

# COUNTY OF SAN DIEGO SUMMARY OF BENEFITS



### **Elected Official**

Here is your customized summary of benefit options at the County of San Diego. Some of these benefits are provided by the County automatically, while others will require you to choose them, using either County-provided Flex Credits or by paying out-of-pocket.

# What are Flex Credits, how many do I get, and how do I spend them?

Flex Credits are a per pay-period allowance. They have no cash value. Most Flex Credits are used to cover your medical plan selections. The table below lists the costs for the various health plans offered by the County, aligned with your personal Flex Credit allowance. You will see that your amounts change as you adjust the number of dependents you select.

#### **Your Flex Credits Per Pay Period**

Employee Only	Employee + 1 Dependent	Employee + 2 or more Dependents
\$555.50	\$807.00	\$1,130.00

Depending on your medical plan selections, you will either have surplus Flex Credits to use to select additional benefits below, or you will need to supplement your choices with out-of-pocket contributions.

Insurance Plans and Their Costs Per Pay Period		Employee Only	Employee + 1 Dependent	Employee + 2 or more Dependents
Medical Plans	Kaiser Permanente HMO	\$424.72	\$849.44	\$1,201.96
	Kaiser Everyday Care HMO	\$389.72	\$779.44	\$1,102.91
	Kaiser Permanente HDHP	\$331.54	\$663.08	\$938.26
	UnitedHealthcare SignatureValue CV Performance HMO	\$460.83	\$921.30	\$1,303.45
	UnitedHealthcare SignatureValue CS VEBA Alliance HMO	\$442.13	\$883.90	\$1,250.53
	UnitedHealthcare/UMR Select Plus PPO	\$845.53	\$1,691.07	\$2,392.92
	UnitedHealthcare Harmony HDHP	\$280.74	\$558.25	\$787.26
	SIMNSA Mexico HMO (See eligibility requirements)	\$144.31	\$253.48	\$372.59
Dental Plans -	Delta Dental PPO	\$23.88	\$47.74	\$68.16
	Delta Dental DHMO	\$9.07	\$16.39	\$21.00
Vision Plans	VSP Vision Service Plan	\$4.07	\$9.41	\$12.76





Where do Excess Flex Credits go if I waive my health plan or if there are any left over after my selections are made?

# Are you covered by an HMO or PPO by any employer?

Excess Flex Credits will be directed to a Health Reimbursement Account up to \$5,000.

## Are you covered by Medicare, Medi-CAL, or Tricare?

A maximum of \$500 will be allocated to the Health Care FSA. The remainder of any excess Flex Credits will be forfeited.

# Are you covered under an HDHP by any employer?

Excess Flex Credits will be directed to a Health Savings Account up to the IRS family maximum of \$8,750.

## Are you covered by an individual plan or Covered CA?

A maximum of \$500 will be allocated to the Health Care FSA. The remainder of any excess Flex Credits will be forfeited.

#### Can I get paid out for any unused Flex Credits?

You cannot. Flex Credits have no cash value and can only be applied to your health benefits.

### **Spending Accounts**

Here are the four types of spending accounts for your excess Flex Credits or out-of-pocket contributions, depending on your situation.



This symbol means that there is an option to select, increase, or contribute to coverage options using remaining Flex Credits or by paying out-of-pocket.

#### **Health Care FSA**

You may pay into this account out-of-pocket up to \$3,300 annually if you anticipate additional health care expenses not covered by your benefit plan.

### +

## Dependent Care FSA

If you anticipate childcare expenses, you can contribute excess Flex Credits or out-of-pocket contributions up to \$7,500.

# Health Reimbursement Account

Unused Flex Credits are deposited into this account when you are covered under an employer group health plan that is not a High Deductible Health Plan.

## Health Savings Account

If you are enrolled in a High Deductible Health Plan, excess Flex Credits or out-of-pocket contributions can be deposited here, up to the IRS individual or family maximum contributions.

Updated: 10/1/2025





# Beyond health plan coverage and spending accounts, what other benefits do I receive?

Here's a list of your additional County-provided benefits, some provided at no additional cost to you.



This symbol means that there is an option to select, increase, or contribute to coverage options using remaining Flex Credits or by paying out-of-pocket.

### **Additional Insurances and Coverages**

#### Life Insurance

The County provides you coverage equal to twice your annual salary with a minimum of \$50,000 up to \$1,000,000.

Supplemental coverage up to 6 times your annual salary is available using Flex Credits or by paying out-of-pocket.

# Accidental Death and Dismemberment Insurance

The County provides you coverage equal to twice your annual salary with a minimum of \$50,000 up to \$1,000,000.

Supplemental coverage up to 3 times your annual salary is available using Flex Credits or by paying out-of-pocket.

# Dependent Life & Spousal Life Insurance

The County provides you coverage of \$2,000 for your eligible dependents.

Supplemental Spouse/Domestic Partner coverage for \$10,000 available using flex Credits or by paying out-of-pocket.

### **Long Term Disability**

You are provided a plan that pays 66 2/3% of monthly salary with a maximum benefit of \$12,000 per month. Benefits start 30 days after disability begins and continues to either age 65 or until your disability ends

#### **Critical Illness Insurance**

Employees can use Flex Credits or pay out-of-pocket to enroll in Critical Illness Insurance which pays a lump sum benefit on top of any health insurance benefits for covered diseases or illnesses.





#### Retirement

#### **Pension**

The San Diego County Employees Retirement Association (SDCERA) provides a defined benefit pension plan. Membership in SDCERA is optional for Elected Officials. To become members, Elected Officials must file a declaration with SDCERA no later than thirty (30) days after their first day in office. Elected Officials who do not file a declaration to become a member give up their right to become a member of SDCERA during their current term of office and any consecutive terms. Elected Officials who timely file a declaration with SDCERA become a member of SDCERA on the first day of the calendar month following the filing of the declaration and will contribute to their benefit from each biweekly paycheck. Contact SDCERA's Chief Executive Officer, Tracy Sandoval, at (619) 515 - 6844 for additional information.

### www.SDCERA.org



#### **Deferred Compensation**

You may elect to defer a portion of your compensation to a 457 Plan and/or a 401A Plan. Contact Deferred Compensation through Nationwide Retirement Solutions at (619) 531-5840 for additional information.

### www.MyDCPlan.com



#### **Allowances**

#### **Automobile Allowance**

Elected Officials receive a monthly allowance of \$1,000 for use of a non-County vehicle to conduct County business.

### **Additional Benefits**

#### **Accident Insurance**

With Lincoln Accident Insurance, you can receive a lump-sum payment, paid directly to you, to use at your discretion. It can help with Injuries, Medical Services and Hospitalization. The plan covers over 150 events and is paid directly to you to spend it on what you need. This plan is not eligible to be paid for by Flex Credits.

#### **Hospital Indemnity Insurance**

Lincoln Hospital Indemnity Insurance can help with out-of-pocket costs while you're in the hospital and recovering to help reduce the financial impact while you heal. It covers services and treatments that are a result of an accident, sickness or childbirth. This plan is not eligible to be paid for by Flex Credits.

Union Codes: EO

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Additional details about benefit plans and Flex Credits can be found in the information-packed <u>Employee Benefits Guide</u> or by visiting the <u>Human Resources Benefits website</u>.