
AFLAC Eligibility Full-time staff and elected officials Cost Employee: Enrollment is voluntary Employer: None	Supplemental insurance to help pay benefits your major medical insurance doesn't cover. Employee payments may be made with a payroll deduction. Amount may or may not be pre-tax, depending upon the type of insurance.
Certification Fees Eligibility Full-time staff who have satisfactorily completed their introductory period or receive General Manager approval. Eligibility requirements for introductory staff may be waived if the certification is required as part of the job classification. Cost Employee: Up-front application, registration and/or course fees. Employer: Upon acquiring certification, up to 100% of fees will be reimbursed.	New certifications are the initial responsibility of the employee. Upon successfully obtaining the certification and providing a copy, TVMWD will reimburse up to 100% of the certification fees. Any late fees, penalties or unsuccessful attempts will not be reimbursed. Renewals for existing certifications will be paid directly by TVMWD. Reimbursement and renewals must be approved by the department head or General Manager.

BENEFIT

Deferred Compensation Plans

Eligibility

Immediate for all employees.

Cost

Elected Officials & part-time staff
 -7.5% of compensation

Employer:

 <u>Full-time staff</u> – matches employee deferral up to \$200.00 per pay period (except pay periods that are the 3rd pay period in a month)

<u>DETAILS</u>

Voluntary participation in a Section 457 deferred compensation plan is made available through Lincoln Financial Group or California Public Employees Retirement System (Voya). Employee contributions are made with a pre-taxed payroll deduction. Employee may "catch up" for unmatched amounts earlier in the calendar year but may not receive match early for future periods. Total deferred contributions cannot exceed limits of the Internal Revenue Service. Employer contributions may also be made by TVMWD to a Section 401a plan.

Dental

Eligibility

Full-time staff and elected officials, including eligible dependents, effective the 1st day of the month following 30 days of service unless approved by the GM.

Cost

Employee: No Cost

Employer: 100% of premium

TVMWD provides dental coverage through ACWA/JPIA. Employees can select from the following two plans:

- Delta Dental of California PPO allows visits to any dentist of choice. Maximum benefit provided by using a DPO dentist.
- DeltaCare USA (HMO) pre-paid dental plan which offers affordable HMO coverage.

Flexible Spending Account

Eligibility

Immediate for newly hired full-time staff & elected officials; otherwise only during open enrollment or with a HIPPA qualifying event.

Cost

Employee: Enrollment is voluntary

Employer: No Cost

TVMWD offers a Flexible Spending Account (FSA) Program which enables employees to set aside an estimated portion of their annual salary on a pre-tax basis to cover qualified medical expenses for the employee & dependents & qualified dependent care expenses incurred during the calendar year. For the FSA-Health Care, any unused contributions in excess of \$500 by calendar year end will be forfeited. Plan limits are as follows:

- Health Care = \$2,700 per calendar year
- Dependent Care = \$5,000 per calendar year

Employee deductions are a pre-taxed payroll deduction.

TVMWD also offers a Limited Flex Spending Account (LFSA) that covers dental and vision only that can be combined with a Health Savings Account.

BENEFITDETAILSHealth Benefit AllowanceTVMWD propertiesEligibilityTVMWD propertiesFull-time staff starting on or beforehelp cover dental and dental dental and dental denta

Cost

Employee: No Cost

Employer: 100% of premiums

TVMWD provides an allowance for employees to help cover the premium costs of Kaiser medical, dental and vision. Excess funds from this allowance will be paid to employees in their paycheck.

Single \$ 503Two-party \$1,013Family \$1,347

Cash back is not available for elected officials.

Health Reimbursement Arrangement Eligibility

Immediate for full-time staff and elected officials.

Cost

Employee: No Cost

Employer: Admin Fees plus \$1,000

annually

TVMWD pays administration fees & \$1,000 annually (calendar year) for reimbursement of qualified out-of-pocket health expenses for you or your qualifying dependents and up-front medical premiums. The \$1,000 will be prorated based on date of hire during the 1st year. For those with an HSA, the \$1,000 will be contributed there instead.

Any unused balance may be carried over and utilized in future years up to a max of \$3,500.

Health Savings Account

Eligibility

Employees enrolled in the Anthem Blue Cross ABHP, effective the 1st day of the month following 30 days of service unless approved by the General Manager.

Cost

Employee: No Cost

Employer: Annual contribution of:

Single \$400Two-party \$800Family \$800

HSAs provide for employee health benefits in the face of rising health insurance costs. They were created to encourage consumer-driven health plans. Plan participants pay directly for routine health care services for yourself or your qualifying dependents, making participants more responsible consumers while reducing the cost of high-deductible insurance coverage. The annual contribution will be prorated based on date of hire during the 1st year.

Long-Term Care

Eligibility

Immediate for all employees.

Cost

Employee: Enrollment is voluntary

Employer: None

CalPERS Long-Term Care Program offers a variety of daily benefit and total coverage amounts to help with the cost of receiving long-term care services. The program is available to California public employees and retirees, as well as their spouses, parents, parents-in-law, adult children and adult siblings.

BENEFIT DETAILS

Life Insurance & Dismemberment Eligibility

Immediate for full-time staff and elected officials effective the 1st day of the month following 30 days of service.

Cost

Employee: Taxes on coverage exceeding \$50,000 and/or if employee elects to increase the benefit at their own expense. Employer: 100% of premium

In the event of death, a sum equal to 2 times the annual salary of the insured, not to exceed \$200,000 (\$10,000 for elected officials) will be paid to the designated beneficiary.

Employee is also enrolled in dependent life coverage, which provides death benefits up to \$1,500 for a spouse and \$1,000 for dependent children.

Employee may add supplemental coverage at their own expense.

Medical

Eligibility

Full-time staff and elected officials, including eligible dependents, effective the 1st day of the month following 30 days of service unless approved by the General Manager.

Cost

Employee: 10% of medical premiums except:

- employees who utilize health benefit allowance
- employees who choose employee only coverage for least expensive plan
- employees enrolling in the Anthem Blue Cross CDHP

Employer: remaining cost of medical premiums

TVMWD provides health coverage through ACWA/JPIA. Employees can select from the following four plans:

- Anthem Blue Cross PPO
- Anthem Blue Cross HMO
- Anthem Blue Cross CDHP
- Kaiser Permanente HMO

Premiums vary depending on the health plan selected. Employees will pay the 10% medical premium as a pre-taxed monthly payroll deduction.

Employee may opt themselves and/or family members out of medical coverage during open enrollment with proof of a comparable alternative medical coverage. The opt out amount is 70% of the average plan cost (based on family status) not to exceed the least costly plan (Kaiser). Reenrollment is not allowed until open enrollment or with a HIPPA qualifying event. ACWA/JPIA requires medical coverage for 75% of TVMWD employees, so opt out is on a first-come first-serve basis. Cash back is not available for elected officials.

BENEFIT **DETAILS Medicare Tax** A mandatory tax for all public employees hired after March 31, 1986. Medicare is a national Eligibility Immediate for all employees. social insurance program that guarantees access to health insurance for Americans age 65 and older and younger people with disabilities. Cost Employee: 50% of Medicare tax Employer: 50% of Medicare tax Medicare benefits may include help with hospital bills, limited coverage of skilled nursing facility stays and hospice care. Contact your local Social Security office for benefit details. **PERS Retirement** Eligibility TVMWD participates in the California Public Immediate for full-time staff. Part-time staff with prior CalPERS (or reciprocal agency) service. Cost: 2%@55 Employee: 7% of salary are based on the following: Employer: approximately 15.8% of salary years of service 5 yrs. PERS service)

Cost: 2%@62 Employee: 6.25% Employer: 6.842% Employees Retirement System (CalPERS).

The retirement formula for employees hired prior to January 1, 2013 (or otherwise qualify as "Classic PERS employees" is 2% @55 and benefits

- age at retirement (age 50 or over with min
- highest 12 consecutive month period

The retirement formula for employees hired on or after January 1, 2013 is 2%@62 and benefits are based on the following:

- years of service
- age at retirement (age 52 or over with min 5 yrs. PERS service)
- highest 36 consecutive month period

Retiree Health

Eligibility

Full-time staff who retire from TVMWD at age 50 or older with a minimum of 10 years of service.

Cost

Employee: Medical, dental & vision premium cost in excess of TVMWD percentage of the medical premium cap. Employer: A maximum of \$600 per month depending on years of service.

Employees may choose to maintain the medical plan they have in place with TVMWD at the time of retirement or be covered under another licensed plan outside TVMWD with proof of coverage. Enrollment in Medicare part A & B is required if the retiree remains on TVMWD medical plan. Retiree is eligible for open enrollment annually as long as they have maintained continuous coverage with TVMWD.

The employee's spouse and/or other dependents are eligible for medical coverage at the employee's cost.

Employee may also use benefit to cover dental and vision premiums obtained from an outside licensed plan.

<u>BENEFIT</u> <u>DETAILS</u>

$Short/Long\ Term\ Disability\ (STD/LTD)$

Eligibility

Full-time staff on the 1st day of the month following 30 days of service.

Cost

Employee: No Cost

Employer: 100% of premium

Disability compensation if you experience a non-work related injury or illness or a pregnancy causing disability in excess of 60 days. STD becomes effective on the 61st day of a disability. LTD is available after 180 days if applicable.

The monthly disability payment is 2/3 of the first \$11,250 of your regular monthly earnings. If you remain disabled, payments will continue until age 65.

State Disability Insurance (SDI)

Eligibility

Immediate for all staff.

Cost

Employee: No Cost

Employer: 100% of SDI contribution rate

California State Disability Insurance (SDI) is a partial wage-replacement insurance plan for California workers. Workers covered by SDI are covered by two programs: Disability Insurance & Paid Family Leave.

Disability Insurance provides affordable, short-term benefits to eligible workers who suffer a loss of wages when they are unable to work due to a non work-related illness or injury, or due to pregnancy or childbirth.

Paid Family Leave was established for workers who suffer a loss of wages when they need to take time off to care for a seriously ill child, spouse, parent, parent-in-law, grandparent, grandchild, sibling, registered domestic partner, or to bond with a new child.

Tuition Reimbursement

Eligibility

Full-time staff who have satisfactorily completed their introductory period or received General Manager approval.

Cost

Employee: Up-front tuition & associated costs.

Employer: Upon course completion with acceptable grade, up to \$3,000 will be

reimbursed in a calendar year.

Reimbursement of tuition and associated costs up to \$3,000 per calendar year. Courses must be work-related or count toward a degree. A grade of "C" or better in the specified course is required for reimbursement.

For a non-accredited program, completion of the course with proof of passing all related course work and exams is required.

The General Manager must approve tuition reimbursement in advance of starting course work.

BENEFIT **DETAILS Technology Loan Program** TVMWD offers an interest free loan for the Eligibility purchase of home technology to assist in Full-time staff who have satisfactorily professional development of the employee which completed their introductory period & will enhance their performance at TVMWD. elected officials. Upon approval by the General Manager with the following loan provisions: Cost Employee: Up-front costs Maximum loan amount is \$3,500 Employer: No cost Repayment via payroll deductions, minimum of \$30 per pay period, for a period not to exceed 5 years. Unpaid balance due upon termination. • Reassignment or transfer of equipment violates agreement and cancels the right to participate in the program. • Allowed: Computers and peripherals, tablets, smart phones • Not allowed: cameras, music devices, gaming or entertainment software • Only one loan at a time. **Unemployment Insurance** Unemployment Insurance provides workers, who lose their jobs through no fault of their own, with Eligibility Immediate for all employees weekly unemployment insurance payments. Cost Weekly payments for as long as 26 weeks (6 Employee: No Cost State & Federal extensions can months). Employer: 100% of premium periodically extend the benefit period. Benefit payments are based on the amount of wages earned over a 52-week period. Elected officials are not eligible for unemployment insurance upon separation from TVMWD. Vision TVMWD provides vision coverage through Eligibility ACWA/JPIA, Vision Service Plan (VSP). The Full-time staff and elected officials, program allows visits to any eye doctor of choice. including eligible dependents, effective Maximum benefit is provided by using a VSP eye the 1st day of the month following 30 doctor. days of service unless approved by the General Manager. Co-pays apply plus any costs for products/services above the VSP contract limits. Cost Employee: No Cost Employer: 100% of premiums

BENEFIT	<u>DETAILS</u>
Worker's Compensation Eligibility Immediate for all employees Cost Employee: No Cost Employer: 100% of premium	Benefit begins when you experience a work-related injury or illness. The benefit structure below defines what injured workers are entitled to: • Medical care • Temporary disability benefits • Permanent disability benefits • Supplemental job displacement benefits • Death benefits

For additional information on any of the benefits listed please contact the Finance Department.