



San Bernardino County Employees'
Retirement Association

Plan Year 2020-2021

General Unit Employee Benefit Summary

Administrative Services • Clerical • Management

• Supervisory • Technical & Inspection

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Health and Welfare		
Benefit Level	Full Time (61-80 hours)	
Medical Premium Subsidy (MPS) Hired or entering the unit BEFORE June 28, 2014	Kaiser Permanente HMO Employee Only	\$230.25
	All Other Plans Employee Only	\$209.47
	All Other Plans Employee + 1	\$359.57
	All Other Plans Employee + 2 or more	\$508.80
Medical Premium Subsidy (MPS) Hired or entering the unit AFTER June 28, 2014	Employee Only	\$209.47
	Employee + 1	\$359.57
	Employee + 2 or more	\$508.80
Dental Premium Subsidy (DPS)		\$9.46
Medical Opt-Out	Opt-Out before 7/23/05	\$141.02
	Opt-Out After 7/23/05	\$84.28
Medical Waive	Waived Before 7/23/05	\$200.17
	Waived After 7/23/05	\$84.28
Vision	Employer Paid for Employee Only Coverage	
Life Insurance	ADM., MGMT:	\$50,000
	SUP, TI:	\$35,000
	CLK:	\$20,000
Voluntary Term Life	Employee	\$10,000 - \$700,000
	Spouse/Domestic Partner	\$10,000 - \$250,000
	Child(ren)	\$5,000 - \$20,000
Voluntary AD&D	Employee:	\$10,000 - \$250,000
	Spouse/Domestic Partner:	\$5,000 - \$125,000
	Child(ren):	\$3,125 - \$25,000
Leave Provisions		
Vacation	80-160 hours/year, w/cash out option up to 60 hours/year if 80 hours of vacation used in the previous year	
Sick	3.39 hours/pay period	
Bereavement	2 days per occurrence (3 days if traveling more than 1,000 miles)	
Holiday	13 + 1 floating/year	
Annual	SUP only – 40 hours/year, no cash-out option (use it or lose it)	
Administrative/Annual	MGMT only – 80 hours Administrative year, w/cash-out option	
	SUP only – 40 hours Administrative/year, w/cash-out option, and 40 hours Annual/year, w/no cash-out option	
Perfect Attendance	Annual Gym Membership Reimbursement up to \$299 – OR – Annual 16 hours Perfect Attendance Leave	

Retirement	
Tier 1 (Hired prior to 1/1/2013. Reciprocity provision may apply.)	2% at age 55 7% SBCERA Contribution upon reaching 5 years of continuous SBCERA Service
Tier 2 (Hired on or after 1/1/2013. Reciprocity provision may apply.)	2.5% at age 67 No SBCERA Contribution
Retirement – Other	
457(b) Eligible to enroll at any time	After one year of continuous service in a regular position, employees are eligible for a biweekly match. Match of 1 times the employee's contribution up to 1% of the employee's biweekly base salary.
Retirement Medical Trust Fund	Must contribute sick leave balance at the rate of 100% of the cash value. No max.
Other	
529 Education Savings Plan	Eligible
Annual Tuition Reimbursement	\$1,500 per employee after one year of SBCERA service
Dependent Care Assistance Plan	Eligible
Flexible Spending Account (FSA)	Annual maximum contribution of \$2,750
Portable Communication Device Allowance	Per Letter of Employment
Qualified Transportation Plan	Pre-tax deductions of up to \$260/month for qualified transportation (commuter) expense
Short Term Disability - General	55% up to \$1,216/week