

	Elected Official	Management	Confidential	Local 3	APWEA	TPEA	APOA	APSMA
MOU Information								
TERM OF AGREEMENT	Elected Term	9/30/21- 9/30/24	9/30/21- 9/30/24	9/30/21- 9/30/24	4/1/22-3/31/26	9/30/21- 9/30/24	8/31/21 - 8/31/24	9/1/21-8/31/25
SCHEDULED SALARY INCREASES IN CURRENT LABOR AGREEMENT	N/A	2022 = 2% Increase (EFF 10/09/22) 2023 = 4% increase 2024 = 3% increase	2022 = 2% Increase (EFF 10/09/22) 2023 = 4% increase 2024 = 3% increase	2022 = 2% Increase (EFF 10/09/22) 2023 = 4% increase 2024 = 3% increase	2022 = 4% increase 2023 = 2% increase 2024 = 4% increase 2025= 3% increase	2022 = 2% Increase (EFF 10/09/22) 2023 = 4% increase 2024 = 3% increase	2022 = 2% Increase (EFF 10/09/22) 2023 = 4% increase 2024 = 3% increase	2021 = 1.5% increase 2022 = 2% increase 2023 = 4% increase 2024 = 3% increase
EMPLOYEE ORGANIZATION DUES	N/A	N/A	N/A	\$64 per month	Dues are 1.25% of gross salary per month or equal to 0.96% gross salary per month for service fees. Not to exceed \$150.00 per month.	N/A	Contact PORAC	Contact PORAC
Time Accruals	Elected Official	Management	Confidential	Local 3	APWEA	TPEA	APOA	APSMA
HOLIDAYS AND FLOAT HOLIDAYS PAY	N/A	13 Holidays and 3 Float Holidays	13 Holidays and 3 Float Holidays	13 Holidays and 3 Float Holidays	13 Holidays and 2 Float Holidays	13 Holidays and 2 Float Holidays	13 Holidays and 3 Float Holidays	13 Holidays and 4 Float Holidays
VACATION TIME	N/A	11 -30 days depending on title and years of service	11 -25 days depending on years of service	11 -25 days depending on years of service	11 -25 days depending on years of service	11 -25 days depending on years of service	11 -30 days depending on date of hire and years of service	11 -30 days depending on date of hire and years of service
SICK TIME	N/A	12 DAYS						
BEREAVEMENT LEAVE	N/A	3 DAYS FOR LESS THAN 300 MI AND 5 DAYS FOR MORE THAN 300 MI PLEASE SEE MOU FOR COVERED FAMILY MEMBERS						
MILITARY TIME	N/A	173.33 per FISCAL YR.						

HEALTH BENEFITS RATES BELOW ARE BASED ON BAY AREA REGION. MAY VARY BASED ON HOME LOCATION	Elected Official	Management	Confidential	Local 3	APWEA	TPEA	APOA	AP SMA
ANTHEM SELECT HMO	SINGLE:\$977.83 2-PARTY:\$1955.66 FAMILY:\$2783.96							
ANTHEM Traditional HMO	SINGLE:\$1059.71 2-PARTY:\$2270.42 FAMILY:\$2996.85							
BLUE SHIELD TRIO	***ONLY AVAILABLE FOR CERTAIN AREA***							
BLUE SHIELD ACCESS+	***ONLY AVAILABLE FOR CERTAIN AREA***							
HEALTH NET SMARTCARE	SINGLE:\$1023.50 2-PARTY:\$2198.00 FAMILY:\$2902.70							
KAISER PERMANENTE	SINGLE:\$762.74 2-PARTY:\$1676.48 FAMILY:\$2224.72							
PERS PLATINUM	SINGLE:\$1049.12 2-PARTY:\$2249.24 FAMILY:\$2969.31							
PERS GOLD	SINGLE:\$674.61 2-PARTY:\$1500.22 FAMILY:\$1995.59							
PORAC	N/A	SINGLE:\$674.00 2-PARTY:\$1724.00 FAMILY:\$2149.00						
UNITED HEALTHCARE	***ONLY AVAILABLE FOR CERTAIN AREA***							
WESTERN HEALTH ADVANTAGE	***ONLY AVAILABLE FOR CERTAIN AREA***							
DENTAL: Delta Dental Plan of CA	Option A-\$102.02 Option B-\$124.12 Option C-\$172.20 *The price is the same for all party sizes							

VISION: VSP	Option 1: Single \$5.94 2-Party \$11.87 Family \$15.44 Option 2: Single \$12.24 2-Party \$22.80 Family \$32.80								
HEALTH CARE ALLOCATIONS AND BENEFITS	Elected Official	Management	Confidential	Local 3	APWEA	TPEA	APOA	APSMA	
CAFETERIA ALLOCATION	SINGLE:\$621.67 2-PARTY:\$1204.34 FAMILY:\$1531.46	SINGLE:\$864.76 2-PARTY:\$1848.68 FAMILY:\$2429.72					SINGLE:\$877.00 2-PARTY:\$1871.48 FAMILY:\$2429.72		
MEDICAL INSURANCE: In-lieu of Medical/Deferral of Unused Medical Premiums	1/2 into Deferred Comp	1/2 into Deferred Comp *\$250 max if hired after 12/31/18	1/2 Cash or 1/2 into Deferred Comp *\$250 max if hired after 12/31/18	1/2 Cash or 1/2 into Deferred Comp *\$250 max if hired after 12/31/18	1/2 Cash or 1/2 into Deferred Comp *\$250 max if hired after 12/31/17	1/2 Cash or 1/2 into Deferred Comp *\$250 max if hired after 12/31/18	1/2 Cash *\$250 max if hired after 9/1/07	1/2 Cash *\$250 max if hired after 9/1/07	
ADDITIONAL BENEFITS	Elected Official	Management	Confidential	Local 3	APWEA	TPEA	APOA	APSMA	
EMPLOYEE ASSISTANCE PROGRAM (EAP)	\$3.89	\$3.89	\$3.89	\$3.89	\$3.89	\$3.89	\$3.89	\$3.89	
LIFE INSURANCE: Rate Employer Pays	N/A	N/A	\$0.221 per 1,000 till 1/1/2024						
LIFE INSURANCE: Benefit	12,000	2X The employee's base salary (max of \$250,000)	Equal to 1 yr. of the employees base salary. (Max. 75,000)	\$25,000	\$25,000	Equal to 1 yr. of the employees base salary. (Max. 100,000)	\$25,000	2X The employee's base salary (Max of \$250,000)	
FLEXIBLE SPENDING ACCOUNTS (FSA)	N/A	IRS 2023 Federal limits							
TUITION REIMBURSEMENT	N/A	\$1,000 per fiscal year it is based on a first come	\$1,000 per fiscal year it is based on a first come	\$800 per fiscal year it is based on a first come	\$800 per fiscal year it is based on a first come	\$800 per fiscal year it is based on a first come	\$800 per fiscal year it is based on a first come	\$800 per fiscal year it is based on a first come	
Cell Phone Allowance	Mayor -\$100 Council Members - \$50	\$50 monthly reimbursement or a company provided cell phone *Dept. Heads Only	N/A						
GYM REIMBURSEMENT	N/A	\$27 per month					N/A -However Full Gym on Premises		
VEHICLE ALLOWANCE	\$350 Council, City Clerk, and Treasurer \$450 Mayor	\$350 Executive Management and Elected Officials \$450 City Manager	N/A	N/A	N/A	N/A	N/A	Reimbursement at the IRS rate	

