

**SUMMARY OF CURRENT BENEFITS AND LABOR
ATTACHMENT 6
SECTION 1**

Amendment 000003

Summary of Current Benefits for Union Employees ONLY

Benefit	Eligibility	Level of Coverage	Amount of Coverage
Medical (Group Health)	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	<p>\$500 Deductible for Individual & \$1500 family</p> <p>Max out of Pocket for Individual \$2,000 and \$4,000 family (In-Network)</p> <p>Non-Network is \$4,000 (Individual)\$8,000 (Family)</p> <p>Physician Office Visits:</p> <ul style="list-style-type: none"> • In Network \$20 encounter Fee • Non-network 60%-deductible applies. • Co-insurance: In Network: 80% • Non-network: 60% <p>Unlimited Lifetime Maximum</p> <p>Prescription Drug:</p> <p>\$10 Generic, \$35 Preferred brand name, \$60 Non-Preferred brand name</p>
Dental	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	Deductible \$50/150 (Single/Fam. Per calendar yr.) Prev. Care – 80%, Major – 50% W/ \$1000 per calendar yr. max.
Vision	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	<p>EXAM - \$15.00 In Network. MATERIALS - \$30 \$130.00 Toward Frames & \$105.00 Toward Contacts</p> <p>Premium is 80% Employer/ 20% Employee</p>
Accidental Death and Dismemberment	Regular full-time employee. 1 st of the month following date of employment	Employee Only	Employee Max. 100,000 Min. 10,000 - Premium is 80% Employer/ 20% Employee

Basic Life Insurance	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	ELECTIVE AND PREMIUM IS PAID 80% Employer/20% Employee
Short Term Disability	Regular full-time employee. 1 st of the month following date of employment	Employee Only	ELECTIVE AND PREMIUM IS PAID BY EMPLOYEE MAX DRAW 12 WKS
Long Term disability	Regular full-time employee. 1 st of the month following date of employment	Employee Only	ELECTIVE AND PREMIUM IS PAID BY EMPLOYEE \$100 MIN. \$5,000.00 MONTHLY MAX.
401k Retirement Savings Plan	Regular full-time employee. 1 st of the month following date of employment	Employee Only	EMPLOYEE CONTRIBUTION ONLY. NO COMPANY MATCH
Military Leave	Regular full-time employee.	Employee Only	10 DAYS PER CALENDAR YEAR WITH PRIOR APPROVAL OF PRESIDENT
Jury duty	Regular full-time employee.	Employee Only	ES&H – (5) CALENDAR DAYS EVERY (2) YRS.
Educational Assistance	Regular full-time employee after completion of 1 year service.	Employee Only	NOT OFFERED

<p>PTO (Paid Time Off – covering holidays, vacation sick and personal time)</p>	<p>Regular full-time exempt employees accrue vacation from date of hire.</p>	<p>Employee Only</p>	<p>Vacation Leave 1 – 5 YRS = 10 DAYS 6 – 10 YRS = 15 DAYS 11 – 25 YRS = 20 DAYS 25 OR MORE = 25 DAYS</p> <p>80 HRS. VACATION MAY BE CARRIED OVER</p> <p>Sick Leave 1 ¼ DAYS PER MONTH</p> <p>Holidays 10 PAID</p>
<p>Bereavement</p>	<p>Regular full-time employee.</p>	<p>Employee Only</p>	<p>2 DAYS WITH PAY</p> <p>3 DAYS WITH PAY IF OVER 300 MILES AWAY</p> <p>IMMEDIATE FAMILY ONLY</p>
<p>Merit Increases</p>	<p>Regular full-time employee.</p>	<p>Employee Only</p>	<p>ANNUALLY BASED ON CBA</p>
<p>FSA (Flexible spending Account)</p>	<p>Regular full-time employee. 1st of the month following date of employment</p>	<p>Employee Only</p>	<p>NOT OFFERED</p>
<p>Pension</p>	<p>This is an addition to all other labor cost</p>	<p>Union Employee's</p>	<p><u>Laborer's</u> – Pension is \$2.00/hr. paid by contactor on all hours worked including vacation, sick and holiday time.</p> <p><u>Teamster's</u> - Pension is \$3.12/hr. paid by contactor on all hours worked including vacation, sick and holiday time.</p> <p><u>Operating Engineers</u> – Pension is \$4.25/hr. and the Apprenticeship fee is \$0.40/hr. paid by contractor on all hours worked including vacation, sick and holiday.</p>

Summary of Current Benefits SCA Employees

Benefit	Eligibility	Level of Coverage	Amount of Coverage
Medical (Group)	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents. *See Medical Benefit Allowance	<p>\$500 Deductible for Individual & \$1500 family</p> <p>Max out of Pocket for Individual \$2,000 and \$4,000 family (In-Network)</p> <p>Non-Network is \$4,000 (Individual)\$8,000 (Family)</p> <p>Physician Office Visits:</p> <ul style="list-style-type: none"> • In Network \$20 encounter Fee • Non-network 60%-deductible applies. • Co-insurance: In Network: 80% • Non-network: 60% <p>Unlimited Lifetime Maximum</p> <p>Prescription Drug:</p> <p>\$10 Generic, \$35 Preferred brand name, \$60 Non-Preferred brand name</p>
Dental	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	Deductible \$50/150 (Single/Fam. Per calendar yr.) Prev. Care – 80%, Major – 50% W/ \$1000 per calendar yr. max.
Vision	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	EXAM - \$15.00 In Network. MATERIALS - \$30 \$130.00 Toward Frames & \$105.00 Toward Contacts
Accidental Death and Dismemberment	Regular full-time employee. 1 st of the month following date of employment	Employee Only	Employee Max. 100,000 Min. 10,000 ELECTIVE AND PREMIUM IS PAID BY EMPLOYEE

Basic Life Insurance	Regular full-time employee. 1 st of the month following date of employment	Employee, Spouse and Dependents.	ELECTIVE AND PREMIUM IS PAID BY EMPLOYEE
Short Term Disability	Regular full-time employee. 1 st of the month following date of employment	Employee Only	ELECTIVE AND PREMIUM IS PAID BY EMPLOYEE MAX DRAW 12 WKS
Long Term disability	Regular full-time employee. 1 st of the month following date of employment	Employee Only	ELECTIVE AND PREMIUM IS PAID BY EMPLOYEE \$100 MIN. \$5,000.00 MONTHLY MAX.
401k Retirement Savings Plan	Regular full-time employee. 1 st of the month following date of employment	Employee Only	EMPLOYEE CONTRIBUTION WITH COMPANY MATCH UP TO 4% MAX.
Military Leave	Regular full-time employee.	Employee Only	10 DAYS PER CALENDAR YEAR WITH PRIOR APPROVAL OF PRESIDENT
Jury duty	Regular full-time employee.	Employee Only	(5) CALENDAR DAYS EVERY (2) YRS.
Educational Assistance	Regular full-time employee after completion of 1 year service.	Employee Only	NOT OFFERED

PTO (Paid Time Off – covering holidays, vacation sick and personal time)	Regular full-time exempt employees accrue vacation from date of hire.	Employee Only SCA -EMPLOYEE	Vacation Leave : SCA Accrual is 2.31 Hrs. of (PTO) per 40 Hr. week 80 HRS. VACATION MAY BE CARRIED OVER Sick Leave NONE Holidays 10 PAID
Bereavement	Regular full-time employee.	Employee Only	2 DAYS WITH PAY 3 DAYS WITH PAY IF OVER 300 MILES AWAY IMMEDIATE FAMILY ONLY
Merit Increases	Regular full-time employee.	Employee Only	BASED ON SCA
FSA (Flexible spending Account)	Regular full-time employee. 1 st of the month following date of employment	Employee Only	NOT OFFERED

***SCA Employees** - have a monthly medical benefit allowance of \$643.07. This translates to an annual benefit allowance of \$7,716.84, to be used for Medical, Dental and Vision etc. This translates to a weekly benefit allowance amount of \$148.40. The employee is responsible for any amount over the weekly benefit allowance. If the employee has any allowance remaining it will go to the employee.

CURRENT LABOR CATEGORIES WITH FTEs, AVERAGE YEARS OF SERVICE, ANNUAL SALARY RANGE, AND AVERAGE HOURLY RATES FOR NON-KEY PERSONNEL

Job Title	E/N	Current FTEs	Average Years of Service	Annual Salary Range	Average Hourly Rate
Supply Technician	N	1	5	\$37,000 - \$46,000	\$20.11

E - Exempt
N - Nonexempt