



Human Resources  
Employee Benefits & Services

## MODIFIED BENEFIT OPTION (MBO)

# EXEMPT non-elected

Exempt Compensation Ordinance January 2024

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



**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 [MBO website](#), 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 July 13, 2024*

	<u>TBO</u>	<u>MBO</u>
Emp-Only	\$328.84	<b>\$233.48</b>
Emp +1	\$536.04	<b>\$439.55</b>
Emp +2 or more	\$753.21	<b>\$617.63</b>

### **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

	<b>TBO</b>	<b>MBO</b>
<b>Vacation</b>	80-160 hours per year <i>Cash-out option</i> <i>Max. carryover of 480 hours.</i> <i>Unused balance in excess of cap will automatically cash out in pay period 1</i>	<b>See PTO</b> <i>Cash-out option same as TBO</i>
<b>Sick</b>	3.69 hours per pay period	<b>See PTO</b>
<b>Holiday</b>	14 + 1 floating per year <i>Max. carryover of 120 hours.</i> <i>Unused balance in excess of cap will automatically cash out in pay period 1</i>	<b>14 holidays per year</b>
<b>Admin</b>	80 hours per year <i>Unused balance will automatically cash out in pay period 26</i>	<b>Same as TBO</b>
<b>Bereavement</b>	2 days per occurrence <i>Plus add'l day if traveling over 1,000 miles</i>	<b>Same as TBO</b>
<b>Perfect Attendance Leave (PAL)</b>	Up to 16 hours PAL <i>Group C and D only</i>	<b>Same as TBO</b>

**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*

# 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 I** 2.0% at age 55  
*Hired 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 ½ times Employee contribution, up to ½%

#### **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 **NOT** 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 (VGUL)**

Group A – 100% of the premium for 1x Annual Salary

Group B – 50% of the premium for 1x Annual Salary or 100% of the premium for ½x 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 \$3,200 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**

Invest for future educational expenses with tax-free earnings. Contact Voya to enroll.

### **Combined Giving**

[link.sbcounty.gov/CombinedGiving](https://link.sbcounty.gov/CombinedGiving)

Give back to the community via one-time or ongoing payroll deductions.

### **Commuter Services**

[link.sbcounty.gov/rideshare](https://link.sbcounty.gov/rideshare)

Help the environment, reduce traffic, save money and earn rewards with your commute.

### **Employee Discounts**

[link.sbcounty.gov/EmployeeDiscount](https://link.sbcounty.gov/EmployeeDiscount)

Save big at hundreds of national and local merchants

### **Wellness Program**

[link.sbcounty.gov/wellness](https://link.sbcounty.gov/wellness)

Information, resources and rewards to support your healthy lifestyle.

### **Employee Assistance Program (EAP)**

[link.sbcounty.gov/eap](https://link.sbcounty.gov/eap)

Confidential expert support and resources available at any time, at no cost to you.

# EMPLOYEE OUT-OF-POCKET COSTS

(Effective July 13, 2024)

Employee Only Coverage		
Plan	TBO - Employee Cost Per Pay Period	MBO - Employee Cost Per Pay Period
Blue Shield Gold Trio HMO	\$0.00	\$53.84
Blue Shield Access + HMO	\$0.00	\$72.67
Blue Shield Signature HMO	\$23.63	\$118.99
Blue Shield PPO	\$326.22	\$421.58
Kaiser Virtual Complete HMO	\$0.00	\$60.62
Kaiser Choice HMO	\$0.00	\$86.62
Kaiser Permanente HMO	\$46.72	\$142.08
Employee + 1 Coverage		
Plan	TBO - Employee Cost Per Pay Period	MBO - Employee Cost Per Pay Period
Blue Shield Gold Trio HMO	\$36.63	\$133.12
Blue Shield Access + HMO	\$74.27	\$170.76
Blue Shield Signature HMO	\$166.90	\$263.39
Blue Shield PPO	\$796.89	\$893.38
Kaiser Virtual Complete HMO	\$50.15	\$146.64
Kaiser Choice HMO	\$102.15	\$198.64
Kaiser Permanente HMO	\$213.07	\$309.56
Employee + 2 or more Coverage		
Plan	TBO - Employee Cost Per Pay Period	MBO - Employee Cost Per Pay Period
Blue Shield Gold Trio HMO	\$56.29	\$191.87
Blue Shield Access + HMO	\$109.58	\$245.16
Blue Shield Signature HMO	\$240.62	\$376.20
Blue Shield PPO	\$1,314.58	\$1,450.16
Kaiser Virtual Complete HMO	\$75.41	\$210.99
Kaiser Choice HMO	\$148.99	\$284.57
Kaiser Permanent HMO	\$305.95	\$441.53