

All data as of 07/09/2024		BARGAINING UNITS											
Please see MOU/Agreements or Benefit Summary Sheets on the City's website for more information. Questions, please contact Human Resources at HumanResourcesGroup@cityofvacaville.com or 707-449-5101.		Department Heads (DH) (Including City Manager and City Attorney)			Administrative Managers Group (AMG)	Vacaville Managers Organization (VMO)	Vacaville City Employees Association (VCEA)	Local 39, Stationary Engineers (L39)	Vacaville Police Officers Association (VPOA)	Vacaville Police Managers Association (VPMA)	Fire Managers Group (FMG)	Vacaville Firefighters Association (VFA)	
		Police Chief	Fire Chief	Misc.	Misc.	Misc.	Misc.	Misc.	Misc.	Safety	Safety	Safety	Safety
BENEFITS		1000	1000	1000	2000, 2100	3000, 3100	5100	4100	7600	7500	7000, 7100	6000	6100
BU CODE FROM SALARY SCHEDULE		1000	1000	1000	2000, 2100	3000, 3100	5100	4100	7600	7500	7000, 7100	6000	6100
PERS (non-pooled) fy 24/25 (see benefit summary sheets for retirement benefit formulas)	Classic EE's:												
	Employer - Normal Cost	18.480%	18.480%	9.070%	9.070%	9.070%	10.070%	10.070%	10.070%	18.480%	18.480%	18.480%	18.480%
	Employer - Unfunded (UAL)	45.780%	45.780%	24.490%	24.490%	24.490%	24.490%	24.490%	24.490%	45.780%	45.780%	45.780%	45.780%
	Employee	9.000%	9.000%	7.000%	7.000%	7.000%	7.000%	7.000%	7.000%	9.000%	9.000%	9.000%	9.000%
	Employee (cost share)	3.000%	3.000%	1.000%	1.000%	1.000%	0.000%	0.000%	0.000%	3.000%	3.000%	3.000%	3.000%
	PEPRA/New EE's:												
	Employer - Normal Cost	21.480%	21.480%	9.570%	9.570%	9.570%	10.070%	10.070%	10.070%	21.480%	21.480%	21.480%	21.480%
	Employer - Unfunded (UAL)	45.780%	45.780%	24.490%	24.490%	24.490%	24.490%	24.490%	24.490%	45.780%	45.780%	45.780%	45.780%
	Employee (50% TNC)	13.250%	13.250%	7.500%	7.500%	7.500%	7.500%	7.500%	7.500%	13.250%	13.250%	13.250%	13.250%
	Employee (cost share)	0.000%	0.000%	0.500%	0.500%	0.500%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
Comments	All cost sharing noted above is by CalPERS contract amendment effective 8/16/2016. Employer rates above have been reduced by cost share (where applicable).												
PARS* fy 24/25*	Employer - Normal Cost	n/a	n/a	1.990%	1.990%	1.990%	1.990%	1.990%	n/a	n/a	n/a	n/a	
	Employer - Unfunded (UAL)	n/a	n/a	34.060%	34.060%	34.060%	34.060%	34.060%	n/a	n/a	n/a	n/a	
	Employee	n/a	n/a	2.000%	2.000%	2.000%	2.000%	2.000%	n/a	n/a	n/a	n/a	
	Comments	*PARS is a closed plan due to PEPRA, NO new participants after 12/31/12 hire date.											
DEFERRED COMPENSATION	Employer max match	6.00%	6.00%	6.00%	6.00%	6.00%	1.00%	1.00%	n/a	n/a	1.00%	5.00%	1.00% (2% for Captains)
	Contr. Required from EE	4.00%	4.00%	4.00%	4.00%	4.00%	n/a	n/a	n/a	n/a	1.00%	3.00%	0.00% (1% for Captains)
LIFE/AD&D INSURANCE (Basic = 100% ER Paid)	Policy Amount	\$150,000.00						\$50,000.00		\$75,000.00			
	Employer	LIFE = \$0.0526 cents per \$1,000 of benefit; AD&D = \$0.0184 cents per \$1,000 benefit											
LONG TERM DISABILITY INSURANCE (100% ER Paid for Misc. groups only)	Max Monthly Benefit	n/a	n/a	66.67% up to \$10K	66.67% up to \$10K	66.67% up to \$10K	66.67% up to \$10K	66.67% up to \$10K	n/a	n/a	n/a	n/a	n/a
	Elimination Period	n/a	n/a	90 days	90 days	90 days	90 days	90 days	n/a	n/a	n/a	n/a	n/a
	Employer	\$0.464 cents per \$100 of benefit											
RETIREMENT HEALTH SAVINGS ACCOUNT	If hired on or after 12/01/2018, the City will contribute the following to a Retiree Health Savings account. Upon completion of initial probationary period through 5th year of City Service = \$600/Annual Upon completion of 5 years of City service = \$840/Annual Upon completion of 7 years of City service = \$960/Annual Upon completion of 10+ years of City service = \$1,200/Annual								If hired on or after 01/01/2020, the City will contribute the following to a Retiree Health Savings account. Upon completion of initial probationary period through 5th year of City Service = \$600/Annual Upon completion of 5 years of City service = \$840/Annual Upon completion of 7 years of City service = \$960/Annual Upon completion of 10+ years of City service = \$1,200/Annual				
HEALTH (CalPERS) Employer Maximums (2024 cal year):	Single: \$868.20/mo Double: \$1,736.40/mo Family: \$2,257.32/mo	Same for all employee groups (Equals 85% of the Kaiser Region 1 rates under CalPERS. Employee pays the difference)											
DENTAL (100% ER Paid)	Single = \$53.57/mo Double = \$91.07/mo Family = \$139.29/mo	Same for all employee groups											
VISION (100% ER Paid)	Single = \$5.39/mo Double = \$10.78/mo Family = \$17.35/mo												
EAP	\$4.00 PEPM												