

East Bay Regional Park District  
**Local 2428 Benefits - 2008**

BENEFIT	DESCRIPTION
<b>Note: E=Employee, ER=Employer</b>	
<b>Memorandum of Understanding TERM:</b>	<b>4/1/06 – 3/31/09</b>
<b>PAY INCREASES</b>	4/1/08 COLA: CPI-W with a floor of 2.5% and a ceiling of 4%.
<b>MEDICAL INSURANCE</b> (Effective 1/1/08) <u>ER cost:</u> (per month) E = \$ 456.74 (Kaiser) \$ 616.60 (max) E+1 = \$ 913.48 (Kaiser) \$1,233.20 (max) E+2 = \$ 1,292.57 (Kaiser) \$1,744.97 (max)	<ul style="list-style-type: none"> <li>• Employer pays Kaiser rate or maximum of 135% Kaiser rate for alternative plan.</li> <li>• Coverage begins 1<sup>st</sup> of month after 6 months of employment.</li> <li>• Employees demonstrating coverage under another plan may elect to receive \$175/mo.in lieu of coverage.</li> <li>• Eligible employees have choice of Kaiser or Blue Cross HMO or PPO plans for medical coverage.</li> <li>• Employer pays full cost of Kaiser for employees working 75% of full-time and above. Employee pays PPO or HMO costs in excess of maximum amounts referred above.</li> <li>• If Employee works less than 75% full-time, cost of coverage is pro-rated.</li> </ul>
<b>DENTAL INSURANCE</b> (Effective 1/1/08) <u>ER cost:</u> (per month) E = \$ 57.51 E+1 = \$108.16 E+2 = \$171.69	<ul style="list-style-type: none"> <li>• Employer pays Delta Dental premiums.</li> <li>• Coverage 90% (10% co-payment); \$2,000 annual maximum.</li> <li>• Orthodontics: 70% (30% co-payment), maximum lifetime coverage is \$1,500/patient.</li> <li>• Begins 1<sup>st</sup> of month after 3 months of employment.</li> <li>• If Employee works less than 75% full-time, cost of coverage is pro-rated.</li> </ul>
<b>VISION CARE PLAN</b> ER cost = 0 EE cost (per month): E = \$11.16 E+1 = \$22.32 E+2 = \$29.02	<ul style="list-style-type: none"> <li>• An optional low cost vision care plan is available at enrollee's expense.</li> <li>• Includes coverage for examination, lenses/frames or contact lenses.</li> <li>• Provides coverage for participating providers and non-participating providers.</li> </ul>
<b>LIFE INSURANCE</b> <u>ER cost:</u> \$0.28/\$1,000 coverage	<ul style="list-style-type: none"> <li>• Employer-paid; coverage starts 1<sup>st</sup> of the month after 6 months of employment.</li> <li>• Amount of coverage = One times annual salary, up to a maximum of \$100,000.</li> <li>• For retirees: \$13,000 max coverage (cost paid by retiree).</li> </ul>
<b>SOCIAL SECURITY</b> ER cost: 7.65% of earnings	<ul style="list-style-type: none"> <li>• 7.65% Employer (6.20% Social Security + 1.45% Medicare)</li> <li>• Employer and Employee pay equal shares.</li> </ul>
<b>RETIREMENT</b> (Pension)  <b>CalPERS</b> (Effective 7/1/08) ER cost: (ER pays ER rate and 7% of E rate) ER Rate = 15.804% EE Rate = 8% (ER pays 7%) Employee pays 1% (pre-tax)	<ul style="list-style-type: none"> <li>• 2.5% @ 55 (CalPERS) effective 10/1/04.</li> <li>• Average 3 highest consecutive years.</li> <li>• Optional credit for unused sick leave.</li> <li>• Social Security <u>excluded</u> from formula.</li> <li>• All new hires under PERS plan (effective 1/1/2001).</li> <li>• Retirement benefits for Firefighter I and II are shown in the Benefits Summary for Police Association.</li> </ul>

The information contained in this document is a summary of benefits provided to Park District employees. For specific information, please refer to the applicable bargaining unit agreement, appropriate plan documents, or contact the Human Resources Department. Any errors or omissions do not constitute either an expressed or implied contract. The benefits are subject to approved modifications and changes. (Revised 7/22/08)



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<b>Note: E=Employee, ER=Employer</b> <b>STATE DISABILITY INSURANCE</b> ER cost: \$.0.60% of earnings	<ul style="list-style-type: none"> <li>Employer paid.</li> </ul>
<b>PAID FAMILY LEAVE</b> E cost: 0.60% (2008 rate; State mandated)	<ul style="list-style-type: none"> <li>Administered by State of California Employment Development Department.</li> <li>Provides up to 6 weeks partial reimbursement of salary missed while caring for a family member, up to a maximum of \$882/week</li> </ul>
<b>LONG TERM DISABILITY</b> (Effective 11/1/06) ER cost: \$0.54/\$100 coverage	<ul style="list-style-type: none"> <li>Employer-paid; income replacement of 60% of salary to maximum of \$5,000.</li> <li>Coverage begins after six months of employment.</li> <li>90 day elimination period (benefits begin 90 days after beginning of disability and after exhaustion of short term disability benefits).</li> </ul>
<b>UNIFORM ALLOWANCE</b> ER cost: up to \$235/year ER also provides all safety equipment	<ul style="list-style-type: none"> <li>Maximum \$235/year for positions requiring uniform.</li> <li>\$100/year for mechanics, plus overalls are provided.</li> <li>\$100/year for Industrial Firefighters.</li> </ul>
<b>SHIFT DIFFERENTIAL</b>	<ul style="list-style-type: none"> <li>25% for all regularly assigned hours after 7:00 p.m.</li> <li>2<sup>nd</sup> shift in equipment maintenance receives 7.5%.</li> </ul>
<b>STANDBY PAY</b>	<ul style="list-style-type: none"> <li>2 hours pay per 8 hours on standby.</li> </ul>
<b>CALL BACK PAY</b>	<ul style="list-style-type: none"> <li>Greater of overtime rate for actual on-job time + 1 hr travel <u>or</u> 2 hours total, whichever is greater.</li> </ul>
<b>WORK IN A HIGHER CLASS</b>	<ul style="list-style-type: none"> <li>Less than 30 days: \$15/day.</li> <li>30+ days: On 31<sup>st</sup> day, receive actual rate of higher classification, or 5%, whichever is greater.</li> </ul>
<b>TUITION REIMBURSEMENT</b> ER cost: \$1,600/year	<ul style="list-style-type: none"> <li>\$800/year job-related.</li> <li>\$800/year career-related, can combine for job-related funds - for total of \$1,600/year for career.</li> <li>Job <u>required</u> training is District paid.</li> </ul>
<b>LICENSES &amp; CERTIFICATES</b>	<ul style="list-style-type: none"> <li>Class A D/L: \$600/year.</li> <li>Industrial Firefighter: Class B D/L: \$300/year.</li> <li>Industrial Fire Officer: Class B D/L: \$750/year.</li> </ul>
<b>OVERTIME MEAL</b>	<ul style="list-style-type: none"> <li>\$11 if employee works 2 hours beyond scheduled work period.</li> </ul>
<b>PAY ON PROMOTION</b>	<ul style="list-style-type: none"> <li>Whichever step offers promoting employee a minimum of 5% increase.</li> </ul>
<b>SPECIAL PAY</b>	<ul style="list-style-type: none"> <li>Chemical usage: \$13/day for chemicals on "I Danger" or "II Warning" list.</li> <li>Full pay for military and jury duty time off.</li> <li>13.8% for Water Safety Instruction.</li> </ul>
<b>EMPLOYEE ASSISTANCE PROGRAM (EAP)</b> ER cost: \$3./month per E E cost: \$1/month	<ul style="list-style-type: none"> <li>Provided by Institute for Labor and Mental Health.</li> <li>Up to total of 5 free visits per year per employee and dependents. Provides confidential counseling, consulting and referral services in a broad range of areas, such as work problems, relationship and family problems, stress management, communication issues, bereavement, life changes, anxiety and depression, alcohol or other chemical dependency issues.</li> </ul>

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