

BENEFITS SUMMARY

VACATION ACCRUAL	<p>An eligible employee shall earn vacation credit each bi-weekly cycle based on the number of hours on pay status at the following rate:</p> <table border="1" data-bbox="583 391 1904 513"> <thead> <tr> <th data-bbox="583 391 911 464">Years of Qualifying Service</th> <th data-bbox="911 391 1115 464">Per Hour on Pay Status*</th> <th data-bbox="1115 391 1551 464">Approximate Yearly Earning**</th> <th data-bbox="1551 391 1904 464">Maximum Accrual Balance</th> </tr> </thead> <tbody> <tr> <td data-bbox="583 464 911 513">Less than 10</td> <td data-bbox="911 464 1115 513">.057692</td> <td data-bbox="1115 464 1551 513">15 days</td> <td data-bbox="1551 464 1904 513">240 hours</td> </tr> </tbody> </table> <p>*Hours on pay status, including paid holidays, but excluding all paid overtime hours. **Full time rate.</p>	Years of Qualifying Service	Per Hour on Pay Status*	Approximate Yearly Earning**	Maximum Accrual Balance	Less than 10	.057692	15 days	240 hours
Years of Qualifying Service	Per Hour on Pay Status*	Approximate Yearly Earning**	Maximum Accrual Balance						
Less than 10	.057692	15 days	240 hours						
SICK LEAVE ACCRUAL	<p>An eligible employee shall earn sick leave credit at the rate of .046154 hours per hour on pay status, including paid holiday hours but excluding all paid overtime hours.</p>								
DENTAL INSURANCE	<p>Cost 100% covered by UC.</p>								
VISION INSURANCE	<p>Cost 100% covered by UC.</p>								
BASIC LIFE INSURANCE	<p>Automatic enrollment. Basic Life cost 100% covered by UC.</p>								
BASIC DISABILITY	<p>Automatic enrollment. Basic Disability cost 100% covered by UC.</p>								
MEDICAL INSURANCE	<p>You and UC share the costs of your medical plan premiums — except for CORE, which is paid for entirely by UC. Your share of the premium depends on your full-time salary rate, the plan you choose, your level of coverage, and your employee group. Refer to page 2 of this document to see the monthly employee contributions for UC medical plans in 2024.</p>								
PRIMARY RETIREMENT PLAN	<p>2016 Retirement Choice Program (Pension Choice and Savings Choice) - You must make your selection within 90 days.</p> <p>Savings Choice: Employee contributes 7% and UC contributes 8% up to the annual IRS pay maximum.</p> <p>Pension Choice: Employee contributes 7% and UC contributes a portion of your eligible pay, as determined by the UC Regents, up to the PEPRA maximum.</p>								
SUPPLEMENTAL RETIREMENT PLANS	<p>Option to enroll in voluntary Retirement Savings Programs record kept by Fidelity including: 403(b), 457(b), and Defined Contribution Plan (DCP) after-tax retirement savings plan.</p>								
SUPPLEMENTAL BENEFITS	<p>Option to enroll in employee paid supplemental benefits including: Voluntary Short-Term Disability, Voluntary Long-Term Disability, Supplemental Life, Dependent Life, Accidental Death & Dismemberment, Supplemental Health Plans, Health Flexible Spending Account, Dependent Care Flexible Spending Account, Legal Plan. Visit https://ucnet.universityofcalifornia.edu/ for more information.</p>								

MEDICAL PLAN OPTIONS BY PAY BANDS

Choose the appropriate salary tier below to see the monthly employee contributions for UC medical plans in 2024.

PAY BAND 1					PAY BAND 2			
Medical Plans – \$68,000 and under					Medical Plans – \$68,001 to \$136,000			
	Self	Self + Child(ren)	Self + Adult	Self + Adult & Child(ren)	Self	Self + Child(ren)	Self + Adult	Self + Adult & Child(ren)
UC Blue & Gold HMO	\$99.69	\$171.78	\$251.07	\$294.08	\$144.81	\$240.50	\$338.23	\$411.79
Kaiser HMO	\$36.49	\$65.60	\$88.24	\$111.30	\$84.69	\$145.69	\$175.40	\$229.01
UC Health Savings Plan (HSA) PPO	\$79.26	\$129.75	\$180.81	\$227.92	\$186.73	\$305.61	\$436.31	\$546.62
UC Care PPO	\$212.95	\$380.49	\$514.84	\$682.95	\$261.05	\$466.43	\$621.03	\$827.07
CORE PPO	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PAY BAND 3					PAY BAND 4			
Medical Plans – \$136,001 to \$204,000					Medical Plans – Over \$204,000			
	Self	Self + Child(ren)	Self + Adult	Self + Adult & Child(ren)	Self	Self + Child(ren)	Self + Adult	Self + Adult & Child(ren)
UC Blue & Gold HMO	\$191.10	\$341.83	\$470.10	\$619.48	\$239.04	\$427.59	\$562.87	\$749.68
Kaiser HMO	\$134.16	\$241.20	\$398.20	\$496.54	\$185.38	\$333.30	\$539.17	\$676.08
UC Health Savings Plan (HSA)	\$297.01	\$486.08	\$665.28	\$842.96	\$411.20	\$672.98	\$902.52	\$1,149.94
UC Care PPO	\$310.41	\$554.63	\$716.19	\$961.08	\$361.52	\$645.96	\$814.79	\$1,099.90
CORE PPO	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0