



Engineers & Scientists of California (ESC)

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Memorandum of Understanding (MOU) Term	June 6, 2023 – March 25, 2026
Representation	Engineers and Scientists of California (ESC), Local 20 International Federation of Professional and Technical Engineers, AFL-CIO & CLC
Health and Welfare	
Benefit Level	Full-time (80 hours/1.0 FTE)
Medical	Semi-Monthly County Contribution Effective June 1, 2024 – May 31, 2025 \$446.50 Employee Only \$893.00 Employee +1 \$1,262.50 Employee +2 or more
Dental	\$46.24 – Semi-Monthly County Contribution \$13.04 – Semi-Monthly Employee Contribution
Vision	County Paid (\$7.45 Semi-Monthly)
Basic Life Insurance – County Paid	\$25,000
Supplemental Life – Employee Paid	1, 2, 3, 4, or 5 times Base Annual Salary (not to exceed \$500,000 when combined with Basic Life)
Dependent Life – Employee Paid	\$5,000 per Eligible Dependent
Accidental Death & Dismemberment – County Paid	\$25,000
Leave Provisions	
Vacation – Accrual based on years of service	Accrue up to 4.94 – 8.01 hours Maximum accrual not to exceed 300 Hours
Vacation Savings Plan (VSP) – Employee Paid	Set aside up to 20 hours of base pay each plan year during years 2 through 5
Holiday	12 days per year 1 Floating Holiday per year beginning January 1, 2024 for employees hired before April 17, 2023 (no carryover or cash out)
Sick	Accrue up to 3.68 hours
Paid Parental Leave	320 hours (subject to eligibility requirements)
Compassionate	Up to 32 hours per eligible occurrence

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Revised: January 17, 2025

Retirement - Pension																			
Tier 1 (Retirement system membership on or before 12/31/2012. Reciprocity provision may apply)	3% at 60																		
Tier 2 (Retirement system membership on or after 1/1/2013)	2% at 62: 2.5% at 67																		
Retirement - Other																			
457 - Voluntary Deferred Compensation	Employee Paid (optional)																		
Retiree Medical Plan – Hired Prior to January 1, 2009	See Memorandum of Understanding (MOU) for eligibility requirements																		
Retiree Health Reimbursement Account (HRA) – Hired on or after January 1, 2009	\$2,400 Lump Sum Deposit upon meeting eligibility criteria; then \$0.58 per eligible pay status hour (Approximately \$1200 per year)																		
Other Benefits																			
Staff Development/Wellness Reimbursement	\$850 per Fiscal Year																		
Continuing Education Requirements – Applies only to <u>Children’s Therapy Program</u> - Occupational Therapists I/II and Physical Therapists I/II	\$1,500 per Fiscal Year																		
Dependent Care Assistance Program (DCAP)	Employee Paid (Optional)																		
Health Flexible Spending Account (FSA)	Employee Paid (Optional)																		
Short Term Disability	Employee Paid through the Union																		
Long Term Disability	County Paid																		
Employee Assistance Program (EAP)	County Paid																		
<p>Semi-Monthly Medical Premium Out-of-Pocket Cost – Examples based on 2024/2025 medical plan premiums</p> <p>Example #1: Employee elects Kaiser Permanente HMO with Employee Only coverage.</p> <table style="margin-left: 20px;"> <tr><td>\$565.81</td><td>Premium</td></tr> <tr><td>- \$446.50</td><td>County Contribution</td></tr> <tr><td>\$119.31</td><td>Employee Semi-Monthly Out-of-Pocket Cost</td></tr> </table> <p>Example #2: Employee elects Sutter Health Plus HMO with Employee + 1 dependent coverage.</p> <table style="margin-left: 20px;"> <tr><td>\$811.70</td><td>Premium</td></tr> <tr><td>- \$811.70</td><td>County Contribution</td></tr> <tr><td>\$0.00</td><td>Employee Semi-Monthly Out-of-Pocket Cost</td></tr> </table> <p>Example #3: Employee elects Western Health Advantage HMO with Employee + 2 or more dependents coverage.</p> <table style="margin-left: 20px;"> <tr><td>\$1,124.21</td><td>Premium</td></tr> <tr><td>- \$1,124.21</td><td>County Contribution</td></tr> <tr><td>\$0.00</td><td>Employee Semi-Monthly Out-of-Pocket Cost</td></tr> </table>		\$565.81	Premium	- \$446.50	County Contribution	\$119.31	Employee Semi-Monthly Out-of-Pocket Cost	\$811.70	Premium	- \$811.70	County Contribution	\$0.00	Employee Semi-Monthly Out-of-Pocket Cost	\$1,124.21	Premium	- \$1,124.21	County Contribution	\$0.00	Employee Semi-Monthly Out-of-Pocket Cost
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