New Jersey Public Employment Relations Commission <u>NON-POLICE AND FIRE</u> <u>COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM</u>

Line #	ŧ						
	SECTION I: Parties						
1	Public Employer: Clea	arview Regional Hi	gh School	County: Gloucester			
2	Employee Organizatio	n: Clearview Educatio	n Association	Number of Employee	es in Unit: 277.82	25	
3	Base Year Contract Te	rm: 7/1/15-6/30/	/18	New Contract Term:	7/1/18-6/30/21		
	SECTION II: Type of	Contract Settlem	ent (please check	only one)			
4	Contract set	led without neutral	assistance				
5	Contract sett	led with assistance of	of mediator				
6	Contract sett	led with assistance of	of fact-finder				
7		led with assistance o					
8	If contract was settled	l in fact-finding, did t	the fact-finder issue	a report with recomm	mendations?		
	Yes No						
	SECTION III: Salary	Base					
	The salary base is the the parties negotiate t			pired or expiring agr	eement. This is th	ne base cost from w	vhich
9	Salary Costs in Base Ye	ear	\$ <mark>13417821</mark>				
10	Longevity Costs in Bas	e Year	\$ <mark>63900</mark>				
11	Total Salary Base		<mark>\$</mark> 13481721				
	SECTION IV: Salary	Increases for Each	Year of New Agr	eement*			
		Year 1	Year 2	Year 3	Year 4	Year 5	
12	Effective Date (month/day/year)	07/1/2018	07/01/2019	07/01/2020			
13	Cost of Salary Increments (\$)	392104	397792	400409			
14	Salary Increase Above Increments (\$)	10500	16851	26537			
15	Longevity Increase (\$)	9600	7300	10100			
16	Total \$ Increase (sum of lines 13-15)	412204	421943	437046			
17	New Salary Base (\$)	13820425	14235068	14662014			
18	Percentage increase over prior year	3 %	3 %	3 %		%	_%

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

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a da		3895551	3350615
21	Health Plan Cost	¢ 2022224	¢10000010
		TUDUUTUT	1000000
22	Droccrintion Dlan Cost	61036424	61980928
77	LI ESCIIPLIOII FIAII COSL	اد	· ¢
		1219424	1221921
25	Dental Plan Cost	2	>
24	Vision Plan Cost	sin In	SIZ
75	Total Cost of Insurance	¢0001402	¢ 4002404
		11012103	* 100200V
36	Employed Incurance Contributions	61104548/	1102/031
70	בוווףוטאפפ ווואמו מווכפ כטוונוושמנוטווא	יל	⁻
		20.5	
17	Employee Contributions as % of Total Insurance Cost		% <u></u> %

-----SECTION VI: Medical Costs

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*If contract duration is lonaer than five vears. please add an additional paae. • • • ~ • . .

Ver:	-		yee Urganization		ducation Ass	h
SECTION V: Increa	ses in Other Co	ontractual Econ	omic Items or N	lewly Added Ec	onomic Items*	
14 Di-4i	D V	V 4	V J	N 3	V A	V F
แem Description	Gast (Slar	hgggegse (S)	ingrease (S)	ipgregse (S)	pggpase (S)	huggese (S
Nonteaching Salaries	2466240	7.3.987_ ,,,	76207- ,,,	78493_ ,_,		
ī	I	i	I	l	1	ì
	1213030	100001	ν		1	1
Extracumcular Superios	212023	47267	0	0		
Blackseal License Reimb.	U	240	0	0		
	^		-	-		
10tals(\$):						

Base Year

Year 1

Employer: Clearview Regional High School	Employee Organization: Clearview Education Assn.	Page 3
employer:		i uge s

Section VI: Medical Costs (continued)

28 Identify any insurance changes that were included in this CNA. Emergency Room Co-Pay reduced from \$75 to \$50 on January 1, 2019 (mid-contract 18/19)

The group rates decreased in 2018/19 due to lower experience rating. This had nothing to do with negotiations. The medical costs reported are actual numbers from audit reports and financial statements.

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name:	Esther R. Pennell
Position/Title:	School Business Admininstrator
Signature:	ather fann
Date:	2/26/2020

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

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

Revised 8/2016

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