



Kent County Personnel Office
555 Bay Road, Dover, DE 19901
(302) 744-2310/ Fax: (302) 736-2262

Office Hours: 8:00am to 5:00pm Monday - Friday

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 to 44 years of continuous County service; \$4,500 for 45 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 07/01/2019)*

Medical benefits begin on the first day of the month following employment. The County offers two plan options (High & Low) and pays most of the cost of employee coverage. Employees currently pay \$79.98 per month in advance for the High Plan or \$77.08 per month for the Low Plan featuring 90% co-insurance with higher co-pays through payroll deduction. Coverage for eligible dependents is also available through payroll deduction, one month in advance. The County contributes 80% of the monthly premium for dependent coverage and funds 93% of the employee premium. The County offers an HDHP/HRA PPO-High plan and an HDHP/HRA PPO-Low Plan with a County-paid HRA including prescriptions through the Aetna "Open Choice" PPO provider network and administered by Delaware Valley Health Trust – a self-insured local government health insurance cooperative. Vision benefits are provided by VBA-Vision through DVHT. Employees and enrolled dependents must use Quest Diagnostics or LabCorp for laboratory services. As a PPO, out-of-network services are available with applicable co-insurance (employee pays 20% for High plan or 30% Low plan). Visit www.aetna.com to find in-network providers. **See rates below**

DENTAL INSURANCE *(as of 07/01/2019)*

Dental benefits begin on the first day of the month following employment. The County offers a self-insured program through Delta Dental "Premiere" featuring 100% coverage for preventative services and 80% cost share for restorative services. The monthly employee cost is \$3.10 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 \$2,000 per person. Visit www.deltadental.com to find in-network providers. **See rates at below**

LIFE INSURANCE *(as of 07/01/2019)*

Group life insurance is provided by County through SUN LIFE 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 07/01/2019)*

Long term – an income up to 60 percent of base salary will be paid, subject to a maximum benefit of \$4,050 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

VISION PROGRAM

Vision benefits are provided at no-cost to health insurance program participants through VBA Vision including annual routine eye examination by a participating provider (every 12 months) covered at 100% and standard glass or plastic lenses (every 12 months) covered at 100% or a controlled cost along with frames (every 24 months) if within the wholesale allowance. For more information and provider listing, visit www.vbaplans.com or call 800-432-4966. Kent County Levy Court's vision program account number is 5519.

WELLNESS PROGRAM

Voluntary wellness program administered by Delaware Valley Insurance Trust provides cash incentives for annual Biometric Screening (\$150); prescribed Colonoscopy Screening (\$150); Hospital-Based Education (\$100); Women's Well Visit (\$50); and Mammogram (\$50). In addition, the program will reimburse health plan participants up to \$25 per month for Gym membership; up to \$200 per year for Race registration; up to \$200 for Weight Watchers participation; and up to \$25 per year per covered family member for a bike helmet. Program details and Wellness incentive submission information are available at www.dvtrusts.com

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 877-240-6863 or visit www.healthadvocate.com. Select *I AM a current member* and enter organization name *Delaware Valley Trusts* to access site.

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 \$1,000 per year for undergraduate courses and \$1,300 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 may be 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 the 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 County contribution):

FY2020 (July 1, 2019 – June 30, 2020)	Employee/Retiree	Employee & Spouse	Employee & Child(ren)	Employee & Family
HDHP/HRA PPO 100%/80% – High plan Aetna Open Choice PPO	Employee pays \$79.98/month	Employee pays \$377.04/month	Employee pays \$217.08/month	Employee pays \$491.30/month
HDHP/HRA PPO 90%/70% – LOW plan Aetna Open Choice PPO	Employee pays \$77.08/month	Employee pays \$363.34/month	Employee pays \$209.20/month	Employee pays \$473.46/month
PPO \$0 – (retirees age 65+) Medicare Supplement Aetna Open Choice PPO	\$0.00/month	\$145.83/month		
DENTAL INSURANCE – (July 1, 2019 – June 30, 2020)	Employee/Retiree only	Family coverage – employee & spouse &/or children		
Delta Dental of Delaware	\$3.10/month	Employee/Retiree pays \$45.10/month		

KENT COUNTY MEDICAL PLAN INFORMATION (July 1, 2019)

PLAN OPTION AVAILABLE: Delaware Valley Health Trust utilizing the Aetna provider network.
(Descriptions are only representative. Summary plan documents available in the Personnel Office)

REMEMBER TO: *Ask provider if accepts Aetna & inform provider that your employer pays the full cost of the applicable HRA deductible.*

1. **HDHP HRA \$5,000/\$10,000 PPO 100%/80%** option: HIGH plan - A Preferred Provider Organization plan (Aetna Open Choice PPO) 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 \$75 non-formulary prescriptions (90-day supply available at 2Xcopay). Emergency room copay is \$150 per visit. Urgent Care facility copay is \$50 per visit. Chiropractic care has 30 visits per plan year limit. Services outside of the Aetna national provider network are covered at 80% after deductible, employee pays 20% co-insurance.

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.

Aetna will process all claims and apply negotiated allowable charges with providers, then invoice the County for HRA services within the deductibles. DVHT pays first dollar (full cost) of primary care and specialist services, preventive medical services, prescriptions, emergency room services, and urgent care.

Employees must pay for routine (non-diagnostic) laboratory tests, and normal copayments for services and prescriptions, with no deductible or co-insurance except for certain services including out of network. Quest Diagnostics and LabCorp are the required laboratories.

2. **HDHP HRA \$5,000/\$10,000 PPO 90%/70%** option: LOW plan - A Preferred Provider Organization plan (Aetna Open Choice PPO) paying 90% of costs in network with \$20 copayment for primary care physician visits, \$40 copayment for specialists, and \$20 generic, \$60 brand name, and \$80 non-formulary prescriptions (90-day supply available at 2Xcopay). Emergency room copay is \$250 per visit. Urgent Care facility copay is \$50 per visit. Chiropractic care has/30 visits per plan year limit. Services outside of the Aetna national provider network are covered at 70% after deductible, employee pays 30% co-insurance. Under the LOW plan, most medical, surgical, hospital, maternity, chiropractic, behavioral, ambulance, laboratory services, (etc.) require employee to pay 10% co-insurance in network or 30% out of network.

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, except for any applicable co-payments or co-insurance requirements.

Aetna will process all claims and apply negotiated allowable charges with providers, then invoice the County for HRA services within the deductibles.

Employees must pay full cost of routine (non-diagnostic) laboratory tests, applicable co-insurance, and copayments for services and prescriptions, except for certain services. Quest Diagnostics and LabCorp are the required laboratories.

3. Aetna PPO \$0 **Medicare Supplement** option - A PPO type 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 \$75 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)

July 1, 2019 – June 30, 2020

(*Monthly rates allocated/charged to Kent County – not paid by employees/retirees)

Coverage Type	Employee*	Employee & Spouse*	Employee & Child(ren)*	Family*
DVHT/HDHP HRA PPO100/80 HIGH – Phantom rates *#	\$1,142.55	\$2,627.85	\$1,828.07	\$3,199.13
DVHT/HDHP HRA PPO 90/70 LOW – Phantom rates *#	\$1,101.04	\$2,532.36	\$1,761.64	\$3,082.88
Medicare supplement–PPO \$0 invoiced premium *#	\$725.24	\$1,454.39		
PPO- High invoiced premium by DVHT Aetna Not including HRA expense	\$1,008.25	\$2,318.96	\$1,613.19	\$2,823.08
PPO- Low invoiced premium by DVHT Aetna Not including HRA expense	\$966.73	\$2,223.48	\$1,546.76	\$2,706.84

#**COBRA premiums are 2% higher as provided by law and will be invoiced by DVHT (health) or Kent County Personnel Office (dental).**

PPO/HDHP HRA (summarized explanation)

HDHP 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. PPO component of plan is fully insured by Delaware Valley Health Trust through Aetna 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, except for any applicable co-insurance or copayments. **Consult plan documents for complete listing and specific coverage details.**

HDHP HRA component (expense) of plan is paid by DVHT through Aetna to the service provider at the negotiated Aetna rates as provided in the contract and then those costs are reimbursed to DVHT on a monthly 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), except for any applicable co-insurance or copayments. **Consult plan documents for complete listing and specific coverage details**

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

(Updated 07/05/2019)