



City of Providence

Benefits At A Glance

B.E.S.T. 10 Month

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@ppsd.org or via phone at 401-680-5281. For additional information about union-offered benefits, contact Vicki Virgilio at 401-331-1033.

Benefit Information			
Core	Provided by City	Employee Cost (biweekly)	
	10 Month	< \$45,702 salary	Ind: \$47.69 Family: \$119.42
	Medical/Non-Oral Pharmacy (Blue Cross and Blue Shield of RI, CVS Caremark (non-oral medications)	> \$45,703 but < \$54,106 salary	Ind: \$52.46 Family: \$131.36
	Express Scripts (oral medications) provided by Union	> \$54,107 salary	Ind: \$63.59 Family: \$159.23
	Basic Life (Lincoln Financial) - \$10K policy	No cost to employee	
	Provided by Union		
	Dental (Delta Dental)	No cost to employee	
Vision (EyeMed)	No cost to employee		
Voluntary	Provided by City		
	FSA	Based on Election	

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

Time Off	
Vacation	Varies depending on years of service and/or position, review appropriate contract.
Sick	Varies depending on years of service and/or position, review appropriate contract.
Personal	(2) Personal days per school year.
Holiday Schedule	https://www.providenceri.gov/hr/holidays