

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)

14 Total Base Salary Cost from Line 13: \$ 1,650,556.00

Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15 Effective Date (month/day/year)	<u>1/1/2022</u>	<u>1/1/2023</u>	<u>1/1/2024</u>	<u>1/1/2025</u>		
16 Cost of Salary Increments (\$)	<u>(93,554.41)</u>	<u>37,424.41</u>	<u>41,455.00</u>	<u>42,535.00</u>		
17 Salary Increase Above Increments (\$)						
18 Longevity Increase (\$)						
19 Total Increased Cost for "Other" Items (\$)						
20 Total Increase (\$) (sum of lines 16-19)	<u>(93,554.41)</u>	<u>37,424.41</u>	<u>41,455.00</u>	<u>42,535.00</u>		

SECTION V: Average Increase Over Term of New CNA

21 Dollar Increase Over Life of Contract \$ 27,860.00 [Take sum of all amounts listed on Line 20 above]

22 Percentage Increase Over Life of Contract 1.7 % [Divide amount on Line 21 by amount on Line 14]

23 Average Percentage Increase Per Year 0.4 % [Divide percentage on Line 22 by number of years of the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	Detective Stipend	6,937.50	7,000.00	7,000.00	7,000.00	7,000.00		
	EMT Stipend	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00		
25	Totals (\$):	9,437.50	9,500.00	9,500.00	9,500.00	9,500.00		

SECTION VII: Medical Costs

Insurance Costs		Base Year	Year 1
26	Health Plan Cost	\$ 268,048.20	\$ 202,844.64
27	Prescription Plan Cost	\$ 97,059.36	\$ 72,973.62
28	Dental Plan Cost	\$ 32,092.20	\$ 18,225.12
29	Vision Plan Cost	\$	\$
30	Total Cost of Insurance	\$ 397,199.76	\$ 294,043.38

SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	\$ <u>130,166.53</u>	\$ <u>95,640.36</u>
32	Contributions as % of Total Insurance Cost	<u>32.8</u> %	<u>32.5</u> %

33 Identify any insurance changes that were included in this CNA.

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Francine DeAngelis

Position/Title: CFO

Signature: *Francine DeAngelis*

Date: August 9, 2022

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission
Conciliation and Arbitration
PO Box 429
Trenton, NJ 08625
Phone: 609-292-9898

Revised 8/2016