

**KLAMATH COUNTY  
BENEFITS PACKAGE: KLAMATH COUNTY PEACE OFFICERS' ASSOCIATION EMPLOYEES**

**Insurance**

<p><b>Medical:</b> Moda Medical</p> <p><b>Insurance Cap:</b> \$1,460/month</p> <p><b>Opt-Out HRA Contribution:</b> \$657.50/month</p> <p><b>HRA VEBA Contribution:</b> \$139.04/month</p>	<p><b>Plan 3</b></p> <ul style="list-style-type: none"> <li>• Coordinated Care: Deductible: \$1,200/\$3,900, Out of Pocket Max: \$4,850/\$15,750 <ul style="list-style-type: none"> <li>○ <b>Annual Exam:</b> \$0 copay, <b>Primary Care Visit with PCP360:</b> \$25 copay, <b>Primary Care Visit with provider other than PCP360:</b> \$50 copay, <b>Urgent Care:</b> \$50 copay, <b>Virtual Visit:</b> \$10 copay</li> </ul> </li> <li>• Non-Coordinated Care: Deductible: \$1,300/\$3,900, Out of Pocket Max: \$5,250/\$15,750 <ul style="list-style-type: none"> <li>○ <b>Annual Exam:</b> \$0 copay, <b>Primary Care Visit and Urgent Care Visit:</b> 25% after deductible, <b>Virtual Visit:</b> \$10 copay</li> </ul> </li> </ul> <p><b>Plan 4</b></p> <ul style="list-style-type: none"> <li>• Coordinated Care: Deductible: \$1,600/\$5,100, Out of Pocket Max: \$6,700/\$15,800 <ul style="list-style-type: none"> <li>○ <b>Annual Exam:</b> \$0 copay, <b>Primary Care Visit with PCP360:</b> \$25 copay, <b>Primary Care Visit with provider other than PCP360:</b> \$50 copay, <b>Urgent Care:</b> \$50 copay, <b>Virtual Visit:</b> \$10 copay</li> </ul> </li> <li>• Non-Coordinated Care: Deductible: \$1,700/\$5,100, Out of Pocket Max: \$7,100/\$15,800 <ul style="list-style-type: none"> <li>○ <b>Annual Exam:</b> \$0 copay, <b>Primary Care Visit and Urgent Care Visit:</b> 25% after deductible, <b>Virtual Visit:</b> \$10 copay</li> </ul> </li> </ul>
<p><b>Dental:</b> Delta Dental</p>	<p><b>Plan 5</b></p> <ul style="list-style-type: none"> <li>• Deductible: \$50, Benefit Max: \$1,700 <ul style="list-style-type: none"> <li>○ Incentive Plan, Orthodontia Benefit</li> </ul> </li> </ul> <p><b>Plan 6</b></p> <ul style="list-style-type: none"> <li>• Deductible: \$50, Benefit Max: \$1,200</li> </ul>
<p><b>Vision:</b> Moda Health</p>	<p><b>Opal</b></p> <ul style="list-style-type: none"> <li>• \$600 Benefit Maximum <ul style="list-style-type: none"> <li>○ Annual Exam, Lenses or Contacts every year, Frames every other year (up to benefit maximum)</li> </ul> </li> </ul> <p><b>Quartz</b></p> <ul style="list-style-type: none"> <li>• \$250 Benefit Maximum <ul style="list-style-type: none"> <li>○ Annual Exam, Lenses or Contacts every year, Frames every other year (up to benefit maximum)</li> </ul> </li> </ul>
<p>Life Insurance</p>	<p><b>Plan A Members:</b> \$20,00 Basic Life, \$20,000 Basic Safety Officer Life, \$20,000 Basic Accidental Death and Dismemberment, \$2,000 Basic Dependent Life</p> <p><b>Plan B Members:</b> \$5,000 Basic Life, \$5,000 Basic Accidental Death and Dismemberment, \$2,000 Basic Dependent Life</p>
<p>Short-Term Disability</p>	<p>60% of salary after 7<sup>th</sup> missed day of work, or after all sick leave has been used. Benefits paid through day 60</p>

**Retirement**

Klamath County Pension	Plan B Members: Employee Contribution: 6% , Employer Contribution: 1%
PERS	Plan A Members: Employee Contribution: 6% to Public Employees Retirement System

**Leave Benefits (Prorated based on FTE)**

Vacation	<p>Less than 6 years</p> <p>6 years</p> <p>11 years</p> <p>16 years</p> <p>20 years</p>	<p>10 days per year</p> <p>15 days per year</p> <p>18 days per year</p> <p>22 days per year</p> <p>25 days per year</p>
Sick Leave	8 hours per month, not to exceed 1290 hours	
Holidays ( <b>Sworn Officers: 12 Floating Holidays</b> )	New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day, Christmas Day, Two Floating Holidays per Fiscal Year	

**Additional Benefits**

Employee Assistance Program	Confidential assistance for employees and their families that experience problems with the abuse of alcohol or other drugs, as well as other problems which affect the employee's health and job performance
Deferred Comp	Nationwide 457 Plan
Health Savings Account	With qualifying medical plan selection, pre-tax contributions up to IRS annual limit
Flexible Spending Account	Pre-tax contributions for unreimbursed medical expenses. Funds must be used within the plan year.
HRA VEBA/Opt-Out	Health Reimbursement Account that can be used to cover qualified healthcare expenses for you and your dependents. County makes monthly contributions for employees who opt-out of County sponsored health insurance with proof of other qualifying group health insurance coverage.
Voluntary Life	Additional Life and Accidental Death and Dismemberment insurance is available for you and your dependents.
Supplemental Insurance	May be purchased through AFLAC