

## Employee Benefits Summary

**REQUIRED INFORMATION FOR BENEFITS:** birth date (self, spouse, dependents), social security number (self, spouse, dependents and beneficiaries), voided check for direct deposit.

**PROBATIONARY PERIOD:** The normal period of probation for new employees shall be six (6) months with the exception of Police and Fire which shall be twelve (12) months

**PAYROLL:** Mandatory direct deposit

**VACATION:** Vacation is based upon length of service. New employees accrue 6.67 hours per month. Vacation is available for use as it is earned.

**HOLIDAYS:** New Years Day, Martin Luther King, Jr., Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the Friday after Thanksgiving, Christmas Eve and Christmas Day.

**SICK LEAVE:** Employee receives credit for eight (8) hours of sick leave at the end of each month. Sick leave may be used for personal or immediate family illness. Maximum accrual of 1040 hours.

**LIFE INSURANCE:** Provided by the City at no cost to employee. Coverage begins on date of employment and equals base annual salary.

**SUPPLEMENTAL LIFE INSURANCE:** -optional- Coverage equals base annual salary. Monthly premium cost based upon employee's age and salary.

**DEPENDENT LIFE INSURANCE:** -optional- Cost to employee \$1.28 per month for \$5000; \$2.55 per month for \$10,000.

**LONG TERM DISABILITY:** -optional- Monthly premium is shared 50/50 by employee/City.

**HEALTH INSURANCE PLAN:** - optional- Plan eff. 1/1/20 BlueCross BlueShield of Tennessee – Network P

Employee Cost Per Pay Period (26)	Standard	Basic
Individual	\$79.96	\$68.61
Individual – Wellness	\$71.97	\$61.75
Family	\$227.89	\$195.55
Family – Wellness	\$205.10	\$175.99

**DENTAL INSURANCE PLAN:** - optional- Plan eff. 1/1/20 Employee Cost Per Pay Period (24)

Delta Dental of TN	Employee	\$14.91
	Employee + Spouse	\$29.07
	Employee + Children	\$32.73
	Employee + Family	\$54.68

**VISION INSURANCE PLAN:** - optional- Plan eff. 1/1/20 Employee Cost Per Pay Period (24)

Davis Vision	Employee	\$4.00
	Employee + Spouse	\$8.00
	Employee + Child	\$8.40
	Employee + Family	\$11.70

**FLEXIBLE SPENDING ACCOUNTS:** -optional- Medical spending and dependent care spending accounts. Contributions are on a pre-tax basis.

**RETIREMENT-ICMA RC 401 (a):** Membership is mandatory; 5% mandatory contribution employee; 5% City contribution; employee voluntary contributions available with City matching employee voluntary contribution up to a maximum 3%.

**RETIREMENT-ICMA RC 457 (b) supplement:** -optional- Employee may contribute up to \$18,500 in 2020.