

**Town of Underhill
Employee Benefits
As of January 1, 2018**

Benefit	Minimum Required Hours	Summary	Type	Total Monthly Cost	Amount Paid by Town	Amount Paid by Employee
Health Insurance - Under 65 yrs	30.0	BCBS Platinum Plan \$250/\$500 deductible - stacked \$1300/\$2600 Out of Pocket + \$1300/\$2600 RX	Single	\$ 751.92	\$ 751.92	\$ -
			2-Person	\$ 1,503.84	\$ 1,503.84	\$ -
			Family	\$ 2,112.90	\$ 2,112.90	\$ -
Health Insurance - 65 yrs and over	30.0	Medicare, Medicare Supplemental, & RX Copays and deductibles set by Medicare - for employees 65 +	Single	\$ 424.93	\$ 424.93	\$ -
			2-Person	\$ 849.86	\$ 849.86	\$ -
			Family	N/A	N/A	N/A
Health Reimbursement Account		HRA Annual Contribution - BCBS or Medicare	Single	N/A	\$ 2,600.00	\$ -
			2-Person	N/A	\$ 5,200.00	\$ -
			Family	N/A	\$ 5,200.00	\$ -
Dental Insurance	30.0	100% normal dental 50% orthodontic No deductible	Single	\$ 36.31	\$ 36.31	\$ -
			2-Person	\$ 69.16	\$ 69.16	\$ -
			Family	\$ 130.07	\$ 130.07	\$ -
Vision Insurance	30.0	Eye exam every 12 months - free 1 pr eyeglasses - various copays	Single	\$ 10.12	\$ 10.12	\$ -
			2-Person	\$ 14.67	\$ 14.67	\$ -
			Family	\$ 26.30	\$ 26.30	\$ -
Life Insurance - Under 65 yrs old	30.0	\$10,000 term life insurance \$10,000 term AD&D	All	\$ 2.70	\$ 2.70	\$ -
Life Insurance - 65 yrs old and over	30.0	\$5,000 term life insurance \$5,000 term AD&D	All	\$ 1.35	\$ 1.35	\$ -
Short Term Disability	30.0	60% of earnings up to \$500/month 7 day eligibility period Up to 25 weeks	All	Costs vary based on salary and age. Currently averages \$10 per month. Entirely paid by the town.		
Long Term Disability	30.0	60% of earnings up to \$4,000/month 180 day elimination period Reduced benefits age 60 and up	All	Costs vary based on salary and age. Currently averages \$17 per month. Entirely paid by the town.		
Retirement	24.0	Vermont Municipal Employees Retirement System	All	17.25%	7.250%	10.000%
457 Deferred Compensation Plan	None	State of Vermont Plan Prudential Retirement Plan	All	Employee contributions only. No municipal contribution.		
EAP	None	Employee Assistance Program	All	Free	Free	Free
Vacation	30.0	3 weeks per year plus one day each year after 10 years: 80 hours carryover				
Holiday	30.0	11 holidays plus 1 floater holiday				
Paid Time Off/Sick	30.0	1 week per year. Carry over up to 160 hours.				
Sick Leave	Statute	Sick leave for PT employees per statute and based on hours and schedule. See handbook				
On Call	40.0	\$2,000 per season on call bonus Season = December thru March				
Clothing Allowance	40.0	Full time road crew employees receive an annual allowance for work clothing.		\$ 600.00	\$ 600.00	\$ -
In Lieu Of Health Ins. - Additional compensation in lieu of health insurance	30.0	If covered by other insurance. Proof of coverage required. 36.5% of premium - adjusted each January	Single	\$ 3,296.45	\$ 126.79	
			2-Person	\$ 6,592.90	\$ 253.57	
			Family	\$ 9,263.04	\$ 356.27	