



CITY OF PALO ALTO WAGE AND HEALTHCARE PROPOSAL

Motor Equipment Mechanic Job Family

City Wage Proposal: 4% in year 1, 3% in year 2, 3% in year 3

Market Adjustment after the COLA

Job Family	Position	Wage	Market Adjustment	2025 Market +4% COLA	Monthly Wage Increase	2026 3% COLA	Monthly Wage Increase	2027 3% COLA	Monthly Wage Increase	Total Wage Increase Over Life of Contract
Motor Equip Mech	EQUIP MAINT Srv PER	\$ 81,453.00	3.39%	\$ 84,711.12	\$ 271.51	\$ 87,252.45	\$ 211.78	\$ 89,870.03	\$ 218.13	\$ 8,417.03
Motor Equip Mech	MOTOR EQUIPMECH I	\$ 107,162.00	3.39%	\$ 111,448.48	\$ 357.21	\$ 114,791.93	\$ 278.62	\$ 118,235.69	\$ 286.98	\$ 11,073.69
Motor Equip Mech	MOTOR EQUIPMECH 2	\$ 115,710.00	3.39%	\$ 120,338.40	\$ 385.70	\$ 123,948.55	\$ 300.85	\$ 127,667.01	\$ 309.87	\$ 11,957.01
Motor Equip Mech	MOTOR EQUIPMECH L	\$ 123,760.00	3.39%	\$ 128,710.40	\$ 412.53	\$ 132,571.71	\$ 321.78	\$ 136,548.86	\$ 331.43	\$ 12,788.86
Motor Equip Mech	MOBILE SERVICE TECH	\$ 121,451.00	3.39%	\$ 126,309.04	\$ 404.84	\$ 130,098.31	\$ 315.77	\$ 134,001.26	\$ 325.25	\$ 12,550.26

City Healthcare Proposal:

Plan Year 2025: \$100 per month (\$1200 per year) in Flexible Compensation plus 4% increase to the employer premium contribution.

Plan Year 2026: 4% increase to the employer premium contribution.

Plan Year 2027: 4% increase to the employer premium contribution.

City Proposal	Current	2025	2026	2027
Premium				
Employee Only Coverage	\$ 1,112.90	\$ 1,112.90	\$ 1,201.93	\$ 1,298.09
Employer Contribution	\$ 956.06	\$ 994.30	\$ 1,034.07	\$ 1,075.44
Flex Compensation	\$ -	\$ 100.00	\$ 100.00	\$ 100.00
Employee Pays	\$ 156.84	\$ 18.60	\$ 67.86	\$ 122.65
City Proposal	Current	2025	2026	2027
Premium				
EE + One Coverage	\$ 2,225.80	\$ 2,225.80	\$ 2,403.86	\$ 2,596.17
Employer Contribution	\$ 1,911.22	\$ 1,987.67	\$ 2,067.18	\$ 2,149.86
Flex Compensation	\$ -	\$ 100.00	\$ 100.00	\$ 100.00
Employee Pays	\$ 314.58	\$ 138.13	\$ 236.69	\$ 346.31
City Proposal	Current	2025	2026	2027
Premium				
Family Coverage	\$ 2,893.54	\$ 2,893.54	\$ 3,125.02	\$ 3,375.03
Employer Contribution	\$ 2,444.00	\$ 2,541.76	\$ 2,643.43	\$ 2,749.17
Flex Compensation	\$ -	\$ 100.00	\$ 100.00	\$ 100.00
Employee Pays	\$ 449.54	\$ 251.78	\$ 381.59	\$ 525.86

*Based on Kaiser Plan Premium and assumption of 8% medical inflation.