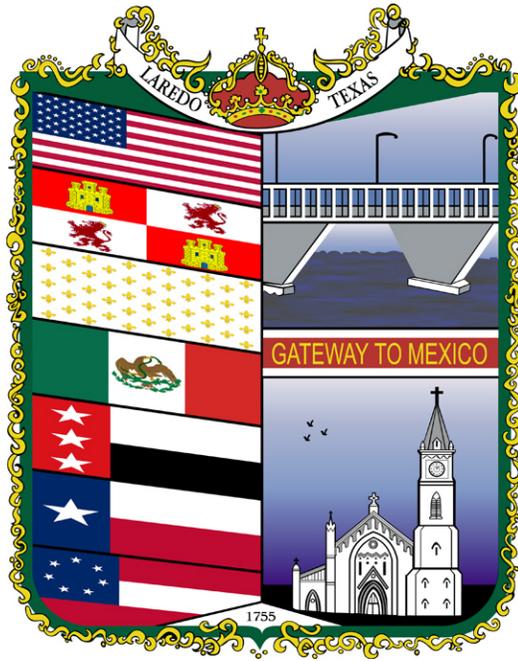


CITY OF LAREDO



SUMMARY OF BENEFITS FY 2013-2014

CITY OF LAREDO BENEFITS PACKAGE

***MEDICAL INSURANCE**

Blue Cross Blue Shield of Texas

No Maximum Lifetime

Employee monthly contribution

- ▶ Employee only: \$0.00
- ▶ Employee + Child(ren): \$112.20 Biweekly
- ▶ Employee + Spouse: \$137.13 Biweekly
- ▶ Employee + Family: \$209.41 Biweekly

***PRESCRIPTIONS**

Outpatient Prescription drug Benefit (per prescription)

30 day supply

- ▶ \$10/ Generic
- ▶ \$35/ Preferred brand name
- ▶ \$55/ Non-preferred brand name

Mail Order Prescription Drug Benefit (per prescription)

90 day supply times one co-payment

- ▶ \$10/ Generic
- ▶ \$35/ Preferred brand name
- ▶ \$55/ Non-preferred brand name

***DENTAL**

Delta Dental Insurance

	<u>Core Plan</u>	<u>Rate</u> <u>(bi-weekly)</u>	<u>Deluxe Plan</u>	<u>Rate</u> <u>(bi-weekly)</u>
	Employee Only:	\$0.00	Employee Only:	\$5.93
	Family:	\$10.43	Family:	\$29.23
Benefit				
Diagnostic & Preventive	100%		100%	
Basic	80%		80%	
Endodontic	50%		80%	
Periodontic	50%		80%	
Oral Surgery	50%		80%	
Anesthesia	50%		50%	
Prosthetics	N/A		50%	
Major	N/A		50%	
Orthodontic	N/A		50%	
	Deductible			
Benefit Maximum per Calendar Year		\$25 / \$75 \$1,200	\$50 / \$150 \$1,200	

CITY OF LAREDO BENEFITS PACKAGE

***VISION**

Superior Vision

Co-payments: \$10 Comprehensive Eye Exam
 \$25 Materials
 \$25 Contact Lens Fitting Exam

- ▶ Employee only: \$3.12 (bi-weekly)
- ▶ Employee and Family: \$7.84 (bi-weekly)

***DEPENDENT LIFE**

ING

<u>Spouse</u>	<u>Child(ren) (14 days to 6 months)</u>	<u>Child(ren) (6 months & over)</u>
\$5,000	\$100	\$2,500

- ▶ **Cost:** \$0.60 Biweekly

***PERSONAL ACCIDENT INSURANCE**

AIG

<u>SINGLE</u>			<u>FAMILY</u>		
<u>CODE</u>	<u>POLICY AMOUNT</u>	<u>COST</u>	<u>CODE</u>	<u>POLICY AMOUNT</u>	<u>COST</u>
PE	50,000	\$0.58	PO	50,000	\$0.92
PJ	100,000	\$1.15	PT	100,000	\$1.85
QJ	150,000	\$1.73	QD	150,000	\$2.77
QK	200,000	\$2.31	QE	200,000	\$3.69
QL	250,000	\$2.88	QF	250,000	\$4.62

Employee may purchase up to 10x their annual salary

FAMILY COVERAGE

Family Unit Composition	% of benefit
Insured (No children)	100%
Spouse	60%
<hr/>	
Insured	100%
Spouse	50%
Each child	10%
<hr/>	
Insured (No Spouse)	100%
Each child	20% to a maximum benefit of \$30,000 per child

CITY OF LAREDO

BENEFITS PACKAGE

*BASIC LIFE INSURANCE

Employee Life (Natural or Accidental Death) ING	\$35,000
Employee AD&D (Accidental Death) AIG	\$35,000

***90 DAY WAITING PERIOD**

RETIREMENT

- Texas Municipal Retirement System
- Contribution of 14% by City; City Match 2-1
- Vesting after 5 years of service credit
- Retirement Eligibility: 5 years of service credit at age 60 **OR** 20 years of service credit at any age
- Supplemental Death Benefit for Employees: Approximately equal to employee's annual salary
- Supplemental Death Benefit for Retirees: \$7,500 lump sum
- Restricted Prior Service Credit: Federal, State, Counties, Other Municipalities, and School Districts

For additional information you can go to www.TMRS.com

HOLIDAYS

- New Year's Day (January 1st)
- Martin Luther King, Jr. (Third Monday in January)
- President's Day (Third Monday in February)
- Friday before Easter Sunday
- Memorial Day/September 11th (Remembrance) Day (Last Monday in May)
- Independence Day (July 4th)
- Labor Day (First Monday in September)
- Veteran's Day (November 11th)
- Thanksgiving Day (Fourth Thursday in November)
- Friday after Thanksgiving (Fourth Friday in November)
- Christmas Eve (December 24th)
- Christmas Day (December 25th)
- Personal Holiday (date subject to department director approval and after being employed with the City for one (1) year) -- One (1) day every fiscal year (*October 1st – September 30th*)

The department shall insure that each one of their employees take the holiday assigned to them for that fiscal year; the employee shall take the personal holiday before the end of the

CITY OF LAREDO BENEFITS PACKAGE

fiscal year or lose it. If the employee has to work on their designated holiday, they will be allowed to reschedule their holiday as determined by their department director. To ensure operating efficiency of the department, the employee must submit a three-day written notice unless a personal hardship does not allow for an advance notification.

ANNUAL LEAVE

Full-time regular employees earn biweekly annual leave as follows:

- 0 to 10** years of service: 10 working days per year, 3.08 A.L.
- 10 to 15** years of service: 12 working days per year, 3.69 A.L.
- over 15** years of service: 15 working days per year, 4.62 A.L.

- The maximum amount of annual leave that an employee may carry over from one year to the next is sixty (60) days (480 hours).
- Any annual leave to the employee's credit over the sixty (60) days [four hundred eighty (480) hours] maximum will be transferred and added to the employee's Sick Leave accrual balance at the end of the fiscal leave year.

*Annual Leave shall not accrue after 45 working days for Serious Illness pay hours.
Annual Leave shall not accrue after 45 working days for Workers Compensation (Injury with pay hours and Injury without pay hours) from the date of injury.*

SICK LEAVE

- Full-time regular employees earn bi-weekly sick as follows: **6 ½** working days per year, 2.00 S.L.
- Maximum carry over for Sick Leave is unlimited.
- Sick Leave credits are transferable between employees unless otherwise stated in a collective bargaining agreement.

*Sick Leave shall not accrue after 45 working days for Serious Illness pay hours.
Sick Leave shall not accrue after 45 working days for Workers Compensation (Injury with pay hours and Injury without pay hours) from the date of injury.*

SICK LEAVE BUY BACK

Employee must select one of the following options:

- (1) The City may elect to purchase (6) six days of unused Sick Leave days from employees who may elect to sell such Sick Leave days and who have accumulated at least sixty (60) days (480 hours) of Sick Leave prior to October 1st of that current fiscal year. Only city employees who participate in an approved deferred

CITY OF LAREDO BENEFITS PACKAGE

compensation plan shall be eligible to sell unused sick leave days, not to exceed (6) six days, at face value. All monies paid by the City for any unused Sick Leave purchased under this policy shall be deposited directly to the employee's account in such deferred compensation plan no later than the first (1st) pay day in December of each fiscal year.

- (2) The City may elect to purchase (6) six days of unused Sick Leave days at a rate of two days of unused Sick Leave in exchange for one paid day not to exceed three (3) paid days, from any employee who has accumulated at least sixty (60) days [four hundred eighty (480) hours] of Sick Leave prior to October 1st of that current fiscal year. The City shall issue these checks no later than the first (1st) pay day in December of each fiscal year.

“This program is solely dependent upon the availability of funds in any fiscal year”

SICK LEAVE DONATION

City of Laredo regular full-time employees that exhaust all paid leave may need additional time to recover from a serious health condition or serious injury. This policy will allow regular full-time employees to request assistance from other regular full-time employees on a voluntary basis to donate unused sick leave hours to assist them during their hardship. This program is strictly voluntary and City employees are allowed the opportunity to support their fellow employees in their time of need.

SERIOUS ILLNESS PROGRAM

- A serious illness program was established by crediting (1) hour per pay period per employee to an account against which employees will be allowed to charge days used.
- Maximum days payable from the serious illness program for any one (1) employee on a cumulative bases is one (1) day for each full month of employment.
- The employee has to have completed six (6) months of service in order to request serious illness days.

FUNERAL LEAVE

- A Department director may grant a regular employee up to three (3) working days of absence pay without charge to sick or annual leave in the case of death in the employee's immediate family.
- Immediate family consists of: employee's spouse and children, employee's or spouse's father, mother, brother(s), sister(s), grandparents, or legal guardian

CITY OF LAREDO

BENEFITS PACKAGE

FAMILY AND MEDICAL LEAVE ACT:

FMLA entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons with continuation of group health insurance coverage under the same terms and conditions as if the employee had not taken leave.

- The City grants up to 12 weeks of Family and Medical Leave during a calendar year to eligible employees.
- Eligibility consists of: Employee must have worked at least 12 months/52 weeks and must have worked at least 1,250 hours during the previous 12 months.
- Eligible employees can request this leave for one or more of the following reasons:
 - The birth of a child and to care for the newborn child within one year of birth.
 - The placement with the employee of a child for adoption or foster care and to care for the newly placed child within one year of placement.
 - To care for the employee's spouse, child, or parent who has a serious health condition.
 - A serious health condition that makes the employee unable to perform the essential functions of his or her job.
 - Any qualifying exigency arising out of the fact that the employee's spouse, son, daughter, or parent is a covered military member on "covered active duty"; Twenty-six workweeks of leave during a single 12-month period to care for a covered servicemember with a serious injury or illness if the eligible employee is the servicemember's spouse, son, daughter, parent, or next of kin (military caregiver leave).

TUITION ASSISTANCE PROGRAM

Tuition Assistance applies to tuition fees only and is reimbursed at 100% for letter grades of **A & B** and 75% for a letter grade **C**. To be eligible you must be a Full-time employee and have at least one (1) year of employment with the City.

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PERFORMANCE EVALUATION

All regular employees who have completed a twelve month orientation period and have received a satisfactory or better performance appraisal, and have been recommended by their department director, will be eligible for an increase rate of pay determined by their annual performance evaluation score. Merit pay increases are contingent upon meeting the following criteria:

- If employee attains a score of 2.9 or less no pay increase will be recommended nor approved.

CITY OF LAREDO BENEFITS PACKAGE

- If employee attains a score of 3.0 to 3.49 to be eligible to receive a 1% pay increase.
- If employee attains a score of 3.5 to 3.99 to be eligible to receive a 2% pay increase.
- If employee attains a score of 4.0 to 4.49 to be eligible to receive a 3% pay increase.
- If employee attains a score of 4.5 to 5.0 to receive a 4% increase.

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UNIFORMS/SAFETY EQUIPMENT

Some departments provide uniforms. All departments provide safety equipment when required.