



Dawson County Benefits at a Glance

Full Time employees are eligible for benefits the 1st of the month following 30 days of employment. The plan year runs from July 1 through June 30. Deductibles and out-of-pocket maximums are on a calendar year (January 1 through December 31).

Dawson County offers the following Benefits to Full Time Employees:

- Cigna HMO and PPO Medical Plans
- Cigna Dental Plan
- Cigna Vision Plan
- Voluntary Life for Employee, Spouse, and Child(ren)
- Short Term Disability
- Long term Disability
- Flexible Spending Account (FSA)
- Dependent Care Flexible Spending Account
- Aflac Supplemental Insurance
- Nationwide Pet Insurance
- 401(a)/457(b) Retirement Plan (Dawson County will match up to 5% of employee contributions; employees are eligible for County match after 90 days of employment)
- Tuition Assistance Program
- 14 Holidays per year
- 1 Floating Holiday per year to be used at employee's discretion
- 40 Hour Annual PTO Payout (full time employees may cash out up to 40 hours once per year provided 20 hour PTO balance remains)
- Dawson County Health Rewards Program—earn up to \$150

Free Employee Benefits Paid for by the County

- County-paid Basic Life Insurance Policy for employees in the amount of \$50,000, \$5,000 for eligible spouse, and \$2,500 for eligible child(ren)
- County-paid Telemedicine Program for employees and their eligible spouse and children
- County-paid Employee Assistance Program for employees and their eligible spouse and children

Holidays:

- New Year's Day
- MLK Day
- Presidents' Day
- Good Friday
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve
- Christmas Day
- New Year's Day
- Floating Holiday

PTO Accrual Rates

| Years of Service | 80 Hour Employee | | 84 Hour Employee | | 96 Hour Employee | |
|------------------|-----------------------|-----------------------------|-----------------------|-----------------------------|-----------------------|-----------------------------|
| | Hours Earned Per Year | Accrual Rate Per Pay Period | Hours Earned Per Year | Accrual Rate Per Pay Period | Hours Earned Per Year | Accrual Rate Per Pay Period |
| 0-1 | 120 | 4.62 | 126 | 4.85 | 144 | 5.54 |
| 2 | 144 | 5.54 | 151 | 5.82 | 173 | 6.65 |
| 3-4 | 160 | 6.15 | 168 | 6.46 | 192 | 7.38 |
| 5-9 | 200 | 7.69 | 210 | 8.08 | 240 | 9.23 |
| 10-14 | 224 | 8.62 | 235 | 9.05 | 269 | 10.34 |
| 15-20 | 240 | 9.23 | 252 | 9.69 | 288 | 11.08 |
| 21-24 | 280 | 10.77 | 294 | 11.31 | 336 | 12.92 |
| 25+ | 320 | 12.31 | 336 | 12.92 | 384 | 14.77 |

Benefit Enrollment Sessions are held the 2nd Wednesday every month at 8:30AM. You will receive information regarding your assigned Benefit Enrollment Session during the onboarding process.

Dawson County provides the following Free Benefits to Part Time Regular Employees:

- County-paid Telemedicine Program for employees and their eligible spouse and children
 - County-paid Employee Assistance Program for employees and their eligible spouse and children
- Benefits become effective the 1st of the month following 30 days of employment*

Dawson County Board of Commissioners



Employer & Employee Insurance Costs
Benefit Plan Year: July 1, 2023 through June 30, 2024

The semi-monthly amounts shown below are based on 24 deductions. For enrollments or changes occurring during the plan year, deductions are adjusted accordingly.

| Cigna OAPIN (HMO) | Total Monthly Premium | Employer Monthly Cost | Percentage paid by County | Employee Monthly Cost | Percentage paid by Employee | Employee Standard Payroll Deduction (per pay period) |
|---|------------------------------|------------------------------|---|------------------------------|------------------------------------|---|
| Employee | 865.77 | 692.62 | 80.00% | 173.15 | 20.00% | 86.58 |
| Employee + Spouse | 1,818.12 | 1,454.50 | 80.00% | 363.62 | 20.00% | 181.81 |
| Employee + Child(ren) | 1,644.77 | 1,315.82 | 80.00% | 328.95 | 20.00% | 164.48 |
| Employee + Family | 2,597.31 | 2,077.85 | 80.00% | 519.46 | 20.00% | 259.73 |
| In-Network Calendar Year Deductible: | | | Out-of-Pocket Calendar Year Limit: | | | |
| Single: | \$1,500 | | Single: | \$4,000 | | |
| Family: | \$4,500 | | Family: | \$8,000 | | |

| Cigna OAP (PPO) | Total Monthly Premium | Employer Monthly Cost | Percentage paid by County | Employee Monthly Cost | Percentage paid by Employee | Employee Standard Payroll Deduction (per pay period) |
|----------------------------------|------------------------------|------------------------------|---|------------------------------|------------------------------------|---|
| Employee | 829.39 | 663.51 | 80.00% | 165.88 | 20.00% | 82.94 |
| Employee + Spouse | 1,741.69 | 1,393.35 | 80.00% | 348.34 | 20.00% | 174.17 |
| Employee + Child(ren) | 1,575.84 | 1,260.67 | 80.00% | 315.17 | 20.00% | 157.59 |
| Employee + Family | 2,488.16 | 1,990.53 | 80.00% | 497.63 | 20.00% | 248.82 |
| Calendar Year Deductible: | | | Out-of-Pocket Calendar Year Limit: | | | |
| | In-Network | Out-of-Network | | In-Network | Out-of-Network | |
| Single: | \$2,500 | \$7,500 | Single: | \$7,900 | \$23,700 | |
| Family: | \$7,500 | \$20,000 | Family: | \$15,800 | \$47,400 | |

| Cigna Dental | Total Monthly Premium | Employer Monthly Cost | Percentage paid by County | Employee Monthly Cost | Percentage paid by Employee | Employee Standard Payroll Deduction (per pay period) |
|-----------------------|------------------------------|------------------------------|----------------------------------|------------------------------|------------------------------------|---|
| Employee | 25.46 | 0.00 | 0.00% | 25.46 | 100.00% | 12.73 |
| Employee + Spouse | 51.75 | 0.00 | 0.00% | 51.75 | 100.00% | 25.88 |
| Employee + Child(ren) | 63.83 | 0.00 | 0.00% | 63.83 | 100.00% | 31.92 |
| Employee + Family | 89.99 | 0.00 | 0.00% | 89.99 | 100.00% | 45.00 |

*Maximum dependent age = 26 (coverage terms at end of month following 26th birthday)

| Cigna Vision | Total Monthly Premium | Employer Monthly Cost | Percentage paid by County | Employee Monthly Cost | Percentage paid by Employee | Employee Standard Payroll Deduction (per pay period) |
|-----------------------|------------------------------|------------------------------|----------------------------------|------------------------------|------------------------------------|---|
| Employee | 5.96 | 0.00 | 0.00% | 5.96 | 100.00% | 2.98 |
| Employee + Spouse | 11.92 | 0.00 | 0.00% | 11.92 | 100.00% | 5.96 |
| Employee + Child(ren) | 12.15 | 0.00 | 0.00% | 12.15 | 100.00% | 6.08 |
| Employee + Family | 19.22 | 0.00 | 0.00% | 19.22 | 100.00% | 9.61 |

*Maximum dependent age = 26 (coverage terms at end of month following 26th birthday)

COBRA terms: Employees = 18 months; Spouse (due to divorce/death) = 36 months

| Basic Life | Employer Monthly Cost |
|----------------------|------------------------------|
| Employee | 6.05 |
| Employee + Dependent | 1.59 |

| Telemedicine | Employer Monthly Cost |
|---------------------|------------------------------|
| Employee | 4.50 |