



City of Providence

Benefits At A Glance

Police

You may find additional information related to all core and voluntary benefits provided by the City on the City's website at www.providenceri.gov/hr/benefits, or you may contact the Benefits Office with questions via email to benefits@providenceri.gov or via phone at 401-680-5279.

Benefit Information		
	Benefit	Employee Cost (biweekly)
Core	Medical/Pharmacy (Blue Cross Blue Shield of Rhode Island/CVS Caremark) - HMCTC	Ind: \$62.00 Ind+Spouse: \$124.00 Ind+Child/Children: \$108.50 Family: \$153.65
	Dental (Delta Dental)	Ind: \$2.38 Family: \$7.38
	Basic Life (Prudential) - \$100K Accidental Death & Dismemberment (Prudential) - \$100K Line of Duty Life Insurance (Prudential) - \$50K	Provided by City at no cost to employee
Voluntary	Flexible Spending Accounts (London Health) <ul style="list-style-type: none"> ➤ Medical, Dependent Day Care, Parking/Transit 	Based on Election
	Supplemental/Optional Life (Prudential) – Up to 5 x annual salary or \$500K, whichever is less	Based on Election
	Vision (Davis Vision)	Ind: \$2.30 Ind. + 1: \$4.37 Family: \$6.71
	457(b) Deferred Compensation (VOYA or VALIC)	Based on Election Contact OMNI – 877-544-OMNI

- Acceptable documentation for enrolling dependents:
 - Children – Birth Certificate
 - Spouse – Marriage Certificate
 - Ex-Spouse – Divorce Decree

Time Off	
Vacation	Review Article VII Section 1 of the Collective Bargaining Agreement
Sick	1.25 days per month
Personal	3 personal days per calendar year.
Holiday Schedule	12 Paid Holidays per year