

Human Resources Employee Benefits & Services MODIFIED BENEFIT OPTION (MBO)

non-elected

The Modified Benefit Option (MBO) is an alternative benefit package that provides an increased base rate of pay with modified benefits.

Exempt Compensation Ordinance January 2024

4% above the base rate of pay

The increase in pay is also included when calculating the following:

- County Contribution to RMT
- County Match to Employee's Contribution to 457(b)/ 401(k)
- Qualified Differentials (paid on % basis)
- Sick Leave Cash-Outs to RMT
- Leave Cash-Outs

Frequently Asked Questions

Can I enroll in the Modified Benefit Option (MBO)?

All full-time employees in regular Exempt Group positions and commit to work a minimum of 1,560 hours per calendar year can enroll in the MBO.

Should I enroll in MBO?

It depends! Everyone's situation is different – read through this document to find out how MBO's benefits differ from the **Traditional Benefit Option (TBO)** to determine if it would work for your lifestyle. You can also visit our <u>MBO</u> <u>website</u>, or call Employee Benefits and Services (EBSD) at 909-387-5787 and ask to speak with an MBO specialist for more information.

When can I enroll in MBO; can I switch between MBO and TBO?

You can elect MBO upon hire, during Open Enrollment.

Can part-time employees enroll in MBO?

No, only full-time employees.



How are MBO benefits different? Look for the orange text.

HEALTH BENEFITS

The County provides Premium Subsidies biweekly to help offset the cost of your medical and dental premiums.



MEDICAL PREMIUM SUBSIDY

Effective February 10, 2024

	<u>TBO</u>	<u>MBO</u>
Emp-Only	\$310.75	\$220.63
Emp +1	\$499.87	\$409.89
Emp +2 or more	\$702.03	\$575.66

MEDICAL OPT-OUT/WAIVE

If you have other employer-sponsored group coverage and do not enroll in the County's medical plans, you will receive an extra \$40 per pay period, or grandfathered amounts.



DENTAL PREMIUM SUBSIDY

\$9.46 (requires enrollment in a County medical plan)



VISION PREMIUMS

No Cost for Employee and Dependent Coverage

LEAVE PROVISIONS			
	ТВО	MBO	
Vacation	80-160 hours per year <i>Cash-out option</i>	See PTO Cash-out option same as TBO	
	Max. carryover of 480 hours. Unused balance in excess of cap will automatically cash out in pay period 1		
Sick	3.69 hours per pay period	See PTO	
Holiday	14 + 1 floating per year Max. carryover of 120 hours. Unused balance in excess of cap will automatically cash out in pay period 1	14 holidays per year	
Admin	80 hours per year Unused balance will automatically cash out in pay period 26	Same as TBO	
Bereavement	2 days per occurrence (3 if traveling >1,000 miles)	Same as TBO	
Perfect Attendance Leave (PAL)	Up to 16 hours PAL Group C and D only	Not Eligible	

The MBO offers flexible Paid Time Off (PTO) in lieu of separate use-specific leave accrual such as vacation and sick leave.

Paid Time Off (PTO) for MBO

8,320 Service Hours or Less

Annual PTO Allowance: 120 hrs Accrual: 4.62 hrs/pay period Max. Hrs Carried Over to Next Calendar Year: 272 hrs Max. PTO + VAC: 374 hrs

8,321 through 18,720 Service Hours

Annual PTO Allowance: 160 hrs Accrual: 6.15 hrs/pay period Max. Hrs Carried Over to Next Calendar Year: 362 hrs Max. PTO + VAC: 480 hrs

Over 18,720 Service Hours

Annual PTO Allowance: 200 hrs Accrual: 7.69 hrs/pay period Max. Hrs Carried Over to Next Calendar Years: 452 hrs Max. PTO + VAC: 586 hrs Unused PTO balance in excess of cap will automatically cash out in pay period 1

This document provides a summary of benefit provisions contained in the MOU. If there is any discrepancy between this document and the MOU, the MOU provisions will prevail.

Employees are our most valuable resource.

COUNTY-PAID BENEFITS

AUTOMOBILE ALLOWANCE

Groups A & B, Assistant Sheriffs, Sheriff's Deputy Chiefs, District Attorney Chief Investigator & Assistant Chief Probation Officer.

Biweekly allowance of \$461.54 with no mileage reimbursement, provided Employee is not assigned a County vehicle.

PORTABLE COMMUNICATION DEVICE ALLOWANCE

Groups A & B - Bi-weekly allowance of \$92.31

SHORT-TERM DISABILITY

Receive 55% of pay, up to \$2,309/week for up to 6 mos.

LONG-TERM DISABILITY

60% up to \$10,000/month

BASIC TERM LIFE INSURANCE

\$50,000

RETIREMENT

SBCERA Retirement Formulas

Reciprocity provisions may apply

- Tier I2.0% at age 55Hired PRIOR to Jan 1, 2013
- Tier II 2.5% at age 67 Hired ON or AFTER Jan 1, 2013

457(b) Deferred Compensation

Groups A & B = County contribution 1 times Employee contribution, up to 1%

Groups C & D = County contribution $\frac{1}{2}$ times Employee contribution, up to $\frac{1}{2}$ %

401 (k) Defined Compensation

Groups A, B & C = County contribution 2 times Employee contribution, up to 8%

Group D = County contribution 2 times Employee contribution, up to 6%

Retirement Medical Trust (RMT)

County Contribution

(Based on continuous years of service):

5-9 years = 2.00% of biweekly base salary 10-15 years = 2.75% of biweekly base salary 16+ years = 3.75% of biweekly base salary

Sick Leave Conversion

Upon separation, eligible to convert a portion of your sick leave into the RMT upon attaining 5+ years of participation with SBCERA and/or other public retirement.

MBO enrollees are <u>NOT</u> able to convert PTO balance into the RMT. Unused PTO hours will be paid out in accordance with the ordinance.

VOLUNTARY PARTICIPATION PROGRAMS

Supplemental Term Life Insurance	Have financial security with extra term life coverage for yourself and your family with coverage up to \$700,000.	
Variable Group Universal Life Insurance	Group A – 100% of the premium for 1x Annual Salary Group B – 50% of the premium for 1x	
(VGUL)	Annual Salary or 100% of the premium for $\frac{1}{2}$ Annual Salary	
	Group C & D – 25% of the premium for 1x Annual Salary	
AD&D Insurance	Additional insurance in the event of accidental death or serious injury, with coverage options up to \$250,000.	
FSA	Pre-tax account for qualified health care expenses up to \$3,050 annually. Plus, up to \$40 match per pay period OR BSC Access+ / Kaiser Choice plan enrollees are eligible for a match up to \$50 per pay period.	
DCAP	Pre-tax account for qualified dependent care expenses up to \$5,000 annually.	
Healthy Lifestyle Program	Health Club Membership Reimbursement, up to \$324/year and Annual Physical Exam.	
Annual Tuition Reimbursement	\$1,000 per fiscal year	
Tuition Loan Repayment	Receive up to \$10,000 for eligible loan repayment. Refer to Exempt Ordinance.	
529 Savings Plan	vings Invest for future educational expenses with tax-free earnings. Contact Voya to enroll.	
Combined	link.sbcounty.gov/CombinedGiving	
Giving	Give back to the community via one-time or ongoing payroll deductions.	
Commuter	link.sbcounty.gov/rideshare	
Services	Help the environment, reduce traffic, save money and earn rewards with your commute.	
Employee	link.sbcounty.gov/EmployeeDiscount	
Discounts	Save big at hundreds of national and local merchants	
Wellness	link.sbcounty.gov/wellness	
Program	Information, resources and rewards to support your healthy lifestyle.	
Employee	link.sbcounty.gov/eap	
Assistance Program (EAP)	Confidential expert support and resources available at any time, at no cost to you.	

Plan Year 2023-24 Revised 1.30.2024 Human Resources – Employee Benefits and Services 909.387.5787 | ebsd@hr.sbcounty.gov | link.sbcounty.gov/benefits

EMPLOYEE OUT-OF-POCKET COSTS

(Effective February 10, 2024)

En	nployee Only Coverage			
Plan	TBO - Employee Cost Per Pay Period	MBO - Employee Cost Per Pay Period		
Blue Shield Gold Trio HMO	\$0.00	\$51.97		
Blue Shield Access + HMO	\$0.00	\$69.82		
Blue Shield Signature HMO	\$23.63	\$113.75		
Blue Shield PPO	\$310.61	\$400.73		
Kaiser Virtual Complete HMO	\$0.00	\$51.86		
Kaiser Choice HMO	\$0.00	\$75.93		
Kaiser Permanente HMO	\$37.17	\$127.29		
Employee + 1 Coverage				
Plan	TBO - Employee Cost Per Pay Period	MBO - Employee Cost Per Pay Period		
Blue Shield Gold Trio HMO	\$43.35	\$133.33		
Blue Shield Access + HMO	\$79.06	\$169.04		
Blue Shield Signature HMO	\$166.90	\$256.88		
Blue Shield PPO	\$764.38	\$854.36		
Kaiser Virtual Complete HMO	\$43.10	\$133.08		
Kaiser Choice HMO	\$91.25	\$181.23		
Kaiser Permanente HMO	\$193.97	\$283.95		
Emplo	oyee + 2 or more Coverage			
Plan	TBO - Employee Cost Per Pay Period	MBO - Employee Cost Per Pay Period		
Blue Shield Gold Trio HMO	\$65.81	\$192.18		
Blue Shield Access + HMO	\$116.34	\$242.71		
Blue Shield Signature HMO	\$240.62	\$366.99		
Blue Shield PPO	\$1,259.16	\$1,385.53		
Kaiser Virtual Complete HMO	\$65.44	\$191.81		
Kaiser Choice HMO	\$133.59	\$259.96		
Kaiser Permanent HMO	\$278.90	\$405.27		

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