

Paid Leave

Holidays:

The City recognizes nine (9) paid holidays including:

- New Year's Day
- Thanksgiving
- Martin Luther King Day
- The Friday following Thanksgiving
- Memorial Day
- Christmas Day
- Independence Day
- Floating Holiday (available after 6 months of service)
- Labor Day

Vacation Leave(*):

Fire employees are entitled to earn a minimum of three weeks (15 days) of vacation leave each year.

<u>Length of Service</u>	<u>Weeks Earned</u>
1 - 14 Years	3 Weeks
15 - 24 Years	4 Weeks
25 Years and above	5 Weeks

Sick Leave(*):

Fifteen (15) days sick leave per year for personal illness. Five (5) days of sick leave per year can be used to care for a family member. Sick Leave accrues at the rate of ten (10) hours per month. There is no accumulation limit for sick leave.

Personal Leave:

All regular employees who have satisfactorily completed six (6) months of service are eligible for Personal Leave, three 8 hour days for Shift 1; 1-1/2 shifts for 12 hour day for Shift 2 per calendar year, for death or funeral of family members (family members include immediate or extended family or persons who served in "loco parentis") or uncontrollable dwelling damage.

Military Leave(*):

All regular full-time employees shall be entitled to fifteen (15) days of paid military leave of absence.

*Required by Chapter 143

Additional Pay

Longevity Pay(*):

<u>Years of Service</u>	<u>Compensation</u>
1—4 years	\$4 a month/years of service
5—9 years	\$6 a month/years of service
10—14 years	\$8 a month/years of service
15 or more years	\$10 a month/years of service (up to a 25-year maximum)

Training and Incentive Pay(*):

The City may provide training and incentive pay based on type of certification and/or college degree held by the employee.

Assignment Pay(*):

Assignment pay may be offered to firefighters and police officers who perform specialized functions in their departments. The City currently has authorized assignment pay of \$125 per month plus \$20 per 24-hour shift assigned to ambulance for paramedics. The City also pays \$60 per month per employee assigned to perform function of SCBA Technician by servicing self-contained breathing apparatus (SCBA) used by firefighters.

Termination Pay(*):

Sick Leave:
Up to 90 days following completion of probationary period.

Vacation:
Up to 20 days following one (1) year of service.

*Required by Chapter 143

Counseling

The Employee Assistance Program (EAP) is designed to provide employees and their dependents guidance in locating professional, cost-effective assistance in resolving difficult personal problems. Employees may voluntarily contact the EAP or have a mandatory referral by their department.

Tax Saver

The Tax Saver Program (Section 125 of the IRS Code) allows certain medical expenses and dependent care expenses to be reimbursed with funds deducted before tax withholding in order to reduce tax liability.

Retirement & Saving Opportunities

Texas Municipal Retirement System:

All employees appointed to positions designated to work 1,000 hours or more per year are covered under the Texas Municipal Retirement System. Employee contribution is a mandatory 7% before taxes each pay period. The City's plan provides five-year vesting and 2-to-1 matching of contributions. The City's TMRS plan also includes:

- Retirement at any age with 20 years of service (or age 60 with at least 5 years of service).
- Partial lump-sum distribution (PLSD) benefit option at retirement.
- Disability retirement available to employees disabled from their position.

Medicare and Social Security Coverage:

All full-time and part-time employees are covered under the Federal Insurance Contributions Act, better known as Social Security. The City contributes 1.45% of employee wages for Medicare coverage and 6.2% for Social Security coverage.

Deferred Compensation Section 457 of the IRS Code:

The plan permits employees, on a voluntary basis, to authorize a portion of their salary to be withheld and invested for payment to themselves at a later date. Neither the deferred amount nor earnings on the investments are subject to current federal income tax.

Voluntary Long-term Disability

Employees may select Long-term Disability insurance for themselves while they are employed with the City of Mesquite. The premium is based on the employee's age and salary. If an employee becomes disabled, then the benefit is paid directly to the employee up to 60% of monthly earnings to a maximum of \$5,000.

Benefit Options for Fire Civil Service Personnel (Chapter 143)



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This brochure briefly describes benefits/leave available but may not include all restrictions or conditions. Consult the Municipal Civil Service Regulations (As Amended) available in your department or in Human Resources for restrictions and conditions. Also, most of these benefits apply to full-time regular employees. Be sure to check with Human Resources or your department regarding benefits, which may not be available to you.

Voluntary Cancer Insurance

The policy permits employees, on a voluntary basis, to enroll in this Critical Care Policy at the following biweekly rates:

	Basic	Enhanced
Employee Only	\$5.84	\$10.04
Family	\$10.12	\$17.46

Death Benefits

The City provides life insurance coverage for all full-time regular employees at two (2) times the employee's annual salary.

Group Supplemental Term-Life Voluntary Plan:

Employees may select additional coverage for themselves up to five (5) times their annual salary in increments of \$10,000. Amount of coverage may require medical approval. Premiums are determined on coverage amount and age of employee. Employees may also select coverage for dependents, available as follows:

- Spouse—Up to 100% of employee amount in increments of \$5,000 (*not to exceed \$250,000*)
- Children—Up to 50% of employee coverage amounts in increments of \$2,000 (*not to exceed \$10,000*)

Accidental Death & Dismemberment (AD&D) Voluntary Plan:

Employees may select any amount (Principal Sum) in multiples of \$25,000 from a minimum of \$25,000 to a maximum of \$500,000; however, the amount selected, if more than \$150,000, may not exceed ten (10) times base annual salary. Employees may choose an employee only or employee and family plan.

Group Medical Health Insurance Program

The City offers health insurance coverage to all regular full-time employees, and their eligible dependents with the employee paying a portion of the premiums. For information on plan designs look at the table to the right.

Employee Health Center

The City of Mesquite offers a Health Center with Pharmacy to all employees and dependents on one of the City medical plans. The co-pay to use the clinic is \$10 per visit and prescription drug co-pays at the pharmacy are as follows:

	30-day	90-day
Generic	\$5	\$10
Preferred Brand Name	\$15	\$30
Non-preferred Brand Name	\$30	\$60

Dental Benefits

The City contributes a portion of the employee's premium to participate in one of the dental plans. Choices are DHMO (managed care plan) which includes Orthodontia coverage or Dental Choice/PPO Plan with terms as follows:

<u>Co-insurance:</u>	
Preventive (deductible waived)	80%
General Services	80%
Major Services	50%
Orthodontia	N/A
<u>CYD:</u>	
Per Individual	\$50.00
Per Family	\$150.00

Bi-weekly Premiums	Dental HMO	Dental Choice / PPO
Employee	\$1.54	\$6.37
Employee + Spouse	\$4.76	\$19.46
Employee + Children	\$5.64	\$17.27
Employee + Family	\$10.23	\$30.36

Plan Design	HRA OAP	Basic OAP	HMO (Network)
HRA Fund:	\$300 Individual / \$600 Family	N/A	N/A
Calendar Year Deductible (CYD):			
In-network	\$1,200 Individual / \$2,400 Family	\$500 Individual / \$1000 Family	N/A
Out-of-network	\$3,600 Individual / \$7,200 Family	\$1,500 Individual / \$3,000 Family	N/A
Physician Office Visits:			
In-network	80% Plan / 20% Member*	80% Plan / 20% Member*	\$30 Member Co-pay
Out-of-network	60% Plan / 40% Member*	60% Plan / 40% Member*	NO BENEFIT
Specialist Office Visit:			
In-network	80% Plan / 20% Member*	80% Plan / 20% Member*	\$40 Member Co-pay
Out-of-network	60% Plan / 40% Member*	60% Plan / 40% Member*	NO BENEFIT
Inpatient Hospital Services:	80% Plan / 20% Member*	\$250 Co-pay, then 80% Plan / 20% Member*	\$500 Member Admission Co-pay
Urgent Care:	\$50 Member Co-pay*	\$50 Member Co-pay*	\$50 Member Co-pay
Emergency Room:	\$100 Member Co-pay*		\$100 Member Co-pay
Advanced Radiology Imaging:	\$200 Co-pay*	\$200 Co-pay*	\$200 Co-pay
Preventive Benefit:	\$350 maximum paid by plan per year per member		\$30 Member Co-pay
Vision Benefit:	\$100 maximum reimbursed per year per member		
Prescription Drugs:			
Generic	20% Member Co-insurance*	\$10 Member Co-pay	\$10 Member Co-pay
Brand Name-Formulary	30% Member Co-insurance*	\$25 Member Co-pay	\$25 Member Co-pay
Non-Formulary	50% Member Co-insurance*	\$50 Member Co-pay	\$50 Member Co-pay
Rx Deductible:	N/A	\$100 / Individual	\$100 / Individual
Out-of-Pocket Maximum:			
Per Person Per Year #	\$3,100 - In \$20,000 - Out	\$3,500 - In \$20,000 - Out	\$4,000 - In/Individual \$8,000 - In/Family NO BENEFIT for Out
Lifetime Maximum:	\$1,500,000	\$1,500,000	\$1,500,000
Biweekly Rates:			
Employee Only	\$5.23	\$11.00	\$35.47
EE+ Spouse	\$66.33	\$91.81	\$150.55
EE+ Child	\$28.22	\$44.14	\$80.85
EE+ Children	\$36.76	\$54.27	\$94.66
EE+ Family	\$85.29	\$113.94	\$180.03

* Subject to CYD

Out-of-Pocket Maximum does not include CYD