

**CITY OF GRAHAM
BENEFITS**

As of July 01, 2018

RETIREMENT PLANS

403b Pension – The North Carolina Department of State Treasurer Division of the Local Governmental Employees’ Retirement System (LGERs) – Employer and employee funded. All eligible employees are **required** to participate in the LGERs plan upon employment. The employee contribution is set at 6% of gross and is tax sheltered.

Employer contribution: 8.95 % **City Contribution General Employees**
 9.7 % **City Contribution Law Enforcement Officers***
 *(City contribution Law Enforcement Officers changes annually)

NC deferred Compensation Plan (457) and the NC 401(k)

All eligible non-sworn full time regular employees are able to participate in two additional supplemental retirement plans – the NC deferred Compensation Plan (457) and the NC 401(k) Retirement Savings Plan upon successful completion of a six (6) month probationary period.

North Carolina Supplemental Retirement Plans Prudential 401(k) Non-Sworn – Subject to funding availability employer match up to 5% of Non-Sworn Eligible Employee’s gross salary following completion of six (6) months employment. Employee’s own contributions are tax sheltered with a maximum annual contribution of \$19,000.00. This plan allows for Roth after-tax contributions. The City does not match into the employee Roth after-tax 401K account.

North Carolina Supplemental Retirement Plans Prudential 401(k) Sworn – In accordance with State law the City will automatically contribute 5% of **Sworn Eligible Employee’s** gross salary into the NC 401(k) Retirement Savings following completion of six (6) months employment. This plan allows for Roth after-tax contributions. The City does not contribute to sworn employee’s Roth after-tax 401K account.

North Carolina Supplemental Retirement Plans Prudential Deferred Compensation Plan (457) – All employees may contribute additionally through payroll deductions in the NC 457 Deferred Compensation Plan. The plan is a defined contribution pension plan where the participant assumes the investment risk with a maximum annual contribution of \$19,000.00. The Deferred Compensation (457) plan allows for traditional pre-tax contributions and Roth after-tax contributions. **Employee pays for full contribution.**

INSURANCE

Group Health and Hospitalization Insurance: Full Time employees. Employee is eligible the first day of employment.

Full Time Employee:	\$608.00*	
EE & Child/Children	\$168.46	Per Pay Period
EE & Spouse	\$449.08	Per Pay Period
EE & Family	\$617.54	Per Pay Period

*Employer Paid in accordance with standard driven premium incentive wellness programs for continuously enrolled employees from 7/1/2019 through 6/30/2020.

Group Vision Insurance: Full-time employees. Employee is eligible the first of the month following 30 days of employment.

Full Time Employee:	\$ 3.23	Employer Paid
EE & Child/Children	\$ 2.77	Per Pay Period*
EE & Spouse	\$ 2.77	Per Pay Period*
EE & Family	\$ 6.00	Per Pay Period*

***Tax free deduction on eligible dependent insurance premiums through a Section 125 Plan.**

Group Delta Dental Insurance: Full-time employees. Employee is eligible the first of the month following 30 days of employment.

Full Time Employee:	\$ 14.13	Per Pay Period*
EE & Child/Children	\$ 35.58	Per Pay Period*
EE & Spouse	\$ 28.27	Per Pay Period*
EE & Family	\$ 54.04	Per Pay Period*

***Tax free deduction on eligible dependent insurance premiums through a Section 125 Plan.**

Cafeteria Plan (Section 125 Plan) - Medical Flexible Spending Account with Flex Card and Dependent Care Savings Plan tax free deduction for contributions. Enrollment once a year during June. Maximum annual medical flexible spending election in the amount of \$2,650.00. The medical flexible spending account allows a rollover up to \$500.00 for unused funds at the end of the plan year into the following plan year. Maximum dependent care flexible spending annual election in the amount of \$5,000.00.

Group Life and AD&D Insurance

USable Life \$5.60 premium per month (full time employees) **Employer pays premium.** \$20,000.00 group term Life Insurance (no cost to employee).

Supplemental Benefits - Administered by Mark III Employee Benefits, Inc. – Employee may elect to purchase additional coverage and benefits directly with Mark III Employee Benefits, Inc..

LONGEVITY PAY

YEARS OF SERVICE	Paid in December
2 – 5 Years of Service	1.0% of Base Pay
5 – 10 Years of Service	2.5% of Base Pay
10 – 20 Years of Service	5.0 % of Base Pay
Over 20 Years of Service	6.0% of Base Pay

VACATION – Accrual

Full and Part time employee, prorated by average hours in the work week.

YEARS OF SERVICE	Days Accrued Per Year/ Hours Per Month
0 – 4 Years of Service	10 days / 6.67 hours
5 – 9 Years of Service	12 days/ 8.0 hours
10 – 14 Years of Service	15 days/ 10 hours
15 – 19 Years of Service	18 days / 12 hours
20 + Years of Service	20 days / 13.33 hours

HOLIDAYS

- New Year’s Day
- Martin Luther King’s Birthday

Good Friday
Memorial Day
Independence Day
Labor Day
Thanksgiving Thursday and Friday
Christmas (three days)

SICK LEAVE – Accrual

Full time and part time employees shall accrue sick leave at a rate of one (1) day per month of service or twelve (12) days per year.

SUPPLEMENTAL CARE BENEFITS

Dental Reimbursement: \$500.00 Maximum per full time employee per year.

Employee Assistance Counseling Program (EACP): The Employee Assistance Counseling Program is available to all employees and their immediate families. The basic services provided by the members of the counseling team at Alamance Regional Medical are provided free of charge. These services are confidential. You can locate the counseling center by calling (336) 538-7481.

LEAVE TYPES

Family Medical Leave Act (FMLA)
Worker's Compensation
Military Leave
Civil Leave
Educational Leave with pay
Shared sick leave

CREDIT UNION MEMBERSHIP AVAILABLE

Truliant Federal Credit Union – (800) 822-0382
Local Government Federal Credit Union – (888) 732-8562
Premiere Federal Credit Union – (800) 873-2929

TUTION REIMBURSEMENT - Full- time employees after completion of six (6) months employment may be reimbursed up to a total of three hundred fifty dollars (\$350.00) per fiscal year upon approval by City Manager.