

RIVCO 1HR
putting people first

**Welcome to the
County
Family!**





Countywide New Employee Orientation Agenda

Welcome

- Housekeeping Items
- Agenda

Co-worker Introductions

Message from CEO

County History

Leadership & Organizational Structure

HR Information

- HR Website
- Vacation, Sick and Annual Leave Information
- Payroll Calendar/Payday
- Employee Discounts
- Employee App
- Public Servants

Benefits

Retirement

Q&A

Unions

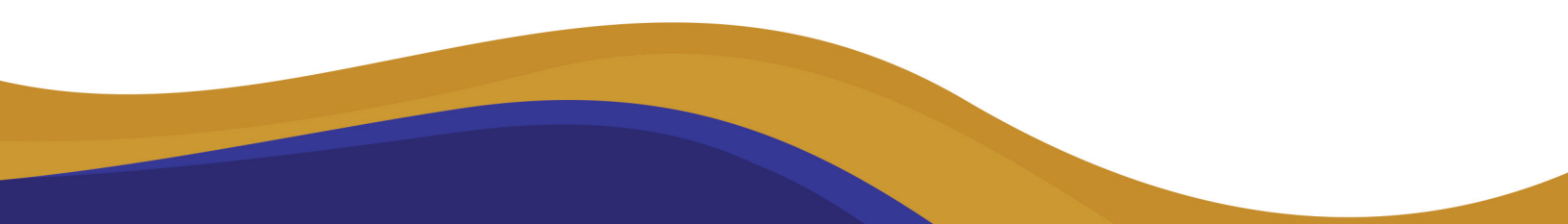
NEW EMPLOYEE ORIENTATION To-Do Checklist



THINGS TO REMEMBER

- STEP 1:** Obtain and acknowledge your County and departmental specific policies (ASAP).
- STEP 2:** Obtain and acknowledge your New Employee Handbook (ASAP).
- STEP 3:** Build your network - Get to know co-workers within your team, department, and other departments throughout the County.
- STEP 4:** Learn your department's mission statement, values, and annual departmental and team goals.
- STEP 5:** Review your health, dental, vision, and retirement benefits and be sure to make your selections within 60 days from your date of hire. Contact your department HR representative or the Benefits Department with any questions.
- STEP 6:** Be sure to complete all mandated trainings timely. Visit <https://corlearning.rc-hr.com/training-login> to register for your classes.
- STEP 7:** Meet with a Career/Educational Counselor through the Educational Support Program to discuss your career and educational goals and learn about tuition discounts. Visit <https://corlearning.rc-hr.com/Products-Services/Educational-Support-Program-ESP> for more information.
- STEP 8:** Download the County's app, RivCoGo, to access discounts, view your paystub, get up to date information, and much more!
- STEP 9:** Take the time to meet with our retirement specialists to learn how to start investing early.

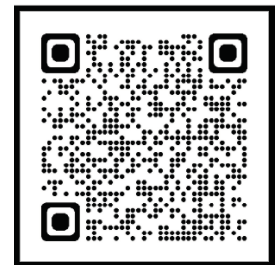
NOTES:



NEW EMPLOYEE ORIENTATION

Contact List

SERVICE	PHONE	EMAIL	WEBSITE
Benefits	(951) 955-4981 Option 1	Benefits@rivco.org	http://benefits.rc-hr.com/
Payroll	(951) 955-3810	ACO_payroll@rivco.org	http://www.auditorcontroller.org/
Retirement	(951) 955-4981 Option 2	Retirement@rivco.org	http://benefits.rc-hr.com/
Employee Assistance Program	(833) 954-1067	Employee Code: PRISM	https://www.anthem.com/employer/eap/employee/
Workers Compensation	(951) 955-3530	WorkComp@rivco.org	http://workcomp.rc-hr.com/
Disability Access Office	(951) 955-5663	ADA@rivco.org	http://dao.rc-hr.com/
Safety	(951) 955-3520	HR-SafetyDivisionTraining@rivco.org	http://safety.rc-hr.com/
Employee Relations	(951) 955-2108	employee-relations@rivco.org	http://rc-hr.com/HR-Services/Employee-Labor-Relations/Employee-Relations
Commuter Services	(951) 955-1118	iCommute@rivco.org	http://rivcocommuter.rc-hr.com/
Learning & Organizational Development	(951) 955-3256	HRLOD@rivco.org	http://rc-hr.com/hrlod/
Human Resources	(951) 955-3510	hrdept@rivco.org	http://rc-hr.com/



Department HR & Payroll Clerk (Timekeeper) Contact List

Updated 4/27/2023

Mail Stop	Department	ID #	Contact Person	Phone #
1250	Agricultural Commission 3403 10th Street, Suite 701 Riverside, CA 92501	280	Patrice Wyatt (HR & Payroll)	(951) 955-3011 (951) 955-3045 FAX (951) 955-3047
3320	Animal Services 4065 County Circle Dr. #206 Riverside 92503	420	April Arias (Supervisor) Elvira Valenzuela (HR)	(951) 358-5498 (951) 358-5846 Fax (951) 358-5847
1140	Assessor - Clerk - Recorder 2724 Gateway Drive Riverside 92507-0751	120	Linda Sullivan (Dept. HR Coordinator) Wendy Myers (Principal Deputy ACCR) Carla Reis-Trovillion (Admin. Svc's Officer) Jennifer Durso ADMIN SVCS MGR	(951) 486-7071 (951) 486-7453 (951) 486-7117 (951) 955-6200 Fax (951) 486-7440
1050	Auditor - Controller (CAC 11th Floor) P.O. Box 1326 Riverside 92502-1326	130	Judy Green (HR and Payroll)	(951) 955-3807 Fax (951) 955-3802
3831	Behavioral Health 4095 County Circle Dr. Riverside, CA 92503	410	TAP OA (Front Desk) Esteven Sanchez (Front Desk) Lupita Suazo (Payroll) Janett Caballero (FMLA/Leaves) Dominick Lopez (New Hires/Benefits) Vacant (Employee Benefits & Records Supervisor)	(951) 358-4606 (951) 358-3144 (951) 358-5341 (951) 358-4619 (951) 358-4609 (951) 358-5369 Fax (951) 358-4776
1010	Board/Clerk of the Board (CAC 1st Floor) P.O. Box 1147 Riverside 92502-1147	100	Lisa Wagner (Primary HR) Cleyra Cordova(Secondary Payroll)	(951) 955-1063 (951) 955-1064 Fax (951) 955-1071
1330	Business and Community Services (Now: Office of Economic Development)			
2370	Child Support Services – (DCSS) 2041 Iowa Ave. Riverside 92507	230	Lauren Hampton (Administrative Services Officer) Ayde Oropeza (Regional Manager/Administration) Donna Hernandez (HR Clerk) Cynthia Hernandez (HR Clerk) Entire HR Staff can be reached at: RCDCSS-HR@rivco.org Department Fax	(951) 955-9804 (951) 955-4110 (951) 955-2098 (951) 955-4222 (951) 955-5993
2590	Community Action Partnership	520	See: Housing, Homelessness Prevention, & Workforce Solutions	(951) 358-5846 (951) 358-6153 (951) 358-5498 Fax (951) 358-5847
5001	Cooperative Extension 21150 Box Springs Rd, Suite 202 Moreno Valley 92557	630	Noreen Shein (Executive Assistant-I) nshein@ucanr.edu Jacqueline Zuniga (Office Assistant -I) jazuniga@ucanr.edu	(951) 683-6491 X 225 (951) 683-6491 X228 Fax (951) 788-2615
1350	County Counsel 3960 Orange St., 5th Floor Riverside 92501	150	Alisa Young (Primary HR & Payroll) ayoung@rivco.org	(951) 955-1848 Fax (951) 955-2226

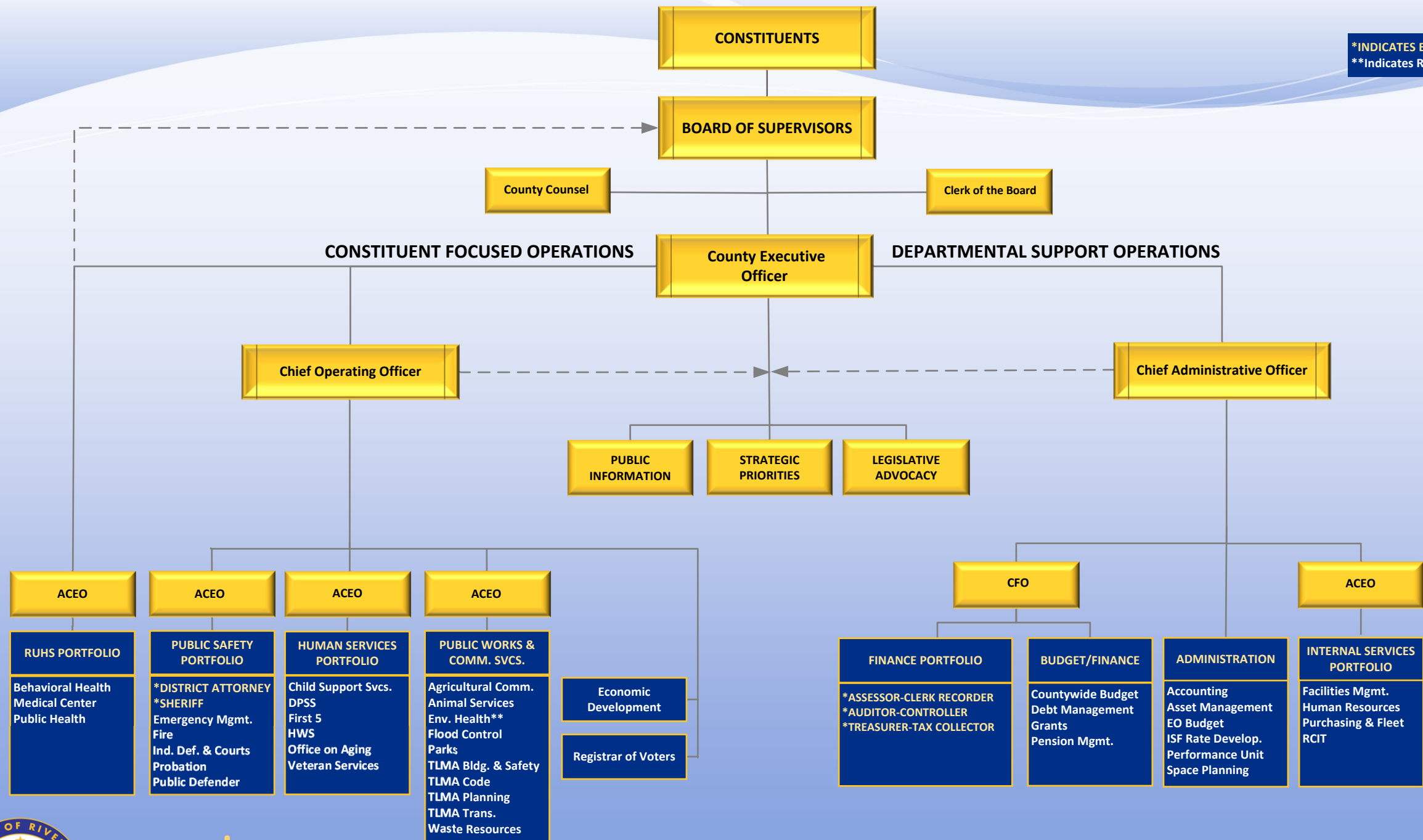
2120	District Attorney 3960 Orange St, 10th Floor Riverside 92501	220	Main DA - HR/Payroll Unit Vanessa Ignacio (Recruitment/Onboarding) Vicki Blackburn (Pre-Employment/Backgrounds/Benefits) Doreen Vasquez (Payroll) Jasmine Watts (Pre-Employment/Backgrounds/Benefits) Jessica Gutierrez (Leave Management/ W. Comp)	(951) 955-4059 (951) 955-5371 (951) 955-5825 (951) 955-6543 (951) 955-0697 (951) 955-1483 Fax (951) 955-0160
	EDA		See: Business and Community Services	
3942	Emergency Management 450 E. Alessandro Riverside 92508	200	Bertha Vaca (Primary Payroll) Emma Vernon (Timesheet approver) Kelly Moore (HR/Personnel Documents) Kelly Moore (LOA/FMLA/RTW)	(951) 358-2586 (951) 955-4720 (951)-358-7104 (951)-358-7104 Fax (951) 306-3781
3320	Environmental Health 4065 County Circle Dr. #206 Riverside 92503	420	April Arias (Supervisor) Elvira Valenzuela (HR)	(951) 358-5498 (951) 358-5846 Fax (951) 358-5847
1020	Executive Office (CAC 4th Floor) 4080 Lemon St. Riverside 92501-3679	110 115 900	Trina Head (Primary HR/FMLA) Jennifer Kammerer (Secondary HR/FMLA) Andria Bartkowski (FMLA) Alicia Chavez (Payroll)	(951) 955-1157 (951) 955-1136 (951) 955-1103 (951) 955-3735
2600	Facilities Management 3450 14th Street Riverside, CA 92501	720	Jane Agunwah Admin Services Officer (HR) Alicia Beltran (HR-LOA/FMLA/RTW, Evaluations, Workers Comp) Becky Daniels (Payroll)	(951) 955-2163 (951) 955-3516 (951) 955-8417 Fax (951) 955-6659
5036	Fire 210 W. San Jacinto Ave. Perris, CA 92570	270	Cassandra Ray (HR/FMLA/LOA) Admin Services Asst Ana Vazquez (Payroll)	(951) 940-6980 (951) 940-6337 Fax (951) 940-6750
2585	First 5 Riverside	938	Rachel Padilla	(951) 955-0473
2990	Flood Control 1995 Market St. Riverside 92501	947	Darrylenn Prudholme-Brockington: Payroll Supervisor (Primary) Lisa McFarland: Payroll Sabrina Ector: HR Officer Sally Tadros: Admin. Svcs. Analyst I Shelly Morales: Admin. Svcs. Analyst I	(951) 955-8357 (951) 955-1252 (951) 955-1294 (951) 955-0782 (951) 955-1218 Fax (951) 955-4532
1330/3760	Housing, Homelessness Prevention, & Workforce Solutions - CDBG, HUD - Workforce Development - Housing Authority - Community Action Partnership (CAP) 3403 10th Street, Ste 300 Riverside CA 92501 5555 Arlington Ave. Riverside CA 92504 1325 Spruce St. Riverside CA 92507	550/560 550 550	Megan Gomez (Deputy Director, Finance & Admin.) Stephany Trigg (HR Assistant) Linda Romano (Payroll Timekeeper) Tamara Martin (CAP) Brandon Trahan (CoC)	(951) 955-6615 (951) 955-2389 (951) 955-4956 (951) 955-3893 (951) 295-2310

1150	Human Resources (CAC 1st Floor) P.O. Box 1569 Riverside 92502-1569	113	Cori Robinson (HR & Timekeeper)	Fax	(951) 955-0023 (951) 955-3581
	Information Technology		See Riverside County Information Technology		
1030	LAFCO 6216 Brockton Ave, Suite 111-B Riverside, CA 92506	290	Elizabeth Valdez (Primary HR & Payroll) Rebecca Holtzclaw (Secondary HR & Payroll)		(951) 369-0631 (951) 369-0631
3224	OASIS	110	SEE RCIT		
1330	Office of Economic Development <i>(Previously: Business and Community Services)</i> - Admin, ED, Libraries - Edward Dean Museum - CSA - Perris Valley Cemetery 3403 10th Street, Ste 400 Riverside CA 92501	190 193 915 980	Janet McFall Admin Services Mgr I (HR) Marielena Carleton Admin Services Analyst I (HR) Marielena Carleton (Payroll)		(951) 955-0021 (951) 955-6685
5580	Office on Aging 3610 Central Ave., Ste. 102 Riverside 92506	530	Lisa Starcev (Primary HR & Payroll)	Fax	(951) 867-3843 (951) 867-3820
2970	Parks 4600 Crestmore Rd. Jurupa Valley, CA 92509	931	Loree Broderick (HR) Admin Services Analyst Robert Williams (Chief-Business Operations) Christina Sanchez (Payroll) Michael Alferez (Payroll)	HR Fax Payroll Fax	(951) 955-4332 (951) 955-4308 (951) 955-6671 (951) 955-1387 (951) 955-5462 (951) 955-4319
1470	Probation 3960 Orange Street, Suite 600 Riverside, CA 92501 - 3247	260	Lynn Harrison (ASO - HR) Coral Quijada (Deputy Director Admin) Cecylia Palacios (Covers Reception/RTW/TAP) Elizabeth Perez (HR/FMLA/LOA) Martha Nava (HR/RMAP/Bilingual) Kristy Bennett (Payroll) Elizabeth Perez (HR/Payroll) Suman Prasad (HR/Payroll) Lynn Harrison (Benefits/Evals/EPM)		(951) 955-0616 (951) 955-2983 (951) 955-2830 (951) 955-4969 (951)955-3634 (951) 955-2358 (951) 955-4392 (951) 955-0616
1520	Public Defender 4075-A Main Street Riverside, CA 92501	240	HR Unit Cecilia Arcangel (Dept. HR Coordinator) Pauline Medrano (Sr. HR Clerk) Payroll Unit Ruby Kanwar (Payroll) Leah Hertz (Fiscal/Payroll)	HR Fax Payroll Fax	(951) 955-9788 (951) 955- 6049 (951) 955-6290 (951) 955-6287 (951) 955-6048 (951) 955-0389
3320	Public Health 4065 County Circle Dr. #206 Riverside 92503	420	April Arias (Supervisor) Elvira Valenzuela (HR)	Fax	(951) 358-5498 (951) 358-5846 (951) 358-5847
3720	Public Social Services (DPSS) 10281 Kidd St. Riverside 92503	510 985	Romera Liddell (Deputy Director) Sandra Meza (Admin Services Supervisor)		(951) 358-3028 (951) 358-6414

			Receptionist - Main Desk Tiffany Tighe - Sr. Human Resources Clerk (A-F & Y-Z) Brenda Gallardo - Sr. Human Resources Clerk (G-N) Daneatra Stewart-Moore - Sr. Human Resources Clerk (O-X) Edna Hall - Admin Services Analyst II DPSS-Payroll@rivco.org - Primary Payroll Contact Gwen Howard - Human Resources Clerk Secondary Payroll Contact	(951) 358-3030 (951) 358-3583 (951) 358-6831 (951) 358-4063 (951) 358-3367 (951) 358-6828
3701	Purchasing & Fleet Services Riverside County Information Center (RCIC) 3450 14th St. 4th Floor Suite 420 Riverside, CA 92501	730	Laura Sanchez (HR & Payroll) Executive Asst Leslie Johnson (HR & Payroll) Office Asst III Jazmin Braulio OAll Suzanna Hinckley ASST DIR, PURCH & FLEET SVCS	951-955-4935 (951) 955-4689 (951) 955-3280 (951) 955-7550 (951) 955-8474 Fax
1033	RCA (Western Riverside County Regional Conservation Authority) 3403 10th Street, Suite 320 Riverside 92501	935	As of 1/1/2021, no longer County Employees. Jennifer Fuller - jfuller@rctc.org Daisy Vergara - dvergara@rctc.org	Fax (951) 955-8873
2510	Registrar of Voters 2724 Gateway Dr. Riverside 92507	170	Candice Gordon (HR/Payroll) Senior Admin Services Supervisor	(951) 486-7330 Fax (951) 486-7335
1575	Riverside County Information Technology (RCIT) Located at: Riverside County Information Center 3450 14th St. 4th floor Riverside, CA 92501 Street address (prior PO Box# is obsolete) new mail stop/address as of 2014	740	Nicole Eubank (Primary HR) neubank@rivco.org Nicole Thom (Secondary HR) NicThom@rivco.org Mary Eileen Cornell (Admin. Svcs Analyst II) mcornell@rivco.org Payroll: Norma Marchan IT Manager I (Payroll) nmarchan@rivco.org Tamara Cantu (Payroll) tcantu@rivco.org	(951) 955-3777 (951) 955-7506 (951) 955-5931
5887	Riverside University Health Systems Medical Center (RUHS) 14375 Nason St, Ste. 212 Moreno Valley 92555	430	Front Desk Employee Services Front Desk Payroll Jaquie Garcia (Admin. Svcs. Officer) Sergio Pena HR Tech (RUHS Employee Services) Ricardo Gomez-Valencia HR Tech (RUHS Payroll) Vacant (Sr. Clerk) Susan Smith (Sr. Clerk)	(951) 486-5531 (951) 486-5546 (951) 486-5576 (951) 486-5553 (951) 486-5536 (951) 486-5534 (951) 486-5511 951-486-5049 951-486-5533 HR Fax Payroll Fax
2500	Sheriff/Coroner 4095 Lemon St., 3rd Floor P.O. Box 512 Riverside 92502	250	Dana Williams (Reception/Payroll Main Desk) Jill Watler (Benefits & Payroll Mgr) Jeanette Bowles (FMLA) Kaitlyn Breton (Payroll) Maria Lourdes Bodag Hakimi (Payroll) Andrea Cronkite (FMLA) Vanessa Franco (Payroll) Christine Williams (FMLA) shfpayroll@riversidesheriff.org shf344@riversidesheriff.org	(951) 955-2723 (951)-955-2721 (951) 955-9141 (951) 955-0093 (951) 955-2705 (951) 955-3772 (951) 955-2704 (951) 955-9754 Leaves Payroll (951) 955-2505 Fax
2161	TAP/MAP (CAC 1st Floor)	113	Chandrika Richardson (HR Services Manager) Alma Torres Elizalde - TAP/Desert Operations	(951) 955-9488

			Brian Arcinas - Mass Recruiting (Tap no longer has timekeepers) General Reception	HR Fax (951) 955-9178 (951) 955-1525
1083	TLMA (CAC 14th Floor) P.O. Box 1605 Riverside 92502-1605	310 - 314 946 191	Brandon Fernandez (Admin. Services Officer & Supervisor/ Back-up HR/Payroll) Marivel Villela-Avalos (Primary HR - Admin. Services Asst) Traci Zamora (Primary Payroll - Admin. Services Asst) Ligia Martinez - Office Assistant III (Secondary HR) General	(951) 955-4228 (951) 955-8824 (951) 955 3210 (951) 955-5542 951-955-TLMA (951) 955-2803 Fax
1110	Treasurer-Tax Collector (CAC 4th Floor) P.O. Box 12005 Riverside 92502-2205	140	Adrianna Gomez (Primary HR) Martha Dominguez (Secondary HR) Christina Vazquez (Payroll) Claudia Bravo (Payroll) Ana Galindo (Payroll) Erica Cervantes (Payroll)	(951) 955-6958 951-955-3968 (951) 955-3829 (951) 955-3969 (951) 955-3848 951-955-9151 (951) 955-3906 Fax
1310	Veterans' Services 4360 Orange St. Riverside 92501	540	HR & Payroll Christina Rich - Executive Asst I Kelly Reid Grant Gautsche	(951) 955-3041 (951) 955-3071 (951) 955-3060 (951) 955-3063 Fax
5950	Waste Resources 14310 Frederick St. Moreno Valley 92553	943 450	Deanna Kimsey (HR) Sandra Green (HR Alternate) Deanna Kimsey (Payroll) Loree Helmers (Payroll Alternate)	(951) 486-3266 (951) 486-3259 (951) 486-3266 (951) 486-3335 (951) 486-3230 Payroll Fax

*INDICATES ELECTED OFFICIAL
 **Indicates Reso. 2019-196



January

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	\$	11 ³	12	13
14	15	16	17	18	19	20
21	22	23	\$	25 ⁴	26	27
28	29	30	31			

February

S	M	T	W	T	F	S
				1	2	3
4	5	6	\$	8 ⁵	9	10
11	12	13	14	15	16	17
18	19	20	\$	22 ⁶	23	24
	26	27	28	29		

National Date Festival February 16-25, 2024

March

S	M	T	W	T	F	S
					1	2
3	4	5	\$	7 ⁷	8	9
10	11	12	13	14	15	16
17	18	19	\$	21 ⁸	22	23
24	25	26	27	28	29	30
31						



Riverside County 2024 Payroll Calendar



\$ Pay Day
County Holiday

April

S	M	T	W	T	F	S
	1	2	\$	4 ⁹	5	6
7	8	9	10	11	12	13
14	15	16	\$	18 ¹⁰	19	20
21	22	23	24	25	26	27
28	29	30				

May

S	M	T	W	T	F	S
			\$	2 ¹¹	3	4
5	6	7	8	9	10	11
12	13	14	\$	16 ¹²	17	18
19	20	21	22	23	24	25
26	27	28	\$	30 ¹³	31	

June

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	\$	13 ¹⁴	14	15
16	17	18	19	20	21	22
23	24	25	\$	27 ¹⁵	28	29
30						

July

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	\$	11 ¹⁶	12	13
14	15	16	17	18	19	20
21	22	23	\$	25 ¹⁷	26	27
28	29	30	31			

August

S	M	T	W	T	F	S
				1	2	3
4	5	6	\$	8 ¹⁸	9	10
11	12	13	14	15	16	17
18	19	20	\$	22 ¹⁹	23	24
25	26	27	28	29	30	31

September

S	M	T	W	T	F	S
1	2	3	\$	5 ²⁰	6	7
8	9	10	11	12	13	14
15	16	17	\$	19 ²¹	20	21
22	23	24	25	26	27	28
29	30					

October

S	M	T	W	T	F	S
		1	\$	3 ²²	4	5
6	7	8	9	10	11	12
13	14	15	\$	17 ²³	18	19
20	21	22	23	24	25	26
27	28	29	\$	31 ²⁴		

November

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	\$	14 ²⁵	15	16
17	18	19	20	21	22	23
24	25	26	\$	28 ²⁶	29	30

December

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	\$	12 ¹	13	14
15	16	17	18	19	20	21
22	23	\$	25	26 ²	27	28
29	30	31				

Employee Self Service Tutorial



STEP ONE: Visit <https://hcm92.co.riverside.ca.us/psp/h920prda/?cmd=login>

A screenshot of a web browser showing the Oracle PeopleSoft HCM 9.2 Production login page. The browser's address bar shows the URL: https://hcm92.co.riverside.ca.us/psp/h920prda/?cmd=login. The page features the County of Riverside logo on the left and the Oracle PeopleSoft HCM 9.2 Production title. Below the title are three input fields: "User ID" with the value "E123456", "Password" with masked characters "*****", and "Select a Language" with "English" selected. A blue "Sign In" button is positioned below the language dropdown. At the bottom of the form area, there is a checkbox for "Enable Screen Reader Mode" and a link for "Forgot Your password?". A legal disclaimer is visible at the very bottom of the page.

STEP TWO: Enter User ID: E + Employee ID#
Password: E + Employee ID# + \$ + last 4 digits of SSN

POWERED BY



RCIT Helpdesk
Telephone: (951) 955-9900

RIVCOHelp: [Submit New Request](#)

LEARN WHAT'S AVAILABLE, COMPARE YOUR OPTIONS, AND ENROLL

- Enroll in health benefits within 60 days of hire
 - Employees can elect coverage by:
 - Using the Self Service Life Event in Peoplesoft. If you utilize the Self-Service Life Event enrollment in Peoplesoft, the coverage begin date is the first of the following month of your hire date.
 - Or
 - Completing a Benefit Election Form (BEF). A BEF can be obtained by your Department HR Representative. Elections are effective the first of the month following receipt of forms or by the "Elected Coverage Begin Date" on the form.
- Check out our Annual Enrollment website at <https://rc-hr.com/OE23>. You will find information about the plans available during the 2023 plan year along with many other resources.
- **IMPORTANT NOTE:** My|CalPERS should only be used for retirement purposes. The County is not notified of health transactions completed in My|CalPERS and enrollments will be denied. Please submit all enrollment requests as indicated above.
- Access The Standard's online portal to enroll in life insurance and designate beneficiaries. Elect at time of hire for highest level of coverage without evidence of insurability within specified coverage amounts, guaranteed issue amount is \$250,000.

Access the 2023 Annual
Enrollment Website

SCAN ME



Benefits website
<https://rc-hr.com/OE23>



Benefits Information Line
(951) 955-4981, option 1



Life Insurance Website
<https://standard.benselect.com>

This designation will apply to the following Standard Insurance Company coverage(s) if available to you through your Employer: Basic Life Insurance, Basic Life with Accidental Death & Dismemberment (AD&D) Insurance, and, unless specified otherwise on a separate signed sheet of paper, Supplemental (Additional) Life Insurance.

Designations made below, or on a separate sheet of paper, are not valid unless signed, dated, and delivered to your Employer during your lifetime. Return the completed form to your Human Resources Department.

MEMBER/EMPLOYEE INFORMATION

Your Name (Last, First, Middle)		Date of Birth
Your Address		
City	State	Zip
Group Name County of Riverside		Group No. 641685

BENEFICIARY INFORMATION

- Your designation revokes all prior designations.
- Benefits are payable to a contingent Beneficiary only if you are not survived by one or more primary Beneficiaries.
- If you name two or more Beneficiaries in a class (primary or contingent), two or more surviving Beneficiaries will share equally, unless you provide for unequal shares.
- If a minor (a person not of legal age) or your estate is the Beneficiary, it may be necessary to have a guardian or a legal representative appointed by the court before any death benefit can be paid. If the Beneficiary is a trust or trustee, the written trust must be identified in the Beneficiary designation. For example, "Dorothy Q. Smith, Trustee under the trust agreement dated _____."
- A power of attorney must grant specific authority, by the terms of the document or applicable law, to make or change a Beneficiary designation. If you have questions, consult your legal advisor.
- Dependents Insurance and Supplemental Life Insurance on your Spouse, if any, is payable to you, if living, or as provided under your Employer's coverage under the Group Policy.
- If you complete the "% of Benefit" box(es), the amounts should add up to 100% for each class (primary or contingent). For example, "Primary - John Q. Doe, 60%; Jane Q. Doe, 40%."

BASIC LIFE

PRIMARY- Full Name	Address	Birth Date	Phone No.	Soc. Sec. No. <i>if known</i>	Relationship	% of Benefit <i>Total must equal 100%</i>

CONTINGENT-Full Name	Address	Birth Date	Phone No.	Soc. Sec. No.	Relationship	% of Benefit

SUPPLEMENTAL (ADDITIONAL) LIFE

PRIMARY- Full Name	Address	Birth Date	Phone No.	Soc. Sec. No. <i>if known</i>	Relationship	% of Benefit <i>Total must equal 100%</i>

CONTINGENT-Full Name	Address	Birth Date	Phone No.	Soc. Sec. No.	Relationship	% of Benefit

Signature of Member/Employee	Date
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Human Resources Department – Retain for your records.

Logging In

- Open the online portal site at <https://standard.benselect.com/COR>




- You are able to log in using your 9 digit Social Security Number with no dashes or your Employee ID Number as your username.
- When you first log in, your personal identification number (PIN) will be the last four digits of your SSN followed by the last two digits of your birth year. Your PIN is a total of 6 digits.


Forgot Login Information?

- If you have logged in previously and forgot your password, click “Forgot your PIN?” as shown in the picture above.


Change PIN

- You will be prompted to change your PIN the first time that you log in. Your personalized pin must be a minimum of eight characters and include at least three of the following: UPPER case letter, lower case letter, number, a special character. *Please note, your pin cannot start with a special character.*
- Please select and answer a security question. Then enter in your email address.
- Once you have entered your information, click 




Home Screen

- Once you have logged in, click . This will guide you through the enrollment process.
- If needed, you are able to logout and re-enter the portal any time to continue the process or modify your enrollments.
- Any changes or elections you make will be saved each time you logout or time out due to in-activity.


Personal Information

- Verify your personal information is correct. If any information is not correct, follow the instructions on the screen, then click 

Dependents



- Review any dependent information listed.
- You may add a dependent by clicking , edit an existing dependent by clicking  the pencil icon or delete a dependent by clicking  the blue x.
- You must have dependents entered on this screen to enroll or change any available dependent coverage.

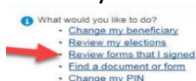
Benefit Elections

- Review the short video about each benefit.
- Choose your benefit elections by selecting a level of coverage for you and your dependents.
- Where applicable, you are able to slide the bar to increase or decrease the benefit amount and cost. You are also able to use the arrows at either end of the slide bar to increase or decrease your election amount. Click  after making your election.
- To learn more about each benefit, click on the Benefit Summary icon in the upper right corner of the screen.




Beneficiaries


- Click  to add a new beneficiary or click  pencil to change an existing beneficiary or X to delete a beneficiary.
- If the beneficiary you would like to designate is already listed, click the check box.
- You may designate more than one beneficiary and allocate different percentages between them.
- Your designation applies to the plan for which you are currently enrolling.
- To change a Beneficiary at a later date; simply login and select “Change my Beneficiary” located on the right side of the screen. Follow the screens as prompted and save your changes.
- To find your current beneficiary designations, from the home page, select “Review Forms that I signed”



Navigation


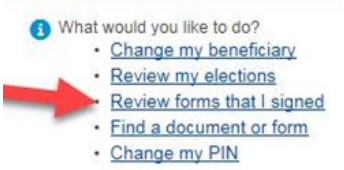
- If at any point you would like to go back to a plan to make a change, you can use the My Benefits at the top to navigate back to any coverage.
- To make a change to the coverage, click the  button and continue through the enrollment process.

Submit Enrollment

- After verifying your benefit elections, you will be brought to the Submit Your Enrollment screen. Your enrollment is not complete until you have clicked the  button on the bottom of this screen.

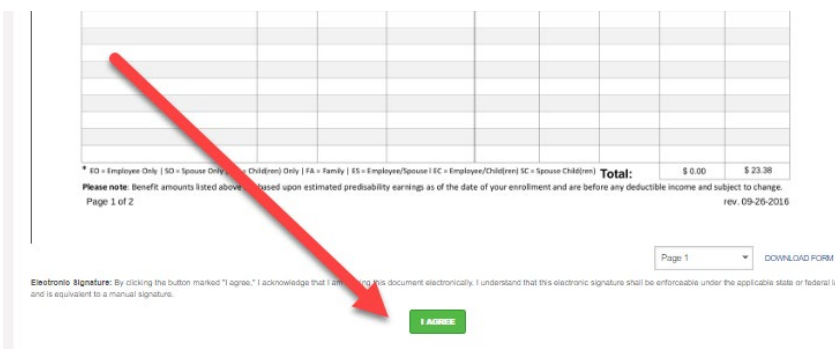
Enrollment Confirmation Statement

You can access your Statement in two ways.

- Upon completion of your enrollment
 - From the Sign/Submit Complete screen, you may obtain copies of your enrollment summary. Scroll to the bottom of the page and click  [Enrollment Summary](#).
 - Please note: If you do not advance through the Submit Enrollment screens, you will not have an Enrollment Summary.
- Home Page
 - Log back into the system. On the right side of the screen, select *review forms I signed*

 - [Change my beneficiary](#)
 - [Review my elections](#)
 - [Review forms that I signed](#)
 - [Find a document or form](#)
 - [Change my PIN](#)
 - Select the Enrollment summary for the period you are looking for.

Evidence of Insurability (EOI)

- If you have elected an amount of coverage that exceeds the guarantee issue, you will be prompted to complete a medical history statement. The prompt appears after selecting "I agree" from the Enrollment Confirmation screen. Please follow the instructions for submitting evidence of insurability.



* FD - Employee Only | SD - Spouse Only | CD - Child(ren) Only | FA - Family | ES - Employee/Spouse | EC - Employee/Child(ren) | SC - Spouse/Child(ren)

Total:	\$ 0.00	\$ 23.38
---------------	---------	----------

Please note: Benefit amounts listed above are based upon estimated predisability earnings as of the date of your enrollment and are before any deductible income and subject to change.
 Page 1 of 2 rev. 09-26-2016


Electronic Signature: By clicking the button marked "I agree," I acknowledge that I am signing this document electronically. I understand that this electronic signature shall be enforceable under the applicable state or federal law and is equivalent to a manual signature.

Page 1

- The following pop-up will then appear, informing you that Evidence of Insurability (EOI) is required.

Important ✕

ATTENTION! Your election requires Evidence of Insurability. Please complete and submit your Evidence of Insurability. Your pending election(s) will expire if we do not receive your Evidence of Insurability application within 30 days of election. Please complete the online medical history statement.

 You have pending EOI applications for the following people. Click on person's name link to start EOI application.

Insured	Plans
Pamela Beesly	Additional Life - Plan F Spouse Life - Plan F



- Select “OK”
- Select “Complete Medical History Statement” to being the EOI submission.

Sign/Submit Complete

Step 3 of 3

Congratulations!

Your enrollment is now complete. You may log-in to the system at any time during the year to review your benefit elections.

ATTENTION! Your election requires Evidence of Insurability. Please complete and submit your Evidence of Insurability. Your pending election(s) will expire if we do not receive your Evidence of Insurability application within 30 days of election.

Action: Evidence of Insurability Needed
Please complete a Medical History Statement for the coverage(s) below.

Insured	Plans	Action Needed
Pamela Beesly	Additional Life - Plan F Spouse Life - Plan F	COMPLETE MEDICAL HISTORY STATEMENT

- Any amount of coverage you've elected over the guarantee issue amount will be pended until the medical review process is complete.
- If you exit the submission phase before completing, once you log back into Ready Enroll, you will be taken to where you left off.
- You will receive reminder emails from The Standard reminding you to submit EOI.
- You will receive an email confirmation from The Standard once you've completed your EOI submission.
- You will be notified by The Standard once a decision is made on your application.



Benefits for your Health & Wellbeing

Employee Assistance Program (EAP)
for Employees and Family Members

Anthem 



24/7, 365 days a year

24/7, 365 days a year - Unlimited access to telephonic guidance, consultation, referral and support services



myStrength App

myStrength app - stress, anxiety, sleep management self-help tool



EAP Counseling Services

Up to 6 counseling sessions face-to-face, by phone, or virtually via LiveHealth Online, -per incident - at no cost to you.

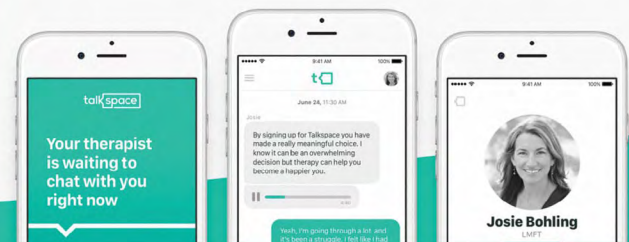


Unlimited Access

Get the support you need at (833) 954-1067
Access EAP online at [AnthemEAP.com](https://www.AnthemEAP.com) and enter PRISM.

talkspace

Talkspace is message-based therapy conducted through a proprietary app. You can message a dedicated therapist, as often as you wish, anytime, 5 days a week with same day response.



Access Talkspace online at
<https://www.talkspace.com/CountyofRiverside>
and enter RIVCO

- Convenient, Stigma Free, No Appointments
- Quick Match with your Licensed Therapist, 1:1 Relationship
- Start Same Day, Anytime, Anywhere

- Text, Audio, Video Messages
- Unlimited Messaging Therapy 100% covered for 3 months



How to Register for my|CalPERS



Not registered yet?

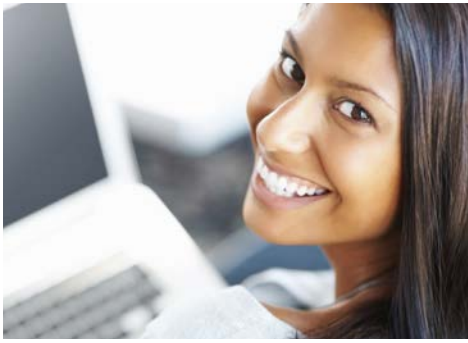
Go to my.calpers.ca.gov and follow these steps:

- 1 On the Pre-Log In page, select **Participant** and **Continue**.
- 2 Select **Register Now**.
- 3 Accept the terms and conditions under the Security Agreement.
- 4 Identify yourself by providing your name, date of birth, last four digits of your Social Security number or your CalPERS Identification number.
- 5 Answer a set of questions about your CalPERS account to verify your identity.
- 6 Create a Username and Password, and enter your email address.
- 7 Choose a personal security image and message.
- 8 Choose your security questions and answers. It's important to choose questions and answers you will remember.
- 9 Log in to my|CalPERS.

- 1 **Participant**
You are a participant if you are a member or non-member, community property payee, beneficiary, survivor, subscriber dependent, conservator, or have power of attorney.
 ←
- 2 New to my|CalPERS? [Register Now](#) ←
- 3
- 4 **First Name (required)**

Don't include your middle name or initial.
- 5 **Verify Your Identity (1 of 3)**
To verify your identity, choose the option that best answers the statement.
- 6 **Password (required)**

At least 8 characters.
No spaces, case sensitive.
- 7 
- 8 **Question 1 (required)**
- 9 Welcome to my|CalPERS




How to Access my|CalPERS

Can't remember your username?

- 1 Select **Forgot Your Username?**
- 2 Identify yourself by providing your name, date of birth, last four digits of your Social Security number or your CalPERS Identification number.
- 3 Select how you want to recover your username. You can choose to answer your security questions or have a temporary passcode sent to your email address or mobile number on record. Once you enter your temporary passcode, your username will appear.

Can't remember your password?

- 1 Select **Forgot Your Password?**
- 2 Identify yourself by providing your name, date of birth, last four digits of your Social Security number or your CalPERS Identification number.
- 3 Select how you want to reset your password. You can choose to reset your password by answering your security questions or by having a temporary passcode sent to your email address or mobile number on record. Once you enter the temporary passcode, you can create a new password.

If you exceed the allowed number of attempts to validate your identity, your account will be locked to protect your security. To unlock your account, contact us at **888 CalPERS** (or **888-225-7377**).

1 **Username (required)**

[Forgot your Username?](#) ←

2 **Identify Yourself**

Complete all of the fields below so we can confirm your identity. The information you enter must current Benefit Statement **exactly**.

First Name (required)

Don't include your middle name or initial.

Last Name (required)

Don't include a suffix such as Jr., Sr., I, II, etc.

3 **Recover Your Username**

How would you like to recover your username? **(required)**

By Email
Send a passcode to sxxxxxxxxx@calpers.ca.gov

By Phone
Send a passcode to XXX-XXX-2390
Text message fees may apply depending on your carrier.

1 **Password (required)**

[Forgot Your Password?](#) ←

2 **Identify Yourself**

Complete all of the fields below so we can confirm your identity. The information you enter must current Benefit Statement **exactly**.

First Name (required)

Don't include your middle name or initial.

Last Name (required)

Don't include a suffix such as Jr., Sr., I, II, etc.

3 **Reset Your Password**

How would you like to reset your password? **(required)**

By Email
Send a passcode to sxxxxxxxxx@calpers.ca.gov

By Phone
Send a passcode to XXX-XXX-2390

Retirement Frequently Asked Questions

1. Where can I find information on Retiree Benefits?
<https://benefits.rc-hr.com/RetirementPlans.aspx>
2. Does the County of Riverside offer a 401K?
No, the County of Riverside offers a 401(a) Money Purchase Plan and 457(b) Deferred Compensation Plan.
3. Am I eligible to contribute to a 457(b) Deferred Compensation Plan?
Yes, employees may choose to make bi-weekly contributions into the Deferred Compensation Plans through Nationwide Retirement Solutions and/or Corebridge Financial.
4. Can I purchase additional years of service with CalPERS?
If eligible, you may purchase Military time, Peace Corps time, Leave of Absence, Service Prior to Membership, or Redeposit of Withdrawn Contributions from CalPERS. Contact CalPERS Member Services for more information at 888-225-7377.
5. What is my Retirement formula?
Your retirement formula is determined by the County of Riverside's contract with CalPERS. Based on the contract, your age, benefit factor, and final compensation is used in the calculation of your retirement benefit.
6. Does the County of Riverside contract for Survivor Continuance with CalPERS?
Yes, Survivor Continuance provides that upon your death after retirement, a part of your monthly allowance will automatically continue to an eligible survivor.
 - If you contribute to Social Security, your eligible survivor will receive 25 percent of your unmodified allowance after your death in retirement.
 - If you do not contribute to Social Security, your eligible survivor will receive 50 percent of your unmodified allowance
7. How do I apply for Retirement?
You will need to meet with CalPERS at 888-225-7377 and/or a Retirement Specialist with the County of Riverside. The appointment can be scheduled by contacting the Retirement Division at 951-955-4981, opt. 2 or you may schedule the appointment online at <https://rc-hr.com/retirement>.
8. Am I eligible for Retiree Health Benefits?
If you retire with the County of Riverside within 120 days of separation, you are eligible to enroll in a medical plan with CalPERS depending on your bargaining unit.

9. Will my pension be affected if I come back to work after Retirement?
If you work for a non-CalPERS employer, there are no restrictions. If you work for a CalPERS employer, you cannot work more than 960 hours in a fiscal year.
10. What is the Post Employment Program (PEP)?
If eligible, the PEP provides eligible employees with significant tax advantages on your qualifying leave balance payouts.
11. How do I register for your Retirement workshops?
<https://rc-hr.com/retirement>
12. How do I register for MyCalPERS?
Go to my.calpers.ca.gov and click on “Active Members” to begin your registration. You will be able to access real-time details about your CalPERS account, view your health information, plan for retirement, enroll in educational offerings or schedule appointments.
13. Am I eligible for the 401(a) Money Purchase Plan?
Eligible employees belong to the LEMU, RCDDAA, Management, Confidential, Unrepresented, and Riverside Sheriffs’ Association.
14. What is the maximum I can contribute to the 457(b) Deferred Compensation Plan?
For 2023, the maximum is \$22,500 annually. If you are age 50 or older, you may contribute an additional \$7,500.
15. Can I access my 457(b) Deferred Compensation Plan and 401(a) Money Purchase Plan as an active employee?
For active employees, loan provisions available from both accounts. Employees over age 59 ½ have access to their 457b Deferred Compensation Plan.
16. What is the difference between the 401A TAP Retirement & the 401A Money Purchase Plan?
Only temporary employees pay into the 401A TAP Retirement in lieu of paying into Social Security. It is a self-administered defined benefit pension plan. The 401A Money Purchase Plan is funded by the County at no cost to the employee within the eligible bargaining groups, but employees must enroll and select investment elections to participate.
17. How can I change my deferral amounts into the 457(b) Deferred Compensation account?
[457 Change Form](#)

Contribute now to your Deferred Comp plan

The sooner you start, the better.



SCENARIO 1

Starts at age 21; stops at age 35

Contributes \$57.69/week for 14 years

Total contribution = \$42,000

7% hypothetical growth rate

Age 67

\$610,374

SCENARIO 2

Starts at age 35; stops at age 67

Contributes \$57.69/week for 32 years

Total contribution = \$96,000

7% hypothetical growth rate

Age 67

\$342,306

SCENARIO 3

Starts at age 21; stops at age 67

Contributes \$57.69/week for 46 years

Total contribution = \$138,000

7% hypothetical growth rate

Age 67

\$952,682

This illustration is a hypothetical compounding calculation assuming a rate of return of 7% on a \$30,000 annual salary. It is not intended to serve as a projection or prediction of the investment results of any specific investments. Investments are not guaranteed. Depending on the underlying investments, returns may be higher or lower. If costs and expenses had been considered in this illustration, the return would have been less. The interest is compounded annually based on weekly contributions.

This material is not a recommendation to buy or sell a financial product or to adopt an investment strategy. Investors should discuss their specific situation with their financial professional.



Scan this code to enroll online.



To schedule an individual appointment, scan this code.

Retirement Resource Group
888-401-5272
nrsforu@nationwide.com

NRM-13220AO.2 (01/21)



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The sooner you start, the easier saving for retirement may be

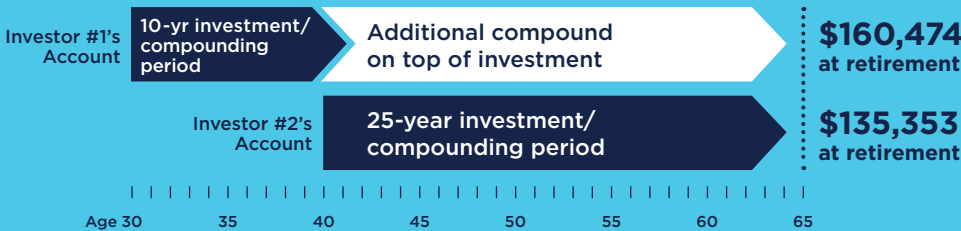


51% of households are at risk of not having enough money to maintain their living standards in retirement.¹

To understand why, consider this example.

Investor #1 begins saving \$2,000 per year beginning at age 30 and then stops after 10 years (\$20,000 total contribution). She leaves her money in the account for an additional 25 years.

Investor #2 doesn't start saving until age 40 but contributes \$2,000 per year for a total of 25 years (\$50,000 total contribution).



The illustration is a hypothetical compounding calculation assuming a 7% annual rate of return. It is not intended to serve as a projection or prediction of the investment results of any specific investment. Investments are not guaranteed. Depending on your underlying investments, your return may be higher or lower. Interest is compounded annually based on beginning-year contributions. No taxes or fees are reflected in this example, which would lower the results displayed. Source: Nationwide Financial® (2021).

This material is not a recommendation to buy or sell a financial product or to adopt an investment strategy. Investors should discuss their specific situation with their financial professional.

Investing involves market risk, including possible loss of principal.

¹"The National Retirement Risk Index: An Update from the 2019 SCF," Issue Brief 21-2, Center for Retirement Research at Boston College (January 2021).

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Scan this code to enroll online.



To schedule an individual appointment, scan this code.



MEL CASUPANAN
951-901-0514
casupm1@nationwide.com



Guadalupe Ayala
818-798-8159
ayalag2@nationwide.com

NRM-13380AO.3 (01/23)



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INVEST IN YOUR FUTURE

You can now make changes to your 457(b) Deferred Compensation contributions online using PeopleSoft Employee Self-Service!

The County of Riverside offers a voluntary 457(b) Deferred Compensation Plan to assist employees in meeting their financial goals in retirement. Employees may choose to contribute to Deferred Compensation Plans through Nationwide Retirement Solutions and/or VALIC. Employees can make contributions on a pre-tax and/or after-tax basis. Changes in the amount of compensation deferred each pay period can be made at any time. The minimum bi-weekly contribution is \$10.00. Your Deferred Compensation contribution is separate from your CalPERS or 401(a) Part-Time and Temporary Employees retirement plans.

[CLICK HERE](#)

Additional resources:

- [Contact a Nationwide and/or VALIC Financial Advisor](#)
- [457 Contribution Change Form](#)
- [Find Out More About The 457b Deferred Compensation Plan](#)

Step-by-Step Instructions:

Log into Employee Self-Service by entering your Employee ID# (e.g. E123456) and Password. Click on link below:

<https://hcm92.co.riverside.ca.us/psp/h920prda/?cmd=login>

 **ORACLE** PeopleSoft
HCM 9.2 Production

User ID 

Password 

Select a Language
English

[Sign In](#)

Enable Screen Reader Mode

[Forgot Your password?](#)

Select *Benefit Details*

ORACLE Employee Self Service

Open Enrollment

There is no Open Enrollment Event, but you have other event available to be processed.

Time

Payroll

Last Pay Date 06/02/2021

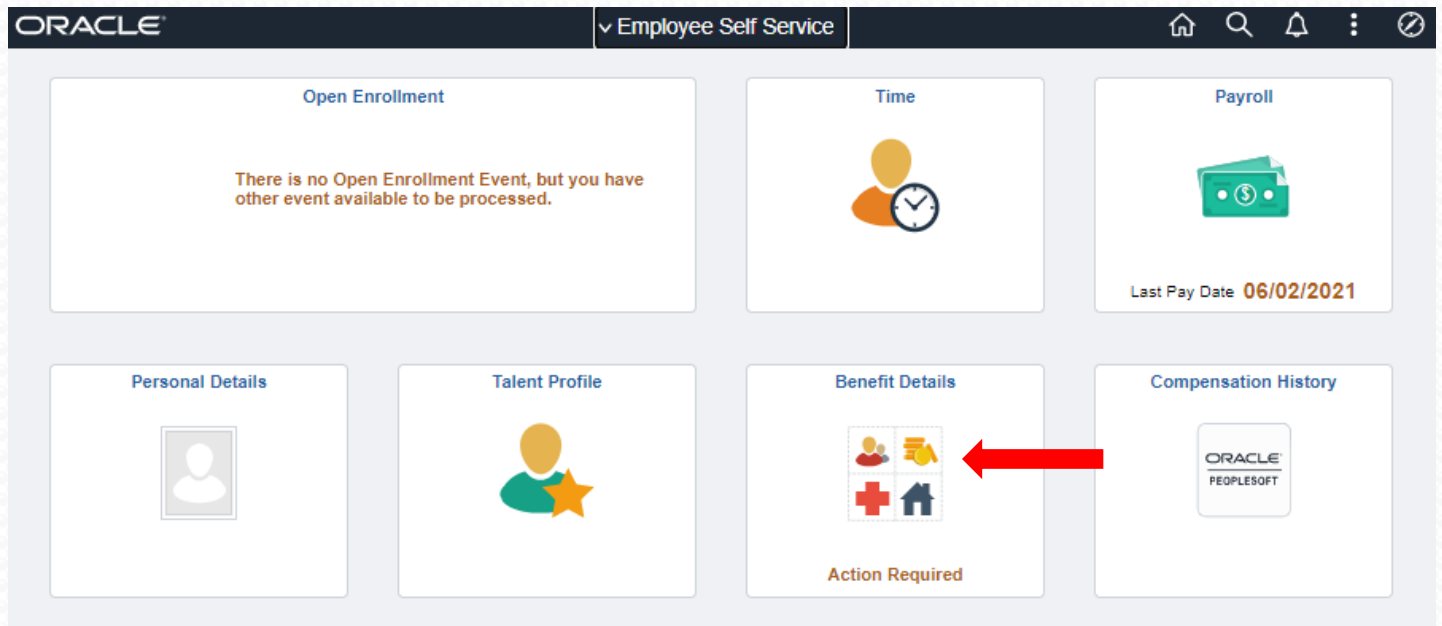
Personal Details

Talent Profile

Benefit Details

Action Required

Compensation History



Select *Life Events*

Employee Self Service Benefit Details

Benefits Summary

Benefit Statements

2021 Preview Statement

Benefits Enrollment

Resume Enrollment

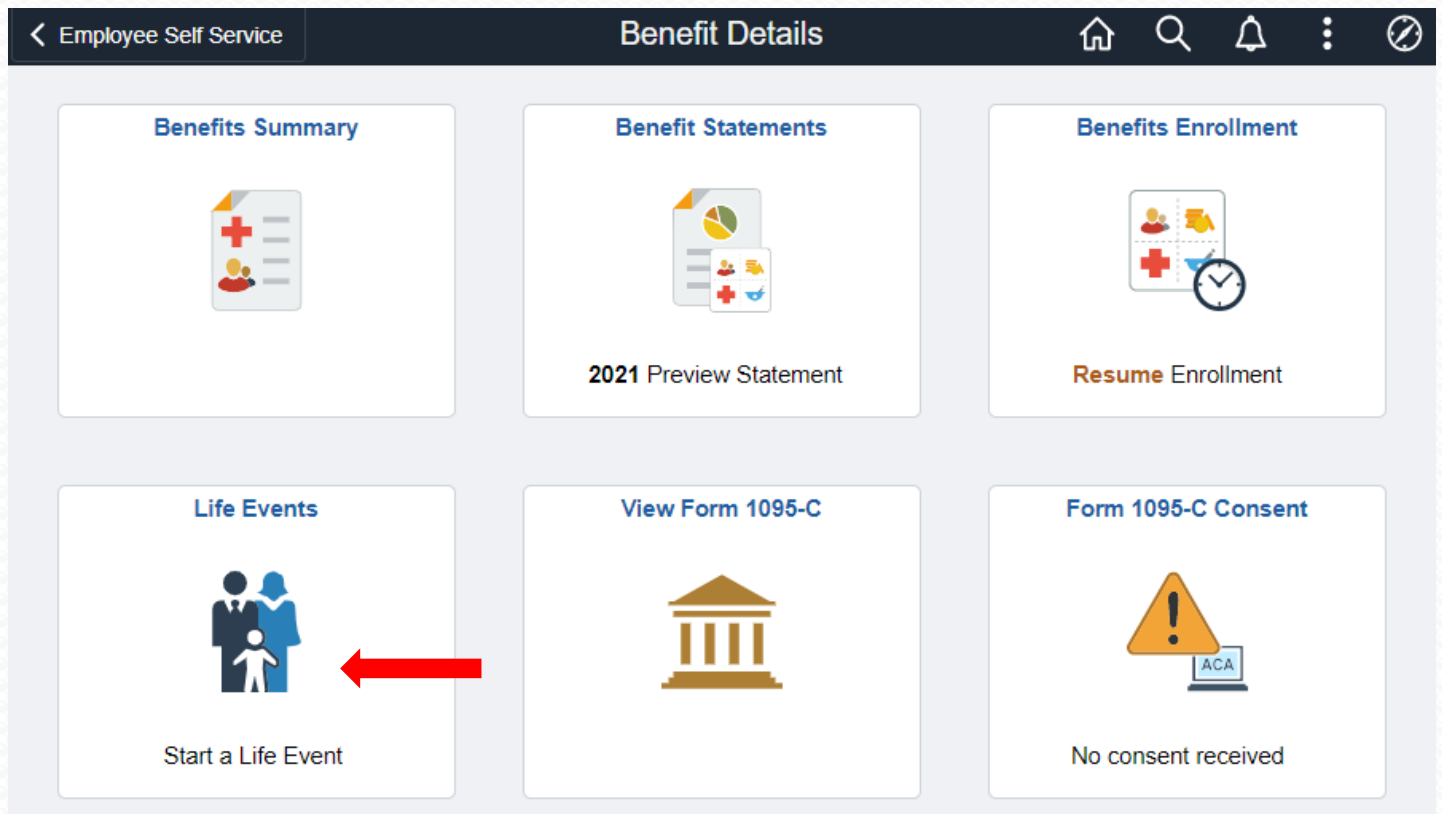
Life Events

Start a Life Event

View Form 1095-C

Form 1095-C Consent

No consent received



Select **Savings Contribution Change** and enter current date *in As Of* field, then click **Start Life Event**

Select **Savings Contribution Change** and enter the current date. You must enter the current date because this option cannot be retroactively dated. Click Start Life Event to continue


If you are experiencing any of the circumstances below, you may now initiate an event online that will allow you to upload documents of proof, add or change dependents, and make your new benefits elections at your convenience.

To begin, select the appropriate Event Type.

Then enter the **actual date** of your event. (i.e. Marriage Date, Birth Date, Hire Date, etc).

Employee

- Marriage / Domestic Partnership
- Birth / Adoption / Legal Guardianship
- Divorce / End of Domestic Partnership
- Hire / Rehire Benefits Elections
- Dependent Coverage Loss/Gain
- Savings Contribution Change

*As Of 

Select **Start My Enrollment** and click **Next**

|

Benefit Enrollment

Now we're ready to prepare your benefit options, based upon the Life Event information that you've entered. Your information will be analyzed to see if there is any impact to your eligibility for benefits, and determine whether changes to your existing enrollments are allowed. Select the 'Start My Enrollment' pushbutton to begin your benefit enrollment.

On the **Benefit Enrollment** screen, click on the Benefit Plan tile you wish to update. If this is a new contribution you will need to first select the plan, then set the contribution.

Select Plan Type (457 or Roth) and Vendor (Nationwide or VALIC) to change and click **Next**

Cancel | < Previous | Next >

Benefit Enrollment

This page presents all the benefit plans that are open for you to change at this time. Click the plan tiles below to explore your enrollment options, update dependents, and make enrollment changes.

IMPORTANT: Whether you have made changes or not, when you are finished, you must click the blue [SUBMIT ENROLLMENT] button below in the center of the page, in order to proceed.

Also, after you submit your benefit enrollment, you must click the 'Complete Your Event Here' step to mark your event complete for processing.

All of your benefit changes will be effective dated based upon your event date.

Enrollment Summary

Status **Pending Review**

Review Enrollment

Submit Enrollment

Benefit Plans

☰ ☰

457 Valic ←

Current No Coverage
New No Coverage
Status **Pending Review**
👤 0 Beneficiaries

Review

457 Nationwide ←

Current Nationwide 457 Deferred Comp \$20.00
New Nationwide 457 Deferred Comp \$20.00
Status **Pending Review**
👤 0 Beneficiaries

Review

VALIC 457 Roth Deferred Comp ←

Current No Coverage
New No Coverage
Status **Pending Review**
👤 0 Beneficiaries

Review

Nationwide 457 Roth Def Comp ←

Current No Coverage
New No Coverage
Status **Pending Review**
👤 0 Beneficiaries

Review

Enter your new contribution (Flat Dollar Amount or Percentage) and click **Done**

Cancel **457 Valic** Done

401(K) plans allow you to prepare for your financial security and build your savings for retirement.

Enroll in Your Plan

Plan Name
✓ Valic 457 Deferred Comp
Select Waive

Contributions

You can enter your contribution as a percent or flat dollar amount but not both. You can not exceed the before-tax and after-tax plan maximums. If you choose to enter percents, the sum of your before-tax and after-tax percents can not exceed 100 percent.

Before Tax Amount Before Tax Percent

Maximum Before Tax Percent 100.00

Contact Information

Phone: 951 9554981 x OPT 2
Email: retirement@rivco.org
Address: RivCo Retirement Contact, P.O. Box 1569, Riverside, CA 92502

4. Review your update on the **Benefit Enrollment** screen, click on the Review Enrollment button to go over your changes. If everything is correct, use the **Submit Enrollment** button to send this information to HR.

Cancel | < Previous | Next >

Benefit Enrollment

This page presents all the benefit plans that are open for you to change at this time. Click the plan tiles below to explore your enrollment options, update dependents, and make enrollment changes.

IMPORTANT: Whether you have made changes or not, when you are finished, you must click the blue [SUBMIT ENROLLMENT] button below in the center of the page, in order to proceed.

Also, after you submit your benefit enrollment, you must click the 'Complete Your Event Here' step to mark your event complete for processing.

All of your benefit changes will be effective dated based upon your event date.

Enrollment Summary

Status: Pending Review

Review Enrollment

Submit Enrollment

Benefit Plans

457 Valic Current: No Coverage New: No Coverage Status: Visited 0 Beneficiaries Review	457 Nationwide Current: Nationwide 457 Deferred Comp \$20.00 New: Nationwide 457 Deferred Comp \$25.00 Status: Changed 0 Beneficiaries Review
VALIC 457 Roth Deferred Comp Current: No Coverage New: No Coverage Status: Pending Review 0 Beneficiaries Review	Nationwide 457 Roth Def Comp Current: No Coverage New: No Coverage Status: Pending Review 0 Beneficiaries Review

5. Click on the '**Next**' button to navigate to the **Benefit Statements** to view your updates. If you wish to review or print this update, click the event to see more details.

6. Click on the '**Next**' button to navigate to the **Complete Your Event** page. From here you will be able to see an overview of the Savings Event. If a step has not been completed, this page will show you what steps are still pending and take you directly back to that pending step. If all the required steps have been successfully completed, you will be able to select the **Complete** button to finalize your request.



Human Resources Retirement Division

Phone: (951) 955-4981, Option 2 • Fax: (951) 955-8538 • Email: Retirement@rivco.org •
• Appointments: <https://rchr.checkappointments.com/> •
• Hours of Operation are Monday - Friday 8:00 a.m. to 5:00 p.m. •

INSTRUCTIONS

To change the bi-weekly amount you contribute to your 457 Deferred Compensation Plan account, submit savings contribution changes online <https://hcm92.co.riverside.ca.us/psp/h920prda/?cmd=login&languageCd=ENG&> **PeopleSoft Employee Self Service > Life Events > Savings Contribution Change**. Funds will be allocated based on investment elections on file with the provider.

You may also submit this form to the Retirement Division Fax (951) 955-8538 or retirement@rivco.org

- I am electing to CHANGE my contributions to the Plan.
- I am electing to STOP all my contributions to the Plan.
- I am a new participant in the County of Riverside 457 Deferred Compensation Plan **Note: Only use this form if you have established an account in the Plan. The enrollment must be completed before deferral can start. To enroll, contact a Nationwide or Corebridge Financial Advisor (Section 3). The Financial Advisor will assist you with account setup, plan enrollment, funding options, and investment advice to meet your financial goals.**

For questions contact Nationwide (877) 677-3678 Corebridge Financial (888) 568-2542 Retirement Division (951) 955-4981 Option 2

SECTION 1 - EMPLOYEE DATA


Last Name:	First Name:	Employee ID (required): _____
Social Security Number: XXX - XX - _____	Best Contact Telephone:	Department:


SECTION 2 - EMPLOYEE DEFERRAL

IRS regulations state that changes made to deferred compensation deferrals are to be effective on the first pay date of the next calendar month after receipt in Human Resources, unless noted otherwise. Complete the appropriate boxes below, with the amount you authorize to have deducted each pay period.

Effective date: ASAP or Paycheck dated _____

Complete all boxes even if currently enrolled and no change is being made. Blank or empty box(es) will replace your current contribution to zero:

	Regular Deferral Amount		50+ Catch-Up Deferral Amount		Standard Catch-Up Deferral Amount	
457 Pre-Tax Contribution:	\$	%	\$	%	\$	%
ROTH After-Tax Contribution:	\$	%	\$	%	\$	%

	Regular Deferral Amount		50+ Catch-Up Deferral Amount		Standard Catch-Up Deferral Amount	
457 Pre-Tax Contribution:	\$	%	\$	%	\$	%
ROTH After-Tax Contribution:	\$	%	\$	%	\$	%

I authorize my employer to reduce my salary by the above amount which will be credited to my Employer's Deferred Compensation Plan. The reduction will continue until otherwise authorized in accordance with the Plan. The deposit of my deferred amount by my employer and its payment to the designated investment options will be reflected in the first pay period contingent on the processing of this application by the Plan Administrator in conjunction with the set-up time required by my payroll center. The reduction is to be allocated to the funding options on file with the provider.

EMPLOYEE SIGNATURE: _____ DATE: _____

OFFICE USE ONLY: _____
Representative's Name - Please Print

Recorded Line: _____
(Required if being submitted by a Nationwide or VALIC Retirement Representative)

SECTION 3 - FINANCIAL ADVISOR CONTACT INFORMATION

For more detailed information, please schedule a meeting with a Financial Advisor listed below. The Financial Advisor will assist you with account setup, plan enrollment, understanding your funding options, and investment advice to meet your financial goals.

Nationwide Retirement Solutions			
Mel Casupanan	Casupm1@Nationwide.com	All Areas, Hospital, DPSS	(951) 901-0514
Lupita Ayala	Ayalag2@Nationwide.com	Hospital, DPSS	(818) 798-8159
Janice Nichols	Nichoj7@Nationwide.com	Desert Areas	(760) 567-5007
Corebridge Financial			
Scott Meinert	Scott.Meinert@corebridgefinancial.com	All Areas	(951) 225-5347
Nain Perez	Nain.Perez@corebridgefinancial.com	All Areas	(951) 403-0652
Tim McDonald	Tim.McDonald@corebridgefinancial.com	All Areas	(760) 835-9522
Kevin Landen	Kevin.Landen@corebridgefinancial.com	All Areas	(951) 501-6432
Roel Aguinaldo	Roel.Aguinaldo@corebridgefinancial.com	All Areas	(951) 205-9445
Tiffany Dugas	Tiffay.Dugas@corebridgefinancial.com	All Areas	(951) 414-0875
Joshua Cervantes	Joshua.Cervantes@corebridgefinancial.com	All Areas	(951) 566-6936



COUNTY OF RIVERSIDE – HUMAN RESOURCES COMMUTER SERVICES DIVISION

PROGRAM INFORMATION

Did you know that County employees who carpool, take public transportation, walk, bike, or telecommute to work five (5) times in the same calendar month may be eligible to register in the RideShare Program? The County of Riverside Human Resources Commuter Services Division offers *incentives for eligible, active, and registered RideShare participants. The *incentive program and its services are provided at no cost, with the exception of the County Vehicle (CV) Program, which is an employee-subsidized program.

\$5/DAY INCENTIVE: For a limited time, qualifying active and registered participants have an opportunity to earn up to \$125 in gift cards. Active and registered participants must RideShare to work five days per month for three consecutive months and log commuter trips through the IE Commuter website. Other restrictions may apply. *Trip log entries are audited for accuracy against County employee approved timecard data. Telecommuters are ineligible for this incentive.*

GUARANTEED RIDE HOME (GRH) PROGRAM: This program is offered to active and registered participants for qualifying guaranteed ride home from work occurrence(s). Active and registered participants may use the GRH Program up to six (6) times per program year, typically not to exceed one use within a 30-day period. *Telecommuters are ineligible for this program.*

BIKE OR WALK TO WORK PROGRAM: Biking and walking to work are greatly encouraged by the County of Riverside. At some worksite's, cyclists and walkers can take advantage of bike racks, personal lockers, and showers! By simply walking or riding your bike to and from work one day a week saves gas, helps the environment, and gives you some exercise.

TRANSPORTATION EXPENSE (TE) PROGRAM: Public transportation (e.g., RTA, Metrolink, OmniTrans or Sunline) users may utilize the Transportation Expense Program to save time and money on their monthly transit pass. Enrolled participants can have the cost of their monthly transit pass deducted biweekly through payroll deduction on a pre-tax basis up to the IRS allowed amount.

COUNTY VEHICLE (CV) PROGRAM: The CV Program allows four (4) or more employees that RideShare to a County facility to utilize a County Vehicle (CV) for their commute to and from work in a County-owned vehicle. Program participants pay a biweekly fee based on daily round-trip mileage per person per vehicle via payroll deductions. Fees per person include a guaranteed seat, routine service repair and maintenance, fuel, and a loaner/rental vehicle while the County Vehicle (CV) is being serviced.

TELECOMMUTING PROGRAM: Working from home has its advantages. One of those perks is the Telework Spotlight offered by IE Commuter. Qualifying active and registered participants who live or work in Riverside or San Bernardino Counties may be randomly selected to win a monthly prize worth up to \$100! Every telework day that a participant logs into their IE Commuters account counts as an entry and gives the participant a chance to win! *The Telework Spotlight random drawings are conducted internally by IE COMMUTER staff. Active and registered participants currently participating in the \$5/Day Incentive are ineligible to win.*

RESERVED CARPOOL PARKING SPACES: At most County worksites there are reserved carpool parking spaces for employees who are active and registered participants. Not only are there designated parking spaces, but parking structure passes may be provided to active and registered participants who work at or near the County Administrative Center (CAC) in downtown Riverside, depending on availability. *Active and registered participants must be carpooling with another active and registered County participant at or near the same Downtown Riverside location.*

RIDEMATCH LIST: Employees may complete and submit a RideMatch Form and request a generated RideMatch list of interested RideShare participants that live and work in their surrounding area. The generated RideMatch list will also assist in locating an established County Vehicle (CV) group commuting to their work location! It is the employee's responsibility to contact employees they are matched with if desire to participate in a RideShare arrangement. *Participation is voluntary.*

MONTHLY OPPORTUNITY DRAWINGS: Qualifying active and registered participants have an opportunity to win in a monthly drawing. Each month, eight active and registered participants are selected to receive a gift catalog from HALO Recognition to select a prize. Prizes include such items as jewelry, camping gear, and home goods. *Telecommuters are ineligible for this incentive.*

Please contact us for more information or if you are interested in registering with the Human Resources Commuter Services Division RideShare Program!

email: icommute@rivco.org General Office Line: 951/955-1118 Website: rivcocommuter.rc-hr.com

COUNTY OF RIVERSIDE – HUMAN RESOURCES COMMUTER SERVICES DIVISION

RIDESHARE REGISTRATION EXCUSES

“NO ONE HAS MY SCHEDULE” or “MY SCHEDULE IS UNPREDICTABLE”

Request a RideShare Match List from the Human Resources Commuter Services Division to be matched with other commuters who have similar schedules and routes. It's not necessary to RideShare every day to qualify; you only need to do so five (5) calendar days per month.

“I AM NEW AND I DON'T KNOW ANYONE HERE” or “NO ONE LIVES NEAR ME”

You would be surprised who lives around you! Request a RideShare Match List from the Human Resources Commuter Services Division to be matched with other commuters traveling the same route. Also, during your breaks, startup a conversation with your coworkers about RideSharing. It's not necessary to RideShare every day, you only need five (5) calendar days per month to qualify.

“I HAVE OFFSITE MEETINGS AND EVENTS”

It's always important to communicate, and on days when you don't have events or meetings, you can RideShare. You are eligible just by simply RideSharing five (5) calendar days each month!

“I LIVE TOO CLOSE”

That's fantastic! People frequently hold the false belief that living too close can't impact anything. You are RideSharing and making a difference if you simply commute five (5) calendar days a month by walking, biking, taking public transportation, or carpooling.

“I HAVE TO DROP OFF/PICK UP MY DEPENDENTS FROM DAYCARE”

You can find a coworker who lives nearby and join a carpool together; you can pick them up after dropping off your dependents.

“I HAVE TO BE AVAILABLE TO LEAVE FOR AN EMERGENCY”

The Human Resources Commuter Services Division offers the Guaranteed Ride Home Program! The program is offered for qualifying guaranteed ride home from work occurrence(s) and may be used up to six (6) times per program year.

“I ALREADY CARPOOL WITH A NON-COUNTY EMPLOYEE.”

Excellent news, indeed! Did you know that you are eligible to register in the program if you carpool with a non-County working adult? Contact our office for a registration form!

“I LIKE DRIVING ALONE”

Carpooling is not necessary every day. Partner up with a coworker you get along with, that lives on your route to work, and consider being the driver.

“I AM ALWAYS LATE”

By establishing a new habit of being on time can be made easier if you carpool with someone who is always on time.

“I DON'T WANT TO DEPEND ON OTHER PEOPLE”

Be the carpool driver! Choose a carpool companion who is aligned with your professional principles.

“I HAVE SOCIAL ANXIETY”

Carpool with someone you know. You can read, listen to music, or engage in other activities to relieve anxiety if you are not operating the vehicle.

“I LIKE MY ROUTINE AND I DON'T WANT TO CHANGE IT”

Have you thought about picking up a coworker who lives near your workplace? On your way to work, do you drop off a County or non-County working adult? You would be eligible for the program if you were carpooling.

“I OFTEN HAVE ERRANDS TO RUN AFTER WORK”

Some errands can be done during lunch time, and keep in mind delivery services are available now. You may also consider RideSharing 2 – 3 days a week and run your errands after work when not carpooling or on the weekends?

“THERE’S NO BUS/TRAIN STOP NEAR ME”

Have you considered to bike and/or walk to the transit stop. Have you considered riding your bike to the nearest transit stop? While taking transit, you can store your bike.

“I DON’T FEEL COMFORTABLE ON PUBLIC TRANSIT”

It takes practice to overcome fear of the unknown, so give transit a try—even on the weekend or on a day when you don't have to work—to see if it's a good fit for you.

“IF I TAKE PUBLIC TRANSIT, IT WILL TAKE 3X LONGER”

There are additional RideSharing options besides public transportation. You can cut emissions by also walking, biking, and carpooling.

Allow the Human Resources Commuter Services Division to assist you in getting started with RideSharing and earning incentives. Remember if you carpool, vanpool, take public transportation, walk, or bike to a County worksite five (5) workdays per month, you qualify for the RideShare program! In addition, you may be eligible to earn up to \$125 in gift cards for logging your commute miles for the first three (3) consecutive months!

Please keep in mind that in order to receive the \$5/Day RideShare incentive and program benefits, employees must first register with the County of Riverside Human Resources Commuter Services Division.

Please contact us for more information or if you are interested in registering with the Human Resources Commuter Services Division RideShare Program!

email: icommute@rivco.org General Office Line: [951/955-1118](tel:9519551118) Website: rivcocommuter.rc-hr.com

County employees who falsely report RideShare participation to earn incentives may be subject to disciplinary action in accordance with County Policy.



COUNTY OF RIVERSIDE – HUMAN RESOURCES COMMUTER SERVICES DIVISION

COMMUTE MODE REGISTRATION

PLEASE RETURN TO COMMUTER SERVICES OFFICE FOR PROCESSING: icommute@rivco.org

Today's Date _____ Employee ID Number _____

Last Name _____ First Name _____

Department _____ Division _____ Mail Stop Number _____

Work Number(s) _____ Work Hours/Schedule _____

Work email address _____

Work Address _____ City _____ Zip _____

Home email address _____

Home Address _____ City _____ Zip _____

Contact Number(s) _____

Did you alter your work schedule to participate in the Commuter Services RideShare Program? YES NO

On an average, how many days per week will you be using the registered alternative mode of transportation? *(Not commuting alone)* _____

PLEASE COMPLETE THE APPROPRIATE COMMUTE MODE BELOW

CARPOOLING

My signature below acknowledges my agreement to abide by the terms and conditions as set forth by the Human Resources Commuter Services Division as so stated on the back of this document. Abuse of any rules or regulations outlined with the Human Resources Commuter Services Division and in Ordinance 626.4 pertaining to Carpool Parking Permits and or Parking Structure access cards and the use of, and/or falsification of RideShare information, will result in the revocation of the Carpool Parking Permit and or Parking Structure access card and disciplinary action in accordance with County Policy. Employees using an issued parking structure access card for purposes other than intended will be required to reimburse the Human Resources Commuter Services Division for charges incurred as a result of parking structure access card misuse.

Check appropriate response: I carpool with a County employee(s) I carpool with a non-county employee *(must be full-time working adult(s))*

Do you? *(check one)* Share Driving Ride Only Drive Only Are you? *(check one)* A New Carpool Group Adding to an existing Carpool Group

There are reserved carpool parking spaces available at my workplace; please issue a parking permit to our carpool group. *(check one)* Yes No NA

Carpool Partner(s):

Name _____ Department or Employer _____ Phone _____

Name _____ Department or Employer _____ Phone _____

Name _____ Department or Employer _____ Phone _____

Name _____ Department or Employer _____ Phone _____

Vehicle Make and Year _____ Model _____ Color _____ License Plate # _____

TRANSIT

Transit Agency *(check appropriate response)* METROLINK RTA OMNITRANS SUNLINE OCTA

Route or Transit Line Number(s) _____

BIKE or WALK

I am registering to *(check appropriate response)* BIKE TO WORK WALK TO WORK

Total miles I bike or walk to work _____

Bike Color _____ Make _____ Serial Number _____

*TELECOMMUTE

**Registered telecommute participants are ONLY eligible for the IE Commuter's Telework Spotlight. Qualifying participants will be randomly selected to win a monthly prize worth up to \$100! Other restrictions may apply.*

I am registering to: TELECOMMUTE

Telecommuting Days (circle all that apply) M T W Th F

REGISTERED PARTICIPANTS ACKNOWLEDGEMENT

My signature confirms that I understand, acknowledge, and will abide by the terms and conditions of the County of Riverside Human Resources Commuter Services RideShare Program. I further understand that abuse of any rule, regulation, or falsely reporting RideShare participation to earn incentives may result in termination of my participation and disciplinary action in accordance with County Policy.

Signature _____

Date _____

HUMAN RESOURCES COMMUTER SERVICES DIVISION USE ONLY

MODE CONFIRMATION *(circle one)*: CP CN R B W T TW IF CN, ENTER CN: _____

GRH VOUCHER: _____ CP PERMIT: _____ STRUCTURE PASS: _____ DEPARTMENT CODE: _____ WORK SITE: _____

DATE WELCOME INFORMATION AND LINK EMAILED ON: _____ REGISTRATION PACKET MAILED TO/ON: _____ HRCSD REP: _____

COUNTY OF RIVERSIDE – HUMAN RESOURCES COMMUTER SERVICES DIVISION

PARKING PERMIT/STRUCTURE PASS CARD AGREEMENT

I UNDERSTAND AND AGREE TO ABIDE BY THE FOLLOWING PARKING STRUCTURE PASS/PARKING PERMIT RULES:

- 1) I understand that active registered Commuter Services participants of our designated carpool group will maintain full responsibility for the carpool parking permit and/or parking structure pass card. (If available, carpool parking structure passes are issued **ONLY** to active registered carpool groups working in Downtown Riverside.)
- 2) I understand that the carpool parking permit and/or parking structure pass card is not transferable and allowing an unregistered individual to use the active registered groups issued carpool parking permit and/or parking structure pass card shall result in the immediate loss of the groups carpool parking permit and/or parking structure pass.
- 3) I understand that the carpool parking permit and/or parking structure pass card allows the active registered carpool group to park only **ONE** vehicle at a time in an unreserved parking space in the assigned parking lot/parking structure **ONLY** on the days the group carpools.
- 4) I understand that parking structure card holders who forget their parking structure pass card or cannot find their parking structure pass card at the time of exit will be subject to paying the hourly fee.
- 5) I understand that while parked in the designated reserved carpool location or assigned parking structure, we will display our carpool parking permit on the rear-view mirror of our vehicle and our County employee parking permit.
- 6) I understand that County of Riverside parking ordinance number 626 is strictly enforced in all County of Riverside parking structures and lots. I will abide by all County of Riverside parking lot and parking structure rules and that the vehicle and personal items be locked and secured. The County of Riverside is not responsible for damage and/or theft while parking in County facilities.
- 7) I understand that I will notify the Human Resources Commuter Services Division immediately if our permit and/or parking structure pass card is misplaced/lost or stolen and understand that we are responsible for paying a \$10.00 card fee and an additional \$10.00 replacement/activation fee.
- 8) I understand that I will notify the Human Resources Commuter Services Division immediately of any changes to our active registered carpool group. If the group disbands or if we decide not to park in the reserved carpool parking space and /or in the parking structure, we will immediately return our permit and/or issued parking structure pass card to the Human Resources Commuter Services Division. If the permit and/or parking structure pass card is misplaced/lost or stolen, we understand that we are responsible for paying a \$10.00 card fee and an additional \$10.00 replacement/activation fee.
- 9) Abuse of any rules or regulations outlined with the Human Resources Commuter Services Division and in Ordinance 626.4 pertaining to Carpool Parking Permits/Parking Structure cards and the use of, and/or falsification of RideShare information, will result in the revocation of the Carpool Parking Permit/Parking Structure card and disciplinary action in accordance with County Policy. Employees using an issued parking structure card for purposes other than intended will be required to reimburse the Human Resources Commuter Services Division for charges incurred as a result of parking structure card misuse.

email: icommute@rivco.org
General Office Line: [951/955-1118](tel:9519551118)
Website: rivcocommuter.rc-hr.com



COUNTY OF RIVERSIDE – HUMAN RESOURCES COMMUTER SERVICES DIVISION

RIDEMATCH REQUEST

PLEASE RETURN TO THE HR COMMUTER SERVICES OFFICE FOR PROCESSING: icommute@rivco.org

PLEASE PRINT CLEARLY/**REQUIRED FIELDS**

LAST NAME _____ **FIRST NAME** _____ **MI** _____ **EMPLOYEE ID NUMBER** _____

E-MAIL ADDRESS _____

HOME ADDRESS _____ **CITY/ZIP CODE** _____

NEAREST CROSS STREETS (EXAMPLE: PARK AVENUE AND MAIN STREET) _____

CELL/HOME TELEPHONE NUMBER _____ **WORK TELEPHONE NUMBER** _____

DEPARTMENT/AGENCY _____ **DIVISION** _____ **MAIL STOP #** _____

WORK ADDRESS _____ **CITY/ZIP CODE** _____

WHAT ARE YOUR REGULAR WORK HOURS? **START TIME** _____ am pm

END TIME _____ am pm

Do you have flexibility with your regular work schedule 30 minutes before or after? YES NO

If yes, what alternative work schedule would you be willing to consider? Start: _____ End: _____

Do you have a vehicle to alternate with others to carpool? YES NO

How do you currently commute to work? (Drive alone, public transit, etc.) _____

How did you hear about Commuter Services? _____

If there is a County Vehicles (CV) group that fits your route and schedule, would you be interested in joining the group? YES NO

ACKNOWLEDGEMENT

My signature below acknowledges my home address will remain strictly confidential and will never be shared or released with anyone. By submitting a RideMatch Request Form, I will receive a generated list of interested RideShare participants that live and work in my surrounding area. The generated RideMatch list will also assist me in locating an established County Vehicle (CV) group. It is my responsibility to contact participants from the generated list if I desire to participate in a RideShare arrangement. I understand and acknowledge that participation is voluntary.

Employee Signature

Date

HUMAN RESOURCES COMMUTER SERVICES DIVISION USE ONLY

DATE REQUEST RECEIVED: _____ RESPONSE DATE: _____ TOTAL COMMUTERS MATCHED: _____

NOTES: _____

◆ **Family and Medical Leave Act (FMLA)** ◆ **California Family Rights Act (CFRA)**
◆ **California Pregnancy Disability Act (PDL)**

FAMILY AND MEDICAL LEAVE FACT SHEET

The following is a summary of pertinent facts regarding family and medical leave under FMLA, CFRA, and/or PDL. More complete information is available from your Department Designee or from the **HR Website/FMLA, CFRA, PDL and Other Leaves Page** at: <http://www.rc-hr.com/HR-Services/Employee-Services/FMLA-CFRA-PDL-and-Other-Leaves>

- All County employees (regular, part-time, temporary, seasonal and per diem) working in California are entitled to leave under FMLA, CFRA, and/or PDL, provided that eligibility requirements are met.
- To be eligible for FMLA and/or CFRA leave, an employee must have been employed with the County for at least 12 months during the past 7 years, and must have worked at least 1,250 hours during the 12-month period immediately preceding the beginning of the leave. All female employees of the County are eligible for PDL, regardless of their length of service or the number of hours worked.
- Eligible employees are generally entitled to take leave under the following timeframes:
 - Up to 12 weeks under FMLA/CFRA for a serious health condition of the employee or family member, or up to 12 weeks under FMLA for a qualifying exigency concerning a family member who is a covered military member (National Guard or Reserves only);
 - Up to 26 weeks under FMLA to care for a family member or next of kin who is a covered service member with a serious illness or injury sustained in the line of duty while on active duty;
 - Up to 4 months (i.e., 17.33 weeks or 693.2 hours) under PDL for prenatal care, severe morning sickness, or disability due to pregnancy or childbirth.Depending on the situation, more than one type of leave may run concurrently.
- The amount of leave for spouses is limited to a combined total of 12 weeks if the time off is for bonding purposes after the birth or placement of a child for adoption or foster care. This limitation applies whether or not the spouses work in the same area or department.
- All FMLA, CFRA and PDL forms are available on the **HR Website/FMLA, CFRA, PDL and Other Leaves Page** at: <http://www.rc-hr.com/HR-Services/Employee-Services/FMLA-CFRA-PDL-and-Other-Leaves>. Employees should read the information on these forms carefully and ensure that the forms are completely and accurately filled out at the time of submission. Employees are encouraged to contact their Department Designees with any questions.
- Although the basic provisions for FMLA, CFRA, and PDL are for *unpaid* leave, the employer is allowed to require employees to use paid leave balances in certain situations. Refer to the *Use of Accruals for Paid Family and Medical Leave* chart for more information.
- Employees who are requesting FMLA/CFRA for **foreseeable** reasons are required to give 30 days notice. In cases where employees do not give 30 days notice, the employer may ask for an explanation. If the explanation is insufficient, the employer may delay the leave.
- Employees who are requesting FMLA/CFRA leave for **unforeseeable** reasons must give notice as soon as practicable, generally the same or next business day if the employee is off work when he/she learns the need for leave.
- Employees on FMLA, CFRA, and/or PDL leave are required to follow their department's usual notification and call-in procedures. Employees taking intermittent leave must notify their department when they call in that the leave is being taken under FMLA, CFRA, and/or PDL. Failure to do this could result in denial of their FMLA, CFRA and/or PDL entitlement for that day.
- By law, employers may designate an absence or leave as FMLA, CFRA, and/or PDL if there is reason to believe the absence qualifies, whether or not the employee requests it, and whether or not it is beneficial to the employee.
- An employee who requests a leave under FMLA or CFRA, but does not meet the **eligibility requirements** (e.g., hasn't worked 1250 hours in the past 12 months), must be sent a *Notice of Eligibility and Rights & Responsibilities*, which includes at least one reason for the employee's ineligibility.
- An employee who requests leave under FMLA, CFRA, and/or PDL, but does not meet **qualification requirements** (e.g., hasn't provided complete and sufficient medical certification), must be notified of the leave denial in writing; the *Designation Notice* is used for this purpose.

- By law, employers must reinstate employees returning from FMLA/CFRA leave to the same or an equivalent/comparable position (same position if returning from PDL), unless the employee would otherwise have been terminated, transferred, or laid off during the period of the leave.
- Under FMLA/CFRA regulations, all records pertaining to an employee's FMLA, CFRA, and/or PDL leave must be retained separate from his/her personnel file, for a period of at least three years.

**COUNTY OF RIVERSIDE, CALIFORNIA
BOARD OF SUPERVISORS POLICY**

Subject:	<u>Number</u>	<u>Page</u>
LACTATION ACCOMMODATIONS FOR EMPLOYEES	C-4	1 of 2

PURPOSE

Pursuant to Sections 1030-1034 of the California Labor Code, the purpose of this policy is to affirm the County's commitment to comply with the law and protect the right of employees to request lactation accommodation when there is a need to express breast milk for their infant child during work hours.

SCOPE

This policy applies to all County of Riverside employees.

POLICY:

Employee requests for lactation accommodation can be made with their immediate supervisor, manager, department head or the Human Resources Department.

Break Time – Upon request, the County shall provide a reasonable amount of break time to accommodate an employee desiring to express milk for the employee's infant child each time the employee has need to express milk. The break time shall, if possible, run concurrently with any break time already provided to the employee.

Private Lactation Spaces – Upon request, the County shall provide an employee with the use of a room or other location for the employee to express milk in private. The room or location may include the place where the employee normally works, and must meet the following requirements:

1. A lactation room or location shall not be a bathroom and shall be in close proximity to the employee's work area, shielded from view, and free from intrusion while the employee is expressing milk.
2. The room or location must be safe, clean and free of hazardous materials.
3. The room or location must contain a surface to place a breast pump and personal items.
4. The room or location must contain a place to sit.
5. The room or location must have access to electricity or alternative devices, including, but not limited to, extension cords or charging stations needed to operate a battery-powered breast pump.
6. The County must provide access to a sink with running water and a refrigerator suitable for storing milk in close proximity to the employee's work area. If a refrigerator cannot be provided, the County may provide another cooling device suitable for storing milk, such as an employer-provided cooler.
7. Where a multipurpose room is being used for lactation (e.g., a conference room), the use of the room for lactation shall take precedence over the other uses, but only for the time it is in use for lactation purposes.
8. If the County shares tenancy in a building with another employer, it is permissible to provide a space that is shared among the multiple tenants if the County cannot provide a location within its own workspace.
9. The County may designate a lactation location that is temporary, due to operational, financial or space limitations. These temporary locations shall not be a bathroom and

COUNTY OF RIVERSIDE, CALIFORNIA
BOARD OF SUPERVISORS POLICY

Subject:	<u>Number</u>	<u>Page</u>
LACTATION ACCOMMODATIONS FOR EMPLOYEES	C-4	2 of 2

shall be in close proximity to the employee's work area, shielded from view and free from intrusion while the employee is expressing milk.

Exceptions – Pursuant to Section 1032 of the California Labor Code, the County is not required to provide break time under this policy if to do so would seriously disrupt its operations.

Responses to Requests – If the County cannot provide break time or a location that complies with this policy, the County shall provide a written response to the employee.

Breastfeeding Discrimination – Under California's Fair Employment and Housing Act (FEHA), it is unlawful to engage in specified discriminatory practices in employment on the basis of sex. Under existing law, "sex," for the purposes of the act, includes gender, pregnancy, childbirth, and medical conditions related to pregnancy or childbirth. California Assembly Bill 2386 recently amended the statutory definition of "sex" under FEHA to now include breastfeeding or medical conditions related to breastfeeding.

Complaints – Complaints of violations of this policy can be made with the Human Resources Department and/or a complaint can be filed with the State of California Department of Industrial Relations, Labor Commissioner's Office.

Ergonomic Assessment Process

DPSS	All Other Departments
<ol style="list-style-type: none"> 1. Notify your supervisor 2. Supervisor will contact your onsite Ergonomic Coord. 3. Onsite Coordinator will schedule an assessment 	<ol style="list-style-type: none"> 1. Notify Supervisor 2. Supervisor will contact your assigned Safety Coordinator 3. Safety will forward a Pre Assessment form to be completed by the Employee. 4. Once Pre Assessment is received an assessment will be scheduled.

Safety Training

We offer several Safety Training courses the big three are;

Repetitive Motion Injury - Employee Workplace Violence Awareness - Drivers Awareness Training

All of three can be completed either in person or E-Learning through CORLearning

Contact your Safety Coordinator for other classes or check out our website (<https://safety.rc-hr.com/Home.aspx>)

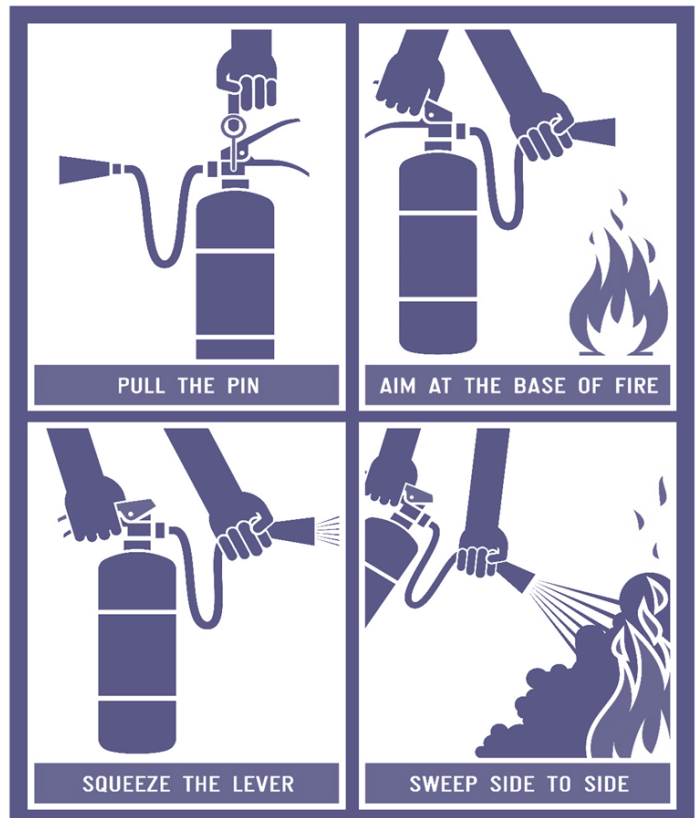
These classes should be completed within the first six months of employment.

HOW2 

use a

Fire Extinguisher

P	- Pull the Pin
A	- Aim the nozzle at the base of the fire from approx. 6 ft
S	- Squeeze the handle
S	- Sweep the nozzle side to side.





FREQUENTLY ASKED QUESTIONS



Q:	Is the Drivers Awareness Training required every year?
A:	Drivers Awareness Training is a once and done class. However, we would recommend a refresher every two years. Note: DAT is required after a person is deemed to have a preventable accident .
Q:	Can I drive a vehicle before attending Drivers Awareness Training?
A:	Yes, once your department head or designee has approved and signed your "Authorization to Drive form" (Form 30) your driving privilege has been authorized. Your department must submit the signed Authorization to Drive form to the Safety Office.
Q:	Do I have to take Repetitive Motion Injury Prevention training before I get an "Ergonomic Assessment"?
A:	We encourage everyone to take the course before things start to become an issue; sooner the better.
Q:	Is it mandatory that I have an "Authorization to Drive form on file with the Safety Office in order to drive a County and or Private vehicle on County business?
A:	Yes, you can find the form on the Safety Division Website.
Q:	Should I take "Employee Workplace Violence Awareness" training again.
A:	Well that's up to you. It is currently considered a once and done class. We do change the training as new information is available or strategies change. We recommend you attend every two years.

Q:	If I get injured at work who do I report it to?
A:	Hope your ok, but you should let your supervisor know asap. We can start the process of getting you better. Workers Compensation team will reach out to very soon.
Q:	How do I stay current with Safety Topics?
A:	Well, you came to the right place. Check out our Safety Division Newsletter. You can find it at our Website : https://safety.rc-hr.com/Home.aspx
Q:	Where can I find safety related forms?
A:	On our website under Safety Center / Forms @ https://safety.rc-hr.com/SafetyCenter/Forms.aspx
Q:	The A/C in our building stopped working and its hot, can I go home?
A:	Cal-OSHA sets no indoor temperature guidelines at the moment. You are only permitted to go home if your department management grants permission. In most cases administration will relocated staff to other facilities. If you choose to leave work without being granted permission by management, then you may be required to use your personal leave time. For more information: http://www.rivcocob.org/boardpolicies/policy-h/POLICY-H19.pdf

The Safety Division assists in administering the safety and loss prevention program to protect county employees, those who visit county facilities or receive county services. It also provides safety policy development, audits, support services, as well as internal training.

Contact us anytime at: 3403 10th Street, Suite 501, Riverside, CA 92501 — County Mail Stop: 2170

Ph: (951) 955-3520 Fax: (951) 955-9200

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