

2025 FULL-TIME EMPLOYEE BENEFITS

Benefits for full-time regular employees (scheduled for 30 hours or more per week). More detailed information can be found in the Employee Handbook & Policies. Effective January 1, 2025.

PAID LEAVE

Cook County provides Paid Leave (PL) to compensate employees who are absent from work for any personal reason. Paid leave is accrued by hour worked beginning on first day of employment. Paid Leave is accrued according to the following schedule:

Years of Service	Hourly Accrual	Yearly Accrual
0 – 5 Years	.08462	22 Days
5 – 10 Years	.09615	25 Days
10 – 15 Years	.11538	30 Days
15+ Years	.13462	35 Days

HOLIDAYS

The County will observe the following eleven paid holidays.

When an official holiday falls on a Saturday, the preceding Friday shall be designated as the holiday. When the holiday falls on a Sunday, the following Monday shall be designated as the holiday.

Holiday	Date Observed	
New Year's Day	January 1	
Martin Luther King Day	Third Monday in January	
President's Day	Third Monday in February	
Memorial Day	Last Monday in May	
Juneteenth	June 19	
Independence Day	July 4	
Labor Day	First Monday in September	
Veteran's Day	November 11	
Thanksgiving Day	Fourth Thursday in November	
Thanksgiving Friday	Friday after the fourth Thursday in November	
Christmas Day	December 25	

LEARNING AND DEVELOPMENT

In-person and online training to support your professional (and personal) development.



MEDICAL INSURANCE - MEDICA

Plan 1: HRA Plan Single and Family Plan Title: Medica Passport 1850-0% HRA compatible with FSA and VEBA*

MONTHLY PREMIUM COST

2025

ALL STAFF PAYS 20% OF MONTHLY PREMIUM:

\$177.16/month single \$441.84/month family

TOTAL PREMIUM:

\$885.78/month single \$2,209.16/month family

PLAN YEAR DEDUCTIBLES

2025 INDIVIDUAL \$1,850.00

FAMILY \$3,700.00

Plan 2: HSA Single and Family Plan Title: Medica Passport 2100-0% HSA compatible HSA and limited VEBA* or HSA employer contribution option

MONTHLY PREMIUM COST

2025

ALL STAFF PAYS 20% OF MONTHLY PREMIUM:

\$171.44/month single \$427.58/month family

TOTAL PREMIUM:

\$857.20/month single \$2,137.86/month family

PLAN YEAR DEDUCTIBLES

	2025
INDIVIDUAL	\$2,100.00
FAMILY	\$4,200.00

FSA – Flexible Spending Account

FSAs allow employees to use pretax dollars to pay for medical, vision and dental expenses or dependent care expenses. Full amount elected is available for you to use immediately. Unused funds will automatically rollover to the following year, up to the IRS maximum of \$660.

Medical FSA Annual Tax-Free Maximums \$3,300

Dependent Care FSA Annual Tax-Free Maximums

•	Single taxpayer and married couple filing jointly	\$5,000
•	Married couple filing separately	\$2,500



HSA - Health Savings Account

An HSA belongs to you and the money is yours to keep even if you change jobs or retire. You don't pay taxes on the money you put in or take out, as long as you use it for medical expenses as defined by the IRS. Funds only become available as they accumulate. Under this plan, VEBA funds can only be used for vision and dental expenses.

Annual Tax-Free Maximums

• Single \$4,300

Family \$8,550

Note: These maximums increase for individuals aged 55 and older.

VEBA – Voluntary Employees' Beneficiary Association Plan

All primary account holders enrolled in a Cook County health insurance plan are enrolled in a VEBA plan. The county contributes \$125 per month to this plan. This is a tax-free plan funded by employer contributions that may be used for eligible expenses now or in the future. **Note when you are contributing to an HSA, this VEBA money becomes limited to vision and dental expenses only.**

DENTAL INSURANCE: AMERITAS

Monthly Premium Cost Paid by Employee

Employee \$32.44
 Employee + Spouse \$66.24
 Employee + Child(ren) \$81.72
 Family \$115.52

VISON INSURANCE: AVESIS

Monthly Premium Cost Paid by Employee

Employee Coverage \$6.61
Employee +Spouse \$13.01
Employee +Child(ren) \$13.66
Family \$17.90

LIFE INSURANCE: HARTFORD

Paid By County

Basic Life and AD&D \$10.000

Option for employee to buy additional coverage for self, spouse and/or eligible children.

PERA SUPPLEMENTAL LIFE INSURANCE (NCPERS)

\$16 per month for term insurance + \$100,000 ADD, plus insurance for spouse and dependent children under 26.

LONG-TERM DISABILITY: MADISON NATIONAL

Paid By County. Long-term disability benefits begin after 90 days and pay 60% of gross salary.

SHORT-TERM DISABILITY: HARTFORD

Monthly Premium Cost Paid by Employee

\$100 per week minimum benefit, up to the lesser of 60% of your pre-disability earnings or \$1,500 per week.



PERA PUBLIC EMPLOYEE PENSION PROGRAM

All employees are public employees and automatically enrolled in PERA (Public Employee Retirement Association). This is a pension program with most employees vested at 36 months. Coordinated plan employees contribute 6.5%, employers contribute 7.5%.

MATCHING RETIREMENT BENEFIT PLAN 457

- Choose from MN Deferred Comp or Nationwide.
- County will provide a match of up to 3% after probationary period.

EMPLOYEE ASSISTANCE PROGRAM

Free access to independent, confidential and professional assessment and short-term counseling services available to employee and family members.