

# CITY OF SALINA BENEFIT SUMMARY

## Classified Full-Time Employees

Effective 01/01/2026

CALL- BACK PAY	<ul style="list-style-type: none"><li>Non-exempt employees may be designated as "on standby" in accordance with departmental-specific requirements.</li><li>Non-exempt employees on standby receive \$1.50/hour for each hour of being on standby.</li><li>On observed holidays employees on standby shall receive \$2.50/hour for each hour of being on standby.</li><li>If the employee is called back to work, he or she will receive a minimum of two (2) hours of call-back pay in addition to standby pay.</li><li>Standby hours do not count towards the computation of overtime hours during a work week.</li></ul>
EMPLOYEE ASSISTANCE PROGRAM (EAP)	<b>ComPsych Corporation</b> <ul style="list-style-type: none"><li>Free counseling, legal and financial consultation, work-life assistance and crisis intervention services provided to eligible employees and family members.</li></ul>
FLEXIBLE SPENDING ACCOUNT	<b>ASI Flex</b> <ul style="list-style-type: none"><li>ASI Flex administers the City of Salina's flexible spending account, which allows employees to pay for specified benefits with pre-tax wages.</li><li>Health Care Expenses: Eligible expenses include medical, prescription, hearing, dental, vision, and over-the-counter health care products.</li><li>Dependent Care Expenses: Child or adult day care services.</li></ul>
HEALTH INSURANCE	<p>Comprehensive health coverage includes medical, prescription, and dental coverage.</p> <ul style="list-style-type: none"><li><b>Single Policy:</b> \$143.00/month.</li><li><b>Employee + 1 Policy:</b> \$319.00/month.</li><li><b>Family Policy:</b> \$384.00/month.</li></ul> <p><b>MEDICAL: Blue Cross &amp; Blue Shield of Kansas</b></p> <ul style="list-style-type: none"><li>Co-insurance: The plan pays 50% of allowed charges. When the member's share equals \$2,000 or a maximum of \$4,000 (family), the plan pays 100% of all charges allowed.</li></ul> <p><b>PRESCRIPTION: BCBS Prime Therapeutics</b></p> <ul style="list-style-type: none"><li>Covered prescriptions are paid at 70% with no deductible.</li></ul> <p><b>DENTAL: Delta Dental of Kansas</b></p> <ul style="list-style-type: none"><li>Annual deductible is \$25 per person or \$75 per family for items not covered at 100%.</li><li>Maximum benefit payment for each eligible person per benefit year is \$1,500.</li></ul>
HOLIDAYS	<ul style="list-style-type: none"><li>Twelve (12) paid holidays per year (8 hours per day).</li><li>One (1) paid personal day (8 hours per day).</li></ul>
LIFE INSURANCE	<p><b>Reliance Standard Life Insurance</b></p> <ul style="list-style-type: none"><li>The City of Salina pays the full cost of this life insurance policy. No cost to employee for coverage.</li><li>Coverage is equal to the employee's annual base pay.</li><li>Spouse coverage is \$15,000.</li><li>Dependent children coverage is \$10,000 (<i>age restrictions apply</i>).</li></ul> <p><b>Kansas Public Employees Retirement (KPERS)</b></p> <ul style="list-style-type: none"><li>Eligible employees receive life insurance with coverage equivalent to 1.5 times the employee's annual salary.</li><li>Employees may also elect to purchase <i>Optional Group Life Insurance</i> for themselves, their spouses and children.</li></ul>
LONGEVITY PAY	<ul style="list-style-type: none"><li>After five (5) years of continuous employment, employees will receive an annual payment equal to \$3.50 for each month of service if their overall performance rating has been 'good' or higher on annual evaluations.</li></ul>
OPTIONAL SUPPLEMENTAL BENEFITS	<p><b>AFLAC</b></p> <ul style="list-style-type: none"><li>AFLAC administers supplemental insurance policies: Accident, Cancer Indemnity, and Short-term Disability.</li></ul> <p><b>Vision Care Direct of Kansas</b></p> <ul style="list-style-type: none"><li>In Network Allowance: Frames=\$150.00; Contact Lenses=\$150.00</li></ul>

<b>OPTIONAL SUPPLEMENTAL BENEFITS (CONTINUED)</b>	<ul style="list-style-type: none"> <li>Member Fees: Eye exam= \$15.00; Glasses=\$15.00; Polycarbonate for Kids = \$25.00</li> </ul>		
	<u>Primary Only</u> Silver Complete=\$10.84 Gold Complete= \$14.18 <u>Primary +1</u> Silver Complete=\$17.34 Gold Complete=\$22.68	<u>Primary + Children</u> Silver Complete=\$22.76 Gold Complete=\$29.76 <u>Whole Family</u> Silver Complete=\$32.50 Gold Complete=\$42.50	
<b>OVERTIME PAY</b>	<ul style="list-style-type: none"> <li>Employees shall be compensated at a rate of one and one-half times (1½) the employee's regular rate of pay for hours worked in excess of forty (40) hours in one (1) standard work week.</li> </ul>		
<b>RETIREMENT</b>	<p><b>Kansas Public Employees Retirement (KPERS)</b></p> <ul style="list-style-type: none"> <li>Classified full-time employees are enrolled in Kansas Public Employees Retirement (KPERS) upon start of employment. Benefits include retirement, life insurance, and disability.</li> </ul> <p><b>Mission Square Retirement</b></p> <ul style="list-style-type: none"> <li>Employees may elect to participate in savings plans through Mission Square Retirement.</li> </ul>		
<b>SAVINGS PLANS</b>	<ul style="list-style-type: none"> <li>Savings plans include Salina Municipal Credit Union and Learning Quest.</li> </ul>		
<b>SHIFT DIFFERENTIAL PAY</b>	<ul style="list-style-type: none"> <li>For employees who are required to perform shift work on a regular basis outside of traditional daily schedules as a condition of employment, employees are eligible to receive additional shift differential pay at the rate of \$1.50 per hour worked.</li> <li>Shift differential pay shall be provided for any hourly employee for hours worked during an eight (8) hour, ten (10) hour, or twelve (12) hour shift after 6:00 p.m. and prior to 6:00 a.m.</li> <li>Shift differential pay shall be paid for actual hours worked. If shift differential pay is applicable and authorized overtime occurs in conjunction with the regular workday, the shift differential shall be paid for each hour of overtime worked, and the shift differential pay shall be added to the base hourly rate prior to computing the overtime rate.</li> </ul>		
<b>SICK LEAVE</b>	<ul style="list-style-type: none"> <li>Eight (8) hours per month of service (unlimited accrual).</li> <li>Upon separation, payout of 1/3 after five (5) years of service in good standing.</li> </ul>		
<b>SKILL/ COMPETENCY BASED PAY</b>	<ul style="list-style-type: none"> <li>Skill/competency-based pay system is intended to foster and reward employee development of identified skills and/or competencies.</li> <li>Bilingual pay certification is an additional \$.75/hr.</li> </ul>		
<b>STANDBY HOURS</b>	<ul style="list-style-type: none"> <li>Non-exempt employees on standby receive \$1.50/hour for each hour of being on standby.</li> <li>On observed holidays employees on standby shall receive \$2.50/hour for each hour of being on standby.</li> <li>If the employee is called back to work, he or she will receive a minimum of two (2) hours of call-back pay in addition to standby pay.</li> <li>Standby hours do not count towards the computation of overtime hours during a work week.</li> </ul>		
<b>TRAVEL &amp; TRAINING</b>	<ul style="list-style-type: none"> <li>The City will cover the cost of certain approved work-related workshops and conferences. Professional society dues, registration fees, and tuition expenses may also be paid and/or reimbursed.</li> </ul>		
<b>VACATION</b>	<b>Classified Full-Time</b>	<b>Starting Balance = 48 hours</b>	
	<b>Years of Service</b>	<b>Vacation Hours Earned/Pay Period</b>	<b>Annual Hours</b>
	0 through 0.50 years (Start to 6 mos.)	0	0
	0.50 through 4 years (>6-48 mos.)	3.6924	96
	5 through 9 years (>48-108 mos.)	4.6154	120
	10 through 14 years (>108-168 mos.)	5.5385	144
	15 through 19 years (>168-228 mos.)	6.1539	160
	20 through 23 years (>228 – 276 mos.)	7.0769	184
	24 years and beyond (>276 mos.)	7.6923	200
<b>WELLNESS</b>	<ul style="list-style-type: none"> <li><b>FREE</b> immunizations for Influenza (flu), Tetanus, and Hepatitis B for employees.</li> </ul>		
<i>Benefits are subject to change by state and local officials. For specific details, refer to the employee Personnel Manual or contact the Human Resources Department. This Benefit Summary is neither a contract nor the basis for an implied contract between the City of Salina and any employee or group of employees.</i>			