

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

14 Total Base Salary Cost from Line 13: \$9,135,132.00

Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15 Effective Date (month/day/year)	<u>01/01/2018</u>	<u>01/01/2019</u>	<u>01/01/2020</u>	<u>01/01/2021</u>		
16 Cost of Salary Increments (\$)	<u>366,418.00</u>	<u>586,313.00</u>	<u>542,477.00</u>	<u>537,146.00</u>		
17 Salary Increase Above Increments (\$)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
18 Longevity Increase (\$)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
19 Total Increased Cost for "Other" Items (\$)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		
20 Total Increase (\$) (sum of lines 16-19)	<u>366,418.00</u>	<u>586,313.00</u>	<u>542,477.00</u>	<u>537,146.00</u>		

SECTION V: Average Increase Over Term of New CNA

21 Dollar Increase Over Life of Contract \$2,032,354.00 [Take sum of all amounts listed on Line 20 above]

22 Percentage Increase Over Life of Contract 23 % [Divide amount on Line 21 by amount on Line 14]

23 Average Percentage Increase Per Year 5.75 % [Divide percentage on Line 22 by number of years of the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	College Credits	11,700.00	0.00	0.00	0.00	0.00		
25	Totals (\$):	11,700.00	0.00	0.00	0.00	0.00		

SECTION VII: Medical Costs

Insurance Costs

	Base Year	Year 1
26 Health Plan Cost	\$ 1,209,986.75	\$ 1,293,046.88
27 Prescription Plan Cost	\$ 433,009.20	\$ 422,168.46
28 Dental Plan Cost	\$ 66,929.94	\$ 65,528.47
29 Vision Plan Cost	\$ 0.00	\$ 0.00
30 Total Cost of Insurance	\$ 1,709,925.89	\$ 1,780,743.81

Employer: Cherry Hill Township

Employee Organization: Cherry Hill Police Benevolent Association

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SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	\$ <u>533,062.21</u>	\$ <u>552,306.91</u>
32	Contributions as % of Total Insurance Cost	<u>32</u> %	<u>31</u> %

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

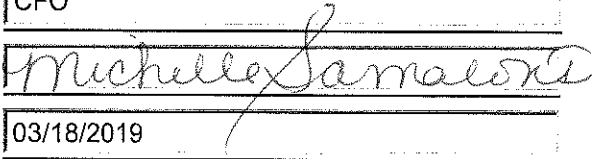
New Gold and Silver Health Plans as of January 1, 2019 with increased deductibles (\$300/600 to \$500/1,000), lower out-of-network coinsurance (70% to 60%) and increased in-patient hospital care co-pay (\$0 to \$200). New Bronze Health Plan as of January 1, 2019 from High Deductible Plan to OMNIA State Defector (with Blue Card).

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Michelle Samalonis

Position/Title: CFO

Signature: 

Date: 03/18/2019

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

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

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