

**Town of Delmar  
Full-Time Employee Benefits**

**Health Insurance**

- Health Insurance is with Aetna
- Employee's Coverage - Town of Delmar pays 100% of employee's premium
- Additional coverage - child, spouse, or family through weekly payroll deduction – Town of Delmar pays 70% of premium for dependents
  - RATES:
    - Employee Only \$0/week (52)
    - Employee + Spouse \$46.15/week (52) or \$92.31/biweekly (26)
    - Employee + Child(ren) \$46.15/week (52) or \$92.31/biweekly (26)
    - Employee + Family \$75.00/week (52) or \$150.00/biweekly (26)
- Benefit Period is July 1 through June 30, open-enrollment in June & effective July 1st
- Town pays 100% of deductible using a Health Reimbursement Account (HRA) (\$3500 family/\$7000 dependents)
- Coinsurance - You pay 0%
- Maximum Out-of-Pocket - \$7000 Individual / \$8550 Family
- Preventive Services – You pay 0%
- PCP Office Visits – You pay \$30 copay after deductible
- Specialist Office Visits – You pay \$60 copay after deductible
- Urgent Care – You pay \$60 copay after deductible
- Laboratory/X-Ray – You pay \$0 after deductible
- Inpatient Care (Includes Maternity) – You pay \$0 after deductible
- Outpatient Surgery – You pay \$0 after deductible
- Emergency Room – You pay \$350 after deductible, waived if admitted
- Prescription Benefit
  - Rx Generic - \$15 Copay after deductible
  - Rx Preferred - \$65 copay after deductible
  - Rx Non-Preferred - \$100 copay after deductible
  - Rx Specialty – 40% up to \$150 after deductible
- Physical Therapy - \$0 after deductible
- Chiropractic (Outpatient) – 25% after deductible
- Out of Network – Not Covered
- Employees who waive our health coverage due to being covered thru spouse will receive \$50 per week as a benefit compensation.

**Dental Insurance**

- Dental Insurance is with Principal
- Employee's Coverage - Town of Delmar pays 100% of employee's premium
- Additional coverage - child, spouse, or family through weekly payroll deduction
  - RATES:
    - Employee Only \$0/week (52)
    - Employee + Spouse \$7.32/week (52) or \$14.63/biweekly (26)
    - Employee + Child(ren) \$6.70/week (52) or \$13.39/biweekly (26)
    - Employee + Family \$14.70/week (52) or \$29.40/biweekly (26)
- Benefit Period is July 1- June 30, open-enrollment in June & effective July 1<sup>st</sup>

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- Calendar Year Deductible - \$50 (Individual) / \$150 (Family)
- Calendar year Maximum Benefit - \$1500 per person
- Oral Examinations – 0% (Covered at 100%) – In-Network / 100% of Maximum Allowable Charges – Out-of-Network
- Preventative Cleanings - 0% (Covered at 100%) – In-Network / 100% of Maximum Allowable Charges – Out-of-Network
- X-Rays - 0% (Covered at 100%) – In-Network / 100% of Maximum Allowable Charges – Out-of-Network
- Fillings – 20% after deductible (In-Network) / 20% of Maximum Allowable Charges (Out-of-Network)
- Root Canals/Deep Cleaning/Single Extraction/Impaction - 20% after deductible (In-Network) / 20% of Maximum Allowable Charges (Out-of-Network)
- Oral Surgery - 20% after deductible (In-Network) / 20% of Maximum Allowable Charges (Out-of-Network)
- Periodontics – Non-Surgical or Surgical - 20% after deductible (In-Network) / 20% of Maximum Allowable Charges (Out-of-Network)
- Crowns – 50% after deductible (In-Network) / 50% of Maximum Allowable Charges (Out-of-Network)
- Full and Partial Dentures - 50% after deductible (In-Network) / 50% of Maximum Allowable Charges (Out-of-Network)
- Implants – Not Covered
- Orthodontia –50% to a \$1,000 lifetime max (Dependent child up to age 19)
- There is no rollover of the annual benefit

**Optical Insurance**

Employees can enroll in optical insurance and have the low weekly premiums deducted from payroll.

- Vision Benefits are with Principal  
RATES:
  - Employee Only \$1.20/week (52) or \$2.40/biweekly (26)
  - Employee + Spouse \$2.67/week (52) or \$5.34/biweekly (26)
  - Employee + Child(ren) \$2.28/week (52) or \$4.56/biweekly (26)
  - Employee + Family \$3.76/week (52) or \$7.52/biweekly (26)
- Comprehensive / Routine Eye Exam - \$10 copay (In-Network) Covered once every 12 months
- Frames – You get \$130 allowance; after \$25 copay (In-Network) – Covered once every 24 months
- Standard Plastic Lenses (either eyeglass or contact):
  - Single Vision: \$30 copay
  - Bifocal: \$50 copay
  - Trifocal: \$65 copay
  - Lenticular: \$25 copay
  - Covered once every 12 months
- Contact Lenses (In lieu of eyeglass lenses and frames) – Up to \$105

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**Flexible Spending Account (FSA)**

With a Flexible Spending Account (FSA), you can set aside pre-tax dollars through payroll deductions to pay for certain health care and dependent care expenses. Each pay period, funds are deducted from your paycheck to help you pay for eligible expenses.

You do not have to participate in the Town of Delmar’s medical, dental or vision plans to enroll in the Health Care FSA plan. A Dependent Care FSA has the same tax advantages but is used for child and elder care expenses.

FSA’s are “use it or lose it” benefit plans. If you do not use all your FSA annual contribution, you will forfeit the remaining balance. It is important to budget appropriately and use all the funds within the FSA plan year. However, your Health Care FSA plan allows you to roll over up to \$610 to be used in the next plan year following a 90-day run out period.

*Example: Employee has \$1,000 in their Medical FSA account on June 30<sup>th</sup>. This means they have \$390 over the amount they can carry over to the next plan year beginning on July 1<sup>st</sup>. If they spend the \$390 through the runout period on costs incurred during the plan year 7/1 - 6/30, they would just carry over the \$390 to the new plan year and not lose anything. If they did not file any claims throughout the runout, they would lose \$390*

**Basic Life and AD&D Insurance**

Town pays 100% of employee’s premium.

- Life Benefit – 1x your Base Annual Earnings, rounded to the next higher \$1,000 to a maximum of \$75,000
- AD&D Benefit – 1x your Base Annual Earnings, rounded to the next higher \$1,000 to a maximum of \$75,000
- Age Reduction – Benefits are reduced by 35% of the original amount at age 65, and further reduce to 50% at age 70. All benefits terminate at retirement.

**General Pension**

Town pays 8% of gross salary into a pension plan for Administrative, Public Works, WWTP and WTP. Eligible after six (6) months. Plan year is January 1 – December 31.

**Employer Contributions:**

You become vested in your Employer Contributions account under a “6-year graded vesting schedule.” Under this vesting schedule, you will have complete ownership interest in your Employer Contributions once you have complete six (6) Years of Vesting Service. Prior to the completion of six Years of Vesting Service, you will be vested in your Employer Contribution account under the following schedule:

<u>Years of Vesting Service</u>	<u>Percentage</u>
0 – 1	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

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**Exception to vesting schedule:**

The above vesting schedule no longer applies once you reach Normal Retirement Age (65) under the Plan. Thus, if you are still employed with us at Normal Retirement Age, you will automatically become 100% fully vested in all contributions under the Plan. You will also be fully vested in your entire account balance (regardless of the Plan's vesting schedule) if the plan is terminated. In addition, if you:

- Die
  - Terminate employment due to becoming Disabled
  - Attain Early Retirement Age (55 with completion of 10 years of service – subject to early withdrawal penalty tax if under 59 ½) under the Plan
- while you are still employed with us, you will automatically become 100% vested.

**Forfeiture of nonvested benefits:**

If you terminate employment before you become fully vested in your Plan benefits, you will be entitled to receive a distribution of your *vested* benefits under the Plan. Your non-vested benefits will be *forfeited* as described below. You are not entitled to receive a distribution of your non-vested benefits.

If you terminate employment at a time when you are only partially-vested (or totally non-vested) in any of your Plan benefits, how the Plan treats your non-vested balance will depend on whether you take a distribution when you terminate employment.

*More details can be found in your Summary Plan Description*

**Police Pension**

Police Officers are enrolled in Delaware State Pension Plan – 7 % of base salary withheld; Town pays 12.74% of base salary (varies) each year into plan.

The Police Pension is managed and maintained by the State of Delaware Office of Pensions.

**Vacation** (*amended July 1, 2021*)

All full-time employees are eligible for vacation time. The accrual schedule is:

<b>Years Of Service</b>	<b>Hours Per Year</b>	<b>Days Per Year</b>	<b>Hrs. Per Month</b>
0 thru 5	96 Hrs.	12 days	8 hours
6 thru 10	144 Hrs.	18 days	12 hours
11 thru 20	192 Hrs.	24 days	16 hours
21 +	240 Hrs.	30 days	20 hours

You must be employed for 1 year before vacation time is available for use. If an employee terminates their employment, before they have completed 1 year of service, they are not eligible to receive their accrued vacation balance. Payout of vacation time will be paid to full time employees terminated that have completed a minimum of 1 year of service and provide two weeks written notice.

## **Town of Delmar Full-Time Employee Benefits**

### **Sick Leave**

Accumulated at 8 hours per month; maximum accrual of 720 hours. Eligible for paid sick leave upon completion of probationary period. A maximum of 40 hours of sick leave per calendar year can be used for immediate family illness or medical appointment. Eligible employees can enroll annually in the Sick Leave Bank program to receive sick leave donations for qualifying uses.

Accrued Sick Leave, not to exceed a maximum of 200 hours shall be paid out to an employee that separates from duty after not less than 20 years of service. The hourly rate for the payout shall be reduced to ½ of the employee's current hourly rate.

### **Paid Holidays** *(amended July 1, 2021)*

Eligible upon completion of probationary period, employees receive thirteen (13) paid holidays per year:

- New Year's Day
- Martin Luther King Day
- President's Day
- Good Friday
- Memorial Day
- Juneteenth
- July 4<sup>th</sup>
- Labor Day
- Veterans Day
- Thanksgiving Day
- Thanksgiving Friday
- Christmas Eve
- Christmas Day

### **Tuition Assistance**

Maximum of twelve (12) credit hours per fiscal year if grade is C or better. Courses must be related to the position or part of a degree program that relates to the position and approved by Department Head and Town Manager.

### **Direct Deposit**

The Town of Delmar will direct deposit your salary into 1 or more of your personal accounts including, checking, savings, credit union, etc.

### **AFLAC**

Premium payments can be made through weekly payroll deduction.

Representative: Kevin Bowen  
443-880-3860  
[Howard\\_bowen@us.aflac.com](mailto:Howard_bowen@us.aflac.com)

### **Home Buying Benefit**

Live near your work program - If you purchase a home within the corporate town limits of Delmar, the Town will pay \$1,000 towards your closing costs.

### **Motor Vehicle Records Review**

The Town of Delmar has a Motor Vehicle Review policy to evaluate employees and prospective employees motor vehicle records for the previous 3-year period. Results of this review may determine employment eligibility or continuation. Employees and prospective employees are

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required to sign an Authorization form to review MVR.

**Random Drug and Alcohol Screening**

The Town of Delmar conducts random drug and alcohol screenings on site. All new hires are subject to pre-employment drug screen and physical prior to their conditional offer becoming an actual offer from the Town.

**Health Advocate**

Designated Health Advocate service is provided by our broker (One Digital) to assist employees with any issues concerning health, dental, life, vision, etc.