

CITY OF HAYWARD
BENEFIT SUMMARY - EFFECTIVE 07/01/2021

ITEM	SEIU Local 1021	SEIU Local 1021	Local 21	HAME	Unrepresented	Unrepresented	POA	Police Management	Local 1909	Local 1909	Fire Chiefs	SEIU Local 1021	Unrepresented
	CLERICAL & RELATED	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive	UNREP Non-Executive (Exempt and Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs. or more)	ELECTED OFFICIALS
1. MAXIMUM MONTHLY CITY MEDICAL CONTRIBUTION (City contracts with CalPERS for Medical); please visit https://www.calpers.ca.gov/docs/2019-health-rates-bay-area.pdf for plan costs.													
PERS - One Party	\$813.64	\$813.64	\$1,008.19	\$732.28	\$936.06	\$732.28	\$1,170.08	\$1,170.08	\$1,307.86	\$1,307.86	\$1,294.69	\$280.00	\$906.28
PERS - Two Party	\$1,627.28	\$1,627.28	\$2,016.38	\$1,464.55	\$1,872.13	\$1,464.55	\$2,340.16	\$2,340.16	\$2,615.72	\$2,615.72	\$2,589.38	Flat amount for	\$1,812.57
PERS - Three or More	\$2,115.46	\$2,115.46	\$2,621.30	\$1,903.91	\$2,692.95	\$1,903.91	\$3,042.21	\$3,042.21	\$3,400.44	\$3,400.44	\$3,366.19	medical, dental, vision	\$2,356.33
2. MONTHLY ALTERNATIVE BENEFIT (IN LIEU OF MEDICAL CONTRIBUTIONS)													
One Party	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$668.63	\$668.63	\$150.00		
Two Party	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$1,337.26	\$1,337.26	\$270.00	N/A	N/A
Three or More	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$1,738.44	\$1,738.44	\$350.00		
3. RETIREE MEDICAL													
Retired	After 12/31/07	After 12/31/07	After 12/31/07				Hired after 5/1/2012	Hired into HPOA After 05/01/12					
Paid Directly to PERS	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00	\$143.00		\$143.00
Reimbursed through A/P	<u>\$131.72</u>	<u>\$131.72</u>	<u>\$131.72</u>	<u>\$131.72</u>	<u>\$94.31</u>	<u>\$94.31</u>	<u>\$365.30</u>	<u>\$365.30</u>	<u>\$365.30</u>	<u>\$365.30</u>	<u>\$365.30</u>	N/A	<u>\$94.31</u>
Total Monthly Contribution	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$237.31</u>	<u>\$237.31</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>		<u>\$237.31</u>
Retired	12/30/07 & Before	12/30/07 & Before	12/30/07 & Before				Hired before 05/01/12	Hired into HPOA 05/01/12 & Before					
Paid Directly to PERS	\$143.00	\$143.00	\$143.00				\$143.00	\$143.00					
Reimbursed through A/P	<u>\$83.01</u>	<u>\$83.01</u>	<u>\$83.01</u>				<u>\$670.64</u>	<u>\$670.64</u>					
Total Monthly Contribution	<u>\$226.01</u>	<u>\$226.01</u>	<u>\$226.01</u>				<u>\$813.64**</u>	<u>\$813.64**</u>					
EE contribution													
Vesting*	10 yrs. of City service- Effective 1/1/08	10 yrs. of City service- Effective 1/1/08	10 yrs. of City service- Effective 1/1/08	10 yrs. of City service- Effective 1/1/06	N/A	N/A	10 yrs. of City service- Effective 7/1/04	10 yrs. of City service- Effective 1/1/03	10 yrs. of City service- Effective 1/1/04	N/A	N/A	N/A	N/A
*Police - Vesting requirement does not apply to Industrial Disability Retirements. **This amount changes each year to match the Kaiser Bay Area single party rate.													
4. MAXIMUM MONTHLY CITY DENTAL CONTRIBUTION (For premiums and employee contributions, please see rate sheets)													
Delta Dental - Monthly Premium	EE only \$49.56 EE + 1 \$84.24 EE + Fam \$128.84	EE only \$49.56 EE + 1 \$84.24 EE + Fam \$128.84	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$70.79 EE + 1 \$120.33 EE + Fam \$184.04	EE only \$71.19 EE + 1 \$121.02 EE + Fam \$185.10	EE only \$70.79 EE + 1 \$120.33 EE + Fam \$184.04	EE only \$71.19 EE + 1 \$121.02 EE + Fam \$185.10	EE only \$71.19 EE + 1 \$121.02 EE + Fam \$185.10	Included in Medical City Contribution	EE only \$35.60 EE + 1 \$60.51 EE + Fam \$92.55
United Concordia - Monthly Premium	EE Only \$24.22 EE + 1 \$60.96 EE + Fam \$60.96	EE Only \$24.22 EE + 1 \$60.96 EE + Fam \$60.96	EE Only \$24.22 EE + 1 \$60.96 EE + Fam \$60.96	EE Only \$24.22 EE + 1 \$60.96 EE + Fam \$60.96	EE Only \$24.22 EE + 1 \$60.96 EE + Fam \$60.96	EE Only \$24.22 EE + 1 \$60.96 EE + Fam \$60.96	EE Only \$30.28 EE + 1 \$76.20 EE + Fam \$76.20	EE Only \$30.28 EE + 1 \$76.20 EE + Fam \$76.20	EE Only \$30.28 EE + 1 \$76.20 EE + Fam \$76.20	EE Only \$30.28 EE + 1 \$76.20 EE + Fam \$76.20	EE Only \$30.28 EE + 1 \$76.20 EE + Fam \$76.20	Included in Medical City Contribution	EE Only \$15.14 EE + 1 \$38.10 EE + Fam \$38.10
5. MAXIMUM MONTHLY CITY VISION CONTRIBUTION (For premiums and employee contribution, please see rate sheets)													
Vision Service Plan (VSP) Monthly	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	Included in Medical City Contribution	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70

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	CLERICAL & RELATED	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive	UNREP Non-Executive (Exempt and Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs. or more)	ELECTED OFFICIALS
6. CITY PAID BASIC LIFE INSURANCE, AD&D													
Coverage	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	1 X Annual Salary	2 X Annual Salary	1 X Annual Salary	N/A	2 X Annual Salary	N/A - offered through Local 1909	1 X Annual Salary	1 X Annual Salary	\$25,000	1 X Annual Salary
The Hartford - Monthly	\$5.25 FT & \$2.63 PT	\$5.25 FT & \$2.63 PT	\$5.25 FT & \$2.63 PT	\$0.105 per \$1000/Annual Salary	\$0.105 per \$1000/Annual Salary	\$0.105 per \$1000/Annual Salary	N/A	\$0.105 per \$1000/Annual Salary	N/A	\$0.105 per \$1000/Annual Salary	\$0.105 per \$1000/Annual Salary	\$2.63	\$0.105 per \$1000/Annual Salary
7. SHORT TERM/LONG TERM DISABILITY INSURANCE													
City Provided Coverage through The Hartford	N/A - Covered by SDI	N/A - Covered by SDI	60% of Salary	66 2/3 % of Salary	66 2/3 % of Salary	66 2/3 % of Salary	N/A - Provided through POA	66 2/3 % of Salary	N/A - Provided through Local 1909	66 2/3 % of Salary	66 2/3 % of Salary	N/A	N/A
LTD - Monthly STD - Weekly	N/A	N/A	(employee paid) LTD only: \$0.25 per \$100 of covered payroll	LTD: \$0.437 per \$100 of covered payroll STD: \$.059 per \$10 of covered payroll	LTD: \$0.437 per \$100 of covered payroll STD: \$.059 per \$10 of covered payroll	LTD: \$0.437 per \$100 of covered payroll STD: \$.059 per \$10 of covered payroll	N/A	LTD: \$0.437 per \$100 of covered payroll STD: \$.059 per \$10 of covered payroll	N/A	N/A	LTD: \$0.437 per \$100 of covered payroll STD: \$.059 per \$10 of covered payroll	N/A	N/A
8. STATE DISABILITY INSURANCE/PAID FAMILY LEAVE INSURANCE													
Coverage	Up to \$1,252/week	Up to \$1,252/week	Up to \$1,252/week	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Up to \$1,252/week	N/A
EDD - Per Pay Period (Employee Paid)	1% X Salary, Max Withholding \$1,229.09	1% X Salary, Max Withholding \$1,229.09	1% X Salary, Max Withholding \$1,229.09	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1% X Salary, Max Withholding \$1,229.09	N/A
9. MEDICARE - Hired After 3/31/86													
Medicare - Per Pay Period (Employee & City Paid)	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary
*Effective 1/1/13, an additional Medicare Tax of 0.9% is applicable to wages and compensation received in excess of: Married filing joint - \$250,000; Married filing separately - \$125,000; Single/Head of Household/Qualifying widow(er) - \$200,000													
10. CITY PROVIDED EMPLOYEE ASSISTANCE PROGRAM													
# of Sessions	10	10	7	10	10	10	20	20	7	7	7	10	N/A
Holman Group - Monthly	\$6.21	\$6.21	\$5.00	\$6.21	\$6.21	\$6.21	\$5.00	\$6.21	\$5.00	\$5.00	\$5.00	\$6.21	N/A

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	CLERICAL & RELATED	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive	UNREP Non-Executive (Exempt and Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs. or more)	ELECTED OFFICIALS
11a. RETIREMENT - CalPERS ("Classic" Members) - Retirement subject to annual compensation limits (see https://www.calpers.ca.gov/docs/circular-letters/2020/200-001-20.pdf)													
Formula	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	3% @ 50	3% @ 50	3% @ 50	3% @ 50	3% @ 50	2.5% @ 55	2.5% @ 55, if elected to participate
CalPERS Employer Rate Including UAL (Published)	27.400%	27.400%	27.400%	27.400%	27.400%	27.400%	50.300%	50.300%	45.200%	45.200%	45.200%	27.400%	27.400%
CalPERS Published Employee Rate	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	9.000%	9.000%	9.000%	9.000%	9.000%	8.000%	8.000%
Employer Rate (EE Paid)	4.500%	4.500%	3.000%	3.000%	5.000%	3.000%	6.000%	6.000%	6.000%	6.000%	6.000%	4.500%	0.000%
Employer Rate (City Paid)	22.900%	22.900%	24.400%	24.400%	22.400%	24.400%	44.300%	44.300%	39.200%	39.200%	39.200%	22.900%	27.400%
Employee Rate (EE paid)	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	9.000%	9.000%	9.000%	9.000%	9.000%	8.000%	8.000%
Employee Rate (City paid)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
Total City paid PERS	22.900%	22.900%	24.400%	24.400%	22.400%	24.400%	44.300%	44.300%	39.200%	39.200%	39.200%	22.900%	27.400%
Total Employee paid PERS	12.500%	12.500%	11.000%	11.000%	13.000%	11.000%	15.000%	15.000%	15.000%	15.000%	15.000%	12.500%	8.000%
11b. RETIREMENT - CalPERS ("New" Members) - Retirement subject to annual compensation limits (see https://www.calpers.ca.gov/docs/circular-letters/2020/200-001-20.pdf)													
Formula	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.0% @ 62	2.0% @ 62, if elected to participate
CalPERS Employer Rate Including UAL (Published)	27.400%	27.400%	27.400%	27.400%	27.400%	27.400%	50.300%	50.300%	45.200%	45.200%	45.200%	27.400%	27.400%
CalPERS Published Employee Rate	6.750%	6.750%	6.750%	6.750%	6.750%	6.750%	13.000%	12.000%	10.500%	9.750%	9.750%	6.250%	6.250%
Employer Rate (EE Paid)	4.500%	4.500%	3.000%	3.000%	5.000%	3.000%	2.000%	3.000%	4.500%	5.250%	5.250%	4.500%	0.000%
Employer Rate (City Paid)	22.900%	22.900%	24.400%	24.400%	22.400%	24.400%	48.300%	47.300%	40.700%	39.950%	39.950%	22.900%	27.400%
Employee Rate (EE paid)	6.750%	6.750%	6.750%	6.750%	6.750%	6.750%	13.000%	12.000%	10.500%	9.750%	9.750%	6.250%	6.250%
Employee Rate (City paid)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
Total City paid PERS	22.900%	22.900%	24.400%	24.400%	22.400%	24.400%	48.300%	47.300%	40.700%	39.950%	39.950%	22.900%	27.400%
Total Employee paid PERS	11.250%	11.250%	9.750%	9.750%	11.750%	9.750%	15.000%	15.000%	15.000%	15.000%	15.000%	10.750%	6.250%

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	CLERICAL & RELATED	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive	UNREP Non-Executive (Exempt and Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs. or more)	ELECTED OFFICIALS	
12. HOLIDAYS & HOLIDAY PAY														
Annual - Total Days	14.5	14.5	14.5	14.5	14.5	14.5	0	0	(40 HR Positions)	(40 HR Positions)	14	58 hours	N/A	
Christmas Eve - Hours	8	8	8	8	8	8	0	0	4	4	4			
New Year's Eve - Hours	4	4	4	4	4	4	0	0	4	4	4			
Pay in lieu of holiday (Public Safety Only)							6.73 % X Salary (40 hrs.)	6.73 % X Salary (40 hrs.)	5.77% X Salary (56 hrs.)	5.77% X Salary (56 hrs.)				
13. VACATION LEAVE ACCRUALS														
Annual	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10-14 yrs - 160 hrs 15 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	(40 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs (56 hrs) 1st yr - 169 hrs 5-14 yrs - 240 hrs 15 yrs+ - 300 hrs	(40 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs (56 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs	(40 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs (56 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	* Prorated based on actual hrs worked	N/A
Vacation Usage Restrictions	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 6 months	N/A	N/A	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	N/A	
14. SICK LEAVE ACCRUALS														
Annual	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	(40 hrs) - 103 hrs (56 hrs) - 144 hrs	(40 hrs) - 103 hrs (56 hrs) - 144 hrs	(40 hrs) - 103 hrs (56 hrs) - 144 hrs	96 hrs	N/A	
Max Accumulation	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	*Prorated based on hrs worked 720 Hours	N/A	
Sick Leave Usage Restrictions	N/A	N/A	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	N/A	N/A	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	N/A	
Separation Payoff*	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	Varies - 0% - 1.5% X City service years X Payrate	Varies - 0% - 1.5% X City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	N/A	
*Employee must leave in good standing. Also, employee must have 20 yrs of City service at time of separation or separate due to retirement or death. HAME and Unrepresented employees hired after 4/1/2012 and SEIU employees hired after 5/1/2014 are not eligible for sick leave payout upon separation.														

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15. UNIFORM ALLOWANCE													
Annual	Clerical: \$275* (paid on a per pay period basis)	Up to \$250 - Safety Shoes (reimbursement)*	\$275 - Police ID Spec* Up to \$200 - Safety Shoes (reimbursement)* Up to \$125 - Prescription Safety Glasses(reimb)*	Up to \$250 - Safety Shoes (reimbursement)*	\$480 - Fire Chief \$440 - Police Chief (paid on a per pay period basis)	N/A	\$900 (paid on a per pay period basis)	\$900 (paid on a per pay period basis)	\$430 (paid on a per pay period basis)	\$480 (paid on a per pay period basis)	\$480 (paid on a per pay period basis)	N/A	N/A
*For specific job classifications per the MOU. (See MOU for full list of job classifications).													
16. EDUCATIONAL INCENTIVE													
Per Pay Period	N/A	N/A	N/A	N/A	N/A	N/A	Int. POST - 2.5% Int. POST + BA - 5% Adv. POST - 7.5% Adv. POST + MA- 10% (see MOU for more information)	Int. POST - 2.5% Int. POST + BA - 5% Adv. POST - 7.5% Adv. POST + MA- 10% (see MOU for more information)	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	N/A	N/A
17. CONTINUOUS SERVICE PAY													
	N/A	N/A	N/A	N/A	N/A	N/A	Sworn Years 15 yrs. - 3% 20 yrs. - 6% 25 yrs. - 10% (see MOU for more information)	Sworn Years 15 yrs. - 3% 20 yrs. - 6% 25 yrs. - 10% (see MOU for more information)	N/A	N/A	N/A	N/A	N/A
18. EDUCATIONAL REIMBURSEMENT													
Annual - Subject to MOU Restrictions & Limit	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	N/A	\$750	N/A	N/A	N/A	N/A	N/A
19. HEALTH AND WELLNESS REIMBURSEMENT													
Monthly Maximum	FT: \$50.00 PT: \$25.00	FT: \$50.00 PT: \$25.00	FT: \$50.00 PT: \$25.00	\$50.00	\$100.00	\$50.00	N/A	\$100.00	N/A	N/A	N/A	PT: \$25.00	N/A
20. PROFESSIONAL DEVELOPMENT REIMBURSEMENT													
Annual Maximum	N/A	N/A	\$350.00	\$500.00	Personal Equipment Stipend	Exempt: \$500 Non-Exempt: \$350	N/A	N/A	N/A	N/A	N/A	N/A	N/A