SAN BERNARDINO COUNTY | Human Resources
Employee Benefits and Services

PROBATION

Benefits Overview

MOU Contract 2022-2027

Healthcare Benefits

The County pays a large portion of your healthcare premiums.

MEDICAL PREMIUM SUBSIDY

Effective July 11, 2026

Employee Only	$221.25
Employee +1	$456.99
Employee +2 or more	$650.96

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 $25 per pay period.

VISION

No cost for Employee Only coverage.
Employee may purchase Dependent coverage;

Employee + 1	$3.16
Employee + 2 or more	$8.81

The Benefit rates listed apply to full-time employees (61-80 hours) per biweekly pay period unless noted otherwise.

To determine your out-of-pocket costs, use our online Benefits Calculator: **https://hr.sbcounty.gov/benefits-calculator**.

Leave Provisions

Leave time listed for full-time employees (61-80 hours) per biweekly pay period unless otherwise noted.

Sick

3.39 hours per pay period.

Holiday

14 + 1 floating per year.

Perfect Attendance

Up to 16 hours PAL or annual gym membership up to $299.

Vacation

80-160 hours per year, cash-out option up to 80 hours per year if 80 hours of vacation used in previous year.

Modified Benefit Option (MBO)

Certain eligible job classifications shall be provided the opportunity to convert from a regular position with traditional benefits to a regular position with modified benefits and wage differential. Refer to your Memorandum of Understanding (MOU).

MOU Website: **https://link.sbcounty.gov/MOU** MBO Website: **https://link.sbcounty.gov/MBO**

Representation:
San Bernardino County Probation Officers Association

Human Resources – Employee Benefits and Services
909.387.5787 | ebsd@hr.sbcounty.gov | link.sbcounty.gov/benefits

Employees are our most valuable resource.

County-Paid Benefits

Short-Term Disability
Receive 55% of pay, up to $1,765/week for up to 90 days

Long-Term Disability
Eligible through SBCPOA

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
Auto-enrolled upon hire at 1% contribution of base salary. County will match half of your contribution up to 0.5% of your base salary after five (5) years.

Retirement Medical Trust (RMT)
County Contribution

Based on continuous years of service:
1-4 years = 0.50% of biweekly base salary
5-9 years = 1.00% of biweekly base salary
10-19 years = 1.25% of biweekly base salary
20+ = 1.50% of biweekly base salary

Sick Leave Conversion
Upon separation, eligible to convert a portion of your sick leave into the RMT upon attaining 10+ years of participation with SBCERA and/or other public retirement.

Voluntary Programs

Supplemental Term Life Insurance
Have financial security with extra term life coverage for yourself and your family with coverage up to $700,000.
https://link.sbcounty.gov/Life-Insurance

AD&D Insurance
Additional insurance in the event of accidental death or serious injury, with coverage options up to $250,000.
https://link.sbcounty.gov/Life-Insurance

Flexible Spending Account (FSA)
Pre-tax account for qualified health care expenses up to $3,400 annually. Employees who select County sponsored Blue Shield Access+ or Kaiser Choice are eligible for up to $10 per pay period match. **https://link.sbcounty.gov/fsa**

Dependent Care Assistance Program (DCAP)
Pre-tax account for qualified dependent care expenses up to $5,000 annually. **https://link.sbcounty.gov/DCAP**

529 Savings Plan
Invest for future educational expenses with tax-free earnings. Contact Scholar Share to enroll. **https://link.sbcounty.gov/529**

Combined Giving
Give back to the community via one time or ongoing payroll deductions. **https://link.sbcounty.gov/CombinedGiving**

Commuter Services
Help the environment, reduce traffic, save money and earn rewards with your commute. **https://link.sbcounty.gov/Commuter**

Employee Discounts
Save big at hundreds of national and local merchants.
https://link.sbcounty.gov/Employee-Discount-Program

Wellness Program
Information, resources and rewards to support your healthy lifestyle. **https://link.sbcounty.gov/wellness**

Employee Assistance Program (EAP)
Confidential expert support and resources available at any time, at no cost to you. **https://link.sbcounty.gov/EAP**

Annual Tuition Reimbursement
First come first serve basis not to exceed $2,000 per fiscal year.

Tuition Loan Repayment
Receive up to $7,500 for eligible loan repayment, refer to your MOU. **https://link.sbcounty.gov/TuitionProgram**

Medical Premium Costs for County Plans

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

Medical Premium Subsidy

Effective July 11, 2026

Employee Only: **$221.25 (TBO)** **$157.08 (MBO)**
Employee +1: **$456.99 (TBO)** **$374.73 (MBO)**
Employee +2: **$650.96 (TBO)** **$533.79 (MBO)**

Employee Only Coverage		
Plan	**Traditional Benefit Option (TBO) Employee Cost Per Pay Period**	**Modified Benefit Option (MBO) Employee Cost Per Pay Period**
Blue Shield Gold Trio HMO	$119.31	$183.48
Blue Shield Access + HMO	$141.63	$205.80
Blue Shield Signature HMO	$196.60	$260.77
Blue Shield PPO	$555.64	$619.81
Kaiser Virtual Complete HMO	$107.82	$171.99
Kaiser Choice HMO	$136.94	$201.11
Kaiser Permanente HMO	$198.87	$263.04

Employee +1 Coverage		
Plan	**Traditional Benefit Option (TBO) Employee Cost Per Pay Period**	**Modified Benefit Option (MBO) Employee Cost Per Pay Period**
Blue Shield Gold Trio HMO	$222.14	$304.40
Blue Shield Access + HMO	$266.82	$349.08
Blue Shield Signature HMO	$376.71	$458.97
Blue Shield PPO	$1,124.23	$1,206.49
Kaiser Virtual Complete HMO	$199.14	$281.40
Kaiser Choice HMO	$257.38	$339.64
Kaiser Permanente HMO	$381.24	$463.50

Employee +2 or more Coverage		
Plan	**Traditional Benefit Option (TBO) Employee Cost Per Pay Period**	**Modified Benefit Option (MBO) Employee Cost Per Pay Period**
Blue Shield Gold Trio HMO	$309.20	$426.37
Blue Shield Access + HMO	$372.42	$489.59
Blue Shield Signature HMO	$527.90	$645.07
Blue Shield PPO	$1,802.23	$1,919.40
Kaiser Virtual Complete HMO	$276.63	$393.80
Kaiser Choice HMO	$359.04	$476.21
Kaiser Permanente HMO	$534.30	$651.47