



MODIFIED BENEFIT OPTION (MBO)

SPECIAL DISTRICTS/FIRE DISTRICT Exempt

Exempt Compensation Ordinance November 2025

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 or 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 11, 2026

	<u>TBO</u>	<u>MBO</u>
Emp-Only	\$394.22	\$279.92
Emp +1	\$666.80	\$546.78
Emp +2 or more	\$938.24	\$769.36

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

	<u>TBO</u>	<u>MBO</u>
Vacation	80-160 hours per year <i>Cash-out option</i> <i>Max. carryover of 480 hours. Unused balance in excess of cap will automatically cash out in pay period 1</i>	See PTO <i>Cash-out option same as TBO</i>
Sick	3.69 hours per pay period	See PTO
Holiday	14 + 1 floating per year <i>Max. carryover of 120 hours. Unused balance in excess of cap will automatically cash out in pay period 1</i>	14 holidays per year
Admin	80 hours per year <i>Unused balance will automatically cash out in pay period 26</i>	Same as TBO
Bereavement	3 days per occurrence <i>Plus add'l day if traveling over 600 miles</i>	Same as TBO
Perfect Attendance Leave (PAL)	Up to 16 hours PAL	Same as TBO

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

Group B – Bi-weekly allowance of \$461.54.

Employees who enter in Group B after June 20, 2020, except Director of Special Districts and Communications Director, shall not have the option to receive automobile allowance.

PORTABLE COMMUNICATION DEVICE ALLOWANCE

Group B – Bi-weekly allowance of \$92.31

SHORT-TERM DISABILITY

Receive 55% of pay, up to \$2,516/week for up to 180 days.

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

Group 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 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.

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 \$3,300 annually. Plus, up to \$40 match per pay period OR BSC Access+ HMO/ 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.

Tuition/Membership Reimbursement \$1,000 per fiscal year

529 Savings Plan Invest for future educational expenses with tax-free earnings. Contact ScholarShare to enroll.

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

Commuter Services link.sbcounty.gov/rideshare

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

Employee Discounts link.sbcounty.gov/EmployeeDiscount

Save big at hundreds of national and local merchants

Wellness Program link.sbcounty.gov/wellness

Information, resources and rewards to support your healthy lifestyle.

Employee Assistance Program (EAP) link.sbcounty.gov/eap

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

Medical Premium Costs for County Plans

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

Medical Premium Subsidy

Effective July 11, 2026

Employee Only: **\$394.22 (TBO)** **\$279.90 (MBO)**

Employee +1: **\$666.80 (TBO)** **\$546.78 (MBO)**

Employee +2: **\$938.24 (TBO)** **\$769.36 (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	\$0.00	\$60.66
Blue Shield Access + HMO	\$0.00	\$82.98
Blue Shield Signature HMO	\$23.63	\$137.95
Blue Shield PPO	\$382.67	\$496.99
Kaiser Virtual Complete HMO	\$0.00	\$49.17
Kaiser Choice HMO	\$0.00	\$78.29
Kaiser Permanente HMO	\$25.90	\$140.22
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	\$12.33	\$132.35
Blue Shield Access + HMO	\$57.01	\$177.03
Blue Shield Signature HMO	\$166.90	\$286.92
Blue Shield PPO	\$914.42	\$1,034.44
Kaiser Virtual Complete HMO	\$0.00	\$109.35
Kaiser Choice HMO	\$47.57	\$167.59
Kaiser Permanente HMO	\$171.43	\$291.45
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	\$21.92	\$190.80
Blue Shield Access + HMO	\$85.14	\$254.02
Blue Shield Signature HMO	\$240.62	\$409.50
Blue Shield PPO	\$1,514.95	\$1,683.83
Kaiser Virtual Complete HMO	\$0.00	\$158.23
Kaiser Choice HMO	\$71.76	\$240.64
Kaiser Permanente HMO	\$247.02	\$415.90