

Salary Resolution

Administrative Management

All benefits are per pay period unless otherwise noted



Memorandum of Understanding (MOU) Term	Revised July 11, 2023
Representation	Sonoma County Administrative Management Council (SCAMC)

Health and Welfare

Benefit Level	Full Time (80 hours/1.0 FTE)
Medical	Semi-Monthly County Contribution Effective June 1, 2025 - May 31, 2026 \$469.00 Employee Only \$938.00 Employee + 1 \$1,326.00 Employee + 2 or More
Dental	\$45.15 Semi-Monthly County Contribution \$14.13 Semi-Monthly Employee Contribution
Vision - County Paid	\$7.45 Semi-Monthly
Basic Life Insurance - County Paid	2x Annual Salary
Supplemental Life Insurance - Employee Paid	1-4x Basic Life (not to exceed \$500,000 when combined with Basic)
Dependent Life - Employee Paid	\$0.23 Semi-Monthly Coverage of \$5,000 per Eligible Dependent
Accidental Death & Dismemberment (AD&D) - County Paid	2x Annual Salary

Leave Provisions

Vacation - Accrual based on years of service	Accrue up to 7.55 - 10.31 hours Maximum accrual not to exceed 500 hours
Holiday	12 holidays per year 1 Floating Holiday per year (no carryover or cash out)
Sick	Accrue up to 3.68 hours
Paid Parental Leave	320 hours (subject to eligibility requirements)
Compassionate	Up to 32 hours per eligible occurrence

Retirement - Pension	
Tier 1 (Retirement system membership on or before 12/31/2012. Reciprocity provision may apply)	General - 3% at 60 Safety - 3% at 50
Tier 2 (Retirement system membership on or after 1/1/2013)	General - 2% at 62; 2.5% at 67 Safety - 2% at 50; 2.7% at 57
Retirement - Other	
401(a) Deferred Compensation	County contribution of 3% base salary
457 - Voluntary Deferred Compensation - optional	County to match employee contribution up to 1% of base salary into 401(a)
Retiree Medical Plan - Hired prior to January 1, 2009	See Salary Resolution for eligibility requirements
Retiree Health Reimbursement Account (HRA) - Hired on or after January 1, 2009	\$2,400 lump sum deposit upon meeting eligibility criteria; then \$0.88 per eligible pay status hour (Approximately \$1,830 per year)
Other Benefits	
Staff Development Reimbursement	\$1,000 per fiscal year
Wellness/Emergency Preparedness	Lump sum \$1,000 per year Paid annually on first full July pay cycle
Cell Phone Stipend	\$50 per month for designated employees who use their personal cell phone for County business
Dependent Care Assistance Program (DCAP)	Employee paid (optional)
Health Flexible Spending Account (FSA)	Employee paid (optional)
Employee Assistance Program (EAP)	County paid
Long Term Disability	County paid

Example of Semi-Monthly Medical Premium - Based on 2025/2026 Medical Plan Premiums

Kaiser Permanente HMO with employee only coverage

\$609.87	Total Premium
<u>-\$469.00</u>	County Semi-Monthly Contribution
\$140.87	Employee Semi-Monthly Contribution

HR Benefits Unit • 707-565-2900 • hr.benefits@sonomacounty.gov

In case of conflict between the information presented in this summary and the current Memorandum of Understanding (MOU), the MOU determines the benefit. This document does not constitute a contract. Benefits are subject to change. For benefits details, please refer to the Salary Resolution or Memorandum of Understanding in effect for this employee group.

Revised: September 25, 2025