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AGREEMENT

Board of Chosen Freeholders and Council #5, N. J. Civil Service Association, White Collar Employees

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INDEX		PAGE
Article 1	Recognition and Definitions	1
Article 2	Term of Agreement	1
Article 3	Collective Negotiating Procedure	2
Article 4	Management Rights	3
Article 5	Discrimination and Coercion	3
Article 6	Salaries and Wages	4
Article 7	Longevity	10
Article 8	Health Benefits	11
Article 9	Personal Leave	12
Article 10	Work Schedule, Overtime, CTO	12
Article 11	Pay During Absence	16
Article 12	Vacation	24
Article 13	Holidays	27
Article 14	Pension	29
Article 15	Suspension & Grievance Proc.	30
Article 16	Released Time	33
Article 17	Seniority Rights	33
Article 18	Shift Changes	33
Article 19	Dues Checkoff	34
Article 20	Out of Title Work	34
Article 21	Personnel File	35
Article 22	Layoffs	35
Article 23	Use of Personal Vehicle	35
Article 24	Fair Share Payments	35
Article 25	Statement of Position Regarding Continuation of Step System	37
Article 26	Continuation of Contract Prov.	38

THIS AGREEMENT is made this 10th day of March, 1980, between the Board of Chosen Freeholders of the County of Bergen, hereinafter referred to as "County" and Council No. 5, New Jersey Civil Service Association, hereinafter called the "Association."

WHEREAS, the parties have carried on collective bargaining for the purpose of developing a contract covering wages, hours of work and all other conditions of employment for white-collar employees:

NOW, THEREFORE, the parties agree as follows:

ARTICLE 1 - Recognition and Definitions:

The County hereby recognizes the Association as the exclusive representative of the employees in the negotiating unit of all "white collar" employees employed by the County of Bergen, but excluding all employees of the Bergen Pines County Hospital and the Bergen County Park Commission, as well as all workers generally considered to be "blue collar" workers, craft workers, police and supervisors. Attached hereto as Schedule A is a list of all titles covered by this Agreement.

ARTICLE 2 - Term of Agreement:

This Agreement shall be in force from January 1, 1980, through December 31, 1982.

ARTICLE 3 - Collective Negotiating Procedure:

- 1. Collective negotiations with respect to rates of pay,
 hours of work or other conditions of employment shall be conducted
 by the duly authorized negotiating agent of each of the parties.
 Not more than five (5) representatives of each party, plus counsel
 and two experts, shall participate in collective negotiating meetings,
 except by consent of both parties.
- Collective negotiations for the contract period beginning
 January 1, 1983, shall commence on or about June 1, 1982.
- 3. Negotiating sessions shall begin at times which will permit at least five (5) consecutive hours of negotiation and shall continue for at least such period and the Association representatives (not exceeding the number shown in Section 1) on duty during the periods agreed upon for negotiations shall be permitted to attend that negotiating session and subsequent regularly scheduled negotiating sessions without loss of pay. No other payment will be made to Association representatives for the negotiating sessions.

ARTICLE 4 - Management Rights:

Nothing in this contract shall abrogate the management rights of the elected or appointed officials in charge of the various departments of County government. Except as otherwise provided herein, the County retains the exclusive right to hire, direct and schedule the working force; to plan, direct and control operations; to discontinue, reorganize or combine any department with any consequent reduction or other changes in the working force observing demotional rights established by Civil Service; to hire and lay off employees in accordance with Civil Service procedures; to introduce new or improved methods or facilities regardless of whether or not the same cause a reduction in the working force, and in all respects to carry out the ordinary and customary functions of management, including the establishment of such operational rules as it shall deem advisable. Further, no management prerogative reserved solely to the discretion of the County of Bergen by the terms of this Agreement shall be made the subject of a grievance.

ARTICLE 5 - Discrimination and Coercion:

There shall be no discrimination, interference or coercion by the County or any of its agents against the employees represented by The Association because of membership or activity in the Association. The Association, or any of its agents, shall not intimidate or coerce employees into membership. Neither the County nor the Association shall discriminate against any employee because of race, creed, color, age, sex or national origin.

ARTICLE 6 - Salaries and Wages:

- A. Effective 1/1/80 and retroactive to that date, salary increases shall be provided as follows:
- i. <u>Those on Step</u> As to those employees who, as of the last payroll period of 1979, were located on a step as provided in Schedule C of the 1978-79 Agreement between the parties, they shall move to the next higher numbered step as indicated on Schedule B of this Agreement, except as otherwise provided in sub-paragraphs ii, iii, vi, and vii hereinafter.

Effective 1/1/81, they shall move to the next higher numbered step as indicated on Schedule C of this Agreement and, effective 1/1/82, they shall move to the next higher numbered step as indicated on Schedule D of this Agreement, unless affected by other provisions of this Article dealing with a change in status of an employee during the period of this Agreement.

Those on step - 1979 promotions, at least 1 step increase, etc. - As to those employees who, as of the last payroll period of 1979, were located on a step as provided in Schedule C of the said 1978-79 Agreement between the parties, but who began employment with the County during the year 1979 or who, through promotion, transfer or otherwise, received a change of grade during the year 1979 which resulted in an increase in salary in an amount equal or greater than the amount represented by the difference between the amount of the step on which the employee was located immediately prior to the said promotion or transfer on the said Schedule C of the said 1978-79 Agreement and the next higher step on the said Schedule C, or, those employees who, through promotion, transfer or otherwise, received a change of trade effective on or before 2/5/79 which resulted in an increase in salary in an amount less than the amount represented by the difference between the amount of the step on which the employee was located immediately prior to the said promotion or transfer on Schedule C of the said 1978-79 Agreement and the next higher step on the said Schedule C, but greater than 1/2 the amount of the said step as so calculated, they shall remain at the grade and step at which they were located as of the

c. After all injury leave is used, the employee may be granted additional injury leave only upon approval of the Board of Chosen Freeholders. After all injury leave is used, the employee may elect to use any sick leave, vacation or compensatory time due at the time of the injury.

- d. Use of Injury Leave Employees absent from duty due to an accident, illness or injury compensable under the Workers Compensation statutes or any policy of Workers Compensation insurance applicable to the said employees and who have completed three (3) months' service with the County will be compensated by the County on a bi-weekly basis at the regular base rate of pay for a period not in excess of 90 working days for each new and separate injury. Payments shall be made in either of the following ways:
- i) A check issued by the County in the full sum of the employees' base salary. Upon receipt of compensation checks for temporary disability during the said 90-day period; the employees shall endorse those checks over to the County. Subject to it being permitted to do so by applicable Federal and state law or regulation, the County shall record that portion of the salary checks equal to the amount of the compensation checks covering partial disability as not being income to the employees for income tax purposes and the W-2 or similar forms sent to the employees at the conclusion of each year shall not show such payments as income.
- ii) A check issued by the County in an amount equal to the difference between the employees' base salary and the amount of partial disability Workers Compensation insurance payments received by the employees during the said 90-day period.

If eligibility for such payments is contested by the County, eligibility will be based on the determination of the New Jersey Division of Workers Compensation under the terms of the New Jersey Workers Compensation Act.

e. Contested Injuries - Charges may be made against sick leave accrual, if any, in any case where the County is contesting the employee's eligibility for injury leave. In the event that the Workers Compensation Division determines in favor of the employee, sick leave so charged shall be recredited to the employee's sick

leave accrual balance. In the event eligibility for payment is denied by the Workers Compensation Division, the employee shall be eligible to utilize sick leave accruals, if any, retroactive to the date of injury, and to use vacation leave.

- f. Medical Proofs In order to limit the obligation of the County for each new separate injury, the County may require the employee to furnish medical proof or submit to medical examination by the County at its expense to determine whether a subsequent injury is a new and separate injury or an aggravation of a former injury received while in the County service.
- g. When an employee has suffered an injury while on duty, and is absent for five (5) days or more, it will be necessary for the employee to submit a written certification from a physician setting forth the nature of the injury and the physician's prognosis as to the length of time before the employee can return to duty.
- i) Additional reports shall be filed from the physician every two weeks thereafter indicating the current status of the employee's health and the time of the employee's anticipated return to duty.
- ii) In the absence of such certification, the employee shall be removed from injury leave.

6. Funeral Leave:

a. Employees shall be entitled to four (4) working days leave with pay to attend or make arrangement for the funeral of a member of their immediate family. Immediate family is defined as and limited to spouse, son, daughter, mother, father, brother, sister, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparents, grandchildren or any other relative residing in the employee's household.

7. Terminal Leave:

a. Employees, upon retirement (Service Retirement,
Accidental Disability Retirement, Ordinary Disability Retirement,
Early Retirement and Deferred Retirement), or employees who terminate their service after reaching age 60, who are not covered by
the Public Employee's Retirement System, shall be granted a

ARTICLE 16 - Released Time

In order to provide the orderly handling of grievance matters, the President, Grievance Chairperson, and Chairperson of the Board of Directors of the Association, or their respective designees,

shall be released from their county duties for reasonable periods of time for the purpose of handling such grievance matters.

ARTICLE 17 - Senority Rights:

- 1. Permanent employees shall be entitled to recognition for seniority with respect to changes in job assignment, hours or working conditions within that title only.
- 2. Seniority shall be based on Civil Service title seniority which shall commence with the date of certification in that title and in those instances where none of the employees involved have been certified as permanent employees by the Civil Service Commission, seniority shall be based upon length of service with the County.
- 3. As to any employees working at the office of the Superintendent of Elections and Commissioner of Registration who received their first Civil Service certifications during the year 1975, seniority rights, as among themselves, shall be based upon the length of service in the job or title, whose duties were substantially similar to the duties under the title in which such employees were certified by Civil Service. The above is subject to the rules and regulations of the Civil Service Commission.

ARTICLE 18 - Shift Changes:

Wherever possible, shift changes will be made at regularly scheduled times established by the department head, except in cases of emergency.

ARTICLE 19 - Dues Checkoff:

Payroll deductions for dues may be made upon the submission by the Association of notification by the employee authorizing the deduction of dues from pay. The County Treasurer shall forward dues to the Association at regular intervals. Employees shall have the right to withdraw authority for deduction of dues in accordance with New Jersey State Statutes.

In the event that the agency shop bill described in Article 24, hereinafter, is enacted into law, the County shall deduct from the pay of all County exmployees covered by this Agreement, who are non-members of the Association or who have not submitted to the County written notices authorizing the deduction of dues from the employees' pay, the maximum amount permitted under the legislation to be deducted from the salaries of non-union employees, in <u>lieu</u> of dues to the Association, and shall forward that amount to the Association at regular intervals.

ARTICLE 20 - OUT OF Title Work:

In the event a permanent employee is temporarily assigned by the department head to perform duties which are not set forth in the employee's Civil Service job description and which are duties set forth in a Civil Service job, description of a higher title and the employee performs those duties during fifty per cent (50%) of his working time, over a period in excess of consecutive four (4) months, the employee shall be forthwith provisionally appointed by the County to the said higher title and shall be paid accordingly, pending the results of a Civil Service promotional examination. If the employee, as a result of the promotional examination, is not eligible for permanent appointment to the said title, the employee will revert to the previous permanent title and any increase in wages received as a result of the provisional appointment shall be terminated and the employee shall not thereafter be required to perform the duties of the said higher title.

ARTICLE 21 - Personnel File:

All entries in an employee's personnel file shall be contained in both the County Personnel Department file and the operating department's file, if one exists. No entries, notations, documents etc., shall be placed in a department file which are not also placed in the County Personnel file. No entries, notations, documents, etc., which reflect on the employee's ability, performance or character shall be placed in a department file or in the County Personnel file without first having been shown to the employee and the employee having been given the opportunity to place his or her initials thereon.

ARTICLE 22 - Layoffs:

- 1. In the event layoffs become necessary, the provisions of the New Jersey Department of Civil Service Administration Rules 4:1-16 to 4:1-16.6 shall be followed:
- 2. Notice shall be forwarded to the Association by the County Administrator of any general layoffs or of any layoffs limited to one or more departments at least forty-five (45) days before such layoffs are due to become effective. Copies of the layoff notices to individual employees shall also be forwarded to the Association.

ARTICLE 23 - Use of Personal Vehicle:

Whenever an employee is required to use his or her own vehicle on County business, he or she shall be compensated for such usage at the rate of \$0.17 per mile. In addition, employees shall be paid an additional one cent per mile for each 15-cent increase in the retail price of a gallon of gasoline over and above such price as of the date of this agreement. The computation of such increase shall be based upon the average price of a gallon of gasoline sold at three retail gasoline stations in Bergen County to be agreed upon by the parties.

ARTICLE 24 - Fair Share Payments:

In the event that Assembly Bill No. 688 which has been passed by both houses of the New Jersey Legislature is signed into law by Governor Byrne, the County shall agree to withhold 85% of the annudues charged by the Association to its members from the salaries of those County employees covered by this Agreement who have not executed authorizations permitting the County to withhold the full amount of the Association dues and shall forward that amount not less often than every eighth week to the Association, provided that the Association complies with the requirements of the said legislation.

2/19/80

ARTICLE 25 - Statement of Position Regarding Continuation of Step System

The parties disagree as to whether the language of the Agreement dated 9/24/76 and the language of the Agreement covering the years 1978 and 1979 require the employer to pay the salary increments contained in the steps schedules attached thereto in the event that a successor agreement was not executed prior to January 1, 1978. and prior to January 1, 1980, respectively. Such disagreement has not been resolved by the parties as of the date of the execution of this Agreement.

The parties similarly disagree as to whether the schedule attached hereto as Schedule D shall continue in effect during the year 1983 and thereafter if a new agreement is not executed prior to January 1, 1983, and as to whether the employer is required to place each employee on the next higher step of the said schedule as of January 1, 1983.

The parties have agreed to continue into this Agreement the language of the Agreement dated 9/24/76 and the language of the Agreement covering the years 1978 and 1979 bearing on this issue despite their disagreement as to its meaning so as not to prevent otherwise the execution and implementation of an Agreement for the years 1980 through 1982 with respect to all of the other terms and conditions thereof.

The parties agree that the execution of this agreement shall not be considered as an element adverse to the positions of either party, in the event that litigation or some other form of interpretation is sought regarding the issue set forth above.

The parties agree that the execution of this Agreement which contains and is intended to preserve the same language on the issue in question as was contained in the 9/24/76 agreement and the agreement covering the years 1978 and 1979: (a) as to the County, shall not be construed as a waiver of any defenses that it may choose to raise in any such litigation or other proceeding;

(b) as to the Association, shall not be construed as an admission by the Association that the County did not intend the step system to continue into 1980 if no new agreement was entered into prior thereto, even though the Association, when it entered into this agreement, was aware that the County's position was that the said language did not so obligate the County. In short, it is the intent of both parties to "maintain the status quo", so to speak, as to the interpretation of the language in question, subject to either party seeking a declaration regarding an interpretation of the said language.

ARTICLE 26 - Continuation of Contract Provisions:

All of the provisions of this Agreement shall continue in full force and effect beyond the stated expiration date set forth herein until a successor Agreement is executed and becomes effective.

IN WITNESS WHEREOF, the parties hereto have caused these presents to be signed and attested by its proper corporate officers and its corporate seal to be affixed and have hereunto set their hands and seals the day and year first above written.

Freeholders

COUNT OF BERGEN

By:

irector, Board of Freeholders

COUNCIL No. 5, NEW JERSEY CIVIL SERVICE

By:

ce Presiden

Member Negotiating Compattee

Annette Viola -

Member - Negotiating Committee

Member - Negotiating Committee

John Battagiia

Member - Negotiating Committee

<u>TITLE</u>	GRADE .
ACCOUNT CLERK	8
ACCOUNT CLERK (TYPING)	8
ACCOUNTING ASSISTANT	18*
ADMINISTRATIVE ANALYST	. 14
ADMINISTRATIVE CLERK, CIVIL DEFENSE	13 .
ADMINISTRATIVE CLERK, CLERK OF THE BOARD OF FREEHOLDERS	21*
ADMINISTRATIVE CLERK, COUNTY ADJUSTER'S	. 18*
ADMINISTRATIVE CLERK, COUNTY CLERK'S OFFICE	18*
ADMINISTRATIVE CLERK, POLICE DEPARTMENT	18 *
ADMINISTRATIVE CLERK, PRIVATE INDUSTRY COUNCIL	18*
ADMINISTRATIVE CLERK, PROBATION	18*
ADMINISTRATIVE CLERK, PROSECUTOR'S OFFICE	16*
ADMINISTRATIVE CLERK, PUBLIC WORKS	18
ADMINISTRATIVE CLERK, TREASURER'S OFFICE	18*
ADMINISTRATIVE SECRETARY, COUNTY ADMINISTRATOR'S OFFICE	19*
ADMINISTRATIVE SECRETARY, BOARD OF TAXATION	lò*

ADMINISTRATIVE SECRETARY, COUNTY COUNSEL

ADMINISTRATIVE SECRETARY, DISTRICT COURT

ADMINISTRATIVE SECRETARY, COUNTY SUPERINTENDENT OF SCHOOLS

21*

^{*}TITLES EXEMPT FROM OVERTIME AND CTO.

16*

ADMINISTRATIVE SECRETARY, GENERAL SERVICES	19*
ACMINISTRATIVE SECRETARY, PLANNING BOARD	19*
ADMINISTRATIVE SECRETARY, PUBLIC WORKS	19*
ADMINISTRATIVE SECRETARY, REGISTRATION AND ELECTIONS	. 19*
AGENCY AIDE	6 .
A!DE TO JUDGES (ARNOLD & ROSENBERG)	AND \$50.00/Day
A!DE TO PRESIDING JUDGE, DISTRICT COURT	DUA* ANNUAL 350
ARCHITECTRUAL DRAFTSMAN, M/W	18
ASSISTANT AGRICULTURAL AGENT	13
ASSISTANT COORDINATOR FOR FEDERAL AND STATE AIDE	!7 *
ASSISTANT BUDGE EXAMINER	17*
ASSISTANT CHIEF CLERK, PROBATION	I7 *
SSISTANT CHIEF CLERK, PURCHASING	17*
-SSISTANT CHIEF MECHANIC, VOTING MACHINES	19
-SSISTANT CUSTODIAN & CHIEF MECHANIC VOTING MACHINES	. 20
-SSISTANT DIRECTOR PARENTS WORKSHOP PROGRAM	18*
-SSISTANT ENGINEER .	9 * .

+SSISTANT INSTRUCTOR OF NURSES

ABSISIANI REIPONCH MACHINE SUPERVISOR	11
ASSISTANT PLANNER	. 16
ASSISTANT PLANNER, DATA MANAGEMENT	16
ASSISTANT PLANNER, TRANSPORTATION	. 16*
ASSISTANT- REHABILITATION COUNSELOR	. 14
ASSISTANT SUPERVISOR OF SENIOR CITIZEN ACTIVITIES	. 13
ASSISTANT TO THE TRANSPORTATION COORDINATOR	13
AUDIO VISUAL SUPERVISOR	[*] 61
BOOKBINDER	14
BOOKKEEPING MACHINE OPERATOR	9
SOCKKEEPING MACHINE OPERATOR AND CASHIER	. 10
EDOKEEPING MACHINE OPERATOR (TYPING)	9
BOOKKEEPING MACHINE OPERATOR & CASHIER (TYPING)	10
CAMCELLATION CLERK	11
CANCELLATION CLERK (TYPING)	11
SASHIER	9
CASHIER (TYPING)	ò
CHAIDERY-EQUITY COORDINATOR	15

CHIEF CUSTODIAN	24
CHIEF FIRE INSTRUCTOR	19*
CHIEF POLICE INSTRUCTOR	19*
CHIEF REHABILITATION ADVISOR, HOUSING IMPROVEMENT PROGRAM	18*
CHIEF SAMITARY AND PLUMBING INSPECTOR	24*
CLERK	5
CLERK BOOKKEEPER	. 8
CLERK BOOKKEEPER (TYPING)	8
CLERK STENOGRAPHER	8
CLERK TRANSCRIBER	7
CLERK TYPIST	6
CLERK TYPIST AND INTERPRETER, BILINGUAL SPANISH AND ENGLISH	. 13
CLINICAL PSÝCHOLOGIST	20 ⁴
COMMUNITY RELATIONS SPECIALIST	17 ⁹
COMMUNITY SERVICE AIDE	. 9
COMMUNITY SERVICE PLANNER	16
COMMUNITY SERVICE WORKER	9
COMPUTER OPERATOR	12

COMPUTER OPERATOR (P/T)	DUA PER HR. 4.(
COMPIDENTIAL AIDE, SURROGATE'S OFFICE	. 17*
CONFIDENTIAL SECRETARY	14
CCORDINATOR OF SCHOOL TRANSPORTATION SERVICES	15*
COORDINATOR, COOPERATIVE PURCHASING	15* -
COORDINATOR RESOURCE RECOVERY AND RECYCLING	13.
COGRDINATOR/PLANNER - SPECIAL TRASNPORTATION	18*
COST ESTIMATOR, PROPERTY IMPROVEMENT	17*
COUNTY RADIOLOGICAL DEFENSE COORDINATOR CIVIL DEFENSE (P/T)	AND* ANNUAL 1,6
CPIMINAL JUSTICE PLANNER	. 14
CULTURAL DEVELOPMENT ADVOCATE	14
DATA CONTROL CLERK	8 .
DETA CONTROL CLERK (TYPING)	9 .
DATA PROCESSING PROGRAMMER	15
DATA PROCESSING SUPERVISOR	23*
DOCKET CLERK	7
DOCKET C'LERK (TYPING)	7
DRAFTSMAN, M/W	,

DRAFTSMAN, M/W TRAINEE	
ECONOMIC DEVELOPMENT ASSISTANT	. I 7*
ELECTIONS CLERK	9
ELECTIONS CLERK (TYPING)	. 9
EMPLOYMENT SPECIALIST, PRIVATE INDUSTRY COUNCIL	16
ENERGY AUDITOR	14
ENGINEERING CLERK	. 8
ENGINEERING DRAFTSMAN, M/W	. 10
ENVIRONMENTAL PLANNER	18*
ENVIRONMENTAL SPECIALIST	I 7*
EXAMINER, EDUCATION CREDENTIALS	! 4
EXECUTIVE ASSISTANT	17*
FAMILY COUNSELOR	20³
FIELD REPRESENTATIVE, COUNTY BOARD OF TAXATION	12
FIELD COORDINATOR, VICTIM WITNESS ASSISTANCE UNIT	16
FIELD REPRESENTATIVE, DISEASE CONTROL	15
FIELD REPRESENTATIVE, ENERGY	15
FIELD REPRESENTATIVE, HEALTH EDUCATION	17

FIRE INSTRUCTOR	15
FIRE INSTRUCTOR, P/T	AND PER DIEM 30.1
GERIATRIC COUNSELOR	16
GRADUATE NURSE	14
GRADUATE NURSE, PUBLIC HEALTH	. 14 .
GRAPHIC ARTIST	16
HEAD ACCOUNT CLERK	· 16
HEAD CLERK STENOGRAPHER	16
HEALTH EDUCATOR	20*
HEALTH SERVICES PLANNER	17 [★]
HOME IMPROVEMENT SPECIALIST AIDE	, 15
HOME LOAN ADVISOR	16
INDEX CLERK	9
INDEX CLERK & KEYPUNCH MACHINE OPERATOR	9
THE COUNSELOR	(\$10,000)
INVESTIGATOR, COURTS	13
INVESTIGATOR, CONSUMER PROTECTION	13 ·
HIVESTIGATOR, COUNTY ADJUSTER'S OFFICE	13

INVESTIGATOR, PROBATION DEPARTMENT	15
INVESTIGATOR, REGISTRATION AND ELECTIONS	, 9
JOB DEVELOPER, PRIVATE INDUSTRY COUNCIL	14
JUNIOR LÍBRARY ASSISTANT	. 10
JURY MANAGEMENT CLERK	13
KEYPUNCH MACHINE OPERATOR	9
KEYPUNCH MACHINE SUPERVISOR	15
LEGAL STENOGRAPHER	12
MAIL CLERK	6
MECHANIC, VOTING MACHINES	12
MESSENGER	6
MICROFILM OPERATOR -	. 7
MICROFILM SYSTEMS SUPERVISOR	16
MUNICIPAL COORDINATOR, ECONOMIC DEVELOPMENT	21
MUNICIPAL COURT LIAISON	. 15
NATURALIZATION CLERK	12
OFFICE MANAGER, CULTURAL AND HISTORIC AFFAIRS	14
	,

OFFSET MACHINE OPERATOR

\$5.50-\$6.00

PARENT GROUP COORDINATOR	AND S
PAYROLL SUPERVISOR	16
PENSION FUND SUPERVISOR	16
PERSONNEL CLERK	. 8
PERSONNEL TECHNICIAN	. 17*
PHOTOSTAT OPERATOR	7
PLANNING AIDE	. 10
FRACTICAL NURSE	9
PRETRIAL COUNSELOR	14
. PRINCIPAL ACCOUNT CLERK	13
PRINCIPAL ACCOUNT CLERK (TYPING)	. 13
FRINCIPAL BOOKKEEPING MACHINE OPERATOR	12
PRINCIPAL CASHIER	14
PRINCIPAL CASHIER (TYPING)	I 4
PRINCIPAL CLERK	13
PRINCIPAL CLERK (TYPING)	. 13
PRINCIPAL CLERK BOOKKEEPING	13 .
FRINCIPAL CLERK BOOKKEEPER, TREASURER'S OFFICE .	15

PRINCIPAL	CLERK STENOGRAPHER	!4
PRINCIPAL	CLERK TRANSCRIBER .	13
PRINCIPAL	COMMUNITY DEVELOPMENT AIDE	17 *
PRINCIPAL:	DATA CONTROL CLERK (TYPING)	13
PRINCIPAL.	DATA PROCESSING PROGRAMMER	21*
PRINCIPAL	DOCKET CLERK (TYPING)	13
PRINCIPAL	ENGINEER	24 *
PRINCIPAL	ENGINEER (BRIDGES)	24*
PRINCIPAL	ENGINEER (HYDRAULIC)	25 *
PRINCIPAL	ENGINEER (HIGHWAYS)	25 *
FRINCIPAL	ENGINEER (STRUCTURAL)	25*
PRINCIPAL	ENGINEER (TRAFFIC)	25*
PRINCIPAL	ENGINEERING DRAFTSMAN, M/W	!9
FRINCIPAL	INDEX CLERK	13
`FRINCIPAL	LEGAL STENOGRAPHER	15
FRINCIPAL	OFFSET MACHINE OPERATOR	16
FRINCIPAL	PERSONNEL CLERK (TYPING)	13 .
FRINCIPAL	PLANNER	20*

FRINCIPAL PLANNER, ENVIRONMENTAL	20*
FRINCIPAL PLANNER, TRANSPORTATION	20 *
FRINCIPAL PLANNING DRAFTSMAN, M/W	17
PROBATE ASSISTANT	9
PROBATE CLERK	15
PROCESS SERVER	13
FROGRAM COORDINATOR, PROPERTY IMPROVEMENT	. 16
PROSPAM MONITOR, COMMUNITY DEVELOPMENT	16*
PROPERTY CLERK	12
PROJECT COORDINATOR, OFFICE ON AGING	16*
PROJECT DIRECTOR SENIOR CITIZENS CENTER	18*
PSYCHIATRIC SOCIAL WORKER	20*
PUBLIC HEALTH NURSE	15
PUBLIC HEALTH NUTRITIONIST	20*
PURCHASING ASSISTANT (STENO)	11
RECEPTIONIST	. 6
FECEPTIONIST (TYPING)	6
FECURDS RETRIEVAL OFERATOR	. 9

RECREATION AIDE, SOCIAL RECREATION	10
RECREATION LEADER, SOCIAL RECREATION .	10
PECREATION THERAPIST	15
REHABILITATION COUNSELOR	16*
RESEARCH ASSISTANT	14
RIGHT-OF-WAY NEGOTIATOR	18*
SAMITARY AND PLUMBING INSPECTOR	18
SANITARY INSPECTOR	17
SATITARY INSPECTOR, TRAINEE	6
SECRETARY, SUPT. OF ELECTIONS & COMM. OF REGISTRATION	14
SENIOR ACCOUNT CLERK	01
SENIOR ACCOUNT CLERK (TYPING)	10
SENIOR ANALYST, ECONOMIC DEVELOPMENT	20*
SETTOR BOOKBINDER	۱7
SETTICE BOOKKEEPING MACHINE OPERATOR	10
SETTIOR CANCELLATION CLERK (TYPING)	12
SENIOR CASHIER	13

.13

SET OR CASHIER (TYPING)

SENIOR CITIZEN PROGRAM AIDE	8
SENIOR CLERK	9
SEKTOR OLERK BOOKKEEPER	10
SEMIOR CLERK BOOKKEEPER (TYPING)	. 10
SEMIOR CLERK STENORAPHER	10
SENIOR CLERK TRANSCRIBER	9
SENIOR CLERK TYPIST	9
SENIOR CLINICAL PSYCHOLOGIST	24*
SENIOR COMMUNITY SERVICE PLANNER (AGING)	۱7*
SENIOR COMMUNITY SERVICE WORKER	11
SENIOR COMPUTER OPERATOR	14
SENTOR DATA CONTROL CLERK	11
SENIOR DATA CONTROL CLERK & KEYPUNCH MACHINE OPERATOR	
SENIOR DATA PROCESSING PROGRAMMER	19
SENIOR DOCKET CLERK	10
SENICR DOCKET CLERK (TYPING)	
SENIER DRAFTSMAN, M/W	14
SENICR ELECTIONS CLERK (TYPING)	J 0

SETTOR	ENERGY AUDITOR	1/™
SENIOR	ENGINEER, HIGHWAY	21*
SEMIOR	ENGINEER, HYDRAULIC	21*
SENIOR	ENGINEERING DRAFTSMAN, M/W	15
SENIOR	FIELD REPRESENTATIVE, COUNTY BOARD OF TAXATION	18*
SENIOR	FIRE INSTRUCTOR	16
SENIOR	GERIATRIC COUNSELOR	17*
SETTOR	GRANTS SPECIALIST	19
SETTOR	INDEX CLERK	9
SENTOR	INDEX CLERK & KEYPUNCH MACHINE OPERATOR	1 (
5E::10R	INVESTIGATOR, COUNTY ADJUSTER'S OFFICE	15
SE'. I DR	INVESTIGATOR, CONSUMER PROTECTION	16
SENIOR	INVESTIGATOR, PROBATION DEPARTMENT	!7
SE COR	INVESTIGATOR, REGISTRATION & ELECTIONS	16
`serroa	KEYPUNCH MACHINE OPERATOR	10
SENTOR	LEGAL STENOGRAPHER	14
SE OR	MAIL CLERK	9
SEN CR	MICROFILM OPERATOR	11

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SENIOR NATURALIZATION CLERK		14
SETTIOR OFFSET MACHINE OPERATOR		13 .
SENIOR PAYROLL CLERK (TYPING)		11
SENTOR PLANNER		18* -
SECTION PLANNER, TRANSPORTATION	· .	18 *
SENIOR PLANNING AIDE		13
SENIOR PROBATE CLERK		17
SENIOR PUBLIC HEALTH NURSE		17
SENIOR RECEPTIONIST (TYPING)	•	9
SENIOR RIGHT-OF-WAY NEGOTIATOR	·	20*
SENIOR SANITARY INSPECTOR	•	18 *
SENTOR SYSTEMS ANALYST	• •	21*
SENTOR STOCK CLERK		12
SENTOR TELEPHONE OPERATOR		8
SETTOR TERMINAL OPERATOR		10
SETTICE TRAFFIC ANALYST		14
SCOTAL CASE WORKER		16*
SOCIAL SERVICES AIDE	_	12

12

SOCIAL SERVICES ASSISTANT	12
SOCIAL WORKER, INSTITUTIONS	16 *
SOCIAL WORKER, JUVENILE REHABILITATION FACILITY	. 16*
STOCK CLERK	. 10
SUPERVISING ACCOUNT CLERK	16
SUPERVISING CASHIER	1 5
SUPERVISING CLERK	16
SUPERVISING CLERK (TYPING)	16
SUPERVISING CLERK STENOGRAPHER	16
SUPERVISING CLERK TRANSCRIBER	16
SUFFERVISING ELECTIONS CLERK	16
SUPERVISING ENGINEER (STRUCTURAL)	25*
SUPERVISING HEALTH INSURANCE BENEFITS CLERK	16
SUFERVISING INDEX CLERK AND KEYPUNCH MACHINE OPERATOR	15
SUPERVISING INVENTORY CLERK	12
SUPERVISING LIBRARY ASSISTANT	13
SUPERVISING PRINCIPAL ENGINEER	25*
SUFERVISING PRINCIPAL ENGINEERING DRAFTSMAN, M/W	20*

20*

VETERANS SERVICE OFFICER	Į.	د
VETERANS SERVICE REPRESENTATIVE	1	1
VICTIM WITNESS SPECIALIST .	. 1	8
YOUTH COUNTER OR		

TITLES EXEMPT FROM OVERTIME AND CTO.

A-18

SUPERVISING RECOVERY ASSISTANT DETOXIFICATION UNTI	
SUPERVISING TERMINAL OPERATOR	13
SUPERVISING TRAFFIC ENUMERATOR .	12
SUPERVISOR, CENTRAL MAILING ROOM	. 16
SUPERVISOR, CRIMINAL INFORMATION RECORDS	18*
SUPERVISOR OF ACCOUNTS	18*
SUPERVISOR OF BOOKKEEPING MACHINE OPERATIONS	16
SUPERVISOR OF RECORDS, COUNTY CLERK	15
SUPERVISOR OF RECORDS, COUNTY SURROGATE	13
SUPERVISOR OF SENIOR CITIZENS ACTIVITIES	15
SYSTEMS ANALYST	19*
TELEPHONE OPERATOR	7
TELEPHONE OPERATOR - RECEPTIONIST	8
TERMANAL OPERATOR	7
TRAFFIC ANALYST	12
TRAFFIC SIGNAL SUPERINTENDENT	21
TRAINING TECHNICIAN	17
	7

Dental Insurance - N.J Dental Service Aun, In

SCHEDULE OF BENEFITS

The dental program covers the following Schedule of Benefits when services are rendered by a licensed dentist and when necessary and customary as determined by the standards of generally accepted dental practice.

I. BASIC BENEFITS:

Preventive

Prophylaxis as required, but not more often than once in any six month period.
Topical application of fluoride solutions to age 19.
Space maintainers.

Diagnostic

Procedures to assist the dentist in evaluating existing conditions to determine required dental treatment.

Oral Surgery

Procedures for extractions and other oral surgery including pre- and post- operative care.

General Anesthesia

When administered for a covered oral surgery procedure performed by a dentist.

Restorative

Provides amalgam, synthetic, porcelain and plastic restorations for treatment of carious lesions.

Crowns, inlays and gold restorations will be provided when teeth cannot be restored with the above materials.

Endodontic

Procedures for pulpal therapy and root canal filling (treatment of non vital teeth).

Periodontic

Procedures for treatment of tissues supporting the teeth.

11. PROSTHODONTIC BENEFITS:

Procedures for construction of bridges, partial and complete dentures.

111. ORTHODONTIC BENEFITS (OPTIONAL) Max of froofpatiently car

Procedures performed by a licensed dentist for eligible dependent children involving the use of an orthodontic appliance for treatment of malalignment of teeth and/or jaws which significantly interfere with their functions. Payment and benefits will cease at ago 19, or at age 23, if the dependent shild is a full time student.

BERGEN COUNTY FMPLOYEES

PROPOSED PROGPAMS AND MONTHLY PATTES

FRE BASIS:

Procesan II

The following programs are based upon MJDSP's Table of Allowances.

Allowance Rasic Benefits: (Including Penair of Dentures)

> The maximum arount gayable by Naman for the above dental services provided ar eligible matient in anv calendar year is \$1,000.80.

Same as Program II-A above but with a \$25.00 deductib per patient ber calendar year

\$75:00 Farily Maximum aggregate deducting

Allowance - Basic Benefits: Program III-A 100% Prosthodontic Benefits: 50€

> The maximum amount payable by MJPSP for the above dental services provided an eligible patient in any calendar year is \$1,000.00.

Same as Program III A above but with a \$25 DA deductil III. Program per patient per calendar year

\$75.00 Family Maximum aggregate decoctible

Fonthly Rates	One Party	Two Party	Three Party+
Program II-A Program III-A Program III-A	3 yrls 7.11 7.22 6.76 8.27 8.52 7.27	12.30 10.58 14.14 14.56 12.16	21.57 18.19 23.43 24 19.68
AGR 3/3/3/2	- forth	T. 44 For oth o	+1.60 fo
100 from 10	dittition		

BERGEN COUNTY FMPLOYUES

UNDERWRITING POLICY AND REQUIREMENT

NJDSP's rates are valid for groups enrolling not later than demony 1. 199 and are guaranteed for a pae year contractual period.

THESE PATES ARE CONTINGENT UPON THE EMPLOYER CONTINUE HAS BEEN INTEREST WITH AM PRECLIMING OF NOT LIFE THAN 1,000 AND NOT MOPE THAN 2,999 EMPLOYERS.

All present and future employees will become eligible for dental benefits on the first day of the month following three full months of continuous full time employment with a minimum of 32 hours per week, unless otherwise approved by NJDSP.

ELIGIBILITY AND ENROLLMENT PROCEDURES

ELIGIBILITY

Employees - All employees in the classifications to be covered shall become eligible to receive dental services following completion of the period of continuous employment stipulated under Benefits and Program Specifications.

Dependents - Dependents are defined to be the employee's spouse and unmarried dependent children. Dependent Children are eligible for coverage from birth until age 19 or, if the covered child is enrolled full time at an accredited school, college or university, coverage may be extended to the childs 23rd birthday unless otherwise indicated under Benefits and Program Specifications. An unmarried dependent child over the limiting age may continue to be covered if incapable of self-support because of a physical or mental handicap commencing prior to reaching the limiting age, provided a physician's certificate is submitted to NJDSP.

ENROLLMENT PROCEDURES

Initial Enrollment - When applicable each employee completes the NJDSP Enrollment Card, making sure all information is complete, supplying names and birthdates of all dependents. It is essential to have the employee's complete Social Security Number and his signature. Enrollment cards not completed in full will be returned to the subscriber, which may mean a delay in eligibility status.

Subsequent Enrollments - Employees qualifying after the plan has been in effect shall also complete the NJDSP Enrollment Card. The same procedures as those for initial enrollment apply. Subsequent enrollment cards should be mailed with the billing the month that the employee becomes eligible.

			MO DAY VA F	TOP DSP USE DAILY
SOCIAL SECURITY NO LAST	NAME F	IRST	INITIAL BIRTHDATE SEX UNION	LOCAL GROUP NUMBE
HOME ADDRESS		, 	ZIP CODI	DATE
NAME OF GROUP			OR BRANCH	DATE HIRED
	MARITAL	D HI CHWOOM O	s Spouse have a Dental Plan? Yes[] No [] With namer is "yes", are dependents enrolled under this plan?	Yes No
LAST NAME (II Odlerem) FIRST I	NAME INITIAL SE	F MO DAY Y	LAST NAME (II Different) FIRST NAME INIT	AL SEA BRITTON
2 SPOUSE			6	
S CHILD			7	
4			8	
5.			9	
MEMBERSHIP ENR NEW JERSEY DENTAL S P. O. Box 1019 East		NC.	LAGREE TO CONTINUE MEMBERSHIP IN THIS PHOURAM DIRECT THE PROGRAM IS IN FONCE, AND AUTHURITE PAYROLL DED.	Y EMPLOYMENT AND WHILE KITION WHERE APPLICABLE
eCirc 4			SIGNATURE	DATE

GOVERNING ADMINISTRATIVE POLICIES

Unlike medical care where the diagnosis dictates more specifically the method of treatment to be rendered, in dental care the dentist and his patient frequently consider several avenues of treatment.

The following "administrative guidelines" are an integral part of the proposed dental program and are consistent with the principles of accepted dental practice and the continue reserve tenance of good dental health.

LIMITATIONS:

(a) x-rays;

Complete mouth x-rays are provided only once in a three (3) year period, unless special need is shown. Supplementary bitewing x-rays are provided upon request but not more than once every six (6) months.

(b) Crowns, Inlays and Onlays;

Replacement will be made only after five (5) years have elapsed following any prior provision of crowns, inlays and onlays under any Delta program.

(c) Prosthodonties:

Prosthodontics, appliances (including, but not limited to, partial and complete dentures and fixed bridges) will be replaced only after five (5) years have elapsed following any prior provision of such appliances under any Delta program, except when NJDSP determines that there is such extensive form of remaining teeth or change in supporting tissues that the existing appliance cannot be made satisfactory. Replacement will be made of a prosthodontic appliance not provided under a Delta program of the interior is unsatisfactory and cannot be made satisfactory.

(d) Optional;

In all cases in which the selection of process pensive plan of treatment is decided upon them is proceeding the contract, NJDSP will pay the applicable proceeding of the lesser fee. The patient is responsible for the remainder of the dentist's fee.

GOVERNING ADMINISTRATIVE POLICIES

(continued)

- (1) Complete or Partial Dentures. If in the construction of a denture the patient and dentist decide on personalized restorations or employ specialized techniques as opposed to standard procedures, NJDSP will allow an appropriate fee for the standard denture toward such treatment and the patient must bear the difference in cost.
- (2) Occlusion. NJDSP will allow the cost of restorations required to replace missing teeth. Procedures, appliances or restorations necessary to increase vertical dimension and/or restore or maintain the occlusion are considered optional and the cost is the responsibility of the patient.

EXCLUSIONS:

NO BENEFITS SHALL BE PROVIDED FOR:

- (a) Service for injuries or conditions which are compensable under Workman's Compensation or Employer's Lidellativity Laws, services which are provided the eligible patient by any Federal or State Government Agency or are provided without cost to the eligible patient by any municipality, county or other political sub-division.
- (b) Services with respect to congenital or developmental malformations or dentistry for purely cosmetic reasons.
- (c) Prosthodontic Services or Devices (including crowns and bridges) or any single procedure rendered prior to the date the patient became eligible for such services under this Agreement.
- (d) Drugs; Experimental procedures; Procedures for the purpose of plaque control; oral hygiene or dictary instruction.
 - (e) Periodontal splinting or scalants and Fases.
- (f) Any services not specifically included in this proposal.

The commencement of the proposal dentar care program outlined in this proposal shall be subject to the execution of a formal Equation ment with NJESP, which shall supersede the prior negotiations, representations as the derstandings. No modification of a such Agreement shall be effective training supersed unless in writing and significant authorized officer of NJDSP.

STAFF

NJDSP's method of operation is designed in such a manner that all Attending Dentist's Statements are reviewed by a dental auditor. If there are other than routine services being performed they are referred to the Dental Consultant Review Department and reviewed by a licensed dentist.

DENTAL AUDITORS:

Qualifications for NJDSP claims auditors include noth dental office and chairside assisting experience, as well as completion of a technical program.

DENTAL CONSULTANTS:

NJDSP Dental Consultants must have a minimum of ten years in active practice and have gained the respect of their peers. The same criteria are used in the selection of special consultants from each of the societies.

NJDSP has five in-house consultants in addition to regional consultants sultants throughout the state. All NJDSP consultants conform to the guidelines established by the New Jersey Dental Association.

-11-

PROCESSING FLOW IN DENTAL AUDIT OF TREATMENT FORMS

When Attending Dentist's Statements (claims) are received, they are reviewed by our dental auditors. Those forms requiring consultant review are referred to a licensed dentist to determine if the services requested are a covered benefit. In some instances, the patient may be clinically examined by the NJDSP Regional Dental Consultant. After this determination has been made, the Attending Dentist's Statement (A.D.S.) is returned to dental audit, where it is coded for processing. The patient's complete dental history is checked for payable benefits, contract limitations, and duplication of services. The computations made are then recorded on the A.D.S. and either paid (if treatment has been completed) or pre-determined (if treatment has not been rendered) and returned to the dental office.

Dental x-rays are requested for restorations (except fillings), surgical extractions, fixed bridges, and complete and partial dentures. In the event a dentist refuses to submit x-rays, he is advised that his refusal to do so may result in his receiving payment for a lesser service, i.e., a MOD amalgam in lieu of a full crown, an uncomplicated extraction in lieu of surgical extraction, etc.

Immediately following payment to the participating dentist, MJDSP sends the patient a statement describing the NJDSP payment made for covered services under the program and showing that portion for which the patient is obligated. If the patient is billed an amount over and above the amount shown as his obligation, the patient may inform NJDSP, and proper action will be taken.

The majority of Attending Dentist's Statements are processed in 15 days. A.D.S. forms with extensive services requiring consultant review may take an additional 5-10 working days. Turn-around time for pre-determination of benefits is directly related to current eligibility reporting by the group. When group eligibility is received by the fifth working day of the current month, the majority of A.D.S. forms are pre-determined within one week. Late reporting of eligibility will extend this time period by the corresponding number of days that the group is late in reporting eligible employees.

NJDSP maintains an internal audit staff which conducts ongoing audits to assure that correct procedures are followed in 7.0.8. processing systems. In addition, a random selection of passes is referred to regional consultants for clinical examinate a regional tients for the determination of quality and a bouncy of the last section.

COORDINATION OF BENEFITS

It is a NJDSP policy that when a patient is entitled to benefits under two or more insurance programs;

- 1. A patient should be covered in total for the amount of the usual, customary and reasonable charges for necessary dental expenses that are covered in whole or in part under any one of the programs before either program reduces it's benefit payment, and
- 2. A patient may not receive more than 100% of these benefits, and, thus, the abuses which may result from over insurance are avoided.

NJDSP policy is applied as follows:

1. Patient covered under two or more NJDSP programs:

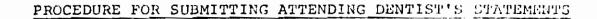
If a patient is eliqible for coverage under two or more NJDSP dental care programs and more than one of said programs provides coverage for a particular service, NJDSP will pay in full the fees for such services and will prorate the cost thereof between the applicable programs, provided that no program shall be charged with a greater amount than the amount for which it would be liable if such dual coverage did not exist.

2. Patient covered under NJDSP and "other programs"

If an eligible patient is entitled to coverage under one or more group insurance policies or group prepaid health care programs, then the benefits of this Agreement shall be provided as follows:

- (a) If the other policy or program(s) primarily cover services or expenses other than dental care, then this Agreement shall be primary.
- (b) If the other coverage is by a dental insurance policy or prepaid dental care program, the policy or program covering the patient as an employee shall be primary over the policy or program covering the patient as a dependent. Coverage for dependent children of a male person shall be primary over the policy or program covering dependent children of a female person.

If the program provided by this Agreement is "primary" as provided above, NJDSP shall provide benefits without regard to any other policy or program, and if the program provided by this Agreement is not "primary", NJDSP shall provide benefits only to the extent that the benefits obtained from such other insurance or program are inadequate to provide full payment for the services which are benefits provided by this Agreement.



During the first appointment, tell your dentist you are covered under a NJDSP dental plan, and give him your group number and the name of your company.

Most dentists have NJDSP Attending Dentist's Statements in their offices and they will complete the form in the following manner for pre-determination or payment. Use steps 1, 2, 6 & 7 when Attending Dentist's Statement is submitted for payment without pre-determination.

I. PARTICIPATING DENTISTS

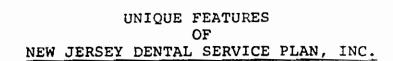
- The form should contain the subscriber's social security number, group number, name and address of member, the name of the patient receiving services, the patient's relationship to the subscriber, and the patient's birthdate. (Failure to complete all required information could result in processing delays).
- Upon completion of the patient's examination and diagnosis, the dentist will list the treatment to be rendered, together with the fee to be charged for each procedure.

USE STEPS 3, 4 & 5 FOR PRE-DETERMINATION

- The patient reviews the form, and if he is in agreement, signs the form.
- The form is then sent to NJDSP by the dentist. will check the patient's eligibility, verify that the treatment to be provided is covered under the dental plan, and enter on the form the amount of the total bill NJDSP will pay, and the amount to be paid by the patient.
- The form is then returned to the dentist, and he will review the treatment plan with the patient before proceeding with the series of treatment.
- When all services have been completed, the patient will review the form and sign it if request for payment; or the dentist will again sign the form, entering dates of service if a request for payment on a pre-determination to indicate that all treatment shown has been rendered.
- A check is sent to the dentist by NJDSP for that portion of the bill covered by NJDSP, and the dentist submits his statement to the patient for the patient's portion of his bill.

NON-PARTICIPATING DENTISTS

Non-participating dentists will submit the Attending Dentist's Statement in the same manner as precicipating dentists. NJDSP will make payment to the patient directly, who is then responsible for making arrangements to pay the dentist for all of the dentist's charges.



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- NEW JERSEY DENTAL SERVICE PLAN, INC. is a non-profit corporation under the NEW JERSEY DENTAL SERVICE CORPORATION ACT and operating under the Insurance Laws of the State of New Jersey. The purpose of NJDSP is to provide quality dental care at a minimum cost.
- 2. NJDSP was established by the NEW JERSEY DENTAL ASSOCIATION in 1969. The New Jersey Dental Association provided the capital and the goal to provide the best possible dental care for the patient.
- 3. NJDSP engages specifically in prepaid group dental plans and have, presently, over 300 plans in force. NJDSP is a member of the Delta Dental Plan Association, and participates in multi-state programs.
- 4. There is no claim form for the patient to complete. Dental statements are prepared and submitted to NJDSP by the dentist and NJDSP payments are remitted directly to the participating dentist.
- 5. An outline of the patient's needs and the treatment recommended is submitted and professionally reviewed before treatment is performed.
- 6. Cases in which diagnosis is complicated and requires more than the normal handling are individually reviewed by staff members who are practicing dentists. If further evaluation is required the case may be referred to the NJDSP REVIEW COMMITTEE for the area in which the patient was treated. Local professional guidance and assistance is provided when needed, assuring comprehensive quality dental care at a reasonable cost.
- 7. NJDSP provides a relatively inflation proof plan. Dentists have confidentially prefiled their fees with NJDSP, certifying that they are Usual, Customary and Reasonable Charges. The dentist also agrees to a review by professional committees.
- 8. Strong professional support behind a dental plan is essential to curb abusive claims practices by both patients and dentists. NJDSP has this support. A vast majority of all licensed dentists in the State of New Jersey are participating dentists.
- 9. Upon completion of dental treatment, the patient is notified by NJDSP of the amount paid to his dentist and the amount of his obligation. The participating dentist has agreed that this is the only amount that will be billed to the patient.
- 10. NJDSP was the first organization to develop dental coverage for negotiated and employer groups in the State of New Jersey.
- 11. As a not-for-profit organization, all funds received by NJDSP are used to pay for services rendered to employees and their families and for administration of the group dental care program.

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NEW JERSEY DENTAL SERVICE PLAN TABLE OF ALLOWANCES

	02810 Gold (¾ cast) \$150.00	05120 Complete lower
DIAGNOSTIC (00100-00999)	A2836 Stoinless steel 40.00	05140 immediate lower
UNION CLINICAL ORAL EXAMINATIONS		05700 PARTIAL DENTURES-INCLUDING SIX
could detail and examination 7 10.00	02891 Crown with post	MONTHS' POST-DELIVERY CARE
	02892 Cast post and core	05210 Upper or lower, without closps, acry-
20130 Emergency oral examination 3 10.00	02900 OTHER RESTORATIVE SERVICES	lic bose, \$ 95.0
.:nann RADIOGRAPHS	02910 Racement inlays, crowns \$ 10.00	05220 Upper or lower with gold or chrome
. 0210 Intraoral-complete series (including	Vario Resemble	clasps with rests, acrylic base \$150.0
bitewings) \$ 20.00	(02000 02000)	05230 Lawer with gold or chrome lingual
20220 Intraoral-single film	ENDODONTICS (03000-03999)	bur and clasps, ocrylic base \$250.0
+ 0240 Intraorol-occlusal, single film \$ 5.00	03100 PULP CAPPING	05250 Upper with gold or chrome polated bor and closps, acrylic base \$275.0
- 0770 Bissuing single film	nazzo pula esp direct - (excluding final	05600 REPAIRS TO DENTURES
03: 1: Ritamine wach additional film * 4:00	restoration) \$ 10,00	05610 Repair braken complete or partial
. took b	03120 Puln con + indirect + (excluding final	denture \$ B/R
1 Cim	restoration) \$ TO.00	05730 Relining uppor or lower complete
JIZOD TESTS AND LABORATORY EXAMINATIONS	03200 PULPOTOMY	denture (office reline) \$60.0
1 0430 Biopsy and examination of oral tis-	03220 Vital pulpotomy (excluding final re-	05740 Relining upper or lower partial den-
sue (hord) \$23.00	storation)	> time foffice retine)\$ 50.6
tissue (soft) \$ 14.00	TREATMENT PLAN, CLINICAL PRO-	05750 Relining upper or lower complete denture (laboratory) \$ 55.0
AAO Pula vitality tests	CEDURES AND FOLLOW UP CARE)	05730 Relining upper or lewer partial den-
470 Diagnostic costs \$ 15.00	C3310 Anteriors (excludes final restoration) \$100,00	ture (laboratory) \$100.6
and the first control of the control	03320 Pre-molors (excludes final restor-	the frameworks of the second s
	glion) \$125.01	PROSTHODONTICS, FIXED
, REVENTIVE (01000-01999)	03330 Molars (excludes final restaration) . \$175,00	
	03350 Apexification \$ 60.00	(06000-06999)
100 DENTAL PROPHYLAXIS	03440 PERIAPICAL SERVICES	HIXED BRIDGES (EACH ADDIMENT AND
116 Adults	03410 Apicactomy, performed as separate surgical procedure	TACH PONTIC CONSTITUTES A UNIT
120 Children 1700 FLUORIDE TREATMENTS	03420 Apicoectomy, performed in conjunc-	IN A BRIDGE)
220 lapical application of ocid 1990109	tion with endodantic manipulation . \$ 75.00	OCHUS BRIDGE PONTICS
phosphote one treatment (excluding	03430 Retrograde filing \$ 17.00	06210 East gold
prophylaxis) 3 10,00	03920 Hemisection \$ 40.00	062ab Porcelgin-fused-to-metal \$215.
ON CHACE MAINTAINERS	03940 Bloaching endadontically treated	06250 Plastic processed-to-metal \$210
SIG Fixed unilgleral brand type 4 50.00	teeth	06/00 REPAIR OF FIXED BRIDGES \$ 8/1
1413 Charl linguel or polotel prch bend	•	06770 CROWNS AS ABUTMENTS 06710 Plostic (aerylie)
type	PERIODONTICS (04000-04999)	D6720 Plastic-processed-to-metal \$150
230 Kemovadia, origine 4 total	•	06750 Parcelain-fused-to-metol \$225
		OD 1 111 C. W. 11 1 D. 1
·	04200 SURGICAL SERVICES	06780 Gold (% cost) \$185
TSTORATIVE (02000-02999)	04210 Gingivectomy or gingivoplasty - per	06780 Gold (% cost)
ESTORATIVE (02000-02999)	04210 Gingivectomy or gingivoplasty - per sextont or guadrant (specify) \$ 75.00	06780 Gold (强 cost)
100 AMALGAM RESTORATIONS	04210 Gingivectomy or gingivoplasty - per sextont or quadrant (specify) \$ 75.00 04220 Gingival curettage \$ 15.00 04260 Osseous surgery (including flap entry	06780 Gold (% cost) \$185
100 AMALGA/A RESTORATIONS	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify) \$ 75.00 04220 Gingival curettage	06780 Gald (% cost)
100 AMALGA!A RESTORATIONS (including Polishing) 110 Amology-page surface, deciduous \$ 10.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)\$ 75.00 04220 Gingival curettage\$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextant or quadrant (please specify)\$100.00	06780 Gold (% cost)
.100 AMALGA:A RESTORATIONS (Including Polishing) 110 Amolgam-one surface, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00	04210 Gingivectomy or gingivoplasty - per sextont or quadrant (specify) \$ 75.00 04220 Gingival curettage \$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextant or quadrant (please specify)	06780 Gold (% cost)
. 100 AMALGA:A RESTORATIONS (Including Polishing) 110 Amolgam-one surface, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00 130 Amolgam-three surfaces, deciduous . \$ 21.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrent (specify)\$ 75.00 04220 Gingival curettage\$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextant or quadrent (please specify)\$100.00 04262 Osseous graft - multiplo site (including flap entry and closure)\$150.00	06780 Gold (% cost)
100 AMALGA/A RESTORATIONS (including Polishing) 110 Amolgom-one surface, deciduous \$ 10.00 120 Amolgom-two surfaces, deciduous \$ 16.00 130 Amolgom-four surfaces, deciduous \$ 21.00 131 Amolgom-four surfaces, deciduous \$ 25.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)\$ 75.00 04220 Gingival curettage\$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextent or quadrant (please specify)\$100.00 04262 Osseous graft - multiplo site (including flap entry and closure)\$150.00 04270 Pedide soft tissue grafts\$80.00	06780 Gold (% cost)
100 AMALGA/A RESTORATIONS (including Polishing) 110 Amolgam-one surfaces, deciduous . \$ 10.00 120 Amolgam-two surfaces, deciduous . \$ 16.00 130 Amolgam-four surfaces, deciduous . \$ 21.00 131 Amolgam-four surfaces, deciduous . \$ 25.00 140 Amolgam-one surfaces, permanent . \$ 10.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)	06780 Gold (% cost)
100 AMALGA/A RESTORATIONS (including Polishing) 110 Amolgam-one surfaces, deciduous . \$ 10.00 120 Amolgam-two surfaces, deciduous . \$ 16.00 130 Amolgam-three surfaces, deciduous . \$ 21.00 131 Amolgam-four surfaces, deciduous . \$ 25.00 140 Amolgam-one surfaces, permanent . \$ 10.00 1150 Amolgam-two surfaces, permanent . \$ 17.00 1160 Amolgam-two surfaces, permanent . \$ 24.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXFRACTIONS 07110 Single footh \$15 07120 Each additional tooth \$15 07100 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45
100 AMALGA/A RESTORATIONS (including Polishing) 110 Amolgam-one surfaces, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00 130 Amolgam-three surfaces, deciduous \$ 21.00 131 Amolgam-four surfaces, deciduous \$ 25.00 140 Amolgam-one surfaces, permanent \$ 10.00 1150 Aniolgam-two surfaces, permanent \$ 17.00 1160 Amolgam-three surfaces, permanent \$ 24.00	04210 Gingivectomy or gingivoplasty - per sextant or quadrant (specify)	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single footh \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45 07250 Root recovery (surgical removal of
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(including Polishing) 110 Amolgam-one surface, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00 130 Amolgam-three surfaces, deciduous \$ 21.00 131 Amolgam-four surfaces, deciduous \$ 25.00 140 Amolgam-one surface, permanent \$ 10.00 150 Aniolgam-two surfaces, permanent \$ 17.00 161 Amolgam-four or more surfaces, permanent \$ 24.00 162 Amolgam-four or more surfaces, permanent \$ 30.00 163 Amolgam-four or more surfaces, permanent \$ 30.00	04210 Gingivectomy or gingivoplasty - per sextont or quadrant (specify)	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single tooth \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, enupted \$15 07220 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45 07250 Root recovery (surgical removal of residual root) \$65 07270 Tooth replantation (includes splint-
100 AMALGA/A RESTORATIONS (including Polishing) 110 Amolgam-one surfaces, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00 130 Amolgam-tour surfaces, deciduous \$ 21.00 131 Amolgam-four surfaces, deciduous \$ 25.00 140 Amolgam-one surfaces, permanent \$ 10.00 1450 Annolgam-two surfaces, permanent \$ 17.00 1460 Amolgam-tour or more surfaces, permanent \$ 24.00 1461 Amolgam-four or more surfaces, permanent \$ 30.00 1470 Amolgam-reinforced pin (per pin) \$ 2.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single footh \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45 07250 Root recovery (surgical removal of residual toot) \$65 07270 Tooth replantation (includes splinting) \$35
(including Polishing) 110 Amolgam-one surfaces, deciduous . \$ 10.00 120 Amolgam-two surfaces, deciduous . \$ 16.00 130 Amolgam-three surfaces, deciduous . \$ 21.00 131 Amolgam-four surfaces, deciduous . \$ 25.00 130 Amolgam-one surfaces, permanent . \$ 10.00 150 Amolgam-two surfaces, permanent . \$ 17.00 160 Amolgam-four or more surfaces, permanent . \$ 17.00 170 Amolgam-reinforced pin (per pin) . \$ 2.00 170 SILICATE RESTORATIONS 170 ACCEPTIC OR PLASTIC RESTORATIONS	04210 Gingivectomy or gingivoplasty - per sextont or quadrant (specify)\$ 75.00 04220 Gingival curettage\$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextant or quadrant (please specify)\$100.00 04262 Osseous graft - multiple site (including flap entry and closure)\$150.00 0427D Pedicle soft tissue grafts\$80.00 0427T Free soft tissue grafts\$100.00 04272 Vestibulaplastry\$100.00 04280 Peridantal pulpal procedures\$100.00 04320 Provisional splinting Introcoronal\$40.00 04321 Provisional splinting extracoronal\$50.00 04330 Occlusal adjustment (limited)\$20.00 04331 Occlusal adjustment (complete)\$75.00	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single tooth \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45 07250 Root recovery (surgical removal of residual root) \$65 07270 Tooth replantation (includes splinting) \$35
(including Polishing) 110 Amolgom-one surfaces, deciduous . \$ 10.00 120 Amolgom-two surfaces, deciduous . \$ 16.00 130 Amolgom-three surfaces, deciduous . \$ 21.00 131 Amolgom-four surfaces, deciduous . \$ 25.00 131 Amolgom-one surfaces, permanent . \$ 10.00 150 Amolgom-two surfaces, permanent . \$ 17.00 160 Amolgom-two surfaces, permanent . \$ 17.00 161 Amolgom-four or more surfaces, permanent . \$ 24.00 162 Amolgom-reinforced pin (per pin) . \$ 2.00 163 Silicate cement-per restoration . \$ 12.00 164 Arrylic or plostic . \$ 12.00	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)\$ 75.00 04220 Gingival curettage\$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextant or quadrant (please specify)\$100.00 04262 Osseous graft - multiplo site (including flap entry and closure)\$150.00 0427D Pedicle soft tissue grafts\$80.00 04271 Free soft tissue grafts\$100.00 04272 Vestibuloplastry\$100.00 04270 Peridontal pulpol procedures\$100.00 04280 Peridontal pulpol procedures\$100.00 04300 ADJUNCTIVE PERIODONTAL SERVICES 04320 Provisional splinting - Intracoronal\$40.00 04321 Provisional splinting - extracoronal\$50.00 04331 Occlusal adjustment (timited)\$20.00 04331 Occlusal adjustment (complete)\$75.00 04340 Periodontal serving and root pluning	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single footh \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45 07250 Root recovery (surgical removal of residual root) \$65 02270 Tooth replantation (includes splinting) \$35 07366 ALVELOPLASTY (surgical preparation of risign for dentures)
(including Polishing) 110 Amolgam-one surfaces, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00 130 Amolgam-two surfaces, deciduous \$ 21.00 131 Amolgam-four surfaces, deciduous \$ 25.00 140 Amolgam-one surfaces, permanent \$ 17.00 1450 Aniolgam-two surfaces, permanent \$ 17.00 1461 Amolgam-four or more surfaces, permanent \$ 24.00 1461 Amolgam-four or more surfaces, permanent \$ 20.00 1470 Autolgam-reinforced pln (per pin) \$ 2.00 1470 Silicate cement-per restoration \$ 12.00 1470 Actylic or plastic finyslying incisol	04210 Gingivectomy or gingivoplasty - per sextent or quadrant (specify)\$ 75.00 04220 Gingival curettage\$ 15.00 04260 Osseous surgery (including flap entry and closure) per sextant or quadrant (please specify)\$100.00 04262 Osseous graft-multiplo site (including flap entry and closure)\$150.00 0427D Pedicle soft tissue grafts\$80.00 04271 Free soft tissue grafts\$100.00 04271 Vestibulaplastry\$100.00 04272 Vestibulaplastry\$100.00 04270 Peridantal pulpol procedures\$100.00 04280 Peridantal pulpol procedures\$100.00 04300 ADJUNCTIVE PERIODONTAL SERVICES 04320 Provisional splinting - Intracoronal\$40.00 04321 Provisional splinting - extracoronal\$50.00 04331 Occlusal adjustment (limited)\$75.00 04340 Periodantal scriling and root pluning (entire mauth)\$75.00	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single footh \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, erupted \$25 07230 Extraction of tooth, imported \$25 07250 Root recovery (surgical removal of residual tooth) \$65 07270 Tooth replantation (includes splinting) \$35 07290 ALVELOPLASTY (surgical preparation of ridge for dentures) 07310 Alveoloplasty in conjunction with extractions \$25
(including Polishing) 110 Amolgam-one surface, deciduous \$ 10.00 120 Amolgam-two surfaces, deciduous \$ 16.00 130 Amolgam-three surfaces, deciduous \$ 25.00 131 Amolgam-four surfaces, deciduous \$ 25.00 140 Amolgam-four surfaces, deciduous \$ 25.00 140 Amolgam-two surfaces, permanent \$ 10.00 1450 Amolgam-three surfaces, permanent \$ 17.00 1401 Amolgam-four or more surfaces, permanent \$ 24.00 1402 Amolgam-reinforced pin (per pin) \$ 20.00 1403 SILICATE RESTORATIONS 1410 Silicate cement-per restoration \$ 12.00 1403 Acceptic or plastic \$ 12.00 1404 Acceptic or plastic (involving incisol services) 1405 Acceptic or plastic (involving incisol service) 1406 Acception \$ 20.00 1408 Acception or plastic (involving incisol service)	04210 Gingivectomy or gingivoplasty - per sextant or quadrant (specify)	06780 Gold (% cost) \$185 06790 Gold (full cost) \$190 ORAL SURGERY (07000-07999) 07100 EXTRACTIONS 07110 Single tooth \$15 07120 Each additional tooth \$15 07700 SURGICAL REMOVAL 07710 Extraction of tooth, erupted \$15 07220 Extraction of tooth, erupted \$25 07230 Extraction of tooth, impacted \$25 07230 Extraction of tooth, impacted \$45 07250 Root recovery (surgical removal of residual toot) \$65 07270 Tooth replantation (includes splinting) \$35 07290 ALVELOPLASTY (surgical preparation of ridge for dentures) 07310 Alveloplasty in conjunction with extractions \$25 07270 Alveloplasty NOT in conjunction
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GENERAL PROVISIONS - Descriptions of the formula of Complete Stand Non-Occupations Chair and a complete an enrollment card. If the employer pays the entire cost of the plan, all eligible employers must be enrolled. If other than dental, victor care or audio benefits are included in the plan, the Employees are shall maked to contribute toward the cost of their insurance, and 75% of those employees eligible must be enrolled. Coverage for an employee not actually at work on the date his insurance would otherwise become effective, shall not become effective until the employee returns to active work. Coverage alask became afformal the employee returns to active work. Coverage alask became afformal the formula for the contribution of the cont

ELIGIBLE DEPENDENTS- Not applicable.

SERVICE WAITING PERIOD:

Present Employees - None

Rew Employees - Three (3) Forming

Parafit: 20% of weekly wage to a many \$ \$150/ with

Parafit round: 52 weeks

Cotinated cont/person / month - \$5.01

Administration of the plan has been designed to keep paper work to a minimum. Upon installation of a plan a qualified Company representative will explain the few simple procedures to be followed in the operation of the plan.

This proposal is not a contract and all provisions of the plan will be subject to the terms of the master policy issued to the employer. Each insured employee will be issued an individual certificate outlining the benefits for which he will be insured.

PROP-LC

Schedil F-1

DISABILITY INCOME

An employee will receive an income while he is totally disabled and unable to work as a result of a non-occupational accident or a sickness for which benefits are not payable under any Workmen's Compensation Law.

The income will begin as of the day of disability indicated in the Schedule of Benefits. It is payable for the maximum period of weeks for each disability indicated in the Schedule of Benefits.

The disability must begin while the employee is insured; successive periods of disability are considered as one unless (a) they are separated by at least one week of active full-time work, or (b) they are due to unrelated causes and are separated by complete recovery.

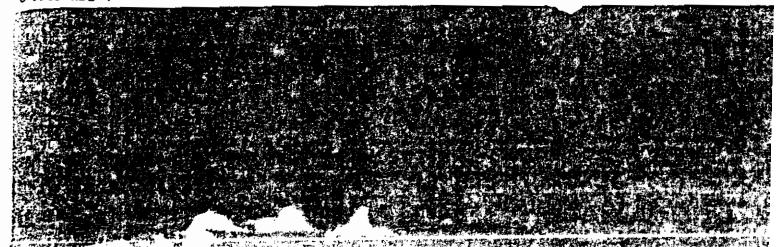
The employee does not have to be confined to his home to receive these benefits, but must be under the care of a legally qualified physician.

COORDINATION WITH OTHER GROUP PLANS

Benefits for reimbursement of medical or dental expenses are coordinated with similar benefits payable to the insured under other group plans in order to prevent combined benefit payments that are in excess of actual covered expenses.

Schedule F-2





The Richard . Thomas Agency

Linden Plaga Suite 211 Great Neck, New York

Flunter 7-6584

February 19, 1980

Thomas Hogan Hogan & Pallace Esq. 20 Court Street Hackensack, New Jersey 07601

Dear Mr. Hogan:

This is to confirm the fact that we have a commitment to write a disability policy covering Bergen County Employees Council #5, with the following disability plan:

70% of weekly salary. Maximum \$150.00
60 day waiting period
52 week benefit period
full coverage for pregnancy
cost 5.01 per employee per month based on approxmiate
1,450 eligible employees
75% participation required if contributory
no male female content required in the 75%

Mr. John Berberich's letter to the freeholders had no meaning other than as a courtesy coverletter, and Mr. Berberich will be writing a letter of explanation stating that we are the original agents of record and should remain so.

Very truly yours,

THE RICHARD - THOMAS AGENCY

Richard T Sklover

RS/ek

Schedule F-3

HITE COLLAR - STEP SYSTEM - EFFECTIVE 1/1/82

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+ 480 475 460 460 450 450 450	05055 050505 050505 050505	280 285 290 295	2222 2605 5050	Increase over 1981
11,675 11,917 12,196 12,913 13,677 14,495 15,373 16,130	8,936 9,337 9,775 10,318 10,959	7,508 7,650 8,007 8,368	7,005 7,125 7,190 7,255	Step 1
12,530 12,772 13,051 14,532 15,350 16,229 16,985	9,590 9,991 10,429 10,972 11,613	8,061 8,203 8,554 8,921	7, 468 7, 588 7, 653 7, 717	Step 2
13,386 13,627 14,619 15,388 17,084 17,084	10,244 10,645 11,083 11,626 12,267	8,615 8,756 9,107 9,474	7,931 8,046 8,116 8,180	Step 3
14,241 14,482 14,762 15,475 16,243 17,060 17,939 18,695	10,898 11,299 11,737 12,280 12,921	9,168 9,310 9,661 10,028	8,394 8,513 8,579 8,643	Step 4
15, 096 15, 336 15, 617 16, 330 17, 098 17, 915 18, 794 19, 549	11,552 11,953 12,391 12,391 12,934 13,575	9,721 9,858 10,214 10,581	8,980 8,976 9,042 9,106	Step 5
15,951 16,193 17,185 17,185 18,872, 19,649	12,206 12,607 13,045 13,588 14,229	10,275 10,416 10,767 11,134	9,443 9,439 9,504 9,542	Step 6
16,806 17,048 17,327 18,040 18,808 19,626 20,505 21,266	12,860 13,322 13,941 14,242 14,883	10,828 11,151 11,321 11,688	9,906 9,902 9,967 10,228	Step 7
17,662 17,903 18,578 19,664 20,481 21,360 22,107	13,514 13,976 14,595 14,972 15,537	11,381 11,704 11,874 12,241	10,365 10,430 10,690	Step 8
18,758 18,758 19,433 19,750 20,593 21,614 22,215 22,971	14,168 14,629 15,249 15,626 16,191	11,935 12,190 12,427 12,794	10,893 11,153	Step 9
19,613 20,288 20,606 21,448 22,469 23,070 24,116	16,280 16,845	12,981 13,348		Step 10
21,461 22,304 23,324 23,925 24,971	17,499	. · -		Step 11
24,781 25,826				Step 1

BERGEN COUNTY
WHITE COLLAR - STEP SYSTEM - EFFECTIVE 1/1/81

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444 450 460 480 480 480	2233 6050 6050 6050	280 285 290 295	2825 2605 5055 2605	Increase over 1980
11, 225 11, 462 11, 736 12, 448 13, 207 14,020 14,893 15,645	8,596 8,992 9,425 9,963 10,599	7,228 7,365 7,717 8,073	6,755 6,870 6,930	Step 1
12,080 12,317 12,591 13,299 14,062 14,875 15,749 16,500	9,250 9,646 10,079 10,617 11,253	7,781 7,918 8,264 8,626	7,218 7,333 7,393 7,452	Step 2
12,936 13,172 13,446 14,154 14,918 15,730 16,604 17,355	9,904 10,300 10,733 11,271 11,907	8,335 8,471 8,817 9,179	7,681 7,796 7,856 7,915	Step 3
13,791 14,027 14,302 15,010 15,773 16,585 17,459 18,210	10,558 10,954 11,387 11,925 12,561	8,888 9,025 9,371 9,733	8,144 8,258 8,319 8,378	Step 4
14,646 14,881 15,157 15,865 16,628 17,440 18,314 19,064	11,212 11,608 12,041 12,579 13,215	9,441 9,573 9,924 10,286	8,730 8,721 8,782 8,841	Step 5
15,501 15,738 16,112 16,720 17,483 18,397 19,169 19,921	11,866 12,262 12,695 13,233 13,869	9,995 10,131 10,477 10,839	9,193 9,184 9,244 9,277	Step 6
16,356 16,593 16,867 17,575 18,338 19,151 20,025	12,520 12,977 13,591 13,887 14,523	10,548 10,866 11,031 11,393	9,656 9,647 9,707 9,963	Step 7
17,212 17,448 18,118 18,430 19,194 20,006 20,880 21,622	13,174 13,631 14,245 14,617 15,177	11,101 11,419 11,584 11,946	10,110 10,170 10,425	Step 8
18,067 18,303 18,973 19,285 20,123 21,139 21,735 22,486	13,828 14,284 14,899 15,271 15,831	11,655 11,905 12,137 12,499	10,633 10,888	Step 9
19,158 19,828 20,141 20,978 21,994 22,590 23,631	15,925 16,485	12,691 13,053		Step 10
20,996 21,834 23,445 24,486 24,486 24,486 24,486	17,139		· -·	Step 11
24,3 25,3				Step

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WHITE COLLAR -	
STEP SYSTEM - EFFECTIVE 1/1/80	BERGEN COUNTY

D18 D19 D20 D21 D21 D22 D23 D24 D24	D13 D14 D15 D16 D17	D09 D10 D11 D12	08765	GRADE
10,775 11,007 11,276 11,983 12,737 13,545 14,413 15,160	8,256 8,647 9,075 9,608	6,948 7,080 7,427 7,778	6,505 6,615 6,725	Step 1
11,630 11,862 12,131 12,834 13,592 14,400 15,269 16,015	8,910 9,301 9,729 10,262 10,893	7,501 7,633 7,974 8,331	6,968 7,078 7,133 7,187	Step 2
12,486 12,717 12,986 13,689 14,448 15,255 16,124 16,124	9,564 9,955 10,383 10,916 11,547	8,055 8,186 8,527 8,884	7,431 7,541 7,596 7,650	Step 3
13,341 13,572 13,842 14,545 15,303 16,110 16,979 17,725	10,218 10,609 11,037 11,570 12,201	8,608 8,740 9,081 9,438	7,894 8,003 8,059 8,113	Step 4
14,196 14,426 14,697 15,400 16,158 16,965 17,834 18,579	10,872 11,263 11,691 12,224 12,855	9,161 9,293 9,634 9,991	8,480 8,466 8,522 8,576	Step 5
15,015 15,283 15,652 16,255 17,013 17,922 18,689 19,436	11,526 11,917 12,345 12,878 13,509	9,715 9,846 10,187 10,544	8,943 8,929 8,984 9,012	Step 6
15,906 16,138 16,407 17,110 17,868 18,676 19,545 20,296	12,180 12,632 13,241 13,532 14,163	10,268 10,581 10,741 11,098	9,406 9,392 9,447 9,698	Step 7
16,762 16,993 17,658 17,965 18,724 19,531 20,400 21,137	12,834 13,286 13,895 14,262 14,817	10,821 11,134 11,294 11,651	9,855 9,910 10,160	Step 8
17,617 17,848 18,513 18,820 19,653 20,664 21,255 22,001	13,488 13,939 14,549 14,916 15,471	11,375 11,620 11,847 12,204	10,373 10,623	Step 9
18,703 19,368 19,676 20,508 21,519 22,110 23,146	15,570 16,125	12,401 12,758		Step 10
20,531 21,364 22,374 22,965 24,001	16,779		-	Step 11
1		·		Ste