Kent County Employee Benefits

TIME-OFF

HOLIDAYS
Twelve paid holidays annually plus one additional day in election years.

VACATION
All vacation leave accrues in hours on a monthly basis (available upon completion of probation):
1 - 4 years of service = 10 days per year
5 - 9 years of service = 15 days per year
10 - 14 years of service = 18 days per year
15 - 19 years of service = 21 days per year
20 - 24 years of service = 24 days per year
25 or more years of service = 27 days per year

SICK LEAVE
1 1/4 days per month accumulative to 120 days.

PERSONAL LEAVE
Three (3) days per calendar year deducted from sick leave with prior approval of department manager.

EXEMPT EMPLOYEE PERSONAL LEAVE
Five (5) days per calendar year; not deducted from sick leave.

COMPASSIONATE LEAVE
Full pay for five (5) days for death of spouse, child or parent; three (3) days for immediate family; or day of funeral service for a near relative, deducted from sick leave.

MILITARY LEAVE
Kent County is a proud supporter of the National Guard & Reserve and all members of our nation’s military. County employees are eligible for up to 20 paid work days of military leave per year for the purposes of military training or special duty. In addition, all County benefits continue at no cost to the employee (including dependent health & dental insurance premiums) when ordered into active duty for one month or more and retention of County position with all seniority rights is guaranteed upon return/discharge.

FAMILY & MEDICAL LEAVE
Employee eligible for up to 12 weeks of unpaid leave from FMLA qualifying reasons concurrent with any accrued sick and vacation leave, after one year from date of hire. Military service related FMLA affords additional benefits.
COMPENSATION

COMPETITIVE WAGES
On a regular basis, Kent County Levy Court conducts a study of compensation rates in the surrounding community and makes adjustments to employee pay scales and/or position classifications to remain competitive in the labor market.

PAY DAY
Bi-weekly on Fridays, one week in arrears.

DIRECT DEPOSIT
Paychecks required to be electronically deposited into personal bank or credit union account.

COST OF LIVING ALLOWANCE
When fiscally possible, Levy Court adjusts all salaries annually to offset inflation effective July 1 with start of the new fiscal year.

STEP INCREASE
When fiscally possible, employees can receive a one to two percent annual step increase upon achieving a satisfactory performance evaluation up to the maximum Step “N”

LONGEVITY PAY
Employees receive $500 annually for 5 to 9 years of continuous County service; $1,000 for 10 to 14 years of continuous County service; $1,500 for 15 to 19 years of continuous County service; $2,000 for 20 to 24 years of continuous County service; $2,500 for 25 to 29 years of continuous County service; $3,000 for 30 to 34 years of continuous County service; $3,500 for 35 to 39 years of continuous County service; $4,000 for 40 or more years of continuous County service. Paid out over ensuing year.

PENSION BENEFITS

CONTRIBUTORY
Employees contribute 3%* of base salary over $6,000 to the retirement program. All pension benefits are paid by the County, so contribution does not affect benefit amount. Contribution is only reimbursed if do not vest. *(1% if hired before 12/21/2010)

VESTING
Eligible (1,000 hours or more per year) employees are vested into the County’s pension plan after eight (8) years of County service. Vesting occurs after 5 years if hired before 06/29/2010.

ELIGIBILITY
Vested employees can retire and begin collecting a County pension, if they are
- Age 62 with 8 or more years of County service (5 years if hired before 06/29/2010)
- Age 60 with 15 years or more of County service
- Age 55 with 20 years or more of County service
- Any age with 30 years or more of County service (change possible due to IRS regulation)

BENEFIT FORMULA
To calculate estimated benefits, average the three highest consecutive annual base salaries, multiply by 1.85%*, then multiply by years of service for the estimated annual pension benefit. Divide by 12 for the estimated monthly pension benefit. *(2% multiplier if hired before 12/21/2010)

POST-EMPLOYMENT BENEFITS
Employees retiring from active service are eligible for retiree benefits. These benefits are subject to change, but currently include medical, dental, & life ($5K) insurances, etc.
EMPLOYEE INSURANCES

MEDICAL INSURANCE (as of 07/01/2015)
Medical benefits begin on the first day of the month following employment. The County pays most of the cost of employee coverage. Employees currently pay $30 per month in advance through payroll deduction. Coverage for eligible dependents is also available through payroll deduction, one month in advance. The County contributes 60% of the monthly premium for dependent coverage. The County offers an EPO plan with a County-paid HRA including prescriptions and a vision benefit provided through Highmark Blue Cross Blue Shield Delaware. Employees and enrolled dependents must use medical service providers that accept Blue Cross Blue Shield. No out of network services are available. See rates at bottom of page.

DENTAL INSURANCE (as of 07/01/2015)
Dental benefits begin on the first day of the month following employment. The employee pays $3.10 per month in advance for employee-only coverage with the County paying most of the individual premium. Coverage for eligible dependents is available, and paid entirely by the employee in advance through payroll deduction. The Delta Dental calendar year benefit maximum is $1,500 per person.

LIFE INSURANCE (as of 07/01/2015)
Group life insurance provided by County through CIGNA at no cost to employee. Coverage is equivalent to base annual salary. Optional supplemental life insurance may be purchased at 1/2, 1, 2 or 3 times employee salary and paid through payroll deduction. Benefits are reduced at age 70. Coverage is also available for dependents.

DISABILITY INSURANCE (as of 07/01/2015)
Long term – an income up to 60 percent of base salary will be paid, subject to a maximum benefit of $3,000 per month, less any amounts for which also eligible such as (a) any other employer-sponsored disability plan; (b) Workers’ Compensation; (c) any state disability benefits law; (d) the “primary” benefit of Social Security; and (e) less any disability or retirement benefits received under the County’s pension plan.

OTHER EMPLOYEE BENEFITS

DEFERRED COMPENSATION
Voluntary deferred compensation and associated taxes for retirement purposes through payroll deduction. Manage your own investments through a 457 plan administered by ICMA-Retirement Corp.

EMPLOYEE ASSISTANCE
Employees experiencing emotional distress, substance abuse, or serious family issues can receive free confidential referrals to area professionals by calling 800-492-4357. Or access the website at www.mylifevalues.com with “Kent County” (case sensitive; no quotations) as the username and 8004924357 as the password.

TUITION REIMBURSEMENT
Job-related college courses leading to an Associate’s, Bachelor’s or Master’s degree reimbursed at 75 percent of base cost of course up to $750 per year for undergraduate courses and $1,000 for graduate courses. Full 75% paid over several years. Must repay County, if leave County employment within one year of reimbursement.

DEGREE/CERTIFICATION AWARD
Employees earning a job related degree in higher education or certain types of professional certification are eligible for up to five (5) percent pay increase.

TRAINING REIMBURSEMENT
100 percent reimbursement upon satisfactory completion of approved job-related course(s) and submission of a paid receipt. Must repay County, if leave County employment within one year of reimbursement for course.

JURY DUTY
Full pay and employee keeps jury duty pay
COUNTY FITNESS CENTER
County employees are encouraged to use the Administrative Complex fitness center which features a universal fitness system, 2 recumbent bikes, 2 treadmills, 2 elliptical machines, a men's locker room, a women's locker room, 3 remote controlled televisions, and a balance weight scale.

ALL COUNTY BENEFITS ARE SUBJECT TO CHANGE
Some County positions may not be eligible for benefits.

COUNTY MEDICAL INSURANCE PLAN DETAILS
Monthly Medical/Health and/or Dental Insurance premiums are deducted from the employee’s paycheck one month in advance. Coverage is effective the first day of the month after date of hire and ends on last day of month after termination. New hires must pay double the rate for the first month or can have the first month’s premium spread over four pay periods. Employees with equal or better medical insurance coverage from another source (previous employer or spouse’s employer) are eligible to waive County provided insurance and receive $100 per month medical cashback.

Below is the monthly employee & eligible retiree cost for self as well as optional self & family, self & child(ren) and self & spouse coverages (includes 60%/month County contribution):

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>EPO/Modified HRA – Highmark Blue Cross Blue Shield</td>
<td>Employee pays $30.00/month</td>
<td>Employee pays $350.00/month</td>
<td>Employee pays $164.95/month</td>
<td>Employee pays $482.18/month</td>
</tr>
<tr>
<td>Special Medicfill – (retirees) Highmark Blue Cross Blue Shield</td>
<td>$0.00/month</td>
<td>$186.42/month</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DENTAL INSURANCE – (July 1, 2015 – June 30, 2016)</td>
<td>Employee/Retiree only</td>
<td>Family coverage – employee &amp; spouse &amp;/or children</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delta Dental of Delaware</td>
<td>$3.10/month</td>
<td>Employee pays $38.10/month</td>
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</table>

KENT COUNTY MEDICAL PLAN INFORMATION (July 1, 2015)

PLAN OPTION AVAILABLE: Highmark Blue Cross Blue Shield Delaware, Inc. (Descriptions are only representative. Summary plan documents available in the Personnel Office)

REMEMBER TO: Ask provider if accepts Blue Cross Blue Shield & inform provider that employer pays the full cost of the applicable HRA deductible. (Routine lab tests are NOT covered)

1. Blue Advantage EPO/Modified HRA option - An Exclusive Provider Organization plan paying 100% of costs in network with $10 copayment for primary care physician visits, $20 copayment for specialists, and $10 generic, $25 brand name, and $50 non-formulary prescriptions (90-day supply available at 2Xcopay). Emergency room copay is $150 per visit. Urgent Care facility copay is $20 per visit. Chiropractic care has/30 visits per plan year limit. No services outside of the Blue Cross Blue Shield national network are covered.

Modified HRA component is fully funded (self-insured) by the County. The County will pay the first $5,000 of expense annually up to a maximum of $10,000 for spouse/children/family aggregate deductible for hospital stays including semiprivate room & board, physician & surgeon services, and related professional services, laboratory services, imaging services, high tech radiology, chiropractic care, radiation therapy and chemotherapy, outpatient surgery and anesthesia, ambulatory surgical center, ambulance, maternity and related services, mental health inpatient and intensive outpatient care, inpatient private duty nurse, durable medical equipment, skilled nursing facility, and home health care.

Blue Cross will process all claims and apply negotiated allowable charges with providers, then invoice the County for HRA services within the deductibles. Blue Cross also pays first dollar (full cost) of primary care and specialist services, preventive medical services, prescriptions, emergency room services, and urgent care.
Employees only pay for routine (non-diagnostic) laboratory tests, and normal copayments for services and prescriptions, with no deductible or co-insurance except for certain services.

2. Blue Cross Special Medicfill option - A Medicare supplement that pays Part A and Part B deductibles and normal 20% coinsurance for Medicare eligible treatment. Prescription copayment costs are $10 for generic, $25 brand name, and $50 for non-formulary with no annual maximum. This option is fully insured and mandatory for all retirees age 65 & over. Prescriptions are provided under this option, so Medicare Part D coverage is not needed, but Medicare Part A & B are required.

**ACTUAL COST OF MEDICAL PLAN (amount charged/allocated to County – NOT paid by employee)**

*Monthly rates allocated/charged to Kent County*

<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>Employee</th>
<th>Employee &amp; Spouse</th>
<th>Employee &amp; Child(ren)</th>
<th>Family</th>
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<tbody>
<tr>
<td>EPO/Modified HRA – Phantom rates *#</td>
<td>$750.09</td>
<td>$1,550.09</td>
<td>$1,087.46</td>
<td>$1,880.54</td>
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<tr>
<td>Medicare supplement – invoiced premium *#</td>
<td>$466.04</td>
<td>$932.08</td>
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<tr>
<td>EPO invoiced premium by Highmark BCBS</td>
<td>$647.15</td>
<td>$1,488.45</td>
<td>$1,035.44</td>
<td>$1,812.02</td>
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<tr>
<td>Not including HRA expense</td>
<td></td>
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<tr>
<td>HRA expense allocation^</td>
<td>$102.94</td>
<td>$61.64</td>
<td>$52.02</td>
<td>$68.52</td>
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<tr>
<td>Funded by County $5K/$10K</td>
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</table>

*rate does not include additional $25,000 annual broker/consultant fee paid by County to L&W Insurance
#COBRA premiums are 2% higher as provided by law and will be invoiced by CONEXIS/WageWorks
^Allocation less than total budgeted figure due to lower than expected actual expenses in prior years.

**EPO/Modified HRA (summarized explanation)**

Modified HRA features a deductible of $5,000 per individual with an aggregate maximum of $10,000, all of which is self-insured by Kent County. EPO component of plan is fully insured by Highmark BCBS Delaware and generally pays first dollar (after applicable copays) for preventative medical services, emergency services, prescriptions, primary doctor services, specialist services, physical & occupational therapy, speech therapy, mental health care and substance abuse treatment office visits, etc. as well as costs exceeding the self-insured HRA deductible limits of $5,000/individual and $10,000/aggregate deductible accumulation. Consult plan documents for complete listing and specific coverage details.

Modified HRA component of plan is paid by Highmark BCBS Delaware to the service provider at the negotiated BCBS rates as provided in the contract and then those costs are reimbursed to Highmark on a weekly basis by the County up to the deductible limit. Generally, services included in the $5,000/$10,000 deductible paid by the County are: diagnostic non-routine laboratory services; imaging and machine testing services; outpatient high tech radiology (MRI, MRA, CT, CTA, PET scans); chiropractic services (up to 30 visits per plan year); radiation therapy & chemotherapy; hospitalization including semi-private room & board, physician’s & surgeon’s services, plus other medical professional services; mental health care & substance abuse treatment including inpatient, partial hospitalization and intensive outpatient care; outpatient surgery including surgeon, anesthesia, hospital, and ambulatory surgical center; maternity including prenatal & postnatal care, delivery-hospital, delivery-physician, and birthing center; ambulance; other services including inpatient private duty nursing (for up to 240 hours per 12-month period); prosthetic devices and durable medical equipment; skilled nursing facility (for up to 120 days per confinement); and home healthcare (for up to 100 visits per plan year). Consult plan documents for complete listing and specific coverage details

**Preceding information is correct to the best of our knowledge – Personnel Office**

(Updated 01/08/2016)