New Jersey Public Employment Relations Commission NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

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	SECTION I: Parties	and Term of Contr	acts				
1	Public Employer: Salem County Special Services			County: Salem			
2	Employee Organization: NJPSA			Number of Employees in Unit: 5			
3	Base Year Contract Te	rm: 07/01/2029-0		New Contract Term: 07/01/2024-06/30/2028			
			ent (please check				
4	SECTION II: Type of Contract Settlement (please check only one) Contract settled without neutral assistance						
_							
5	Contract settled with assistance of mediator						
6	Contract settled with assistance of fact-finder						
7	Contract settled with assistance of super-conciliator						
8	If contract was settled	l in fact-finding, did t	the fact-finder issue	a report with recomm	nendations?		
	Yes No						
	SECTION III: Salary	Base					
	The salary base is the			opired or expiring agre	eement. This is the b	pase cost from which	
	the parties negotiate	the salary increases.	537201	man, man men dialifera di laura dan dah dan dilikumak kanak kanak kanak kanak kanak kanak kanak kanak kanak ka			
9	Salary Costs in Base Yo	ear	\$ <u>1</u>				
10	Longevity Costs in Base Year \$ 4000						
11	Total Salary Base \$541201		\$ 541201				
	SECTION IV: Salary	Increases for Each	Year of New Agro	eement*			
	F	Year 1	Year 2	Year 3	Year 4	Year 5	
12	Effective Date (month/day/year)	07/01/2024	07/01/2025	07/01/2026	07/01/2027		
13	Cost of Salary Increments (\$)	32950	20855	21130	23545		
14	Salary Increase Above Increments (\$)	15000	1500	1500	0		
15	Longevity Increase (\$)	8000	8000	8000	8000		
16	Total \$ Increase (sum of lines 13-15)	55950	30355	30630	31545		
17	New Salary Base (\$)	597151	627506	658136	689681		
18	Percentage increase over prior year	3.9 %	3.9 %	3.9 %	3.9 %	%	
	*If contract duration i	s longer than five ve	ars, please add an a	dditional page.			

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

19	Stipend	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
20	Totals(\$):	0	3000	3000	3000	3000	

^{*}If contract duration is longer than five years, please add an additional page.

	SECTION VI: Medical Costs		
		Base Year	Year 1
21	Health Plan Cost	\$ <mark>100980</mark>	\$ 107822
22	Prescription Plan Cost	\$ 0	\$ <u>0</u>
23	Dental Plan Cost	\$ <mark>3070</mark>	\$ <mark>3070</mark>
24	Vision Plan Cost	\$ 167	\$ <mark>167</mark>
25	Total Cost of Insurance	\$ ¹⁰⁴²¹⁷	\$ 111059
26	Employee Insurance Contributions	\$ ²⁷⁹⁶⁰	\$ <mark>30375</mark>
27	Employee Contributions as % of Total Insurance Cost	27	₆ 27 _%

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Section	ı VI: Medical Co	sts (continued)					
28	Identify any insurance changes that were included in this CNA.						
29	SECTION VII: Certification and Signature The undersigned certifies that the foregoing figures are true:						
		,					
	Print Name:	Frank H. Maurer III					
	Position/Title:	Business Administrat	or				
	Signature:	fullles					
	Date:	01/28/2025					

form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016