

SUMMARY OF BENEFITS

ANOKA COUNTY COMMUNITY ACTION PROGRAM

Refer to ACCAP Personnel Policies

Benefits are subject to change per management recommendation and approval of Governing Board.

BENEFIT ELIGIBILITY

- * **REGULAR STATUS EMPLOYEES** scheduled to work at least 20 hours or more
- * **FULLTIME EMPLOYEES** who work 1,500 hours per year must work at least 30 hours per week for 52 weeks of the year or 40 hours for 37.5 weeks per year

<p><u>HOLIDAYS:*</u></p> <ul style="list-style-type: none"> ● 10 Holidays Per Year ● Based on regularly scheduled hours of work ● Part time – Paid scheduled hours 	<p><u>SICK LEAVE:*</u></p> <ul style="list-style-type: none"> ● 9 days per year ● Accrual based on actual hours worked ● Must have completed Orientation Period to use ● May use for immediate family ● Maximum 800 hours ● Accrued at least 400 hrs. of sick, you will be allowed to convert up to 40 hrs. to vacation. 								
<p><u>VACATION:*</u></p> <ul style="list-style-type: none"> ● Accrual based on <u>actual hours</u> worked ● Must have completed Orientation period ● Not accrued during layoff or any other unpaid leave ● Maximum accrual – 240 hours <table border="0" style="margin-left: 40px;"> <tr> <td>Year 1 – 3 FTE</td> <td>13 days – per year</td> </tr> <tr> <td>Year 4 – 7 FTE</td> <td>16 days – per year</td> </tr> <tr> <td>Year 8 – 12 FTE</td> <td>19 days – per year</td> </tr> <tr> <td>Year 13+ FTE</td> <td>22 days – per year</td> </tr> </table>	Year 1 – 3 FTE	13 days – per year	Year 4 – 7 FTE	16 days – per year	Year 8 – 12 FTE	19 days – per year	Year 13+ FTE	22 days – per year	<p><u>FUNERAL LEAVE:*</u></p> <ul style="list-style-type: none"> ● One day with pay for non-immediate family member with approval of supervisor. ● Three days with pay for immediate family member with approval of supervisor. <p><u>JURY DUTY:*</u></p> <ul style="list-style-type: none"> ● Employees summoned for Jury Duty. ● Jury pay must be reimbursed to ACCAP.
Year 1 – 3 FTE	13 days – per year								
Year 4 – 7 FTE	16 days – per year								
Year 8 – 12 FTE	19 days – per year								
Year 13+ FTE	22 days – per year								
<p><u>BONE MARROW TRANSPLANT LEAVE:*</u></p> <ul style="list-style-type: none"> ● Up to 40 hours of paid leave to employees who normally work at least 20 hours per week for purposes of donating bone marrow. 	<p><u>PARENTAL LEAVE:*</u></p> <ul style="list-style-type: none"> ● Unpaid Maternity and Paternity Leave granted for up to twelve weeks. 								
<p><u>EMPLOYEE SALARY ADVANCE:*</u></p> <ul style="list-style-type: none"> ● For a bona fide emergency and approval from Executive Director. ● Payroll deductions – Must be paid back within one year. ● Subject to limits (advances on banked benefits of vacation and half of sick) ● 0% interest 	<p><u>EMPLOYEE DEVELOPMENT:*</u></p> <ul style="list-style-type: none"> ● On site and off site employee mandatory education and training will be provided if it meets federal and other funding source requirements. ● Tuition Refund: ACCAP may refund employees up to 50% of college costs, with restrictions, from an accredited educational institution for higher education. See Personnel Policies for full policy. 								
<p><u>FAMILY MEDICAL LEAVE:*</u></p> <ul style="list-style-type: none"> ● Employees who are eligible may be granted FMLA Leave without pay for up to 12 weeks per rolling calendar year for prolonged illness of employee or employee’s family member. 	<p><u>TAX SHELTERED 403(b):*</u></p> <ul style="list-style-type: none"> ● ACCAP will match a regular status employee’s contribution dollar for dollar to a TSA up to 8% of their annual salary or \$3,000 per year after completion of 1,000 paid hours. All employees who 								

	work 20 hours or more may participate in the 403(b) plan.
<u>CAFETERIA PLAN:**</u> <ul style="list-style-type: none"> Pre-Tax dollar plan for ACCAP Insurance Premiums, HSA, Vision expenses, Dental expenses, and Dependent Care (not eligible for medical expenses). 	<u>EMPLOYEE APPRECIATION EVENT:*</u> <ul style="list-style-type: none"> Agency Winter Brunch September All Staff Meeting
<u>“ON CALL” STATUS PAY:*</u> <ul style="list-style-type: none"> Compensation for employees who work “on call status”. 	<u>COST OF LIVING RAISE:*</u> Cost of Living increase given to regular status employees when funding sources permit.
<u>DISABILITY INSURANCE:**</u> <ul style="list-style-type: none"> Carrier: MetLife Short term: - 26 weeks – 60% Gross pay, \$400 max Long term – Determined by carrier 	<u>RETENTION PAY*</u> Employees that have been with ACCAP for five years or more are given retention pay of amounts annually approved by the Governing Board.
<u>EMPLOYEE EXPENSES + MILEAGE:*</u> <ul style="list-style-type: none"> Employees are paid expenses over mileage reimbursement per federal rate. 	<u>WORKERS COMPENSATION:*</u> <ul style="list-style-type: none"> Carrier: Accident Fund – 200 North Grand Ave, Lansing, MI 48933
<u>SEVERANCE:*</u> <ul style="list-style-type: none"> Employees leaving in good standing will get unused vacation + 50% of unused sick leave up to 200 hours. Employees employed over 15 years will receive all unused sick leave. 	
ACCAP is an “at will” employer.	
<u>INSURANCE BENEFITS**:</u> <u>ELIGIBILITY:</u> <ul style="list-style-type: none"> Medical, Dental, and Life, insurance begins the first of the month – 30 days after date of hire. Employees may have the option of reimbursement under certain circumstances (covered under parent’s/spouse’s employer plan or Medicare). ACCAP contributes \$640.77 per employee toward medical, dental, and life insurance premiums or \$862.07 if children are covered under medical. Employee contributes the remaining premium amounts owed. Health Savings Account (HSA) of \$1,000 for single & \$1,500 for single + per year (prorated based on eligibility date). The premium amounts stated are monthly. These amounts are subject to change each enrollment year. 	<u>LIFE INSURANCE:</u> <ul style="list-style-type: none"> Carrier: SunLife \$10,000 term life insurance for employee Optional term life offered for employee Optional term life offered for spouse and children <u>MEDICAL INSURANCE:</u> <ul style="list-style-type: none"> Carrier: PreferredOne Single - \$568.20 Family - \$1,119.65 <u>DENTAL INSURANCE:</u> <ul style="list-style-type: none"> Carrier: HealthPartners Single - \$36.40 Single + 1 - \$70.95

	<ul style="list-style-type: none">● Family - \$115.52
--	---

For further information, please go to SharePoint or email hr@accap.org.