

RESOLUTION NUMBER 20- /91 **BOROUGH OF LODI**

Bergen County, New Jersey

WHEREAS, an Agreement has been negotiated between the Borough of Lodi (hereinafter referred to as the "Borough") and the Policemen's Benevolent Association, Local 26 (Lodi Unit) (hereinafter referred to as the "PBA") for the period of January 1, 2021 through December 31, 2025 with PBA Option to Renew from January 1, 2026 to December 31, 2026 (hereinafter referred to as the "Agreement") which Agreement is attached hereto, made a part hereof and incorporated herein by reference; and

WHEREAS, the Mayor and Council of the Borough of Lodi on behalf of the Borough desire to approve and authorize the execution of said Agreement;

NOW, THEREFORE, BE IT RESOLVED, by the Mayor and Council of the Borough of Lodi that the Agreement between the Borough of Lodi and the Policemen's Benevolent Association, Local 26 (Lodi Unit) for the period of January 1, 2021 through December 31, 2025 with PBA Option to Renew from January 1, 2026 to December 31, 2026 which Agreement is attached hereto is hereby approved and the Mayor is hereby authorized to execute said Agreement on behalf of the Borough.

Adopted this /7 day of November , 2020.

Mayor

ATTEST

Parole L. D'Amico RMC Municipal Clerk

THIS IS TO CERTIFY THAT THIS IS A TRUE COPY AS ADOPTED BY THE BOROUGH COUNCIL OF THE BOROUGH OF LODI, N.J. AT A MEETING HELD

ON November 17, 2020 BORO CLERK CANGLE & Danies, Roc

AGREEMENT

BETWEEN

THE BOROUGH OF LODI

AND

THE POLICEMEN'S BENEVOLENT ASSOCIATION, LOCAL 26 (LODI UNIT)

JANUARY 1,2021 THROUGH DECEMBER 31,2025 WITH OPTION TO RENEW BY THE LODI PBA LOCAL 26 FROM JANUARY 1,2026 to DECEMBER 31,2026

Prepared By:

THE POLICEMEN'S BENEVOLENT ASSOCIATION, LOCAL 26

(LODI UNIT)

TABLE OF CONTENTS

•	PAGE
PREAMBLE	6
ARTICLE 1- EMPLOYEES' BASIC RIGHTS	7
ARTICLE 2- EXCLUSIVITY OF ASSOCIATION REPRESENTATION	8
ARTICLE 3- AGENCY SHOP	9
ARTICLE 4- EXISTING LAWS	10
ARTICLE 5- ASSOCIATION RECOGNITION	11
ARTICLE 6- ASSOCIATION REPRESENATIVES	13
ARTICLE 7 - RIGHTS OF EMPLOYEES.	15
ARTICLE 8 - DATA FORFUTURE BARGAINING.	18
ARTICLE 9 - SALARIES	19
ARTICLE 10- WORK DAY, WORK WEEK AND OVERTIME	21
ARTICLE 11- HOURLY RATE.	22
ARTICLE 12 - COURT TIME.	23
ARTICLE 13-TRAINING PAY	25
ARTICLE 14- RECALL	26
ARTICLE 15 - PRIORITY FOR OVERTIME.	27
ARTICLE 16 - SHIFT CHANGES.	28
ARTICLE 17- LONGEVITY	29
ARTICLE 18- UNIFORMS	30
ARTICLE 19-PBA REPRESENTATION	32

ARTICLE 20 - VACATIONS33
ARTICLE 21- HOLIDAYS35
ARTICLE 22-SICK LEAVE38
ARTICLE 23- WORK INCURRED INJURY41
ARTICLE 24 - BEREAVEMENT LEAVE43
ARTICLE 25 - LEAVE OF ABSSENCE45
ARTICLE 26 - MEDICAL COVERAGE
ARTICLE 27- INSURANCE52
ARTICLE 28 - LIFE INSURANCE53
ARTICLE 29 -BULLETIN BOARD54
ARTICLE 30-CEREMONIAL ACTIVITIES55
ARTICLE 31 - LEGAL EXPENSES56
ARTICLE 32- PERSONNEL FILES57
ARTICLE 33 - MILITARY LEAVE59
ARTICLE 34-PENSION60
ARTICLE 35 - GRIEVANCE PROCEDURE61
ARTICLE 36 - SAVINGS CLAUSE63
ARTICLE 37 - OFF DUTY POLICE ACTION64
ARTICLE 38- AMENDMENT OF LAW65
ARTICLE 39 - MILEAGE ALLOWANCE
ARTICLE 40 - MATERNITY/PATERNITY LEAVE
ARTICLE 41- SAFETY AND HEALTH69

ARTICLE 42 - PERSONAL DAYS	70
ARTICLE 43 - YEARLY CALENDAR	72
ARTICLE44- NO WAIVER	73
ARTICLE 45 - UNIFORM REGULATIONS	74
ARTICLE 46 - POLICE VEHICLES	75
ARTICLE 47 - SENIORITY.	76
ARTICLE 48 - IN-SERVICE TRAINING	77
ARTICLE 49 - JOINT PBA-MANAGEMENT COMMITTEE	78
ARTICLE 50- PAST PRACTICE CLAUSE	79
ARTICLE 51- MISCELLANEOUS PROVISIONS	80
ARTICLE 52- OUTSIDE EMPLOYMENT ACTIVITIES	83
ARTICLE 53 - POLICE SERVICES	
ARTICLE 54 -TERMS OF CONTRACT	86
APPENDIX A, B, C, D AND E	87

PREAMBLE

THIS AGREEMENT, made by and between the BOROUGH OF LODI, a body politic and corporate of the State of New Jersey, hereinafter referred to as the "Employer", and THE

POLICEMEN'S BENEVOLENT ASSOCIATION, LOCAL 26, (Lodi Unit)
hereinafter referred to as the "PBA"; WHEREAS, the Employer and the PBA recognized that it will be to the benefit of both to promote mutual understanding and foster a harmonious relationship between the parties to the end that continuous and efficient service will be rendered to and by both parties, NOW, THEREFORE, it is agreed as follows:

EMPLOYEES' BASIC RIGHTS

- A. Pursuant to chapter 303, Public Laws 1968, the Employer hereby agrees that every Employee shall have the right freely to organize, join and support the PBA and its affiliates for the purpose of engaging in collective negotiations and other concerted activities for mutual aid and protection. As a body exercising governmental powers under the Laws of the State of New Jersey, the Employer undertakes and agrees that it shall not directly or indirectly discourage or deprive or coerce any Employee in the enjoyment of any right conferred by Chapter 303, Public laws 1968, or other Laws of New Jersey or the Constitution of New Jersey and of the United States.
 - B. The Employer further agrees that it shall not discriminate against any Employee with respect to hours, wages or any terms or conditions of employment by reason of his membership in the PBA and its affiliates, collective negotiations with the Employer or his institution of any grievance, complaint or proceeding under this Agreement or otherwise with respect to any terms of conditions of employment, as prescribed by the Statutes of the State of New Jersey.

EXCLUSIVITY OF ASSOCIATION REPRESENTATION

A. The Employer agrees that it will not enter into any Contract or Memorandum of Agreement with anyone but the recognized Association (PBA Local 26, Lodi Unit) only with regard to the categories of personnel covered by the said Memorandum of Agreement during the terms of this Agreement.

AGENCY SHOP / UNION DUES

The Borough agrees to deduct from the pay of each member of the A. bargaining unit the required amount of Association dues provided the member has signed and filed an appropriate written authorization as required by law. The Association shall notify the Borough of the rate of membership dues. The Borough shall remit such dues to the Association on a monthly basis. The Association hereby agrees to indemnify and hold harmless the Borough of Lodi, its agents, employees and officials, for any and all claims which may be made by virtue of any deduction undertaken pursuant to this paragraph. The authorization for dues deduction shall remain in full force and effect during the full term of an employee's employment, unless properly withdrawn. To withdraw from a dues authorization an employee must submit a written request to withdraw from the Association to the responsible payroll clerk for the Borough within ten (10) days following each anniversary date of his/her employment. Once the Employer's payroll clerk receives the request, he or she will notify the Association within five (5) business days. The properly filed withdrawal will become effective on the 30th day after the employee's anniversary date of employment. The requirements set forth herein shall be applied consistent with the U.S. Supreme Court's June 27, 2018 decision in Janus v. AFSCME, Council 31 and the New Jersey Workplace Democracy Enhancement Act.

EXISTING LAWS

A. The provisions of this Agreement shall be subject to and subordinate to, and shall not annul or modify existing applicable provisions of State or Federal Laws.

ASSOCIATION RECOGNITION

- A. The Employer recognizes PBA Local 26 (Lodi Unit) only as the exclusive bargaining representative for the purpose of collective negotiations with respect to all negotiable items of employment of all Employees employed by the Employer's Police Department except those Employees specifically excluded herein, Police Chief and Deputy Chief of Police, and all non-police Employees.
- B. The term "Police Officer" or "Employee" as used herein shall be defined to Include the plural as well as the singular and include females as well as males; and shall apply to members of the police force covered by this Agreement.
- C. The Employer and the Union agree that there shall be no discrimination against any Employee because of age, race, creed, color, religion, marital status, sex, national origin, nationality, political affiliation, pregnancy, ancestry, breastfeeding, sexual orientation, gender identity or expression, disability, domestic partnership/civil union status, liability for military service, in some cases atypical hereditary cellular or blood trait genetic information.
- D. The Employer and the Union agree that all Employees covered under the Agreement have the right without fear of penalty or reprisal to form, join, and assist any Employee organization or

to refrain from any such activity. There shall be no discrimination by the Employer or the Union against any Employer because of the Employee's membership or non-membership or activity or non-activity in the Union.

ASSOCIATION REPRESENTATIVES

- A. The Employer recognized the right of the Association to designate Representatives within the Department and alternates for the enforcement of this Agreement, provided they are members of the Lodi Police Department or their attorneys.
- B. The Association shall furnish the Employer in writing the names of the representatives and the alternates and notify the employer of any changes.
- C. The authority of the representatives and alternates so designated by the Association shall be limited to, and shall not exceed, the following duties and activities.
 - The investigation and presentation of grievances in accordance with the provisions of the Collective Bargaining Agreement.
 - 2. The transmission of such messages and information which shall originate with, and are authorized by the Association and its Officers.
- D. The designated association representatives shall be granted time with pay during working hours to investigate and seek to settle grievances but not including disciplinary matters. The Chief shall grant reasonable time for the aforesaid

activities, and to attend negotiating sessions and all other meetings or sessions which might affect the rights and/or obligations of any member.

RIGHTS OF EMPLOYEES

- A. Members of the force hold a unique status as public officers in that the nature of their office and employment involves the exercise of a portion of the police power of the municipality.
- B. The security of the community depends to a great extent on the manner in which Police Officers perform their duty, and their employment is thus in the nature of a public trust.
- C. The wide ranging powers and duties given to the Department and its members involve them in all manner of contacts and relationships with the public.
- D. Out of these contacts may come questions concerning the actions of the members of the force.
- E. These questions may require investigation by Superior Officers designated by the Chief and governing body.
- F. In an effort to insure that these investigation are conducted in a manner which is conducted to good order and discipline, the following rules are hereby adopted:
 - (1) The interrogation of a member of the force shall be at a reasonable hour, preferably when the member of the force is on duty, unless the exigencies of the investigation dictate

otherwise, in which event reassignment of the member of the force should be employed. (If any time lost, the member of the force shall be compensated). When it arises out of a work situation or police matter, interrogation shall be handled on Borough time.

- (2) The interrogation shall take place at a location designated by the Chief. Usually it will be at Police Headquarters or the location where the incident allegedly occurred.
- (3) Sufficient information to reasonably apprise the member of the allegations should be provided. If it is known that the member of the force is being interrogated as a witness only, he should be so informed at the initial contact.
- (4) The questioning shall be reasonable in length.

 Reasonable respites shall be allowed. Time

 shall also be provided for personal

 necessities, meals, telephone calls, and rest

 periods that are reasonably necessary.
- (5) The members of the force shall not be subject to any offensive language, nor shall he be threatened with transfer, dismissal or other disciplinary punishment. No promise of reward

- shall be made as inducement to answering questions.
- (6) The complete interrogation of the member of the force shall be recorded mechanically or by a department stenographer at the request of the member or interrogator. There will be no "off the record" questions. All recesses called during questioning shall be recorded.
- (7) If a member of the force is under arrest or is likely to be, that is, if he is a suspect or the target of a criminal investigation, he shall be given his rights pursuant to the current decisions of the United States Supreme Court.

DATA FOR FUTURE BARGAINING

- A. The Employer agrees to make available to the Association all relevant data the Association may require to bargain collectively, which data shall be contained in the official records of the Borough.
- B. The relevant data noted above shall include but shall not be limited to such items as salaries and benefits enjoyed by other Borough Employee groups, the cost of the various insurances and other programs, information concerning overtime worked by Employees, the total number of sick leave days utilized by Employees, the total number of injuries on duty, the total length of time lost as a result of injuries on duty and other data of similar nature.
- C. The Borough shall incur no additional expense by virtue of this Article. This Article shall not apply to any attorney-client work product.

SALARIES

- A. The base pay for Employees hired before 1/1/2021 are covered by this contract shall be as set forth in Appendix A annexed. The base pay for Employees hired on or after 1/1/2021 will follow Appendix A(1)annexed.
- B. All Employees currently on staff as of the date of signing of this contract shall be entitled to step movement on January $\mathbf{1}^{\mathtt{ST}}$ of each year.
- C. Employees hired on or before July 1, 2013 and have completed seventeen (17) years of service would be entitled to Said Senior Officer Differential. The benefit would be an increase in the base pay rate by an amount equal to one-half(½) the difference between the Employee's then current base rate and the next higher rate of pay. For example, a patrolman having completed seventeen (17) years of service would receive a Patrolman's pay expanded by one-half (½) the difference between the Patrolman's base rate and the Sergeant's base rate of pay. This procedure for calculating Senior Officer Differential as an expansion of base pay shall be calculated for each rank differential in the salary structure. Captains shall be

paid a Senior Officer Differential which is calculated by averaging the percentage value of Senior Officer Differentials between all other ranks (Patrolman to Sergeant, Sergeant to Lieutenant, and Lieutenant to Captain).

- D. Senior Officer Differential shall be eliminated for all Officers hired after July 1, 2013. The parties reserve the right to address and/or renegotiate this clause in the future contracts, if so desired.
- E. Effective January 1, 2016, those Employees holding an Associates' Degree from an accredited educational institution shall receive an annual one-time \$1,000 education incentive payment upon submission of certified transcripts from the institution to the Borough Manager. This education incentive shall not be included as part of an Employee's Base Salary.
- F. Effective January 1, 2016, those Employees holding a Bachelor's Degree from an accredited educational institution shall receive an annual one-time \$2,000 education incentive payment upon submission of certified transcripts from that institution to the Borough Manager. This education incentive shall not be included as part of an Employees Base Salary.

WORKDAY, WORKWEEK AND OVERTIME

- A. The normal work day tour shall be eight (8) hours, which shall include forty-five(45) minutes for meal period in addition to fifteen (15) minutes coffee break prior to the meal period and fifteen (15) minutes coffee break subsequent to meal time per day, which shall be taken pursuant to present practice including the obligation to respond to all calls.
- B. Effective with the signing of this contract, or as soon thereafter as possible, the parties agree to implement a 12 hour work day work schedule. The 12 hour work schedule shall be on a 3/2 sequence as detailed on Appendix C annexed. The Chief may modify the schedule for purposes of efficiency or other reasons upon reasonable notice to the Union, except in cases of emergency in which case the Chief may modify the schedule at any time.
- C. Overtime shall be paid by following the rules: It shall be paid overtime compensation (time and one-half the straight time hourly rate).

HOURLY RATE

A. To compute the base hourly rate for overtime for other purposes, the Employee's established base salary shall be divided by 2080 hours.

COURT TIME

- A. Court time, as referred to in this Article, shall consist of all time, excluding regular tours of duty, during which any Police Officer covered under this Agreement shall be required to attend a Municipal Court, County Court, Superior Court, Grand Jury proceeding, or other Courts or Administrative Bodies.
- B. All such required court time shall be considered as overtime and shall be compensated at time and one-half.
- C. When a Police Officer covered under this Agreement shall be required to travel to and from any of the Courts or Administrative Bodies as noted in this Article, such travel time shall be considered and included in the computation of the amount of overtime to which the Employee is entitled, provided, however, that such travel time be computed between the Employer's police headquarters and the pertinent Court or Administrative Body.
- D. The amount of overtime to which a Police Officer may be entitled under this Article shall be the actual time required, including waiting time in the Court or

Administrative Body, together with any applicable travel time, provided, however, that the Employee's entitlement to overtime under this Article shall not be less than three (3) hours of overtime pay so long as Court time is not contiguous with regular day, that is, the Court appearance does not continue into regular tour of duty.

TRAINING PAY

A. The Employer agrees to compensate all Police
Officers covered by this Agreement at time and one-half rate
for attending training courses on their own time which courses
are State or Municipality mandated or approved.

RECALL

A. Any Employee who is called back to work after having completed his regularly scheduled shift shall be compensated at time and one-half the straight time hourly rate of pay with minimum guarantee of four (4) hours work or pay in lieu thereof.

PRIORITY FOR OVERTIME

- A. Overtime for regularly scheduled shifts and details will be offered in an order of preference based upon a rotating seniority roster.
- B. The purpose of this section is to equalize overtime among Employees and same shall not be defeated by the Employer's selection of special persons within the unit for special details as set forth herein.
- C. The language of this Article is meant to apply to the current practice that it is applicable to departmentally ordered overtime only. Extra duty work is not covered by this Art

SHIFT CHANGES

- A. The Employer agrees that it will not unreasonably adjust shifts so as to avoid overtime payment to Employees covered by this Agreement and shift changes shall not occur without giving affected Employees seventy-two (72) hour notice.
- B. The Employer agrees that it will not unreasonably deny two (2)

 Employees who mutually agree to switch shifts, within the same rank or position.
- C. Employees shall be permitted to mutually exchange tour(s) of duty with other member of the Bargaining Unit provided such is done with the Approval of the Chief of Police or Tour

LONGEVITY

In addition to all wages and other benefits, each Employee shall be entitled to longevity payment which shall be paid at the rate of two (2%) percent base salary for every four years of service based upon the Employee's current base salary, with a maximum of ten (10 %) percent. All Officers hired after July 1, 2013, are subject to a maximum longevity rate of eight (8%) percent. All Officers who are currently at twelve (12%) percent longevity will stay at twelve (12%) percent. Longevity will be eliminated for all Employees hired after January 1, 2018.

UNIFORMS

- A. Each new Employee shall receive from the Employer, free of charge in lieu of a clothing allowance, a complete uniform. Annexed here to as Appendix B is the complete uniform list.
- B. Thereafter, the Employer will pay each Employee, the sum of one thousand (\$1000.00) Dollars per year as a clothing and maintenance allowance which shall be payable on January 1, 2016 and for each successive year.
- C. This payment shall be made to plain clothed as well as uniformed Employees.
- D. If the Employer decides to change the uniform or any part thereof, it shall provide to each employee, free of charge, an such changed items.
- E. Utilization of Section D shall not diminish the clothing allowance set forth in this Agreement except if a complete new uniform is issued in any calendar year.
- F. Any Employee's uniform or personal equipment which are required by him in his capacity as a Police Officer, which may be damaged as a result of a single episode during the course of his employment, shall be replaced at the

expense of the Employer, with the approval of the Chief, except where such damage is cause by negligence of the Employee.

- G. Any such payments made under Section F shall be in addition to the Employee's annual clothing allowance otherwise referred to in this Agreement and shall be made to the Employee within thirty (30) days of reporting same.
- H. In addition, the Employer shall purchase and furnish a new Officer one hand gun which shall be in reasonable satisfactory condition. Said gun shall be returned to the Employer upon the termination of the Officer's employment.

PBA REPRESENTATION

A. The Employer agrees to grant the necessary time off without loss of pay to one member of the PBA or his alternate selected by the members of the PBA as delegate to attend any State or National Convention of the New Jersey Policemen's Benevolent Association. Further, the Employer agrees to grant the necessary time off without loss of pay to the PBA representative duly designated as the State delegate to attend the monthly State PBA meeting, Bergen County Conference Meeting and Conventions. The PBA By Laws will be protected/included in this contract. It is the intent of the parties to fully comply with the provisions of N.J.S.A. 40A:14-177.

VACATIONS

A. The Vacation Allowance shall be as follows for Officers and Supervisors:

	8 Hour	12 Hour
	Schedule	Schedule
1 to 4 years of service	11 working	7 working days
	days	
Start of 5 th year of	15 working	10 working
service	days	days
Start of 10th year of	20 working	13 working
service	days	days
Start of 15 th year of	25 working	17 working
service	days	days_
Start of 20 th year of	30 working	20 working
service	days	days

- B. When in any calendar year, the vacation or any part thereof is not granted by reason of pressure of police activity, such vacation periods not granted shall accumulate and shall be granted during the next succeeding year at the approval of the Chief.
- c. If an Employee is on vacation and becomes sufficiently ill so as to require hospitalization for four (4) days or more, he may have such period of illness and post-hospital recuperation period charged against sick leave at his option upon proof of hospitalization and physician's certificate.
- D. No Employee who is on vacation shall be recalled except

- in a case of full mobilization of the Department by the Chief, to meet a clear and present danger confronting the Borough.
- E. Vacation shall be selected on a rotating seniority basis which shall be established by following article 47 (Seniority) in this contract. Vacations are to be selected and posted with the schedule pursuant to present practice.
- F. Vacation shall be pro-rated during the first year of service.

HOLIDAYS

- A. Each Employee shall be compensated with thirteen (13) paid holidays per year to be utilized in the same calendar year unless the Chief permits them to be carried over. Holiday time off shall be at the Employee's sole discretion subject to prior departmental approval.
- B. If the Governing Body declares not through collective negotiations, any other day to be a holiday in addition to the thirteen (13) holidays set forth herein, Employees shall be entitled to such holidays:
 - 1. New Year's Day
 - 2. Lincoln's Birthday
 - 3. Washington's Birthday
 - 4. Good Friday
 - 5. Memorial Day
 - 6. Independence Day
 - 7. Labor Day
 - 8. Columbus Day
 - 9. Election Day
 - 10. Veteran's Day
 - 11. Thanksgiving Day

- 12. Christmas Day
- 13. Martin Luther King Day
- Each Employee covered by this Agreement shall have С. the individual option to sell back to the Employer up to 24 hours per calendar year. If the Employee elects to sell said holiday back to the Employer than said Employee shall receive paid compensation equivalent to such holidays as are sold back calculated at the overtime rate and those "sold" holidays will be deducted from the Employee's existing days left. If the Employee elects to sell back up to 24 hours then notice shall be given to the Employer not later than February $1^{\rm st}$ of the calendar year. Where such election is made by the Employee, the Employer shall pay the Employee the appropriate amount within (30) calendar days of said notice. The remaining holidays may be sold back at the straight time rate to be paid December 1st. If the Employee elects to sell holidays to the Employer then said Employee shall receive paid compensation as provided above and the sold back holidays shall be deducted from the Employee's existing days left.

- If the Employee elects to sell back any holidays then notice shall be given to the Employer not later than July $1^{\rm st}$ of the calendar year.
- D. The parties agree to form a holiday benefit committee for the purpose of examining the benefit and to consider proposals and counter proposals, and bringing back such agreements as may be made to their respective principals for ratification.

 Committee subjects shall include, but not be limited to, holiday accumulation, holiday utilization, accountability, buy back, etc.

Article 22

SICK LEAVE

- A. The present practice and policy with regard to accumulated sick leave time, whereby each Employee is entitled to fifteen (15) days per year for calculation purposes, shall continue in full force and effect.
- B. In addition to the foregoing, and in accordance with provisions of law governing sick leave for Police Personnel contained in N.J.S.A. 40A:14-137, every Officer shall be granted up to one (1) year sick leave, not related to accumulated sick days which are hereby expressly authorized.
- c. If an Officer is out sick for more than seven (7) days, or injured and under doctors care he will not be required to remain in his home if the doctor feels it is necessary for his recuperation; but he will let the Desk Officer know where he can be reached. The Department Head may direct the Employee to the Borough designated physician for an opinion as to the eligibility of the Employee to be absent from work.
- D. If an Officer lives alone or becomes ill or injured while not at home, he will notify the Desk Officer as to

where he will be staying.

- E. Sick leave may be used by an Officer for personal illness or injury or a member of his family or household which requires his attendance upon the person who is ill or injured or which requires his being quarantined by a physician because of a disease which is certified by the local Health Department of the jurisdiction where the officer resides as being a contagious disease. Sick leave is hereby defined to mean absence from post or duty because illness, accident or exposure to a contagious disease requiring isolation. The Employer agrees to follow the statute under: N.J.A.C. 4A:1-1.3.
- F. Not withstanding any of the above provisions, the

 Employer reserves the right to have an Officer examined

 by a physician, designated by the Employer after a

 period of ninety (90) days from the date of his

 disability if the Officer is disabled and the likelihood

 of the Officer being able to return to duty is

 questionable based on the determination of the Borough

 Manager or Chief.
- G. If the physician appointed by the Employer to examine the disabled Officer determines that the Officer will

never be able to return to duty, the Officer or his legal guardian shall be required to apply for disability retirement in accordance with the provision of either the Police & Fire Retirement System.

- H. Habitual absenteeism or tardiness may be cause for discipline.
- I. Any Employee who calls in sick to engage in outside employment shall be subject to disciplinary action.
- ${f J.}$ If an Employee is absent from work for reason that entitles him to sick leave, the Department Head or his designated representative shall be notified as early possible, but not later than one hour prior to the start of the scheduled work shift from which he is absent barring extenuating circumstances. Failure to so notify the Department head or his designated representative may be cause for denial of the use of sick leave for the absence and constitute cause for disciplinary action. An Employee who is absent for five (5) consecutive days or more and who does not notify the Department Head or some other reasonable representative of the Borough on any of the first five (5) days may be subject to dismissal barring extenuating circumstances.

Article 23

WORK INCURRED INJURY

- A. Where an Employee covered under this Agreement suffers a work-connected injury or disability, the Employer shall continue Employee at full pay, during the continuance of such Employee's inability to work. During this period of time, all temporary disability benefits accruing under the provisions of the Workers Compensation Act shall be paid over to the Employer.
- B. The Employee shall be required to present evidence by a certificate of a responsible physician that he is unable to work, and the Employer may reasonably require Employees to visit the Borough's designated physician.
- C. In the event the Employee contends that he is entitled to a period of disability beyond the period established by the treating physician, or a physician employed by the Employer or by its insurance carrier, then, and in that event, the burden shall be upon the Employee to establish such additional period of disability by obtaining a judgement in the Division of Workers' Compensation, or, if there is an appeal therefrom, by the final decision of the last reviewing court shall be binding upon the parties.
- D. For the purpose of this article, injury or illness incurred while the Employee is acting in any Employer authorized activity, shall be considered in the line of duty.

E. Employees who are injured while working must make a report within a reasonable period of time thereof to their Department Head.

BEREAVEMENT LEAVE

- A. All permanent full-time Employees covered by this Agreement shall be entitled to three (3) consecutive calendar days leave with pay to be used within ten (10) Days of notification to their Employer (before or after) for funeral services for member of immediate family. The leave shall be consecutive calendar days but exclusive of schedules shift days off.
- B. Immediate family shall include spouse, civil union partner, children, parents, brother, sister, step-relative, grandparents and grandchildren of Employee or spouse.
- C.One day bereavement leave, day of burial, shall be added in the case of the death of an uncle, aunt, nephew or niece.
- D. Such funeral leave shall not be charged against the Employee's vacation or sick leave.
- E.Any extension of absence under this article, however, may be at the Employee's option and

with the consent of Department Head, be charged against available vacation, holiday, personnel or compensation time or be taken without pay for reasonable period.

F.Reasonable verification of event may be required by the Employer.

Article 25

LEAVE OF ABSENCE

- A. All permanent full-time Employees covered by this

 Agreement may be granted a leave of absence

 without pay for a period of six (6) months.
- B. The Employee shall submit in writing all facts bearing on the request to the Chief who shall append his recommendations and forward his request to the Borough Manager.
- C. The Borough Manager shall consider each request on its merits and without establishing a precedent. The Employer will not unreasonably deny any Employee's request for leave of absence.
- D. This leave is subject to renewal for reasons of personal illness, disability or other reasons deemed proper and approved by the Employer.

 Normally, it shall be granted only when the Employer has used his accumulated sick and vacation leave in the case of illness or his vacation leave if leave without pay is requested

for reasons other than illness.

- E.At the expiration of such leave, the Employee shall be returned to the position from which he is on leave.
- F. Seniority shall be retained.

MEDICAL COVERAGE

Α.

- (1) The Employer shall provide medical, prescription and eye care coverage to all eligible unit Employees at not less that the level of coverage provided by the State Health Benefit Program ("SHBP") in effect for the bargaining unit members on January 1, 2010 under the Direct 10 Plan. The specific provisions of coverage are set forth in the "SHBP" attachments.
- (2) No further claims shall be filed after May 1, 2010 for reimbursement of doctor visits co-pays, prescription co-pays, out-of-network providers and services, hospital co-pays or the like as provided under the level of benefits in effect prior to January 1, 2010. Employees shall be responsible for any and all applicable co-pays and deductibles under the "SHBP" as well as any and all costs and expenses not covered by the "SHBP" plan.
- (3) Beginning January 1, 2011, Direct 10 shall be the base plan for all Employees in the bargaining unit. The Borough shall pay for the full cost of premiums for all bargaining unit Employees that enroll in the Direct 10 Plan. Employees opting for any other available coverage shall be responsible for any additional cost in premiums.
 - B. In addition to the coverage for active members, the

Employer shall provide the same medical plan, including family plan if applicable, as was provided to such retired Employee on the last day of active service for the Employer. This extended coverage shall apply until equivalent coverage is available to the Employee, at no cost to him/her, through other employment or until the retired Employee shall qualify for Medicare coverage; In such latter case, the coverage to be provided shall be as set forth hereafter. In the case of a retired Employee who shall be entitled to Medicare coverage, such Medicare coverage, per Federal regulations, shall be primary and the coverage to be provided by the Employer shall be in conjunction with such Medicare coverage so that the total medical coverage benefits, including Medicare and the coverage provided for herein, which the retired Employee would have had he/she not retired would not be diminished. For purposes of this Section a retired Employee shall be one who qualifies for a service retirement or an accidental disability retirement under the Police and Fireman's Retirement System in effect as of July 1, 2000. An Employee who qualified for such disability retirement who is restored to duty or is otherwise disqualified from continuing pension benefits pursuant to the Police and Fireman's Retirement System, shall no longer be entitled to the coverage supplied by the Employer pursuant to this Section.

(1) For Employees that had twenty (20) years of service by December 31 $^{\rm st}$, 2012, are entitled, upon their retirement from the

Lodi Police Department, to non-contributing health benefits from the Employer, including medical, dental and prescription coverage, as was provided to such retired Employee on the last day of active service for the Employer.

- C. The Employer will maintain the current prescription drug plan (State Health Benefits Direct 10 Plan) for each Employee covered by this Agreement.
- D. All increases in premiums during the term of this Agreement shall be born entirely by the Employer, except as otherwise provided by law.
- E. The Employer will maintain whatever level of dental coverage is currently in effect as of the date of execution of this Agreement. Effective May 1, 2013, the one thousand (\$1,000.00) dollar dental maximum benefit shall be increased by Five Hundred (\$500.00) dollars for a maximum benefit of one thousand five hundred (\$1,500.00) dollars as defined by the terms of the summary plan description.
- F. The Employer will provide, as its expense, the influenza inoculation to be given for all Officers by the Employer.
- G. The parties agree that there shall be no changes in future medical coverages until there has been negotiation on the subject. The Employer shall provide advanced notice of any intended change together with sufficient information so that the PBA can evaluate said proposed

changes. The PBA shall then promptly meet and negotiate with the public Employer as to the proposed change.

- H. The Employer shall provide for Hepatitis Binoculations for Employees in the bargaining unit.
- I. The Employer will reimburse Employees up to \$200.00 per year for eyeglasses and contact lenses. Employees shall support all request for reimbursement with receipts.
- The Employer agrees that members hired prior to January 01, J. 2018, will roll back their medical contribution to twenty-five (25%) for current active members and one and a half (1.5%) of their retired pensionable salary upon retirement (this is to include medical, prescription and dental coverage). All Employees hired after January 1, 2018 will continue paying medical contribution of thirty-five (35%) for current active members and one and half (1.5%) of their retired pensionable salary upon retirement (this is to include medical, prescription and dental coverage). If Chapter 78 is repealed and/or refined and/or reformed, Chapter 78 in the Lodi PBA contract is then null and void and all eligible members will revert back to the benefits as long as it is better(for employees)than the current contribution. The one and half (1.5%) of their pensionable salary upon retirement does not apply to the members who have reached the 20 years of service by December 31, 2012, as mentioned

- in paragraph B (1).
- K. All employees hired after January 1, 2021 will continue paying medical contribution of thirty-five (35%) for current active members and medical contribution of thirty-five (35%) upon retirement (this is to include medical, prescription and dental coverage). Provisions set forth in paragraph (J) regarding Chapter 78 repeal, refinement and/or reform apply here and will render said subsection above null and void subject to same provisions and expectations set forth in said paragraphs accordingly.
- L. All employees hired after January 1, 2021, The Employer shall provide medical, prescription and eye care coverage to all eligible unit Employees at not less that the level of coverage provided by the State Health Benefit Program ("SHBP") in effect for the bargaining unit members on January 1, 2021 under the Direct 10 Plan. The specific provisions of coverage are set forth in the "SHBP" attachments. All members hired prior to January 1, 2021 shall continue coverage as set forth in paragraph A(1) under Article 26.

Article 27

INSURANCE

- A. The Employer will either indemnify or will continue to provide existing insurance coverage to Employees covered under this Agreement, protecting them from civil suits arising out of performance of their duties including but not limited to the following: false arrest, malicious prosecution, libel, slander, defamation of character, violation of the right of privacy, invasion of the right of privileged occupancy.
- B. The Employer will also pay the reasonable fees of any attorney selected by said Employee, or any body, and interest on the judgement which any Employee may be charged or obligated to pay as a result of any civil and/or criminal charges against the Employee by reason of their performance of his duties for the Employer as required by statute.
- c. The Employer agrees the contract could be reopened within its term <u>ONLY</u> to discuss implementation of an insurance policy for qualified immunity type of protection for each officer in the event qualified immunity is repealed by the State of New Jersey with a minimum coverage of Five (5) million dollars per officer.

LIFE INSURANCE

The Employer will provide, at its own expense and cost and without cost to the Employee, a life insurance policy in the face amount equal to two times each Employee's base Salary.

Article 29

Bulletin Board

- A. The Employer will supply one bulletin board for the use of the Association to be placed in a conspicuous location.
- B. The bulletin board shall be for the use of the

 Association for the posting of notices and bulletins

 pertaining to the Association business and or matters

 dealing with the welfare of Employees.
- c. No matter may be posted without receiving permission of the officially designated Association representative and the Chief.
- D. The Chief shall not unreasonably withhold permission for posting.

Article 30

CEREMONIAL ACTIVITIES

- A. In the event a Police Officer in another department in the state of New Jersey is killed in the line of duty, the employer will permit at least two (2) uniformed Police Officers of the Department to participate in funeral services for the deceased officer.
- B. Subject to the availability of same the Employer will permit a Department police vehicle to be utilized by the members in the funeral services.
- C. Police Officers participating in such funeral service shall not be entitled to any compensation during the services which they are participating in unless otherwise agreed to by the chief or the Borough Manager but without setting a precedent.

LEGAL EXPENSES

If an Officer is charged with violation of the law as a result of acts committed by him in the course of performing his duties, the Officer shall select an attorney to provide legal service to defend him, which attorney shall be reasonably satisfactory to the Employer, with the provisions of N.J.S.A. 40A:14-155.

The PBA shall submit a list of three (3) attorneys from which the public Employer shall select one, Officers shall also be permitted to retain an attorney to defend a civil action to which he/she is a party as a result of an act committed by him/her during the course of performing his/her duty.

PERSONNEL FILES

- A. A separate personal history file shall be established and maintained for each Employee covered by this agreement; personal history files are confidential records and shall be maintained in the office of the Chief.
- B. A Member of the Police Department may, by appointment, review his personal file and this appointment for review must be made through the Chief.
- Officer or his actions is to be placed in his personnel file, a copy shall be made available to him, and he shall be given the opportunity to rebut it if he so desires, and he/she shall be permitted to place said rebuttal in his file. The Employee shall be given two (2) weeks from-date he/she initials and dates material to be placed in his file to rebut.
- D. All personal history files will be carefully maintained and safeguarded permanently, and nothing

placed in any file shall be removed therefrom.

MILITARY LEAVE

- A. Where any Employee is a member of the National Guard, Air National Guard, or a reserve unit of any of the Armed Forces of the United States and is required to engage in field training and to attend meetings, he shall be granted a military leave of absence with pay for the period of such training or meeting. Such paid leave of absence shall not affect his vacation.
- B. When the officer has been called to active duty or inducted into the military, air or naval force of the United States, he shall be granted an indefinite leave of absence without pay and his seniority shall continue forthe duration of such military service. Such Officer must be reinstated without loss of privileges of seniority, provided he received honorable discharge and he reports for duty with the Borough within ninety (90) days following his honorable discharge from military service.

PENSION

- A. The Employer shall provide pension and retirement benefits to Employees covered by this Agreement pursuant to provisions of statutes and laws of the State of New Jersey.
- B. The Employer will pay to the appropriate Police

 Retirement Fund all amounts which the fund will accept to account for; any payments made to Employees pursuant to this Agreement.
- a dispute as to whether a payment should or should not be made to the appropriate police retirement fund, then, and in the event, resolution of the said dispute shall be made by the appropriate fund and the parties to this Agreement agree to be bound thereby.

GRIEVANCE PROCEDURE

A. To provide for the expeditious and mutual satisfactory settlement of grievances arising with respect to complaints occurring under this Agreement, the following procedures shall be used. For the purpose of this Agreement, the term "grievance" means any complaint, or any difference or dispute between the Borough and any Employee with respect to the interpretations, application, or violation of any of the provisions of this Agreement, or any rule, regulation, procedure or practice.

B. The procedure for settlement of grievances shall be as follows:

(1) STEP ONE

In the event that any Employee covered by this Agreement has a grievance, then within thirty (30) working days the grievance shall be presented in writing to the Chief, with a copy going to the Borough Clerk. The Chief shall render a decision within ten (10) working days after the grievance was presented to him.

(2) STEP TWO

If no satisfactory resolution of the grievance is reached at STEP ONE, then within ten (10) working days the

grievance shall be presented in writing to the Manager who shall render a decision within ten (10) working days after the grievance was first presented to him.

(3) STEP THREE

If no satisfactory resolution is reached at STEP TWO, then within ten (10) working days the grievance shall be presented to the Borough Council. The Council shall render a decision within ten (10) working days after the grievance was first presented to them.

(4) ARBITRATION

- (a) If no satisfactory resolution of the grievance is reached at STEP THREE then within ten (10) working days the grievance shall be referred to PERC for the selection of an arbitrator to decide the issue or issues. The decision of the Arbitrator shall be final and binding upon the parties.
- (b) The cost for the services of the Arbitration shall be borne equally by the Borough and the Association. Any other expenses, including, but not limited to the presentation of witnesses, shall be paid by the parties incurring same.
- (c) The decision of the Arbitrator shall be in writing and shall include the reasons for such decision.

SAVINGS CLAUSE

A. If any provision of this Agreement or any application of this Agreement to any Employee, member or group of Employees or members is held to be invalid by operation of law, by any Court, Administrative Body or other tribunal of competent jurisdiction, then the parties agree to reopen negotiations with respect to the impact of such invalid provision consistent with law relating to negotiations and interest arbitration set forth in N.J.S.A. 34:13a-16 et seq.;

however, all other provisions and applications contained herein shall continue in full force and effect, and shall not be affected thereby.

OFF DUTY POLICE ACTION

- A. Since all Police Officers are presumed to be subject to duty twenty-four (24) hours per day, the parties agree to the following:
- 1. Any action taken by a member of the force on his time off, which would have been taken by an Officer on active duty or present or available, shall be considered police action, and the Employee shall have the rights and benefits concerning such action as if he were then on active duty. The within clause does not apply to approved secondary employment which may be handled by Employees covered by this Agreement.
- 2. Recognizing that the Employer and its residents benefit from the additional protection afforded them by armed off-duty Police Officers, and further recognizing the weighty responsibility and hazards confronting such armed off-duty Police officer, the Employer agrees to pay such Employees an additional sum to be added to the regular and periodic payments the Employees receive on the following amount: one (\$ 1.00) Dollar per year for off-duty time.

AMENDMENT OF LAW

A. Any provision of this Agreement requiring State Legislative action to permit its implementation by amendment of law shall not be effective until the appropriate State bodies have acted.

MILEAGE ALLOWANCE

A. Whenever an Employee shall be required to use his personal vehicle in any job connected capacity or authorized by the Chief, he shall be entitled to an allowance so as to comply with current Internal Revenue Service provisions.

MATERNITY/PATERNITY LEAVES

The parties agree that employee rights and responsibilities as relates to such leaves shall be governed by the federal Family and Medical leave Act, New Jersey Family Leave Act, New Jersey Family Leave Insurance, and said provision listed below in this article.

- A. Female Police Officers shall advise the Employer in writing of a pregnancy. The right of a female Police Officer shall include but not be limited to the following provisions.
 - 1. The female Police Officer shall be permitted to work as a Police Officer so long as such work is permitted by a doctor's note. The female Police Officer's assignments shall be at the discretion of the Chief of Police. The doctor shall be a physician of the female Police Officer's own choosing.
- 2. In addition to the other provisions of this Article the female Police Officer shall be permitted to use accumulated sick time, compensatory time off and any other accumulated time benefits which she may have during the period of her pregnancy and the period following childbirth.
 - 3. In addition, a female Employee with one (1) year or more

of service shall be granted, on thirty (30) days written notice, maternity leave without pay for up to six (6) months duration and shall be returned to work without loss of prior seniority, or prior benefits, provided that she notifies the Chief of Police in no later than after three (3) months of leave that she intends to return to work.

- 4. The female Police Officer shall at all times be kept at full benefits and shall be considered as on active duty for all computation purposes.
- 5. Upon return to active duty status, the female Police Officer shall be entitled to be placed in the same position which she held before departing on maternity leave. Male Police Officers shall be permitted to use ten (10) days of accumulated sick compensatory time off and any other time benefits following the birth of their child. When the wearing of a uniform is no longer practical, the Employee shall be reassigned to non-uniformed duty and permitted to dress in appropriate civilian attire.

SAFETY AND HEALTH

- A. The Employer will comply with all safety and health statutes and other safety and health regulation so as to maintain existing working conditions at a safe level for all Employees.
- B. Every Employer shall furnish a place of employment which shall be reasonably safe and healthful for Employees. Every Employer shall install, maintain and use such Employee protective devices and safeguards including methods of sanitation and hygiene and where a substantial risk of physical injury is inherent in the nature of a specific work operation shall also with respect to such work operation establish and enforce such work methods as are reasonably necessary to protect the life, health, and safety of Employees with due regard for the nature of the work required.

PERSONAL DAYS

- A. Each employee shall be entitled to five (5) personal days per year which are cumulative to the next succeeding year pursuant to present and past practice.
- B. For the purpose of this article, an Employee shall not be required to advise his superior the reason for the personal leave day. Employees shall give the Chief of Police forty-eight (48) hours notice if their request to take a personal day where such notice is practicable. In any event, the Employee shall give the Chief all possible notice if emergent circumstances make 48 hours notice impossible. The chief shall not unreasonably deny permission to take a personal day. The parties recognize that manning considerations or emergency conditions may lead to a denial of personal leave, However, the required use of overtime coverage shall not be a basis for denial of personal leave.
- c. Personal leave days for persons working the twelve-hour shift shall be controlled by Appendix C attached.
- D. As an attendance incentive, in the event an Employee uses zero emergency personal days in a calendar year, the Employer, upon the Employee's signed written request and verification, shall pay the Employee the monetary equivalent of three days pay for that calendar year by March 1 of the following year. If the Employee only uses one emergency personal day, then the

Employer shall pay the Employee for two days in the same manner as the foregoing. The aforesaid attendance incentives shall not be included as part of the Employee's base salary. Any Employee who uses more than one emergency personal day shall not be eligible for their attendance incentive.

YEARLY CALENDAR

A. Except as otherwise modified bythis Agreement, the present calendar shall remain in full force and effect as shall the method of selection of days off.

NO WAIVER

- A. Except as otherwise provided in this Agreement, the failure to enforce any provision of this Agreement shall not be deemed a waiver thereof.
- B. This Agreement is not intended and shall not be construed as a waiver thereof of any right or benefit to which the Employees or Employer herein are entitled by law.

UNIFORM REGULATIONS

A. While the parties agree that a full and complete uniform and the use thereof the Employee has an affirmative impact upon an Officer's image, it is recognized that the use of police hat while riding in a patrol vehicle can cause inconvenience and discomfort to the Employee.

The parties, therefore, agree that an Employee may remove his uniform hat while riding in an official patrol vehicle.

- B. Seasonal changes of uniform will take place on May 1st with the change to a summer uniform (short sleeves). The next change will then occur on October 1st with the change to winter uniforms (long sleeves).
- C. Employees covered by this Agreement shall be permitted
 to use departmentally approved light weight jackets with summer uniforms (short sleeve shirt).
- D. Class B uniform will be authorized to be worn year-round with the Survival Armor front opening Raid Molle black tactical vest. This will be optional at the member's cost. The vest carrier that was purchased by the Borough of Lodi that matches the uniform shirt will no longer be authorized.

POLICE VEHICLES

A. All police vehicles purchased after the execution of this Agreement shall have the standard police package and the Employer will make every effort to keep such equipment in good state of repair.

SENIORITY

A. Traditional principles of seniority shall apply to Employees covered by this Agreement. Such principles shall apply to lay off, recall and other similar acts. Seniority is exercised by virtue of rank, and in the cases of equal rank, by length of time in service in such rank; and where equal and the officers are of the same rank, seniority is determined by the highest ranking on the civil service appointment list. Time in service shall not be reduced by time lost due to an absence from his employment for bona fide illness or injury certified by a physician not in excess of one (1) year. Such certification shall be subject to review by the Borough designated physicians, if any, or any physician mutually acceptable to the parties.

IN-SERVICE TRAINING

- A. Members of the unit may attend in-service training courses during the calendar year. The determination of which members shall attend and which in-service training courses they shall take, if any, shall be made by the Chief. The Chief's determination shall be reasonable.
- B. Each member of the Department attending school pursuant to Section A above shall be reimbursed for all expenses, which shall include a sum not to exceed Ten (\$ 10.00) Dollars for a meal per day.

JOINT PBA - MANAGEMENT COMMITTEE

- A. A committee consisting of the Borough Manager or his designee and a committee representing the PBA shall be established for the purpose of reviewing the administration of the Agreement and to resolve problems that may arise. Said committee will meet when necessary and required. These meeting are not intended to bypass the grievance procedures or to be considered contract negotiation meetings.
- B. The purpose and intent of such meetings is to foster good employment relations through communications between the Employer and the PBA on such matters:
 - Discussion of questions arising over the interpretation and application of this Agreement;
 - 2. Disseminating general information of interest to the parties;
 - 3. Giving PBA representatives the opportunity to express their views or to make suggestions on subjects of interest to Employees of the Bargaining unit;
 - 4. The promotion of education and training;
 - 5. The elimination of waste and the conservation of materials and supplies; and
 - 6. The improvement of working conditions, the safeguarding of health and prevention of hazards to life and property and the strengthening of the morale of the employees.

PAST PRACTICE CLAUSE

- A. The parties agree that all benefits, rights, duties, obligations and conditions of employment relating to the status of Borough of Lodi Police Officers, which benefits, rights, duties, obligations, terms and conditions of employment are not specifically set forth in this Agreement, shall be maintained at not less than the highest standards in effect at the time of the commencement of collective bargaining negotiations between the parties leading to the execution of this Agreement.
 - B. Unless a contrary intent is expressed in this Agreement, all existing benefits, rights, duties, obligations and conditions of employment applicable to any Police Officer pursuant to any rules, regulations, instruction; directive, memorandum, statute or otherwise shall not be limited, restricted, impaired, removed or abolished.

MISCELLANEOUS PROVISIONS

- A. When an Officer has worked overtime during any given week, the Superior Officer in charge of that tour shall submit a record of such overtime to the Chief's office which will then submit same to the Treasurer's office or payment to said Officer.
- B. Time of Payment- Payment of overtime work shall, if practicable, be made in the next paycheck following the overtime.
 - c. 1. Upon retirement, or death during employment, each Officer shall receive a lump sum cash payment as supplemental compensation for the full amount of earned and unused accumulated sick leave days, up to maximum of one year (220 working days exclusive of vacation, holidays and personal days), which is credited to him on the effective date of his retirement.
 - 2. The retiring Employee shall have the sole option to have the said Employee's benefit paid out in up to three payments over a period of up to eighteen (18) months. Money held by the public Employer during this period would not he with interest.
 - 3. All persons with an effective hire date after January 1, 1992 or on the before July 1, 2013 shall receive no more than twenty-five (25%) percent of their then current annual salary as a cash payment upon retirement or death during employment as supplemental compensation for the full earned and unused accumulated sick leave days. Each Employee hired after January 1, 1992 but before July 1,2013 shall be permitted the option to sell back up to 120 hours of sick time per year to be paid in the first payroll following December 1st of said year. Where such option is to be exercised the Employer shall be advised by November 1st, of said same year.

- 4. All persons with an effective hire date after July 1, 2013 shall receive no more than fifteen (15%) of their annual salary as a cash payment upon retirement or death during employment as supplemental compensation for the full amount of earned and unused accumulated sick leave days. Each employee hired after July 1, 2013 shall be permitted the option to sell back up to One Hundred Twenty (120) hours of sick time per year to be paid in the first payroll following December 1st of said year. Where such option is exercised the employer shall be advised by November 1st of said same year.
- D. The established annual salary shall mean base salary plus Senior Officer Differential, where applicable, plus longevity pay.
 - E. Members appointed to the department after January 1st of the year shall be considered to have been appointed as of January 1st of the year for the purpose of determining salary benefits longevity, vacations, increments, and all other fringe benefits. This clause in no way effects the seniority rights of any member. Seniority rights shall be determined by the actual appointment.
 - F. Payment for vacation periods shall be made on the established payday of the week prior to the Officer's starting his vacation.
 - G. Hardware items such as hand guns if damaged in the line of duty, holsters, handcuffs and cases, night stick, safety helmets, badges, and mace, shall be

- purchased and supplied by the Employer and replaced if not in working order or in poor condition.
- H. The Employer shall have the right to utilize a twice monthly (15th and 30th) payroll. If the 15th or 30th falls on a Saturday, Sunday or Holiday, the payroll shall be paid on the preceding Friday.
 - 1) The Employer agrees when the Borough Hall is closed during an emergency declared by the Borough Manager all members shall get a Borough Holiday to their bank whether on or off during the declared day.
- I. Any members hired after 01/01/2021 will no longer receive the severance benefit given to members. All members hired prior to 01/01/2021 will continue to receive their severance benefit of three months (3) of their last year salary upon retirement under the past practice clause.

OUTSIDE EMPLOYMENT ACTIVITIES

- A. Officers shall be entitled to engage in any lawful activity and obtain any lawful work while off-duty.
- B. It is understood that the full time Officers will consider their position with the Borough as their primary employment. Any outside employment or activity must not interfere with the Officer's efficiency in his position with the Borough and must not constitute any conflict of interest.
- c. No Officer planning to or engaging in any outside employment or activity during their off-duty hours shall be permitted to wear the regulation uniform without permission of the Chief.
- D. All outside employment shall be listed with Chief. The information provided to the Chief, shall include the outside Employer's name, address and the officer's work schedule.

POLICE SERVICES

A. All requests for services of Police Officers while off duty that may be addressed to the public Employer shall be forwarded to the Police Department for posting. All such requests are subject to approval and reasonable limitations by the Chief of Police. The public Employer agrees to require a Police Officer on all contracting jobs done within the Borough where there is a road opening involved. Any time there is a road opening or significant street repair as determined by the Chief of Police or his designee, the Employer agrees to require as a condition of the letting of the job that the contractor agreed to provide at least one (1) Police Officer to provide public safety and security at the location of the work site.

B. The public Employer further agrees that all monies received from such contracting work shall be paid through the Employer's payroll process and the law enforcement Officer while so employed shall be treated in all respect as an Employee of the public Employer, however, hours worked on such off-duty Police services shall not be considered for purposes of calculating overtime pursuant to 29 C.F. R. § 553.227. All qualified Police Officers seeking to perform such services shall be eligible to perform same on a rotating non-discriminatory

basis, subject to the approval of the Chief of Police. Their performance of such work shall be at each Police Officer's own option. Police Officers engaging in these services shall observe their normal standards of conduct while performing such work and shall be subject to disciplinary action for failure to do so.

- C. (1) Except with regard to existing contracts already in place, where the request for police services is made by a "for profit entity" the off duty pay rate shall be one hundred twenty (\$120.00) dollars per hour of which eighty (\$80.00) dollars shall be payable to the Police Officer and forty (\$40.00) dollars to the Borough as an Administrative fee.
- in place, where the request for Police services is made by a "non-profit entity" (such as the Board of Education or a religious organization), the off duty pay rate for non-regular work shall be sixty (\$60.00) dollars per hours of which fifty (\$50.00) dollars shall be payable to the Police officer and ten (\$10.00) dollars to the Borough as an Administrative fee.
- (3) Paragraph (C)(1) and (C)(2) shall be subject to the introduction, publication and passage of a Borough Ordinance reflecting the forgoing.

TERMS OF CONTRACT

The term of this Agreement shall be from January 1, 2021 through December 31, 2025 with the option to renew by the Lodi PBA Local 26 for one year by the members of PBA Local 26 within no later than forty-five (45) days of the expiration date of 12/31/25. If option is not exercised by the Lodi PBA Local 26, said parties may begin renegotiation as per custom, practice and applicable laws until such time as successor Agreement is executed.

Witness

Carole L. D'Amico R.M.C.

arole L. D'Unico, Roma

Borough Clerk

Christopha Lijeny

Borough of Lodi

Scott Luna

Mayor

Witness

PBA LOCAL 26 (Lodi Unit)

APPENDIX A

	2021	2022	2023	2024	2025	2026 Optional
1 st 6 months	37059	37059	37059	37059	37059	37059
2 nd 6 months	43599	43599	43599	43599	43599	43599
STEP 1	51599	51599	51599	51599	51599	51599
STEP 2	59599	59599	59599	59599	59599	59599
STEP 3	67599	67599	67599	67599	67599	67599
STEP 4	71959	71959	71959	71959	71959	71959
STEP 5	83038	83038	83038	83038	83038	83038
STEP 6	94118	94118	94118	94118	94118	94118
STEP 7	105197	105197	105197	105197	105197	105197
STEP 8	116277	116277	116277	116277	116277	116277
STEP 9	134274	138302	142451	146725	151126	155660
SERGEANT	142024	146802	151701	156725	161876	166410
LIEUTENANT	149774	155302	160951	166725	172626	177160
CAPTAIN	157524	163802	170201	176725	183376	187910

APPENDIX A (1)
Employees hired on or after 1/1/2021

	2021	2022	2023	2024	2025	2026 Optional
1 st 6 months	37059	37059	37059	37059	37059	37059
2 nd 6 months	43599	43599	43599	43599	43599	43599
STEP 1	51599	51599	51599	51599	51599	51599
STEP 2	59115	59115	59115	59115	59115	59115
STEP 3	66631	66631	66631	66631	66631	66631
STEP 4	74147	74147	74147	74147	74147	74147
STEP 5	81663	81663	81663	81663	81663	81663
STEP 6	89179	89179	89179	89179	89179	89179
STEP 7	104211	104211	104211	104211	104211	104211
STEP 8	111727	111727	111727	111727	111727	111727
STEP 9	119243	119243	119243	119243	119243	119243
STEP 10	126759	126759	126759	126759	126759	126759
STEP 11	131979	131979	134605	136742	138942	141215
STEP 12	134274	138302	142451	146725	151126	155660
SERGEANT	142024	146802	151701	156725	161876	166410
LIEUTENANT	149774	155302	160951	166725	172626	177160
CAPTAIN	157524	163802	170201	176725	183376	187910

Appendix B

Policemen Benevolent Association

Bergen County Local No. 26

Lodi, New Jersey 07644

The Following is the list of complete uniform:

A. Academy Uniforms:

- 2 Long Sleeve Shirts
- 2 Pairs of Pants
- 2 Black ties
- 1 Hat
- 1 Pair of Shoes

B. Duty Uniforms

- 1 Class A long sleeve shirts
- 1 Class B long sleeve shirts
- 1 Class A Short sleeve shirts
- 1 Class B Short sleeve shirts
- 1 Class A pair of pants
- 1 Class B (BDU) pair of pants
- 2 blue ties
- 1 hat
- 1 black leather jacket or three season jacket
- 1 Garrison Belt (needed in academy)

- 2 name tags (needed in academy)
- 1 tie clip (needed in academy)
- 1 set of collar insignia
- 1 rain coat
- 1 rain hat
- 1 pair of duty boots
- 3 badges
- 1 hat badge

C. Leather Gear: (needed in academy)

- 1 gun belt
- 1 holster
- 1 magazine holder
- 1 pair of handcuffs
- 1 handcuff holder
- 4 belt keepers
- 1 Asp holder
- 1 radio holder
- 1 Asp
- 1 Level three gun holster

APPENDIX C

TWELVE HOUR SHIFT

THREE/TWO SCHEDULE

A duty day for each Police Officer working the 3/2 schedule shall consist of the following:

- 1. Each work day shall consist of twelve (12) hours.
- 2. Each work day will provide for one (1) forty-five (45) minute meal period and three (3) fifteen (15) minute breaks.
- 3. Each Officer shall have a minimum of at least eight (8) hours off before and after assigned shift.
- 4. The work week will be as follows:

<u>MON</u>	<u>TUE</u>	<u>WED</u>	THUR.	FRI.	SAT	<u>sun</u>
OFF	OFF	WORK	WORK	OFF	OFF	OFF
<u>MON</u>	TUE_	<u>WED</u>	<u>THUR</u>	<u>FRI</u>	<u>SAT</u>	<u>sun</u>
WORK	WORK	OFF	OFF	WORK	WORK	WORK

5. The 3/2 schedule twelve (12) hour duty days call for a total of 2,190 hours to be worked be each member. The current agreement between the Borough and PBA 26 requires each member to work 2080 hours per year at straight time, the Borough agrees to give back to each member 110 hours in compensatory bank time per year so that each member will continue to work 2080 hours per year.

WORK SCHEDULE

Shift Schedule: Members shall pick either day or night shift based on their preference and seniority if and when a non-rotating shift schedule is Implemented. The 3/2 schedule shall consist of two (2) platoons, each with two (2) shifts; each shift shall be twelve (12) hours in duration. When platoon A is working Platoon B shall be off:

Day Shift 0600-1800 hours

Night Shift 1800-0600 hours

Example: Assuming 28 Officers assigned to Patrol Bureau:

A Platoon B Platoon

Day Shift= 7 Officer 7 Officer

Night Shift= 7 Officer 7 Officer

Other bureaus within the department not utilizing the 3/2 schedule shall meet with the Chief of Police or his designee to determine shift scheduling for their respective bureau.

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MANNING AND SHIFT SELECTION

Number of Men assigned to each shift. The number of men on any shift will be determined by the Chief of Police or his designee using current department rules, regulations, department needs and current crime statistics.

Vacation Time

Each member working the 3/2 schedule shall receive the vacation allowance as Article 20 and present practice will remain in effect.

	8 hour	-	12 hour
	Day		Conversion allowance
1 to 4 years of service	11 days	_	88 hours
Start of 5 th year of service	15 days	_	120 hours
Start of 10 th year of service	20 days		160 hours
Start of 15 th year of service	25 days		200 hours
Start of 20 th year of service	30 days		240 hours
	1101 TD7V		

HOLIDAY

Each member working the 3/2 schedule shall receive the following holiday time off per year:

Thirteen (13) 8 hour days off

Each member shall use fifty -two (52) hours compensatory time off per year added to the above holidays so that each member when then receive: 0134925.DOC)

Thirteen (13) 12 hour days off

Each member shall be allowed to sell back two (2) twelve (12) hours day at time and one-half in accordance with Article 21. In addition, each member will also have the option to sell back all the remaining twelve (12) hour holidays at straight rate to be paid December 1st. The Employee will either submit in writing in January of each calendar year of his/her intention to sell all of his days, or if the Employee elects to only sell a portion of said days, he/she will submit in writing prior to July 1st of the calendar year. All members will schedule (7) days with the Chief of Police prior to March 31st of the calendar year. However, this will not restrict said Employees from changing the scheduled day off with permission from the Chief to another scheduled day, or so that he can opt to sell said day as per allowance. The Employer agrees not to cancel any scheduled holiday days to avoid last minute overtime.

Personal Days

Each member working the 3/2 schedule shall receive the following personal time off per year:

Five (5) 8 hour days off

Each member shall use twenty (20) hours of compensatory time off per year added to the above five (5) personal days so that each member will receive:

Five (5) 12 hour days off

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Three (3) of the above personal days will be considered emergent days and will remain as per Article 42. The designated "Emergent Days" shall not be denied due to Employer exposure to overtime costs. The "non-emergent" personal days may be denied due to overtime exposure.

SICK TIME

Sick Time: Under the 3/2 schedule each member shall receive ten (10) twelve-hour days per calendar year.

Any accumulated sick time to be taken in pay upon a member's retirement shall continue to be accumulated as eight (8) hours days under this agreement, with accumulated time to be converted into hours and divided by 12.

BEREAVEMENT LEAVE

Bereavement Leave shall remain at three (3) twelve (12) hour days for immediate family and one (1) twelve (12) hour days off for aunt, uncle, nephew, or niece with pay. Bereavement time will be taken in consecutive work days.

OVERTIME

Overtime is defined as any work in excess of the basic twelve (12) hour work day or any work on a regular day off as defined by the 3/2 work schedule.

TRAINING

All department training and in-service classes shall be considered a member's duty day when training falls on a day a member is regularly

scheduled to work, except for training such as Right to know, blood borne pathogens and similar training.

Hourly Rate: to compute the base hourly rate of an employee for overtime or other purposes when working 3/2 (12) hours day schedule, the employee's established annual salary shall be divided by 2080 hours.

Time to be carried over: all outstanding accumulated time to be carried over from the previous year shall be converted in hours and divided by 12 with the exception of sick time.

Compensation/Bank Time: the remaining thirty-eight (38) hours of compensatory time will be paid at straight time rate to each member in June of each calendar year. Patrol Officers that receive the 38 hours check in June will have the option to either schedule the hours at the beginning of the year (to be listed as "Kelly time") or take a check. This "Kelly time" is valid for the same year earned and cannot be carried over. The "Kelly time" is to be set forth at the beginning of the year as "Scheduled time" and cannot be changed after said approved.

PBA

VISION CARE BENEFITS

This is the Vision Benefit Schedule for the PBA only administer through IDA as of January 1st, 2015 DEDUCTIBLES

Deductible	le payable	per Plan Participant	N/A*		
Eye I in a tv	Exam, per welve (12)	person,) month period	Covered through Medical Plan		
Fram in a tv	ne-type len welve(12)	uses*, per person month period for all types below	Refer to Calendar Year Maximum (CYM)		
B T	Single vis Si-focal Tri-focal Lenticular	sion	CYM CYM CYM CYM		
Fram In at	ie, per paii t twelve(; [12) month period	Refer to Calendar Year Maximum (CYM)		
In at twelve(I2) month period					
**If ¡	prescribed	for one of the following causes:			
(1)	Ifvisua	al acuity is not correctable to 20/70 in the better e	ye except by the use of contact lenses		
(2)	IfaCov lenses a	ered Person is being treated for a condition such as I are routinely used as a part of treatment	Keratoconus or Anisometropia and contact		
(3)	A Cove	red Person requires contact lenses after cataract sur	gery		
Conta two (2	act Lenses 2) lenses pe	s, if prescribed for other reason, er person in a twelve (12) month period.	Refer to Calendar Year Maximum		
Calen per C	ndar Year Covered F	maximum (CYM), amily	\$200		

APPENDIX D

state of New Jersey — Department of the Treasury TATE HEALTHUBENEETS PROGRAM

PLAN COMPARISON SUMWARY

EOR LOCAL GOVERNMENT EMPLOYEES

EFFECTIVE JANUARY 1,2010

he *Plan Comparison Summary* provides a way for employees to compare the benefits of the medical plans offered by the State Health Benefits Program (SHBP). If you are new to the SHBP, or a member who is considering a different medical plan, the Plan Comparison Summary is a useful resource for selecting a plan. For members who want to know more about their current plan, the Plan Comparison Summary is a quick reference to the services offered.

The following sections summarize plan designs and general policies of the SHBP. Inside, the comparison chart summarizes the benefits each plan provides for specified services.

MEDICAL PLANS

Local Government employees are offered the choice of a Preferred Provider Organization, with two options known as NJ DIRECT19 and NJ DIRECT15 (administered by Horizon Blue Cross Blue Shield of New Jersey), and two HMO plans - Aetna HMO and CIGNA HealthCare.

All of the medical plans are managed care plans; meaning that they provide coverage for preventive care such as annual checkups and screening tests, well-baby visits, and immunizations, in the hope of avoiding serious illness and more costly treatment.

NJ DIRECT10 and NJ DIRECT15 provide both innetwork and out-of-network medical care. Under NJ DIRECT10 and NJ DIRECT15, members may see any physician, nationwide, and do not need to select a Primary Care Physician (PCP) for in-network care.

In-network care is provided through a network of providers that includes internists, general practitioners, specialists, pediatricians, and hospitals.

No referrals are needed for visits to a specialist. If the physician participates in the Horizon BCBSNJ Managed Care Network, the member only pays the appropriate copayment. Members living outside of New Jersey can utilize physicians participating in the national Blue Cross Blue Shield Network. In-network hospital admissions are also covered in fulls.

If the physician does not participate in the Horizon BCBSNJ Managed Care Network or the national network, the services will be considered out-of-network. Contact your doctor to see if he or she participates in the Horlzon BCBSNJ Managed Care or national network. To find current participating physicians contact Horizon BCBSNJ directly. Plan telephone numbers and Web site addresses are listed on the comparison charts.

Out-of-network benefits provide reimbursement for eligible services rendered for the treatment of illness and injury, Most out-of-network care is reimbursed at a percentage of "reasonable and customary" allowances after a member's annual deductible is met. Out-of-network hospital admissions are subject to a separate deductible.

NJ DIRECT10 and NJ DIRECT15 include annual maximum out-of pocket amounts. This means that when a member's, or family's, out-of-pooket maximum is reached, covered benefits are paid at 100 percent of the allowance through the remainder of the calendar year2.

Aetna HMO and CIGNA HealthCare have expanded networks that provide services nationwide. When you enroll in an HMO you must select a Primary Care Physician (PCP) from a group of participating providers contracted by the HMO.

(continued inside)

¹ Certain in-network covered benefits require 10% member coinsurance.

² Certain services may require pre-certification from Horizon BCBSNJ. Services that require a pre-certification, but are not pre-certified, will be paid at out-of-network benefit levels and will not count towards out-of-pocket maximums.

All services, except emergencies and as indicated on the enclosed comparison chart, are coordinated through your PCP. If you require the care of a specialist, your PCP will refer you to a specialist who participates in the HMO network. Electronic referrals are used by the HMOs and, therefore, no paperwork is required. Specialist services rendered without a valid referral, or by a provider who does not participate in the HMO (except for emergencies), will not be paid by the HMO.

HMOs have no deductibles (except for durable medical equipment) or claim forms to file, however, you are required to pay a copayment for visits to your PCP or a referred specialist. There are <u>no</u> out-of-network benefits, or out-of-pocket maximum amounts under an HMO plan.

If you are considering an HMO, contact your doctor's office to see if they participate in the HMO you have selected. To find current participating physicians contact the HMO directly. Plan telephone numbers and Web site addresses are listed on the comparison charts.

DEFINITIONS

A copayment is the fee paid by the member to the in-network physician at the time covered services are rendered.

Coinsurance is the portion of the eligible charge that is the member's responsibility for out-of-network and some in-network services (durable medical equipment and ambulance). When utilizing out-of-network providers, charges above the "reasonable and customary" allowance are the member's responsibility but are not considered "coinsurance" for the purposes of out-of-pocket maximums.

Pre-certification requires that the member (or the treating physician/facility) receive prior authorization from the medical plan to determine medical necessity before certain services are provided. Some examples of services that require pre-certification are inpatient admissions, reconstructive procedures, durable medical equipment purchases, specialty pharmaceuticals, hospice, and home health care. A detailed list is available from your medical plan.

DUAL HIMO ENROLLMENT IS PROHIBITED

State statute specifically prohibits two employees/retirees who are both enrolled in the SHBP or School Employees' Health Benefits Program (SEHBP) and who are married to each other, civil union partners, or eligible domestic partners from enrolling under both of the SHBP/SEHBP HMO plans. One member may belong to an HMO as an employee or as a dependent but not as both.

For example, if two members are married to each other, each may enroll for single coverage under each of the HMOs, or one member can enroll the other as a dependent under an HMO if the other person enrolls in NJ DIRECT10 or NJ DIRECT15,

Furthermore, two members cannot both cover the same children as dependents under both of the HMO plans.

In cases of divorce, dissolution of a civil union or domestic partnership, or single parent coverage of dependents, there is no coordination of benefits under two HMO plans.

AUDIT OF DEPENDENT COVERAGE

Periodically, the Division of Pensions and Benefits performs an audit using a random sample of members to determine if dependents are eligible under plan provisions. Proof of dependency such as a marriage, civil union, or birth certificate is required. Coverage for ineligible dependents will be terminated. Fallure to respond to the audit will result in the termination of dependents from coverage and may include financial restitution for claims paid.

HEALTH CARE FRAUD

Health care fraud is an intentional deception or misrepresentation that results in an unauthorized benefit to a member or to some other person. Any individual who willfully and knowingly engages in an activity intended to defraud the SHBP will face disciplinary action that could include termination of employment and may result in prosecution. Any member who receives monies fraudulently from a health plan will be required to fully reimburse the plan.

MORE INFORMATION

For more information about eligibility and enrollment, see the NJ DIRECT, Aetna HMO or CIGNA HealthCare Member Handbooks — available over the Internet from the Division of Pensions and Benefits at: www.state.nj.us/treasury/pensions/

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STATE HEADTH BENEFITS PROGRAM COMPARISON CHART FOR LOGAL GOVERNMENTS EMPLOYEES

PLANINAME TELERHONE HUMBER	#0794QUETINAFHMQ 1987ZSTATETNU 15(1887Z782)8365)	FEAUTHCARES	128007 (12800) (12800) (12800) (12800)	//#150 eNJIDIRECT15 t)/csfibP 4/8 7420/ blue.com/snbp.vs
andWEBSITE)//www.cignaicom/stateon // // // // // // // // // // // // //	National of the second of the	POUT OF NETWORK
SERVIGEAREAS PRIMARY AND PREVENTIVE PARE	S A Nationyide	All of the second secon		
PHYSICIAN (OFFIGE VISITS)	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	80% / 70% after deductible; no coverage for wellness care
ANNUAL HOUTINE PHYSICAL PEXAMS	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	Not covered
ROUTINE CHIED AND	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	Not covered
LIMMUNIZÁTIONS (EXGEPT-FORTRAVEL AND/ORF/OB-REFANED)	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	Not covered except for children under 12 months; 80% / 70% after deductible
ANNUAL ROUTINE GYNEGOLOGICAL EXAMS	100% after \$10 copayment per visit (no referral needed if using network provider)	100% after \$10 copayment per visit (no referral needed if using network provider)	100% after \$10 / \$15 copayment per visit	80% / 70% after deductible
ANNUAL ROUTINE MAMMOGRAM (ONE ANNOALS NAMMOGRAM EFORWOMEN AGE-40 ANDOVER)	100%; no copayment (no referral needed if using network provider)	100%; no copayment	100%; no copayment	80% / 70% after deductible
ERIOSTATE STEERING! STEERING! STEERING! STEERING STEERING FROM MEN AGE 40 AND OVER!	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	Not covered
ANNUAL ROUTINEERE PEXAMINATIONS	100% after \$10 copayment per visit (no referral needed if using network provider)	100% after \$10 copayment per visit (no referral needed if using network provider)	100% after \$10 / \$15 copayment per visit	Not covered
HEARING AIDS	Not covered	Not covered	Not covered	Not covered

in-network copayment \$10 for NJ DIRECT10 and \$15 for NJ DIRECT15 and 70% for NJ DIRECT10 and 70% for NJ DIRECT15. Benefits, excluding hospital expenses, are based on the Horizon BCBSNJ discounted provider network allowance or the "reasonable and customary" fee schedule based at the 90th percentile.

		e read deposits A has engaged a production of the			
-	PLAN NAME TELEPHONE NUMBER ANDWEBSITE STECIALITY AND OUTFAUIENINGAR		HEAUTHOARE	III WANTON	IIsie // #150/ NU DIRECTO 00-414/SHBP 800-414-7427); zonbluercom/shbp 00/f40F/NETWORK
	SEPECIALISTACERICE WEITER	100% after \$10 copayment per visit; PCP referral required		100% after \$10 / \$ copayment per vis	
	ALLERGY TESTING	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$1 copayment per visi	
	VULERGYTREATIVENT ROUTINE INVECTIONS	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$1 copayment per visi	
	PRENATALICAREA MATERNIEY CARE	\$10 copayment for first prenatal office visit then 100% covered, Beginning Right Maternity Program - a voluntary prenatal education program	\$10 copayment for first prenatal office visit then 100% covered, Healthy Bables - a voluntary prenatal education program	\$10 / \$15 copayment first prenatal office vis then 100% covered, Precious Additions - a voluntary prenatal education program	it 80% / 70% after
	INFERTILLITY SERVICES GE (MUSTEE) PRIESCENIFIED)	Diagnosis covered after \$10 copayment; treatment covered with limitations after \$10 copayment	Diagnosis covered after \$10 copayment; treatment covered with limitations after \$10 copayment	Diagnosis covered after \$10 / \$15 copayment; treatment covered with limitations after \$10 / \$15 copayment	Diagnosis covered at 80% / 70% after deductible; treatment covered with limitations at 80% / 70% after deductible
	TOUTPATIENT TÃO WITY VISITS				
	eHEMOTHERAPY	100%; no copayment	100%; no copayment	100%; по copayment	80% / 70% after deductible
FIA	DIATIONTHERAPY	100%; no copayment	100%; no copayment	100%; no copayment	80% / 70% after deductible
İ	WSIGNITHER APY	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	80% / 70% after deduct ble
	OUTPATIENTS LET	100%; no copayment	100%; no copayment	100%; no copayment	80% / 70% after deductible
	ATHENT PHERAPY (SPEECH + 1 COUPATIONAL PHYSICAL)	100%; after \$10 copayment per visit; Ilmit of 60 visits per condition per calendar year	100%; after \$10 copayment per visit; limit of 60 visits per condition . per calendar year	100% after \$10 / \$15 copayment per visit	80% / 70% after deductible

In-network copayment \$10 for NJ DIRECT10 and \$15 for NJ DIRECT15; out-of-network reimbursement 80% for NJ DIRECT10 and 70% for NJ DIRECT15. Benefits, excluding hospital expenses, are based on the Horizon BGBSNJ discounted provider network allowance or fine "reasonable and customary" lee schedule based at the 90th percentile.
 Speech therapy limited to: restoration after a loss or impairment of a demonstrated previous ability to speak; develop or improve speech after surgical correction of a birth defect.

PLAN NAME TELEPHONE?	#019 - AETNAHM 1877-STANE NU 1877-782-8965)	5 H020 GIGNAM HEALTHCARE 1 800:5647642 IJ Www.cgna.com/stateo	1800 (1-80)	0 444150 NUDIRECTI 4414 SHBP 0444-7427) nblue:com/shbp
And WEB SITE OF THE SECOND SEC	www.aefra-com/state	II www.conscorvstateo	INGNETAVORIKA	OUTOFNETWORK
OUTPAILENT OARDIAG REHABLEITATION THERAPY	100% after \$10 copayment per visit	100% after \$10 copayment per visit	100% after \$10 / \$15 copayment per visit	80% / 70% after deductible
CHIROPRACTIC/CARE	100%; after \$10 copayment per visit; limit of 20 visits per calendar year; PCP referral required	100%; after \$10 copayment per visit; limit of 20 visits per calendar year	100% after \$10 / \$15 copayment per visit; limit of 30 visits per calendar year; combined in-network and out-of-network	80% / 70% after deductible for up to 30 visits per calendar year combined in-network and out-of-network
FIGME/HEALTIH GARE	Services and supplies covered at 100% with pre-approval; prior inpatient hospital stay not required; nursing home care or custodial care not covered	Services and supplies covered at 100% with pre-approval; prior inpatient hospital stay not required; nursing home care or custodial care not covered	Services and supplies covered at 100% with pre-approval; prior inpatient hospital stay not required; nursing home care or custodial care not covered	Services and supplies covered at 80% / 70% after deductible with pre-approval; prior inpatient hospital stay not required; nursing home care or custodial care not covered
P. HOSPICE CARE	100%; no copayment	100%; no copayment	100%; no copayment	80% / 70% after deductible
DURABLE MEDICAL EQUIPMENT (PMG)	\$100 deductible; then 100% for rest of calendar year	\$100 deductible; then 100% for rest of calendar year	90%; no copayment	80% / 70% after deductible
PROSTHETICAL DEVICES (MUST BE APPROVED TO ABVANCE)	\$100 deductible; then 100% for rept of calendar year; combined deductible with Durable Medical Equipment	\$100 deductible; then 100% for rest of calendar year; combined deductible with Durable Medical Equipment	90%; no copayment	80% / 70% after deductible
INPATIENT/SERVICES				
HÖSRITAL (ROOMANDIBOARDANDI LOTRER (NPATENT) SERVIGES)	100%; no copayment	100%; no copayment	100%; no copayment	80% / 70% after separate \$200 deductlble per hospital stay
	100%; no copayment; for up to 120 days per calendar year	100%; no copayment; for up to 120 days per calendar year	100%; no copayment; for up to 120 days per calendar year; combined in-network and out-of-network	80% / 70% after deductible; for up to 60 days per calendar year; combined in-network and out-of-network
建 型中华的特别的	100%; no copayment	100%; no copayment	100%; no copayment	80% / 70% after deductible
INPATIENTAVISTS	100%; no copayment	100%; no copayment	100%; no copayment	. 80% / 70% after deductible

In-network copayment \$10 for NJ DIRECT10 and \$15 for NJ DIRECT15 put-of-network reimbursement 80% for NJ DIRECT10 and 70% for NJ DIRECT15. Benefits, excluding hospital expenses, are based on the Horizon BCBSNJ discounted provider network allowance or the "reasonable and customary" fee schedule based at the 90th percentile.



RLANINAME TELEPHONE NUMBER I and WEBSITE SURGERY AND	15877-STATE N. (15877-762-8365)	10 3 #1020 CICNA HEALTHCARE #8004564-7642 eni www.cigna.com/stateo	1,60 (1,8 (1,00) (1,00) (1,00)	no /_#150'; NJ:DIRECTIS 0*414:SHBP: 00:414:7427) onblae dom/shbp OUT-OF-NETWORK
Meatlent surger	Y 100%; no copaymen	100%; no copayment	t 100%; no copaymer	at 80% / 70% after deductible
OUTPATION SURGE	100%; no copaymen	t 100%; no copayment	100%; no copaymen	t 80% / 70% after deductible
MENTAL HEALTH				
" !NPATIERIT STREATMENTO	100%; no copayment; up to 35 days per calendar year	100%; no copayment; up to 35 days per calendar year	100%; no copayment up to 25 days per calendar year; balance at 90% up to annual and/or lifetime maximums	year at 50% after
OUTPATIENT THEATMENT	100% after \$10 copayment per visit; up to 30 visits per calendar year	100% after \$10 copayment per visit; up to 30 visits per calendar year	90% up to annual and/or lifetime maximums	80% / 70% after deductible up to annual and/or lifetime maximums
ALCOHOL AND CORUGABUSE				
NPATIENT TREATMENT	100%; no copayment; up to 28 days per occurrence per calendar year	100%; no copayment; up to 28 days per occurrence per calendar year	Same as any other Illness	Same as any other Illness
(NPATIENT DECOMPOSE DETOXIFICATION	100%; no copayment	100%; no copayment	Same as any other iliness	Same as any other illness
DUTRATIENT C TREAUMENT	100%; no copayment; up to 60 visits per calendar year	100%; no copayment; up to 60 visits per calendar year	100%; no copayment; no visit limit	80% / 70% after deductible
AP INCATENT AREHABIEITATION	100%; no copayment; up to 28 days per occurrence per calendar year	100%; no copayment; up to 28 days per occurrence per calendar year	Same as any other Illness	Same as any other Iliness
OUTPAUENT DETOXIFICATION	100%; no copayment	100%; no copayment	Same as any other	Same as any other illness

¹ In-network copayment \$10 for NJ DIRECT10 and \$15 for NJ DIRECT15; out-of-network reimbursement 80% for NJ DIRECT10 and 70% for NJ DIRECT15. Benefits, excluding hospital expenses, are based on the Horizon BCBSNJ discounted provider network allowance or the "reasonable and customary" fee schedule based at the 90th percentile.

³ Biologically-based mental health conditions are treated like any other illness and not subject to annual or lifetime mental health dollar maximums or separate mental health visit limits.

	PEANNANE ELEPHONE NUMBER LUWERSINE	#019 AETNA HMG 3-2772STATE NU 11-277-72218665)	HEAUTHCARE	1,800 (d.80 www.hcrize	ior/, #150 NV birecia V412-SHBP origo74/7) Shuluecom/Shbp st
	EGENGYLO'ARL			IN-NETWORK!	OUT-OF-NETWORK!
EME V(GO)	HOSPITAL T RGENGYROOM AYMENTWAIVED TADMITTED)	100% after \$35 copayment	100% after \$35 copayment	100% after \$25 / \$50 copayment	4 100% after \$25 / \$50 ⁴ copayment
夏 麗作句	MBULANCE REMERGENCY PORTATION (ONLY)	100%; no copayment	100%; no copayment	90%; по сораутепт	80% / 70% after deductible
	LUNTARY ROGRAMS				
MAI	Asthma, Chronic Heart Failure, Chronic Hepatitis, Chronic Kidney Disease, Chronic Obstructive Pulmonary Disease, Chron's Disease, Coronary Artery Disease, Diabetes, Gastro Esophageal Reflux, Inflammatory Bowel Disease, Low Back Pain, and Weight Management		Asihma, Chronic Obstructive Pulmonary Disease, Diabetes, Heart Disease, Hepatitis C, Inflammatory Bowel Disease, Low Back Pain, Osteoarthritis, Osteoporosis, and Welght Complications	Asthma, Chronic Kidney Disease, Chronic Obstructive Pulmonary Disease, Coronary, Artery Disease, Diabetes, Heart Fallure, Hepatitis C, Ohesity, and Multiple Sclerosis	Asihma, Chronic Kidney Disease, Chronic Obstructive Pulmonary Disease, Coronary Artery Disease, Dlabetes, Heart Fallure, Hepatilis C, Obesity, and Multiple Sclerosis
			ES, OUT-OF-POCKET IFETIME-BENEFIT M		
1-10-11-11-11-11-11-11-11-11-11-11-11-11	Jetibles IVICDAB	None	None	None	\$100 per calendar year; \$200 per hospital admission
	ICTIBLES AMILY XIMUMI	None	None	None	\$250 per family, per calendar year; \$200 per hospital admission
OUT-O	XIMLM FPOGKETE MOUAL)	No maximum No maximur		\$400 per calendar year (coinsurance and copayments) ⁶	\$2,000 per calendar year (coinsurance only)
OUT-OT	XIMUM APOOKET MIEY)	No maximum	No maximum	\$1,000 per calendar year (colnsurance and copayments) ⁶	\$5,000 per calendar year (coinsurance only)
COV EXPI	UM PLAN ERED INSES /LIPETIME	Unlimited	Unlimited	Unlimited ⁷	\$1,000,000 lifetime ⁷

¹ In-network copayment \$10 for NJ DIRECT10 and \$15 for NJ DIRECT15; out-of-network relmbursement 80% for NJ DIRECT10 and 70% for NJ DIRECT15. Benefits, excluding hospital expenses, are based on the Horizon's discounted provider network allowance or the "reasonable and customary" lee schedule based at the 90th percentile.

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⁴ NJ DIRECT10 emergency room copayment is \$25; NJ DIRECT15 emergency room copayment is \$50.

⁵ Most disease management programs provide educational materials, and in some cases, individualized case management for members with an emphasis on health education and behavior modification.

 $^{^6}$ Under NJ DIRECT15, only coinsurance goes toward in-network out-of-pocket expenses.

⁷ Mental Health Maximums: \$15,000 annual; \$50,000 lifetime. Up to \$2,000 restoration feature each year with a lifetime maximum of \$50,000. Biologically-based mental health conditions are treated like any other lilness and not subject to annual or lifetime mental health dollar maximums or separate mental health visit limits.

PRESCRIPTION DRUG COVERAGE orteocal governmentemployees

Employers have the option of providing the Employee Prescription Drug Plan, or another non-SHBP drug plan, as a separate prescription drug benefit.

If no separate prescription drug plan is provided, prescription drug coverage will be determined by the medical plan in which the member is enrolled as noted below.

MEDIGAL REANTERES	ZEMO BLAN LINEMBERS	NET	
Figure Charles	PHARMACY Copayment for 30-day supply		
Benefits 19 Provided by	Generic \$5	NJ DIRECT10 or NJ DIRECT15	NJ DIRECT10 Member 80% Reimbursement
Wedco	Preferred Brand \$10	90% Reimbursement	after Deductible
1866-220-65-2	Other Brands \$20		
Www.inedcorgoon/stellenjl.	MAIL ORDER Copayment for 90-day supply		NJ DIRECT15 Member 70% Reimbursement after Deductible
	Generic \$5		
	Preferred Brand \$15		
	Other Brands \$25		it and the second

DENTAL COVERAGE FOR LOCAL GOVERNMENT EMPLOYEES

Employers have the option to offer the Employee Dental Plans, or another dental plan, as a separate dental benefit, If provided by your employer, the Employee Dental Plans offer two basic types of plan: the Dental Expense Plan, and a selection of Dental Plan Organizations (DPOs). For more Information, see the Employee Dental Plans Member Handbook which is available from the Division of Pensions and Benefits on our Web site at:

www.state.nj.us/treasury/pensions/

If your employer offers another dental plan, contact your benefits administrator for plan information.

CONTINUED COVERAGE FOR CHILDREN AGE 23 THROUGH 31

Coverage for a dependent child ends on December 31 of the year in which the child turns age 23. When a covered child turns age 23, you will receive a COBRA notice outlining the right to purchase continued health coverage for up to 36 months. However, under the provisions of Chapter 375, P.L. 2005, a child who is under age 31, may be eligible for continued medical and prescription drug coverage at a lesser cost than COBRA. See Fact Sheet #74, Health Benefils Coverage of Children Until Age 31. Continued dental and vision coverage may be available under COBRA.

If a covered child is not capable of self-support when he or she reaches age 23 due to mental illness or incapacity, or a physical disability, the child may be eligible for a continuance of coverage. A Continuance for Dependent with Disabilities form and proof of the child's condition must be submitted no more than 31 days after the date that coverage would end. Since coverage ends on December 31 of the year the child turns 23, you usually have until January 31 to file the form. See Fact Sheet #51, Continuing Health Benefits Coverage for Over Age Children with Disabilities.

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URL; www.state.nj.us/treasury/pensions pg-mail; pensions.nj@treas.state.nj.us
This is a summary and not intended to provide total information. Allhough every attempt at accuracy is made, it cannot be guaranteed.

HB-0794-0110



APPENDIX E FOR MEMBERS HIRED ON AND AFTER 1/1/2021



LOCAL GOVERNMENT ACTIVE GROUP MEDICAL PLAN DESIGN - PLAN YEAR 2021 HORIZON PLANS - MEDICAL COST SHARING

Out-of-Network Inpatient Hospital Deductible	Out-of-Network Out-of-Pocket Maximum (Individual/Family) ⁹	Out-of-Network Coinsurance ^s	Out-of-Network Deductible (Individual/Family)	in-Network Out-oi-Pocket Maximum (Individual/Family)	in-Network Coinsurance Maximum (Individual/Family)	in-Network Coinsurance	In-Network Deductible	Emergency Room Copayment	Specialist Care	Primary Care	Medical Cost Sharing	
\$500	\$2,000/\$5,000	30%	\$400/\$1,000	\$6,840/\$13,680	\$800/\$2,000	10%2	\$100° (if hired after 7/1/19)	\$1507	\$15	\$15		NJ DIRECT/ NJ DIRECT/20191
\$200/stay	\$2,000/\$5,000	20%	\$100/\$250	\$400/\$1,000	None	10%2	None	\$75	\$10	\$10		NJ DIRECT10
\$200/stay	\$2,000/\$5,000	30%	\$100/\$250	\$6,840/\$13,680	\$400/\$1,000	10%²	None	\$100	\$15	\$15		NJ DIRECT15
\$200/stay	\$2,000/\$5,000	30%	\$100/\$250	\$6,840/\$13,680	\$400/\$1,000	10%²	None	\$100	\$25	\$15		NJ DIRECT1525
\$500/stay	\$5,000/\$12,500	30%	\$200/\$500	\$6,840/\$13,680	\$800/\$2,000	10%2	None	\$125	\$30 adult/\$20 child***	\$20		NJ DIRECT2030
\$600/stay	\$6,500/\$13,000	40%	\$800/\$2,000	\$6,840/\$13,680	\$2,000/\$5,000	20% after deductible ³	\$200/\$500	\$300	\$35	\$20	Minute.	NJ DIRECT2035
,				\$6,840/ \$13,680	None	10%2	None	\$85	\$10	\$10		Harizon HMO¹
				\$2,500***	None	None	None	\$100	\$15	\$5	TIER 1	Horizon
				\$4,500***	None	20%	\$1,500**	\$100	\$30	\$20	TIER 2	Horizon OMNIA
-	\$6,000/\$12,000	40%	In-Network Deductible*	0,000	None	20% arter deductible	\$4,000***	20% coinsurance after deductible	20% coinsurance after deductible	20% coinsurance after deductible		NJ DIRECT HD4000*
	\$3,500/\$7,000	40%	In-Network Deductible*	\$2,50	None	deductible	\$1,500	20% coinsurance after deductible	20% coinsurance after deductible	after deductible		NJ DIRECT HD1500**

Members hired before July 1, 2019, will be enrolled in NJ DIRECT. Members hired after July 1, 2019, will be enrolled in NJ DIRECT 2019.
 HD = High Deductible Health Plan
 Age 26 and under
 Family amounts are 2 x per member amounts listed

§ \$100 in network deductible has exclusions: 2nd wellness visit, preventive, obstetrics, pediatrics, and any deductible applied to other services.
All plans with out-of-network benefits have specified dolter limits for chiropractic, physical therapy, and acupuncture.

Service areas for Horizon HMO plans are limited to New Jorsey, New Castle County in Delawaro, and bordering counties of Pennsylvania and New York.
 On select services.

<sup>Applies to services that do not require a copayment.
Out-oblawork Deducable is combined with in-hawork Deducable.

Anni Deducable.

Arian Deducable is domining its 5300 for Horizon HD1500 plans which can be used for qualified in Employer Health Savings Account Fonding is 5300 for Horizon HD1500 plans which can be used for qualified medical expenses without federal tax fiability.

Texto for adults reterred to the emergency room by their primary care physician and for pediatric (through age 19).</sup>

HA-0896-1020

Prescription Drug annual Out-of-Pocket Maximum (Inclividual/Family)	Mail: Brand w/ Generic Equivalent	Mail: Non-Preferred Brand Copayments	Mail: Preferred Brand Copayments	Mail: Generic Copayments	Retail: Brand w/ Generic Equivalent	Retail: Non-Preferred Brand Copayments	Retail: Preferred Brand Copayments	Retail: Generic Copayments	Prescription Drug Copayments ²	
\$1,710/\$3,420	Member pays difference ⁴	Member pays difference*	\$40	\$0	Member pays difference ⁴	Member pays difference*	\$16	\$7		NJ DIRECT/ NJ DIRECT 2019!
\$1,710/\$3,420	Member pays difference⁴	\$15	\$15	\$0	Member pays difference*	\$10	\$10	\$3		NJ DIRECT10.
\$1,710/\$3,420	Member pays difference ⁴	\$ 15	\$15	\$0	Member pays difference*	. \$10	\$10	₩.		NJ DIRECT15
\$1,710/\$3,420	Member pays difference*	\$88	\$40	\$0	Member pays difference*	\$35	\$16	\$7		NJ DIRECT1525
\$1,710/\$3,420 \$1,710/\$3,420	Member pays difference*	\$92	\$36	\$6	Member pays difference*	\$46	\$18			NJ DIRECT2030
\$1,710/\$3,420	Member pays difference ^{3,4}	Member pays difference ^{3,4}	\$52	\$0	Member pays difference ^{3,4}	Member pays difference ^{a,*}	\$213	\$72		NJ DIRECT2035
\$1,710/\$3,420	Member pays difference ⁴	\$15	\$15	\$0	Member pays difference ⁴	\$10	\$10	\$3		Horizon:HMO'
\$1,710/\$3,420	Member pays difference*	\$88	\$40	\$0	Member pays difference ⁴	\$35	\$16	\$7		Horizon OMNIA
		I		coinsurance	Subject to deductible			•		NJ DIRECT NJ DIRECT
	- Transporter and the second s			ance	Subject to deductible					NJ DIRECT HD1500*

Note: Retail - 30 day supply, Mail - 90 day supply. Oral contraceptive coverage is available under the medical and prescription plans.

Members hired before July 1, 2019, will be enrolled in NJ DIRECT. Members hired after July 1, 2019, will be enrolled in NJ DIRECT 2019. HD = High Deductible Health Plan

For maintenance prescription drugs, mall order is mandatory under all plans. You pay the the cost difference between the brand drug and the generic drug.

- Service areas for Horizon HMO plans are limited to New Jersey, New Castle County in Delaware, and bordering counties of Pennsylvania.
- and New York.

 Local government employers can select from the SHBP's Prescription Drug Plans, purchase their own prescription drug coverage plan, or receive prescription drug coverage through the SHBP medical plan. Copayments shown apply to the plans when coverage is through the receive prescription drug coverage through or needleal plan. Copayments shown apply for the plans when coverage is through the medical plan. Cohsurance is 10% for NJ DIRECT10 and NJ DIRECT18. Cohsurance is 15% for NJ DIRECT10. And NJ DIRECT18. Cohsurance is 15% for NJ DIRECT19. The plans of the plans of deductible and ductible Health Plans, prescription drug coverage must be inrough the SHBP medical plan and are subject to the plan's deductible and coinsurance amounts.



be provided separately. This is only a summary. Benefits may change upon renewal. For more information about your coverage, or to get a copy of the complete terms of coverage, visit Member Online Services at http://www.ni.gov/treasury/pensions/index.shtml or by calling 1-609-292-7524. If you do not currently have coverage with Horizon BCBSNI you can view a sample policy here, The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will

http://www.ni.gov/treasury/pensions/index.shtml. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at www.cciio.cms.gov or call 1-609-292-7524 to request a copy.

Important Questions		Why I his Mairie's:
What is the overall deductible?	\$100.00 Individual / \$250.00 Family for out-of-network <u>providers</u> . Aggregate family.	*\$250.00 Family Generally, you must pay all of the costs from providers up to the deductible amount of before this plan begins to pay. If you have other family members on the <u>plan</u> , each family member must meet their own individual <u>deductible</u> until the total amount of <u>deductible</u> expenses paid by all family members meets the overall family <u>deductible</u> .
Are there services covered before you meet your deductible?	Yes. <u>Preventive care is covered before</u> you meet your <u>deductible</u> .	Yes. <u>Preventive care</u> is covered before This <u>plan</u> covers some items and services even it you haven to be the line deduction. you meet your <u>deductible</u> . amount. But a <u>copayment</u> or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers amount or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers are the restriction of the control of th
		https://www.healthcare.gov/coverage/preventive-care-benefits/.
Are there other deductibles for specific services?	No.	You don't have to meet deducuoies for specific survives.
What is the out-of-pocket limit for this plan?	For Active employee in-network Health providers \$400.00 Individual/	
	\$1,000.00 Family. Retiree in-network	Z TO THE PARTY OF
от придажения дене	Health providers \$400.00 Individual/	
	\$1,000.00 Family. Out-of-network	
	\$5,000.00 Family.	the days to see the court of not ket
What is not included in the out-of-pocket limit?	Premiums, balance-billing charges and health care this plan doesn't cover.	Premiums, balance-billing charges and Even though you pay these expenses, they don't coult toward the business health care this plan doesn't cover. limit .
Will you pay less if you use a network provider?	F_	This plan uses a <u>provider network</u> . You will pay less it you use a <u>provider in the plan's network</u> . You will pay the most if you use an <u>out-of-network provider</u> , and be might thereive a hill from a provider for the difference between the <u>provider's</u>
·	call 1-800-414-SHBP (7427).	charge and what your <u>plan</u> pays (<u>balance billing</u>). Be aware your <u>network provider</u> might use an <u>out-of-network provider</u> for some services (such as lab work). Check with your <u>provider</u> before you get services.
Do you need a referral to	No.	You can see the <u>specialist</u> you choose without a <u>referral</u> .
see a specialist:		Advanced to the second

0 5 5

0.4

(NJ DIRECT (PPO))/BlueCard

If you need Emergency room care \$75.00 Copayment per visit\$75.00 Copayment per visit\$25 Copayment/visit for physician	Physician/surgeon fees No Charge. 20% <u>Coinsurance</u> . 20% <u>Coinsurance</u> for out-of anesthesia.	If you have Facility fee (e.g., ambulatory No Charge. 20% Coinsurance. none outpatient surgery center)	er Specialty drugs	More information about Non-preferred brand drugs See separate Prescription Drug Plan SBC Coverage is available	condition Preferred brand drugs	If you need drugs to Generic drugs	Imaging (CT/PET scans, MRIs) No Charge. 20% Coinsurance. Requires pre-approval.	If you have a test Diagnostic test (x-ray, blood No Charge. 20% Coinsurance. ——none———none———	<u>Preventive</u> No Charge. Not Covered. Care/screening/immunization Not Covered. Not Covered. To pay for services that aren't preventive. Ask your provider if the services needed are preventive. Then check what your plan will pay for.	Specialist visit \$10.00 <u>Copayment</u> per 20% <u>Coinsurance.</u> visit.	sit a health Primary care visit to treat an \$10.00 Copayment per 20% Coinsurance.	Common Medical Event Services You May Need Network Provider (You will pay the least) What You Will Pay Unt-of-Network Frovider(You will pay the most)	
\$25 <u>Copayment</u> /visit for physician referrals or pediatric (under age 19) ER visits; and if admitted within 24 hours, the copayment is waived. Payment at the in-network level applies only to true	20% <u>Coinsurance</u> for out-of-network anesthesia.	One——				one	pre-approval.	one———	alendat year. You may have services that aren't e. Ask your provider if the needed are preventive. Then at your plan will pay for.	are limited to no more than \$35 a visit for chiropractic and \$60 a visit for acupuncture or 75% of the in network cost per visit, whichever is less.	tic and acupuncture services	Limitations, Exceptions, & Other Important Information	

^{*}For more information about limitations and exceptions, see the <u>plan</u> or policy document at http://www.nj.gov/treasury/pensions/index.shtml

		If you are pregnant		health, or substance abuse services	If you need mental health, behavioral		If you have a hospital stay			Common Medical Event
Childbirth/delivery facility services	Childbirth/delivery professional services	Office visits	Inpatient services		Outpatient services	Physician/sutgeon fees	Facility fee (e.g., hospital room)	Urgent care	Emergency medical transportation	Services You May Need
No Charge.	No Charge.	\$10.00 <u>Copayment</u> per visit 20% <u>Coinsutance</u> for Office.	No Charge.	\$10.00 <u>Copayment</u> per Office visit for Mental Health and Behavioral Health. No Charge for Substance abuse office visit.	No Charge for Outpatient Hospital.	No Charge.	No Charge.	\$10.00 <u>Copayment</u> per visit.		What You Network Provider (You will pay the least)
20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	t20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .		20% Coinsurance.	20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	20% <u>Coinsutance</u> .	rance.	You Will Pay Out-of-Network Provider(You will pay the most)
Requires pre-approval. There is a separate \$200 <u>deductible</u> per inpatient stay for out-of-network facilities.	none	Cost sharing does not apply for preventive services. Maternity care may include tests and services described elsewhere in the SBC (i.e. Ultrasound.)	Requires pre-approval. There is a separate \$200 <u>deductible</u> per inpatient stay for out-of-network facilities.		Some specialty outpatient services require pre-approval.	Requires pre-approval. 20% Coinsurance for out-of-network anesthesia.	Requires pre-approval. There is a separate \$200 <u>deductible</u> per inpatient stay for out-of-network facilities.	none	Limited to local emergency transport to the nearest facility equipped to treat the emergency condition.	Limitations, Exceptions, & Other Important Information

^{*}For more information about limitations and exceptions, see the <u>plan</u> or policy document at http://www.ni.gov/treasury/pensions/index.shtml

		If your child needs dental or eye care					other special health needs	If you need help recovering or have	Common Medical Event
Children's dental check-up	Children's glasses	Children's eye exam	Flospice services	Durable medical equipment	Skilled nursing care	Habilitation services	Rehabilitation services	Home health care	Services You May Need
Not Covered.	Not Covered.	\$10.00 <u>Copayment</u> per visit.	No Charge.	10% Coinsurance.	No Charge.	No Charge for Inpatient and Outpatient Facility. \$10.00 <u>Copayment</u> per visit for Office.	No Charge for Inpatient and Outpatient Facility. \$10.00 <u>Copayment</u> per visit for Office.	No Charge.	What You Network Provider (You will pay the least)
Not Covered.	Not Covered.	Not Covered.	20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	20% <u>Coinsurance</u> .	What You Will Pay ovider Out-of-Network ay the Provider(You will pay the the most)
none	none	Coverage is limited to 1 visit.	Requires pre-approval. There is a separate \$200 <u>deductible</u> per inpatient stay for out-of-network facilities.	Requires pre-approval for all rentals and some purchases.	Requires pre-approval. Limited to 120 days in-network and 60 out-of-network facility days for a combined maximum of 120 days per calendar year. There is a separate \$200 deductible per inpatient stay for out-of-network facilities.		Requires pre-approval. There is a separate \$200 <u>deductible</u> per inpatient stay for out-of-network facilities.	Requires pre-approval.	Limitations, Exceptions, & Other Important Information

^{*}For more information about limitations and exceptions, see the <u>plan</u> or policy document at http://www.nj.gov/treasury/pensions/index.shtml

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.

Cosmetic Surgery

Long Term Care

Routine foot care

Dental care (Adult)

Private-duty nursing

Weight Loss Programs

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

Acupuncture (for pain management only)

Hearing Aids (Only covered for members age • 15 or younger)

Non-emergency care when traveling outside the U.S. (Subject to deductible/coinsurance and balance billing.)

Bariatric surgery (requires pre-approval)

Chiropractic care (limited to 30 visits/year)

Infertility treatment (requires pre-approval)

are provided outside the United

Routine eye care (Adult)

 Most coverage provided outside the United States. (Subject to deductible/coinsurance and balance billing.)

^{*} For more information about limitations and exceptions, see the <u>plan</u> or policy document at http://www.ni.gov/treasury/pensions/index.shtml

Your Rights to Continue Coverage:

There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is: the plan at 1-800-414-7427 (SHBP), the Department of Health and Human Services, Center for Consumer Information and Insurance Oversight, at 1-877-267-2323 x61565 or www.cciio.cms.gov, or the U.S. Department of Labor, Employee Benefits Security Administration at 1-866-444-3272 or www.dol.gov/ebsa. Other coverage options may be available to you, too, including buying individual insurance coverage through the Health Insurance Marketplace. For more information about the Marketplace, visit www.got.coverage.ni.gov or call 1-877-962-8448.

Your Grievance and Appeals Rights:

There are agencies that can help if you have a complaint against your <u>plan</u> for a denial of a <u>claim</u>. This complaint is called a <u>grievance</u> or <u>appeal</u>. For more information about your rights, look at the explanation of benefits you will receive for that medical <u>claim</u>. Your <u>plan</u> documents also provide complete information to submit a <u>claim</u>, <u>appeal</u> or a <u>grievance</u> for any reason to your <u>plan</u>. For more information about your rights, this notice, or assistance, contact: Horizon Blue Cross Blue Shield of New Jersey Member Services at 1-800-414-SHBP (7427). You may also contact the Department of Labor's Employee Benefits Security Administration at 1-866-444-EBSA (3272) or <u>www.dol.gov/ebda/healthreform</u>.

Does this plan provide Minimum Essential Coverage? Yes

premium tax credit Minimum Essential Coverage generally includes <u>plans, health insurance</u> available through the <u>Marketplace</u> or other individual market policies, Medicare, Medicaid, CHIP, TRICARE, and certain other coverage. If you are eligible for certain types of <u>Minimum Essential Coverage,</u> you may not be eligible for the

Does this plan meet the Minimum Value Standards? Yes

If your <u>plan</u> doesn't meet the Minimum Value Standards, you may be eligible for a <u>premium tax credit</u> to help you pay for a <u>plan</u> through the

-To see examples of bow this plan might cover costs for a sample medical situation, see the next section.

^{*} For more information about limitations and exceptions, see the plan or policy document at http://www.nj.gov/treasury/pensions/index.shtml



This is not a cost estimator. Treatments shown are just examples of how this <u>plan</u> might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your <u>providers</u> charge, and many other factors. Focus on the <u>cost sharing</u> amounts (<u>deductibles</u>, <u>copayments</u> and <u>coinsurance</u>) and <u>excluded services</u> under the <u>plan</u>. Use this information to compare the portion of costs you might pay under different health <u>plans</u>. Please note these coverage examples are based on self-only coverage.

(9 months of in-network pre-natal care and a hospital delivery) Peg is Having a Baby

The <u>plan's</u> overall <u>deductible</u> \$0.00 <u>Specialist <i>Copayment</i></u> \$10.00 Hospital (facility) <i>Coinsurance</i> 0%
--

Other Coinsurance

Specialist office visits (prenatal care) Childbirth/Delivery Professional Services Childbirth/Delivery Facility Services Specialist visit (anesthesia) This EXAMPLE event includes services like: Diagnostic tests (ultrasounds and blood work)

1 Ì In this example, Peg would pay Total Example Cost \$12,700.00

In this example, Joe would pay:

Cost Sharing

Total Example Cost

		The total Peg would pay is	Limits or exclusions	What isn't covered	Coinsurance	Copayments	Deductibles	Cost Sparing
		\$80.00	\$70.00		\$0.00	\$10.00	\$0.00	
	Please note that some of the Limits or Exclusions listed above may be covered under the Prescription Plan.	The total Joe would pay is	Limits or exclusions	What isn't covered	Coinsurance	Copayments	Deductibles	Service Control
وماطهودهما	xclusions listed rtion Plan.	\$3,680.00	\$3,500.00	1	\$80.00	\$100.00	\$0.00	→

(a year of routine in-network care of a Managing Joe's type 2 Diabetes

Other Coinsurance	Hospital (facility) Coinsurance	Specialist Copayment	The plan's overall deductible
T0%	10%	OU.UL\$	\$0.00

This EXAMPLE event includes services like: Primary care physician office visits (including disease education,

Diagnostic tests (blood work)

Prescription drugs Durable medical equipment (glucose meter)

well-controlled condition)

Other Coinsutance

Hospital (facility) Coinsurance

Specialist Copayment

\$10.00 \$0.00

0%

The <u>plan's</u> overall <u>deductible</u>

(in-network emergency room visit and Mla′s Simple Fracture

follow up care)

Emergency room care (including medical supplies) Diagnostic test (x-ray) This EXAMPLE event includes services like: Rehabilitation services (physical therapy, Durable medical equipment (crutches

\$5,600.00 Total Example Cost

۲.		٠.				,		
	The total Mia would pay is	Limits or exclusions	What isn't covered	Coinsurance	Copayments	Deductibles	Cost Sharing	In this example, Mia would pay:
	\$210.00	\$10.00	,	\$100.00	\$100.00	\$0.00		

This plan has other deductibles for specific services included in this coverage example. See "Are there other deductibles for specific services?" row above.

The plan would be responsible for the other costs of these EXAMPLE covered services

* For more information about limitations and exceptions, see the plan or policy document at //www.nj.gov/treasury/pensions/index.shtml



Notice of Nondiscrimination

them differently on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual crientation or health status in the administration of the plan, including enrollment and benefit determinations. Horizon BCBSNI provides free aids and services to people with disabilities (e.g. qualified sign language interpreters and information in other formats) and to those whose primary language is not English (e.g. information in other languages) to Horizon Bine Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate against nor does it exclude people or treat

Contacting Member Services

Please call Member Services at 1-800-355-BLUE (2583) (TTX 7H) or the phone number on the back of your member ID card, if you need the free aids and services noted above and for all other Member Services issues.

Filing a Section 1557 Grievance

If you believe that Horizon BCBSNI has failed to provide the free communication aids and services or discriminated against you for one of the reasons described above, you can file a discrimination complaint also known as a Section 1557 Grievance, Horizon BCBSNI's Civil Rights Coordinator, can be reached by calling the Member Services number on the back of your member ID card or by writing to the following address: Horizon BCBSNI

Civil Rights Coordinator PO Box 820, Newark, NJ 07101.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, through the Office for Civil Rights Complaint Portal, online at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf or by mail at U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201or by phone at 1-800-368-1019 or 1-800-537-7697 (TDD). OCR Complaint forms are available at www.hhs.gov/ocr/office/file/index.html

Language assistance

Si habia un idioma diferente al inglés, hay ayuda disponible gratis. Llame al número que aparece al reverso de su tarjeta de identificación

Se você fala um idioma diferente do inglês, a ajuda esté disponível gratuizmente. Ligue para o número no verso do seu bilhete de identidade 如果您讲英语以A的语言,可获取免费帮助。请拨打您的身份证背面的导码。 영어 이외의 현어를 사용하는 경우, 무료 지원 서비스를 받을 수 있습니다. D 키드 뒷면에 있는 번호로 전화하십시오 જો તમે અંગ્રેજી સિવાયની ભાષા બોલના હોવ, તો મફતમાં મદદ ઉપલબ્ધ છે. તમારા આઇડી કાર્ડની પાછળ ઓપોલા નંબર પર કોલ

Se parli una lingua diversa dall'inglese, è disponibile un servizio di assistenza gratuito. Chiama il nunero sul retro della tua carta d'identificaz Ješli mówisz w języku mnyminią angjelski, pomoc udzielana jest bezpłatnie. Zadzwoń pod numer podany na odwrocie dowodu osobistego.

Kung nagsasalita ka ng isang wika maliban sa Ingles, magagamit ang tulong nang walang bayad. Tumawag sa munarong nasa likod ng iyong

Если вы не говорите по-английски, вам помогут бесплатно. Позволите по пепефону, указанному на обратной стороне вашей ID-

Si où pale on lôt lang ke Angle, gen ed ki disponib gratis. Rele nan nimewo ki ekri nan do kat idanifyan w lan.

यदिआप अंग्रेज़ी से किन्न कोई अन्य भाषा बोलते हैं, तो निःशुल्क सहायता उपलब्ध हैं। अपने आईडी कार्ड के पीछे दिए गए नंबर पर Nếu bạn nổi ngôn ngữ khảo ngoài tiếng Anh, thì chúng tôi có thể giúp bạn miễn phí. Hãy gọi số ở mặt sau thê ID của bạn

Si vous parlez une langue autre que l'anglais, l'ande est graunte. Appelez le numéro an dos de voire carte d'identité إذا كلت تتحدث تفة الخرى خير الإفجلزية، قوقر لك المساعدة مجالًا , يُكتك الأنصال بالزقم الموجود على ظهر بطاقة الهُوية .

اگل آپ انگزیزی کے خاترہ کوئی دوسری زبان بولی منگئے ہیں تو مفت مدد دستیاب ہے۔ براہ مہربائی شناختی کارڈکی پنجیلی گزیف دن ج ثلدہ نعیل ہور کال کاری ب

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