

2017 City of Goodlettsville Benefit Summary

Vacation *Hour for Hour*

Shift:	<u>8 hr</u>	<u>12 hr</u>	<u>24 hr</u>
6 mo service:	40 hrs	42 hrs	53 hrs
1 yr service:	80 hrs	84 hrs	106 hrs
*5 yrs service:	120 hrs	126 hrs	160 hrs
10 yrs service:	160 hrs	168 hrs	213 hrs

Paid Holidays (11)

New Years Day
 Memorial Day
 Independence Day
 Labor Day
 Thanksgiving Day
 Christmas Eve
 Christmas Day
 Four Floating Day (July-July)

Sick Leave (*Hour for Hour*)

8 hour shift employee earns 8hrs/month
 12 hr shift employee earns 8.42/month
 24 hr shift employee earns 10.67/month

Education Assistance

Tuition reimbursement program after 1yr

Longevity *(as allowed by budget)

1-4 years - \$50 per year of service
 5 or more years - \$100 per year

Flu Vaccinations

Offered onsite, 100% paid by insurance

Employee Assistance Plan (EAP)

City provides employee at no cost

TN Consolidated Retirement System (TCRS) (after 6 months of employment)

City funds entire contribution 14.98% of salary for those hired before January 1, 2013.
 Vested after 5 years of membership. After 1/1/13, employee pays 5%.

Deferred Compensation Plan – Sections 457 and 401 (after 6 months)

Employee makes voluntary pre-taxed contributions to 457. No City contribution.

Insurance – Colonial Supplemental Products

Must meet with Colonial representative upon hire or open enrollment.

Dental-BCBS

Employee only –City pays premium
 Family - \$24.83/check

Life- BCBS

Two times annual salary up to \$180,000
 City pays entire premium.
 (35% reduction at age 65)

Supplemental Life – Guardian

Available for employees/dependents
 Employee pays premium

Long Term Disability- Guardian

City pays entire premium

Voluntary Vision – BCBS

Single – \$2.61/check
 Employee +spouse - \$5.22/check

Employee + children -\$5.49/check
 Employee + family – \$8.62/check

Medical - BCBS : HRA : \$750Deductible/\$1380 Max: \$30 co-pay; spec \$45

Option 1(S network)

No HCA Hospitals; 10/75/150Scripts

Employee only: \$20.50/check
 Employee +1: \$40.87/check
 Family: \$59.35/check

Option 2 (S network) +

No HCA Hospitals; 10/35/50 Scripts

\$49.72/check
 \$99.36/check
 \$144.40/check

Option 3(P network)

HCA Hospitals; 10/75/150Scripts

Employee only: \$55.18/check
 Employee +1: \$110.31/check
 Family: \$160.31/check

Option 4 (P network) +

HCA Hospitals; 10/35/50 Scripts

\$84.42/check
 \$168.85/check
 \$245.43/check