New Jersey Public Employment Relations Commission

NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

| Line # | ‡ | | | | | | | |
|---|---|---|--------------|--|-------------|----------|--|--|
| | SECTION I: Parties and Term of Contracts | | | | | | | |
| 1 | Public Employer: Emerson Board of Education | | | County: Bergen | | | | |
| 2 | Employee Organization: Emerson Education AssocTeachers | | | Number of Employees in Unit: 114.8 | | | | |
| 3 | Base Year Contract Term: 3 year | | | New Contract Term: 3 year | | | | |
| | SECTION II: Type of | SECTION II: Type of Contract Settlement (please check only one) | | | | | | |
| 4 | Contract settled without neutral assistance | | | | | | | |
| 5 | Contract sett | Contract settled with assistance of mediator | | | | | | |
| 6 | Contract settled with assistance of fact-finder | | | | | | | |
| 7 | Contract settled with assistance of super-conciliator | | | | | | | |
| 8 | | | | a report with recomn | nendations? | | | |
| , | If contract was settled in fact-finding, did the fact-finder issue a report with recommendations? Yes No | | | | | | | |
| *************************************** | SECTION III: Salary Base | | | | | | | |
| | The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which | | | | | | | |
| | the parties negotiate the salary increases. | | | | | | | |
| 9 | Salary Costs in Base Year \$\\ 8353940 | | | AND CONTROL OF THE CO | | | | |
| 10 | Longevity Costs in Base Year | | \$ 57250 | 57250 | | | | |
| 11 | Total Salary Base \$8411190 | | | | | | | |
| | SECTION IV: Salary Increases for Each Year of New Agreement* | | | | | | | |
| | | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | | |
| 12 | Effective Date (month/day/year) | July 1, 2022 | July 1, 2023 | July 1, 2024 | | | | |
| 13 | Cost of Salary Increments (\$) | 281380 | 234850 | 236410 | | | | |
| 14 | Salary Increase Above Increments (\$) | | | | | | | |
| 15 | Longevity Increase (\$) | 85500 | 19500 | 29000 | | | | |
| 16 | Total \$ Increase (sum of lines 13-15) | 366880 | 254350 | 265410 | | | | |
| 17 | New Salary Base (\$) | 8635320 | 8870170 | 9106580 | | | | |
| 18 | Percentage increase over prior year | 4.4 % | 2.9 % | 2.9 % | % | <u> </u> | | |
| - | *If contract duration is longer than five years, please add an additional page. | | | | | | | |

| Item Description | Base Year Cost (\$) | Year 1 Increase (\$) | <i>Year 2</i> Increase (\$) | <i>Year 3</i> Increase (\$) | Year 4 Increase (\$) | <i>Year 5</i> Increase (\$ |
|--|------------------------|-------------------------|--|--------------------------------|-------------------------|---------------------------------------|
| 6th period pay | 0 | 9000 | 0 | | | |
| | | | | | 1 | |
| | | | | | | 1 |
| | | | | | | |
| | | | | | | |
| Management of the Control of the Con | | | gazzania a la canacia de la ca | | | |
| | | | | | | |
| *** | | | | | | |
| | | | | | | |
| Totals(\$): | | | | | | |
| | | | | | | |
| *If contract duration | on is longer than j | tive years, please a | iad an additional | page. | | |
| | | | | | | · · · · · · · · · · · · · · · · · · · |

| | SECTION VI: Medical Costs | | |
|----|---|------------|------------|
| | | Base Year | Year 1 |
| 21 | Health Plan Cost | \$ 2576328 | \$ 2827517 |
| 22 | Prescription Plan Cost | \$ | \$ |
| 23 | Dental Plan Cost | \$ 144200 | \$ 144200 |
| 24 | Vision Plan Cost | \$ | \$ |
| 25 | Total Cost of Insurance | \$ 2720528 | s 2971717 |
| 26 | Employee Insurance Contributions | \$ 424688 | \$ 490200 |
| 27 | Employee Contributions as % of Total Insurance Cost | 15.6 | 16.5 |
| | , , | | |

Page 2 of 3 (complete all pages)

| Employ | _{yer:} Emerson B | oard of Education | Employee Organization: | Emerson Education Assocteachers | Page 3 |
|--------|---------------------------------------|--|--|--------------------------------------|----------------|
| Sectio | n VI: Medical Co | sts (continued) | | | |
| 28 | Identify any in | surance changes that were | included in this CNA. | | |
| | | | | | |
| | | , | | | |
| | | | | | Ì |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | SECTION VIII C | ertification and Signatur | ٩ | | |
| 29 | | ed certifies that the forego | | | |
| | The anacisigne | a certificatina inc forego | ome neares are trae. | | |
| | | Philip H Nisonoff, Ed | d D | • | |
| | Print Name: | *************************************** | and the second s | | |
| | Position/Title: | Asst. Supt./SBA/Bd. | ∕Sec. | - | |
| | Signature: | | | | |
| | | 8/25/22 | gyngagy (ylgaga) dag gylynman gag gynginnan ha'n h'y mae'r a dae g Am i Albinan diabhaid (An i An i Add Albinad (An i Albinad (A | | |
| | Date: | The second secon | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | P-0 |
| | Sand this comm | aleted and signed form a | long with an electronic co | opy of the contract and the signed c | ertification |
| | | acts@perc.state.nj.us | iong with an electronic et | py of the contract and the signed c | CI IIIICUCIOII |
| | | | | | |
| | | | | | |
| | NJ Public Emplo | oyment Relations Commi | ssion | | |
| | Conciliation and | d Arbitration | | | |
| | PO Box 429 | | | | |
| | Trenton, NJ 086 | 625 | | | |
| | Phone: 609-29 | 2-9898 | | Revised 8/20 |)16 |