

County of Colusa Colusa County Management Coalition/ Unrepresented Employees Unit

2025 Benefit Summary

BENEFIT TYPE	DESCRIPTION OF BENEFIT		
CalPERS Retirement Formula – Miscellaneous	Classic: 3% @ 60 New: 2% @ 62		
CalPERS Employee Contribution Rate -	Classic: 8% New: 7.5%		
Miscellaneous			
CalPERS Retirement Formula – Safety	Classic: 3% @ 50 New: 2.5% @ 57		
CalPERS Employee Contribution Rate - Safety	Classic: 12% New: 13%		
Social Security	The County participates in the Social Security Program.		
	Employee share: 6.2% up to \$176,100		
Medicare	Colusa County participates in the Medicare Program. The current employee		
	and employer share is 1.45%.		
State Disability Insurance	Colusa County participates in this the S		
Cafeteria Plan Contributions	If enrolled in a CalPERS medial insurance	e plan, the County <u>monthly</u>	
	contributions are as follows:		
	Cavaraga Laval	Manthly County Contribution	
	Coverage Level Employee Only	Monthly County Contribution \$1,016.13	
	Employee Only Employee plus One Dependent	\$2,032.27	
	Employee plus Two Dependents	\$2,641.95	
Medical Plan		<u>'</u>	
iviedicai Pian	Colusa County offers several HMO and CalPERS. Specific plans are based on eli	, ,	
	page 3.	gibility. See Plans and Nates table on	
	page 3.		
	Currently, the County pays the entire p	vernium for all coverage levels if	
	employees select the CalPERS Gold Plan or Western Health Advantage!		
Dental Plan	Colusa County offers HMO and PPO dental plans with orthodontic coverage		
	through Delta Dental. See <i>Plans and Rates</i> table on page 3.		
Vision	Colusa County offers a vision plan through Vision Service Providers (VSP)		
	Ameritas. The County contributes the full premium for employee only.		
	Enrollment is mandatory at the employee-only level. See <i>Plans and Rates</i> table		
	on page 3.		
Medical Waiver	Employees electing to opt out of the County provided medical plan will receive		
	\$400 cash in-lieu benefit per month with proof of enrollment in alternate eligible plan.		
Health Reimbursement Arrangement	The County contributes \$50.00 per month into an individual IRS qualified		
	Health Reimbursement Arrangement (HRA) account for each active covered		
	employee. This is in addition to any excess cafeteria funds. **See page 2		
	below for additional details.		
DENIETT TYPE	DESCRIPTION OF PENEFIT		
BENEFIT TYPE	DESCRIPTION OF BENEFIT		

Life Insurance	The County provides a \$50,000 life insura	ance policy free of cost to employees			
and modified	The County provides a \$50,000 life insurance policy free of cost to employees (enrollment is mandatory). Employees have the option to purchase additional				
	life insurance for themselves and their dependents, term life and whole life				
	policies available.				
Employee Assistance Program	Colusa County offers a confidential counseling program to employees and				
	their dependents with 6 sessions per incident per calendar year.				
Deferred Compensation 457(b) Plan	The County offers optional deferred com				
	Voya and MetLife with matching contribution	Voya and MetLife with matching contributions based on years of service:			
	▶ Up to 7 years of service, \$30 per month				
	> 7-15 years of service: \$40 per month				
	> 15+ years of service: \$50 per mo	onth			
Sick Leave	Accrual of one (1) day of paid sick leave p	per month, beginning on the day of			
	hire. Sick leave accrual is unlimited.				
Holidays	There are 13 regular holidays plus one no	on-floating holiday.			
Vacation Parity	If you worked for a public agency* prior	to coming to Colusa County, your			
	former years of service in a benefitted, for				
	on a year-for-year basis) will now be cou	•			
	purposes of vacation accrual with the Co	•			
	the new accelerated vacation accrual chart (see chart below), if you started				
	· · · · · · · · · · · · · · · · · · ·	with the County this year, but had three years of service at another County			
	(City, Special District, or other public sector agency job) you will now accrue				
	vacation as if you have been working for Colusa for the past three+ years.				
	(*Public Agency means any city, county,				
	public body [similar to Cal Gov Code §20056 minus CA-specific service]).				
	Service credit will also be given to employees with prior <u>military service</u> (counted in full years, on a year-for-year basis), provided that the employee was <u>honorably</u> discharged. Please submit form <i>DD-214</i> along with the Vacation				
	Parity form.	troini DD 217 diong with the vacation			
Vacation	Years of Service	Annual Vacation			
	0 to 3 years	10 days			
	4 to 7 years	15 days			
	8 to 11 years	20 days			
	12+ years	25 days			
	-	•			
	Vacation accrual is capped at 1.5 times the yearly rate. Colusa County honors previous service with a public agency counts towards vacation accrual at Colusa County. A public agency includes cities, counties, districts,				
	and similar entities on a year for year basis.				
Management Leave	Management employees are entitled to				
	Leave per calendar year.	, (, o, , , o , , o , , o , , o , o , o			
	Unrepresented employees are entitled to fifty-six (56) hours of Management				
	Leave per calendar year.				
	This allocation of Management Leave will be added to eligible employees' accounts starting from the first day of the first full pay period in January, and it				
	will not carry over or accumulate from or	ne year to the next.			
Newly eligible employees who begin their County employment after					
	Newly eligible employees who begin the	ii County employment after the mist			
	working day of the first full pay period in	· · · · · · · · · · · · · · · · · · ·			
		January will receive a prorated			



COUNTY OF COLUSA 2025 RATES

Coverage Period: January 1, 2025 - December 31, 2025

EMPLOYEE GROUP: MGMT/URD

MONTHLY COSTS	COVERAGE LEVELS						
	Emplo	Employee Only		Employee + 1		FAMILY	
HEALTH INSURANCE PLAN NAME	Prior1/1/13	After 12/31/12	Prior1/1/13	After 12/31/12	Prior1/1/13	After 12/31/12	
PERS Platinum - PPO (Blue Shield of CA)	773.51	463.51	1,237.02	927.02	1,515.12	1,205.13	
PERS Gold - PPO (Blue Shield of CA)	310.00	0.00	310.00	0.00	310.00	0.00	
**Blue Shield - Access+ (HMO) & EPO	466.85	156.85	623.69	313.69	717.79	407.80	
**Western Health Advantage	210.33	(99.67)	110.66	(199.34)	50.86	(259.14)	
**Anthem HMO Select	553.54	243.53	797.06	487.07	943.18	633.19	
**Anthem HMO Traditional	797.87	487.87	1,285.73	975.74	1,578.45	1,268.46	
**Blue Shield Trio HMO	431.38	121.38	552.76	242.76	625.58	315.59	
**United Health Care Alliance	481.29	171.29	652.58	342.58	755.35	445.36	
**United Health Care Harmony	301.30	(8.70)	292.59	(17.40)	287.37	(22.62)	
**Kaiser HMO	409.44	99.44	508.87	198.88	568.53	258.54	
PORAC - (Peace Officers Only)	271.21	(38.79)	501.05	191.06	451.71	141.72	

With the significant increase in insurance premiums costs for the 2024 plan year, most employees will have no excess funds to pay for yoluntary supplemental policies resulting in an increased out-of-pocket cost.

^{**}Plan available in limited zip codes. To determine if the health plan you are considering provides services where you reside or work, use the Health Plan seach by Zip Code available on the CalPERS website.

MONTHLY COSTS	COVERAGE LEVELS			
DENTAL INSURANCE PLAN NAME	EE Only	EE + Spouse	Family	EE + Children
Delta Dental PPO	0.10	41.90	99.30	27.60
Delta Care DHMO	0.00	0.00	21.20	0.00

^{*}The County of Colusa requires its employees to enroll in County-sponsored dental coverage unless they can show proof of alternative coverage from another source. Employees hired prior to 1/1/13 may take the \$45 County contribution as a monthly cash in-lieu benefit as per County Dental Plan Coverage Waiver Form guidelines.

MONTHLY COSTS	COVERAGE LEVELS		
VISION INSURANCE PLAN NAME	Employee Only	Employee + 1	FAMILY
VISION SERVICE PROVIDERS (VSP)	0.00	6.61	10.37

Vision enrollment is mandatory for all employees.

	HIRED		
CASH IN-LIEU AMOUNTS	Prior to 1/1/13	After 12/31/12	
	435.00	400.00	

County health plan enrollment is not mandatory. If an employee does not enroll in County health insurance, they may be eligible for a monthly cash in-lieu benefit as long as employees can provide proof of alternative coverage as defined in Health Plan Coverage Waiver Form.