CITY COUNCIL
BENEFIT SUMMARY SHEET

COMPENSATION: $2,094.75/month

FRINGE BENEFITS AND WELLNESS

- ***MEDICAL***
  City medical plan premium contribution up to $767.00/month for member, plus additional contribution if enrolling eligible dependent(s)
- ***DENTAL INSURANCE***
  Employer paid family coverage
- ***EMPLOYEE ASSISTANCE PROGRAM (EAP)***
  Available to member and dependents
- ***VISION PLAN***
  City paid for member only
  Dependents may be added at additional cost
- ***LIFE INSURANCE***
  $100,000 policy paid by employer
- ***ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE***
  Covered accident/injury/loss up to $102,000
  Work-related accident up to an additional $50,000
- ***MEDICARE COVERAGE***
  Provided for members elected after April 1, 1986
- ***WELLNESS***
  Up to $1,000/fiscal year per terms in Resolution
- ***WELLNESS CENTER AND LAP SWIM***
  Available to all active members at no cost

RETIREMENT BENEFITS

- ***RETIREMENT – PERS*** *(Optional Enrollment)*
  2.5% @ 55 OR 2.0% @ 62 up to 2.5% @ 67
  (depending on PERS membership date and election date with the City)

  PERS will determine Classic or New membership status
- ***RETIREMENT HEALTH SAVINGS PLAN (RHS)***
  City contributes $150.00/month
- ***RETIREE MEDICAL TRUST (BERMT)***
  $50.00/pay period City contribution
- ***§457 DEFERRED COMPENSATION PLAN***
  City matches §457 deferred compensation member contribution up to $150.00/month

MISCELLANEOUS

- ***WORKERS COMPENSATION***
  City is self insured and provides coverage to member
- ***TRANSPORTATION ALLOWANCE***
  $500.00/month

THIS IS PROVIDED AS A SUMMARY OF BENEFITS AND DOES NOT CONFER ANY RIGHTS UPON ANY EMPLOYEE. PLEASE REFER TO THE APPROPRIATE RESOLUTION FOR A MORE DETAILED DISCUSSION OF THESE BENEFITS.

Revised 08/17/26