

AGREEMENT BETWEEN
THE SIMSBURY BOARD OF EDUCATION
AND
THE SIMSBURY EDUCATION ASSOCIATION

July 1, 2020 – June 30, 2023



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THIS AGREEMENT IS MADE AND ENTERED INTO by and between the SIMSBURY BOARD OF EDUCATION (hereinafter called the "Board") and the SIMSBURY EDUCATION ASSOCIATION (hereinafter called the "Association"), affiliated with the CONNECTICUT EDUCATION ASSOCIATION and the NATIONAL EDUCATION ASSOCIATION.

ARTICLE I

RECOGNITION

The Board recognizes the Association as the exclusive representative of all certified professional personnel and personnel employed under a durational shortage area permit except administrators and temporary substitute teachers excluded by statute for the purpose of negotiations with respect to salaries and other conditions of employment pursuant to Section 10-153b to 10-153f of said statutes, until such time as the professional personnel represented shall choose other representatives pursuant to said section.

ARTICLE II

SALARIES

A. Salary Schedule

The salary schedule for positions covered by this Agreement is attached hereto and is part of this Agreement as follows:

Exhibit I, II & III - Salary Schedule

B. Placement on the Salary Schedule

At the time of initial employment, certified personnel shall be assigned a step on the salary schedule commensurate with preparation, teaching experience, and military service. For teachers hired after July 1, 2002, up to full credit for previous PK-12 teaching experience will be granted to those who are certifiable in the state of Connecticut.

Placement credit up to five (5) steps may be granted to new hires for other employment experiences directly related to their teaching assignment.

Realizing there will be situations in which other experience may be deemed teaching experience of value to our schools, in such situations the Superintendent/Designee shall consult with the SEA President/Designee to mutually determine if placement on a higher salary step is acceptable.

Any teacher who transfers from another public school system shall be placed upon the step up to that step the teacher would be on if all the experience had been in the Simsbury Public Schools. Except as provided above, teachers newly employed or recalled shall not be placed at a step of the salary schedule that is higher than the step of incumbent teachers with the same number of years of teaching experience.

Initial Hiring Placement Schedule

Step	2020-21 Years of Experience	2021-22 Years of Experience	2022-23 Years of Experience
1	0	0	0
2	1	1	1
3	2	2	2
4	3-4	3	3
5	5	4-5	4
6	6	6	5-6
7	7-8-9	7	7
8	10	8-9-10	8
9	11+	11+	9+

1. Military Service

One step of the salary schedule shall be allowed for each year of military service, to a maximum of two years. Service in excess of one hundred eighty days shall be considered as one full year when computing the teacher's placement on the salary schedule. Service credit shall never be granted beyond the stated maximum of the salary schedule.

2. Transfer of Accrued Illness Time from Previous District

Staff hired after July 1, 2002, will be entitled to transfer to the Simsbury Public School system, from the school system in which they were previously employed, up to a maximum of ninety (90) days of accrued sick time, provided that prior to signing an employment contract with the Simsbury Public School system, the teacher shall furnish the Superintendent or designee with written confirmation of the amount of accrued sick time. Such confirmation must be signed by the Superintendent or Personnel Director of the school system in which the teacher was previously employed.

C. Advancement on the Salary Schedule

1. Based on Satisfactory Performance

- (a) A step increase has been negotiated in all years of the agreement, therefore, all teachers whose work is satisfactory in accordance with the school district's evaluation procedure shall be advanced one step on the salary schedule until maximum has been reached.
- (b) A teacher whose work is considered to be unsatisfactory in accordance with the school district's evaluation procedure may be retained at the same salary step for the succeeding year. When this action is taken, the teacher shall receive an explanation in writing prior to June 1.

2. Based on Change in Classification

Advancement related to further course work is governed by the Appendix, "Advancement on Salary Schedule," which is set forth in Exhibit IV, attached hereto and is part of this Agreement.

D. Additional Remuneration

Additional remuneration for military service, special service personnel, extra duties, professional education beyond the Master's Degree, mentor teachers, national board certification, and longevity retirement is set forth in Exhibit V, and is part of this Agreement.

E. Contracts

Provisions which govern contracting with certified professional personnel covered by this Agreement are set forth in Exhibit VI as part of this Agreement. The contract forms to be used are set forth in Exhibits VI-A and VI-B, and are part of this Agreement as "Contract of Employment" and "Annual Salary Notification."

ARTICLE III

INSURANCE BENEFITS

A. Life Insurance

1. Thirty thousand dollars (\$30,000) of life insurance coverage is provided at Board expense. Individuals may purchase additional life insurance on a 50% / 50% Board-teacher shared-cost basis. The maximum amount available, which shall not exceed three (3) times the annual salary of the insured is computed to the nearest higher thousand up to a maximum of \$300,000.
2. Teachers employed prior to July 1, 2007 who are eligible for retirement under statute, who have 25 years of service in Simsbury, and who participate in the longevity retirement program, will receive a \$7,500 life insurance policy upon retirement. Teachers employed thereafter who are eligible for retirement under statute, and who have 25 years of service in Simsbury, and who participate in the longevity retirement program, will receive a \$7,500 life insurance policy upon retirement until age 70.

B. Board of Education Health Insurance Program

1. There are three (3) health insurance options available to employees hired before July 1, 2014: a High Deductible Health Plan (HDHP), a Health Maintenance Organization (HMO), and a Preferred Provider Organization (PPO), outlined further below (see also summaries in Exhibit IX). For new hires as of July 1, 2014 or thereafter, the only health insurance plan will be the High Deductible Health Plan (HDHP). Employees participating in the HDHP must remain in the HDHP. The Board-teacher shared cost basis is indicated in the following schedule:

	<u>Year</u>	<u>Board Contribution</u>	<u>Employee Contribution</u>
a. High Deductible Health Plan (HDHP)			
Individual Employee	2020-21	81.5%	18.5%
and Dependent Coverage	2021-22	81%	19%
	2022-23	80%	20%

	<u>Year</u>	<u>Board Contribution</u>	<u>Employee Contribution</u>
b.	Health Maintenance Organization (HMO)		
Individual Employee	2020-21	Buy-up*	Buy-up*
and Dependent Coverage	2021-22	Buy-up*	Buy-up*
	2022-23	Buy-up*	Buy-up*
c.	Preferred Provider Organization (PPO)		
Individual Employee	2020-21	Buy-up*	Buy-up*
and Dependent Coverage	2021-22	Buy-up*	Buy-up*
	2022-23	Buy-up*	Buy-up*

*NOTE: "Buy-up" is the option to participate in the HMO or PPO by paying the difference between (1) what the Board would have paid in premium or premium equivalent plus the applicable Board payment to offset the deductible amount for the HDHP and (2) the cost of participating in the HMO or PPO.

2. Additional Plan Information

a. High Deductible Health Plan (HDHP)

- Participation is mandatory for new hires, and teachers participating in the HDHP must remain in the HDHP.
- Prescription co-pays (\$5/\$30/\$45) apply after the deductible is satisfied. Mail Prescription co-pays are twice the amount of retail.
- The deductibles shall be \$2,000/\$4,000, and employees will be enrolled in a Health Savings Account (HSA).
- The Board contribution to the deductible is 50%.
- The Board's contribution to the deductible shall be made 50% on the first pay date in July and 50% on the first pay date in January.

b. Health Maintenance Organization (HMO)

- There is no annual deductible for the individual and their families as long as they stay in the HMO Network.
- This Plan has no lifetime maximum if services are provided in Network. Out-of-the-HMO Network, the individual has total responsibility for medical expenses, except in an emergency.

c. Preferred Provider Organization (PPO-In Network)

- There is no annual deductible cost to the individual, no family deductible, and no co-insurance costs for those expenses incurred within the Network of doctors and hospitals. This Plan includes an unlimited lifetime maximum.

d. Preferred Provider Organization (PPO-Out-of-Network)

- The annual deductible for out-of-network is **\$500** individual/**\$1,000** individual plus one/**\$1,500** family,
- 80% / 20% co-insurance on a calendar year basis,
- After the insured has paid **\$1,500** individual/**\$3,000** individual plus one/ **\$4,500** family in benefit payments including deductible, covered expenses are paid 100%.

e. Plan design co-pays in PPO and HMO are as follows:

Co-Pay	2020-2021	2021-2022	2022-2023
	Year 1	Year 2	Year 3
<i>Providers</i>			
Office Visit	\$30	\$30	\$30
Specialist	40	40	40
Emergency Room	125	125	125
Urgent Care	75	75	75
Inpatient Hospital	250	250	250
Outpatient	250	250	250
High End Imaging	75/375	75/375	75/375
<i>Prescription</i>			
• Retail	\$10/25/40	\$10/25/40	\$10/25/40
• Mail Order	20/50/80	20/50/80	20/50/80
• Maximum Out-of-Pocket (MOOP)	Unlimited	Unlimited	Unlimited
• Duration (Retail/Mail Order)	30/90 days	30/90 days	30/90 days
• Edits	* See Note	* See Note	* See Note

***NOTE:** (1) generic substitution with a “dispensed as written” (DAW) provider override for brand drugs, (2) mandatory specialty drugs dispensed through Accredo specialty pharmacy.

3. Prescription Drug Benefits

Prescription Drug Benefits for all three (3) plans are detailed in the chart above and in the summary of benefits in Exhibit IX. The prescription drug benefit includes the following “edits” (managed care): (1) generic substitution with a “dispensed as written” (DAW) provider override for a brand name drug, and (2) mandatory specialty drugs dispensed through Accredo mail order specialty pharmacy. Specialty medications are used to treat complex medical conditions, are typically injected, and may need special handling.

4. Health Benefits Programs

Complete details on each plan will be provided to the teachers on the district website. From the “Human Resources” page, SEA members should click on “Employee Benefits” and then “Medical Insurance.” A summary of benefits coverage is available for all plans; these documents are updated annually by the insurance carrier. Plan summaries of benefits and the most recent cost comparison between plans are included as Exhibit IX in this contract.

5. Open Enrollment Period

A regular, annual enrollment will occur each year for teachers, active, retired, and those on Board approved guaranteed leave of absence, to change or renew their choices of all Insurance Plan Options.

6. Retired Teachers

Upon retirement, teachers will be eligible to participate at their own expense in the health insurance programs in place for active employees in accordance with and subject to the limitations under statute.

C. Dental

The Board will provide Dental Insurance (preventive services, general services, major services, and orthodontic benefits) on the following cost basis: Qualifying individuals may purchase individual and/or dependent coverage on a Board – teacher shared-cost basis with a maximum annual benefit of \$1500 per individual for the duration of this agreement. (Premium cost sharing amounts are same as for HDHP health benefits)

A summary of Dental Benefits is included as Exhibit X in this contract.

D. Part-time Employee Premium Contribution

The employee contribution towards the annual cost of health insurance for part-time employees who are employed at least half-time (.5) is the percentage they are employed. For example, a teacher who is employed as a half-time (.5) teacher will pay 50% of their health insurance premium, with the Board paying 50%. Teachers who are employees less than a .5 FTE (full time equivalent) are not eligible to receive health insurance benefits.

E. Death Benefits

If a teacher dies while employed by the Simsbury Board of Education, the health insurance for the deceased teacher's dependent(s) will remain in force for 24 weeks.

Additional extension rights will be available to eligible dependents at their expense at the current group rate as provided by applicable law.

F. Long-Term Disability Income Plan

A long-term disability income plan is available on a 50% / 50% Board-teacher shared-cost basis. The disability benefit is \$5,000 per month or a maximum of 60% of the teacher's salary whichever is less.

G. Flexible Spending Arrangement (FSA) / Section 125 Program

The Board of Education agrees to maintain an optional Section 125 Program with a General Purpose Medical FSA, a Limited Purpose Medical FSA and a Dependent Care FSA. The purpose of these Section 125 plans is to enable eligible teachers to divert a portion of their gross salaries, prior to reduction for federal income or social security taxes for "Medical Care" Expenses and "Dependent Care" Expenses, and have the following conditions:

General Purpose and Limited Purpose Medical FSAs: Both the General Purpose Medical FSA and Limited Purpose Medical FSA have a minimum of \$100 to a maximum of \$2,750 per plan year (in 2020) and may be adjusted year by year by federal law. The General Purpose Medical FSA is only available to those members that are not enrolled in a HDHP/HSA plan and the qualified expenses are for "Medical Care" expenses as defined by the IRS Section 213 (d) code. The Limited Purpose Medical FSA is for members enrolled in

the HDHP/HSA. The eligible expenses with the Limited Purpose Medical FSA are limited first to the following expenses: services or treatments for dental care and/or vision care.

Dependent Care FSA: The Dependent Care FSA has a minimum of \$500 to a maximum of \$5,000 per plan year for dependents (in 2020) and may be adjusted year by year by federal law. The dependent care contributions go into an account from which, during the course of the plan year, the member can be reimbursed for their covered dependent care expenses per the guidelines of the plan document.

It is understood that the plan administrator monitoring the program might have a minimum participation requirement. Those employees electing to participate are responsible for the annual fee.

H. Filing and Content of Insurance Plan

Complete details of all insurance plans are filed in the office of the Board of Education and may be examined there during regular office hours. The actual terms and conditions of these plans shall determine the benefits for which employees may be eligible, and this Agreement will not be construed to alter these plans or grant additional benefits not provided in them.

I. Alternate Programs

The Board reserves the right to change insurance carriers or third-party administrators for the benefits under this Article provided that such benefits are equal to the current benefits. In addition, disruption (by physician) shall be no greater than 10%. The Board will notify the Association in writing at least sixty (60) days prior to any change of carriers or third-party administrators. The Association shall have up to thirty (30) days following such notification to review such change and respond in writing whether it approves or does not approve the change. If the Association does not approve the proposed change, with its notification to the Board it shall submit a written statement detailing the reasons for such disapproval. Failure to submit such a statement to the Board within the thirty (30) day period shall be deemed approval of such change. Should the Association file such written statement of disapproval in a timely manner, the Board shall respond within thirty (30) days. The Board reserves the right to proceed with the change as proposed, and the Association reserves the right to seek review of that action through the grievance procedure. Any such grievance shall be filed at the arbitration level, pursuant to the expedited arbitration procedures of the American Arbitration Association, as such procedures may be amended by mutual agreement of the parties.

ARTICLE IV

WORKING DAYS

The work year shall consist of one hundred eighty-five (185) workdays as outlined below.

There shall be one hundred and eighty (180) student contact days during the duration of the contract. There shall be two days (2) to be scheduled prior to the first student day, which shall be used for administratively determined meetings as authorized by the Superintendent or designee in each year of the contract. There shall be two additional professional development days to be held during the school year as determined by the Superintendent or designee. These days will be identified with sufficient advance notice through the school calendar. There shall be one (1) workday following the last student contact day.

If the teachers' workday is lengthened beyond the hours in effect during the 2016-17 school year, the Board of Education shall negotiate compensation in accordance with the provisions of impact bargaining. Teachers at the middle school and high school levels shall attend two programs approved by administration that are designed to increase parent involvement. Such programs will occur outside of the regular work day or work year (for example, Open House Programs and Orientation Programs as scheduled by the Board).

The person or persons (no more than two) serving in the capacity of President of the Simsbury Education Association shall be exempt from any and all school coverage duties normally assigned to a teacher for the duration of the school year(s) that he/she is elected. This includes recess duty, bus duty, lunch duty, cafeteria duty, hall monitoring.

ARTICLE V

ABSENCES

A. With Salary Continuation

Certified personnel covered by this Agreement shall be granted fifteen (15) days per year for personal illness, quarantine, injury, or disability related to pregnancy, cumulative to one hundred eighty-five (185) days. "Personal illness" may be defined for up to ten (10) days per year to include illness or death in the immediate family of an absent employee covered by this Agreement.

When the absence of a person employed under this Agreement is covered by Workers' Compensation, said employee shall also be entitled to partial sick leave payment on a pro-rata basis, but total compensation shall not exceed the employee's regular rate of pay.

The deduction of days from the accumulated sick leave of the employees receiving benefits under Workers' Compensation and partial sick leave payment simultaneously shall be on a pro-rata, partial day basis.

Said deduction of partial days from the employee's accumulated sick leave per day of absence under Workers' Compensation shall be equivalent in percentage to that part of the employee's normal salary not covered by Workers' Compensation payments through the term of coverage by Workers' Compensation.

Provisions for absence due to assault are provided for under 10-236, a, b, and c of the General Statutes.

1. Other Personal Absences

The Superintendent shall grant certified personnel covered by this Agreement, personal days without salary deduction for:

- a. Religious days (not to exceed three [3] a year),
- b. Sickness or death of close relatives or a member of the immediate household,
- c. Attendance in court or for other legal reasons beyond the employee's control,
- d. Personal reasons subject to approval by the Superintendent of Schools.

As a general procedure, personal days shall be limited to five (5) days in any school year. Exceptions shall be made by the Superintendent, based upon emergency situations.

Personal day requests, with the exception of emergencies or conditions beyond one's control, must be forwarded to the Superintendent of Schools seventy-two (72) hours prior to the desired day.

2. Jury Duty

Certified personnel covered by this Agreement who are called to jury duty shall be granted the difference between jury pay and their regular salary. Time lost for jury duty shall not be charged against accumulated sick leave.

3. Absence for Professional Reasons

Absence may be allowed for visiting days, attendance at conventions, participation in school evaluations, educational conferences and/or other forms of professional improvement, without pay deduction, if approval is granted by the Superintendent of Schools.

4. Absence in Excess of Allowance

In the event of absence in excess of days allowed, salary deductions shall be made by the Board at a per diem rate of the annual salary for each such day of absence, based on the work year as defined in this Agreement.

5. Sick Leave of Absence

In the event of absence due to illness or physical disability of tenure employees beyond the granted sick leave accrual, the Board shall make requisite payments to maintain in full force said teacher's protection under the current insurance plan for a period not to exceed twelve (12) months.

6. Adoption of a Child

A teacher who adopts a child under mitigating or unusual circumstances may be granted up to fifteen (15) days of personal/sick time by the Superintendent or designee.

B. Leave

1. Without Salary Continuation

Absence for professional improvement may be granted by the Board upon the recommendation of the Superintendent. The teacher seeking leave shall be assured of consideration for any unfilled position for which he/she holds certification and for which he/she is qualified at the termination of the leave. Leaves, for reasons other than professional improvement or sick leave of absence, may be granted at the discretion of the Board of Education. All such leaves shall terminate 5 calendar days before the first working day of the school year following the granting of the leave, with the exception of leaves granted between March 1 and the first working day of the next school year which shall terminate five calendar days before the first working day of the subsequent school year. As in the case of the leave granted for professional improvement, consideration shall be given by the administration to return the teacher to his/her former position or an equivalent one.

2. Sabbatical Leave

Teachers with at least six (6) years of service in the Simsbury Schools may devote one (1) year to additional training upon approval of the Board of Education, where such training would be for the benefit of the Simsbury school system and the teacher, and where the teacher could be temporarily replaced without serious dislocation to the school system.

The Board of Education shall pay up to 100% of salary to the individual on leave in an amount it shall specify if such leave is granted.

Application for sabbatical leave and the initial proposal must be received by the Superintendent of Schools or his/her designee by the last school day in September for a sabbatical leave requested for the succeeding year. Announcement of sabbatical application procedures shall be provided by no later than the previous June 1. The number of certified teachers on sabbatical leave during any one year shall not exceed one percent of the total number of certified teachers covered by this Agreement.

Teachers granted such leaves shall be required to return to the Simsbury school system for three (3) years, with one-third (1/3) of the amount of salary provided being forgiven for each year of additional service. In the event that a teacher should not return to the Simsbury Public Schools following the sabbatical leave, or complete three (3) years of service, any unforgiven salary must be returned to the Simsbury Public Schools within thirty (30) calendar days. In the event of death or disability which renders the teacher to be incapable of performing his/her duties, the Board of Education shall release him/her and his/her estate from these obligations. (See Exhibit VII).

3. Pregnancy Related Disability and Childrearing Leave

Pregnancy related disability shall be treated as a temporary disability under the conditions as set forth in Article V, paragraph A.1., above. Leaves of absence for childrearing shall be granted under the conditions as set forth in Article V, paragraph B.1, above.

ARTICLE VI

TEACHER ASSIGNMENTS, TRANSFERS, AND VACANCIES

A. Assignments

1. Under normal circumstances, teachers will be notified in writing of the schools to which they will be assigned for the coming year, if different; the grades and/or subjects that they will teach if different; by June 1. If such assignments must be changed thereafter, the affected teacher will be notified as soon as practicable.

2. The positions listed in Exhibit V, Section K are appointive positions lasting for a period of no more than one school year. After three continuous years in the same position, reappointment to these positions will be automatic unless there is documented evidence justifying removal of a person from such position. All persons who apply for a vacancy in such a position, will be considered, provided the applicant applies in writing and meets the posted qualifications. However, the appointing authority, Superintendent or his/her designee, shall not be limited in making appointment to those expressing written interest.

B. Transfer

1. The transfer of teachers within the school system is the responsibility of the Superintendent of Schools. When the Superintendent determines that an involuntary transfer is required, the Superintendent or his/her designee shall meet with the affected teacher(s) and a representative of the Association to discuss the need for the transfer.

2. Teachers who request a transfer for the next school year shall file a written statement of such desire with the Superintendent.

C. Vacancies

1. All job vacancies shall be posted for five (5) days prior to filling the position, and the Board reserves the right to post any position externally. Notice of vacancies shall be distributed electronically to certified staff.

2. Should the Superintendent grant a request to transfer to a vacancy, the Superintendent reserves the right to defer transfer until the beginning of the next school year to avoid disruption of the educational process.

ARTICLE VII

LUNCH PERIODS AND PREPARATION TIME

The Association and the Board recognize the importance of teacher preparation time, both individual and collaborative, to maximize instructional effectiveness with and for students. Both parties recognize that schools remain dynamic environments and requests requiring preparation time to be utilized in a specific way are sometimes inevitable. However, administrators shall refrain from making last minute administrative requests affecting scheduled preparation time when reasonably possible.

1. Lunch Periods

Each teacher shall have a minimum of twenty-five (25) minutes of duty-free lunch time. Teachers will not be required to attend administrative meetings or other activities during their lunch period.

2. Elementary Preparation Time

All elementary school teachers (grades K-6) shall have, in addition to their lunch periods, a minimum of two hundred ten (210) minutes of preparation time per week, to be used for planning and/or conferences.

3. Secondary Preparation Time

Secondary teachers (Grades 7-12) shall have, in addition to a duty free lunch, a minimum of one preparation/conference period of time per day totaling at least two hundred, ten (210) minutes of preparation time per week, to be used for planning and/or conferences.

ARTICLE VIII

GRIEVANCE PROCEDURE

A. Purpose

1. The purpose of this grievance procedure is to settle equitably and at the lowest possible administrative level issues which arise from time to time concerning salaries and other working conditions of the professionals covered by this Agreement.
2. The Board and the Association agree that these proceedings shall be kept as informal and confidential as may be appropriate at any and all levels of the procedure.
3. Nothing herein contained shall be construed as limiting the right of any teacher having a problem to discuss the matter informally with the appropriate member of the administration or with any representative of the Association at any time.

B. Definitions

1. "Grievance"
 - a. A "contractual grievance" is a complaint by a teacher or group of teachers or the Association that, as to him/her/them, there has been a violation, misrepresentation, or misapplication of the provisions of this Agreement.
 - b. A "non-contractual grievance" is a complaint other than a contractual grievance which (i) an individual teacher or group of teachers or the Association may assert relative to (1) Board Policies and Administrative Regulations, or (2) administrative decisions made pursuant to (1) above as applied to the aggrieved person(s), or (ii) an individual teacher or group of teachers or the Association may assert relative to a claim of failure to follow the established procedures in the evaluation plan.
2. An "aggrieved person(s)" is the certified professional person or group of persons or the Association making the grievance.
3. "Days" as used in this procedure shall mean, unless otherwise indicated, working school days.

C. Time Limits

1. No grievance, either contractual or non-contractual, shall be filed unless such filing by the aggrieved person(s) takes place within twenty (20) days of the act or occurrence constituting the grievance, or as of the time when the aggrieved person(s) reasonably should have known of the act or occurrence leading to the grievance, whichever is later. Unless such timely filing takes place, such matter shall thereafter not be considered a grievance.
2. In the case of an alleged continuing violation of the contract, the time limits begin to run from the last violation.

D. Procedure with Respect to Non-Contractual Grievances

1. If any professional staff member feels that he/she has a grievance to discuss, he/she should first take it through the Informal Procedure, discussed below, in Section E.
2. If the grievance cannot be resolved through said Informal Procedure, then it may only be taken through Levels One and Two, discussed below in Section G, except for grievances related to Board Policy, which may be heard at Level Three.

E. Informal Procedure

1. If an aggrieved person believes that he/she has a grievance, such person should first discuss the matter with the school principal or other appropriate administrator in an effort to resolve the matter.
2. Should the aggrieved person wish, he/she may contact the Association President for help in resolving the problem at this level. This procedure shall be referred to as "pre-grievance" and it is hoped that all problems can be resolved at this level.
3. All decisions by supervisors or administrators at this level of the informal procedure shall be reported in writing to the Superintendent of Schools. Copies of the decisions shall be forwarded to the Chairperson of the Professional Rights and Responsibilities Committee.

F. Content of Written Grievance

The written grievance at Levels One, Two, Three and Four shall contain:

1. A citation of the specific section or sections of the article or articles of this Agreement, or the Board Policies and Administrative Regulations or administrative regulations promulgated thereunder, allegedly mis-interpreted, misapplied, and/or violated.
2. The date of such alleged misinterpretations, misapplications, and/or violations.
3. The signature of the aggrieved person.
4. Statement of the facts giving rise to such grievance

G. Formal Procedure

1. **Level One: School Principal**

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at the informal level, or if no decision at the informal level is rendered within five (5) days after the institution of the informal procedure, he/she may submit his/her grievance in writing as a formal grievance to the proper school principal or other such administrator as the situation shall dictate within ten (10) days after the grievance was first presented at the informal procedure level.
- b. The school principal (or other administrator) shall render a written decision within five (5) days after the initiation of the Level One proceedings to the aggrieved party, and a copy shall be sent to the Chairperson of the Association's Professional Rights and Responsibilities Committee.

2. **Level Two: Superintendent of Schools**

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at Level One, or if no decision at Level One is rendered within five (5) days of the institution of Level One procedures, he/she may appeal to the Superintendent of Schools within five (5) days after the decision at Level One or within ten (10) days after the initiation of the Level One procedures, whichever is sooner.

- b. Within ten (10) days after the Superintendent's receipt of said written appeal, the Superintendent shall hold a hearing with the aggrieved person and representatives of the Association (if involved). A record shall be kept of the hearing by the Superintendent or his/her designee and by the Association.
- c. The Superintendent shall render a written decision to the aggrieved person, with a copy to the Association, within five (5) days after the hearing at Level Two.

3. Level Three: Board of Education

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at Level Two, or if no decision at Level Two is rendered within five (5) days after the hearing at Level Two, he/she may file a written request for appeal with the Association's Professional Rights and Responsibilities Committee within five (5) days after the decision at Level Two or within fifteen (15) days after the initiation of the Level Two procedure, whichever is sooner.
- b. Such an appeal to the Board of Education may only be brought by the Association's Professional Rights and Responsibilities Committee or its designee. Notice of such an appeal shall be given within five (5) days of the Association's receipt of the request for Level Three procedures from the aggrieved person.
- c. Within ten (10) days after the receipt of said notice of appeal from the Association, the Board shall hold a hearing with the aggrieved person and representative(s) of the Association. A record shall be kept of the hearing by the Board and by the Association.
- d. The Chairman of the Board of Education shall render a written decision to the aggrieved person, with a copy to the Association, within five (5) days following the hearing at Level Three.

4. Level Four: Binding Arbitration (contractual grievances only)

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at Level Three, or if no decision at Level Three is rendered within five (5) days after the hearing at Level Three, he/she may file a request for binding arbitration with the Association's Professional Rights and Responsibilities Committee of any alleged violation, misrepresentation or misapplication of the provisions of this Agreement within five (5) days after the decision at Level Three or fifteen (15) days after the initiation of the Level Three procedure, whichever is sooner.
- b. The Association may submit the grievance to arbitration by written notice to the Chairman of the Board of Education (or other duly authorized representative of said Board) and to the American Arbitration Association. Notice of such submission shall be given within five (5) days of the Association's receipt of the request for arbitration from the aggrieved person.
- c. The arbitrator shall be selected from a list submitted by the American Arbitration Association.
- d. The parties shall be bound by the rules of the American Arbitration Association.

- e. The arbitrator shall hear and decide only one grievance in each case. He/she shall be bound by and must comply with all terms of this Agreement. Furthermore, said arbitrator shall not have the power nor the authority to add to, delete from, or modify in any way the provisions of the Agreement, nor to require the commission of an act prohibited by statute.
- f. The decision of the arbitrator shall be final and binding on both parties.
- g. The expense of such arbitrator shall be borne equally by both the Association and the Board of Education.

H. Miscellaneous

- 1. If in the judgment of the Association a grievance affects a group or class of professionals covered under this Agreement, or involves a matter of precedent or policy, the Association may process such a grievance through levels of the grievance procedure.
- 2. Decisions at all levels of the grievance procedure shall be in writing setting forth the decision and reasons therefor.
- 3. All documents, communications, and records dealing with the processing of a grievance shall be filed separately from the personnel files of the participants.
- 4. When a grievance is submitted by an individual teacher without the Association involvement at Levels One and Two, and the Principal and/or the Superintendent shall notify the President of the Association that the grievance exists, stating the aggrieved person's name, date of filing, and the nature of the grievance.
- 5. The number of days indicated at each level of the procedure should be considered as maximum and every effort should be made to expedite the process. The time limits may be extended, however, by mutual agreement in writing. Permission for such extension of time shall not be unreasonably withheld by either party.
- 6. In the event that a grievance is filed on or after June 1, every effort shall be made to resolve the grievance prior to the end of the school year or as soon thereafter as is practicable.
- 7. Failure at any level in the procedure to communicate the decision on a grievance within the specified time limits shall entitle the aggrieved to proceed to the next step. Failure at any level in this procedure to appeal a grievance decision within the specified time limits shall be deemed to be acceptance of the decision rendered at that level.
- 8. No reprisals of any kind shall be taken by either party or by any member of the administration or its representatives against any party or interest, or any other member of the Association by reason of his/her participation in the grievance procedure.
- 9. The formal or informal procedures above shall commence at either the levels specifically referred to herein, or at the level at which the relevant decision was made.

ARTICLE IX

INSTRUCTIONAL ACCOUNTABILITY

A. Personnel File

No material which is negative in nature originating after original employment shall be placed in a teacher's personnel file unless the teacher has been notified and has had an opportunity to sign, date, and review the material. A teacher may submit a written notation regarding any material in his/her file, and the same shall be attached to the file copy of the material in question. When the teacher is asked to sign material placed in his/her file, such signature shall be understood to indicate his/her awareness of the material, but in no instance shall said signature be interpreted to mean agreement with the content of the material. No anonymous complaint shall be placed in any teacher's file.

B. Just Cause

No teacher shall be disciplined, i.e. reprimanded in writing, suspended or denied an increment without just cause.

ARTICLE X

STAFF REDUCTION AND RECALL

A. Reduction

The Association shall be notified of the need for staff reduction before any determination shall be made of the individual teachers to be dropped. Determination of those who are to be released is to be in the following order:

1. Tenure and Certification Status (in the following order)

- a. Volunteer retirements, transfers and resignations
- b. Non-certified, non-tenured teachers, including holders of durational area shortage permits
- c. Certified, non-tenured teachers
- d. Certified, tenured teachers

2. Other Criteria

In the event that tenure and certification status is found to be not definitive enough, the following criteria (in the following order) shall be used within each level (of tenure and certification status):

- a. Total contractual experience in the system (starting with the date the contract was signed)
- b. Experience in position (elementary or secondary, not grade or subject taught)
- c. Total experience in the position in any system
- d. Total experience in any system
- e. Degree status
- f. Additional course credit

3. The criteria in (1) and (2) above shall govern all staff reductions except that in unusual and exceptional circumstances, the Superintendent, for just cause, may deviate from the criteria specified in 2. a-f inclusive, provided that the Superintendent shall have the burden to justify any exception to said criteria.

B. Notification

1. Non-Renewal – Non-Tenured Teachers

Non-tenured teachers whose contracts of employment will not be renewed for the ensuing year will be notified of their non-renewal in accordance with Section 10-151 of the Connecticut General Statutes. This provision is for informational purposes only.

2. Termination – Non-Tenured and Tenured Teachers

Non-tenured and tenured teachers whose contracts of employment are to be terminated will be notified of their termination in accordance with Section 10-151 of the Connecticut General Statutes. This provision is for informational purposes only.

C. Recall Procedure

1. The name of any teacher whose services have been terminated because of the elimination of position or a reduction in staff shall be placed upon a recall list and remain on such list for three (3) years provided such teacher does not refuse an appointment and provided such teacher applies by email addressed to the Director of Personnel, with receipt acknowledged by the Director of Personnel via a return email to the teacher, for the retention of his/her name on said list on or before June 1 of each year subsequent to his/her termination. Such email shall also include a preferred phone number and email address. (A teacher who is terminated from a full-time position does not waive his/her right to remain on the recall list for three (3) years by a refusal to accept an offer of part-time reemployment through recall procedure.)
2. Any teacher on the recall list shall receive, when possible, a telephone call and email at the addresses provided by the teacher at least ten (10) work days prior to the date of reemployment. The teacher shall accept or reject the appointment by return email to the Director of Personnel within three (3) calendar days, with receipt acknowledged by the Director of Personnel via a return email to the teacher. If he/she accepts the appointment, he/she shall receive a written contract prior to the date of reemployment, where possible.
3. Any teacher who changes his/her preferred phone number and/or email address shall notify the Board by email of said change, with receipt acknowledged by the Director of Personnel via a return email to the teacher.
4. Recall shall be based on a reversal of the staff reduction criteria of A.1., and a parallel of the steps in A.2.
5. No new teacher shall be hired in a subject area or grade level until all teachers who were terminated from that subject area or grade level have been recalled or declined the opening.
6. No new teachers shall be hired in a subject area or grade level before teachers who were terminated from other subject areas or grade levels, and possessing the necessary certification are recalled or decline the opening.

In unusual and exceptional circumstances, the Superintendent, for just cause, may deviate from the above criteria provided that the Superintendent shall have the burden to justify the exception.

7. A teacher who has been recalled shall be placed at the top of the list of all teachers whose length of seniority is the same as that of the returning teacher. Should further staff reduction occur, a recalled teacher would then be the last to be released in his/her category of seniority.
8. The temporary separation of a teacher shall not affect any earned sick days.
9. Upon written request, the Association shall be provided with a copy of the current recall list.

ARTICLE XI

AMENDMENTS

Proposals by either party for additions to this Agreement are negotiable at any time.

This agreement may not be modified in whole or in part by the parties except by an instrument in writing duly authorized and executed by both parties.

If any provision or any position of this Agreement is ultimately ruled invalid for any reason by an authority of established and competent legal jurisdiction, the balance and remainder of the Agreement shall remain in full force and effect.

ARTICLE XII

ASSOCIATION SERVICE FEE

A. Deductions

The Simsbury Board of Education agrees to deduct from each member an amount equal to the Association membership dues or any voluntary service fee as authorized in writing and by means of payroll deductions. The amount of the deduction from each paycheck shall be equal to the total Association membership dues or any voluntary service fee divided by the number of paychecks agreed to by the Simsbury Education Association and the Board of Education within 22 payroll dates. The amount of Association membership dues and voluntary service fee shall be certified by the Association to the Board of Education prior to the opening of school each year.

B. Subsequent Employment

Those teachers whose employment commences after the start of the school year shall pay a pro-rated amount equal to the percentage of the remaining school year.

C. Forwarding of Monies

The Board of Education agrees to forward to the Association each month a check for the amount of money deducted during that month. The Board shall include with such check a list of teachers for whom such deductions were made.

D. Lists

No later than the first paycheck in October of each school year, the Board of Education shall provide the Association with a list of all certified employees of the Board of Education and the positions held by said employees. The Board shall notify the Association monthly of any changes in said list.

E. Save Harmless

The Association shall hold the Board harmless against any and all claims, demands, liabilities, lawsuits, attorneys' fees or other costs which may arise out of, or by reason of, actions taken against the Board as a result of the enforcement or administration of this Section.

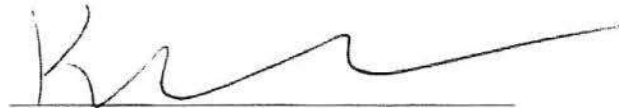
ARTICLE XIII

DURATION

The provisions of this Agreement shall be effective as of July 1, 2020 and shall continue and remain in full force and effect until June 30, 2023, provided that the Board may reopen negotiations over the provisions of Article III if the cost of medical insurance plan offered therein is expected to result in the triggering of an excise tax under The Patient Protection and Affordable Care Act [ACA; P.L. 111-148], as amended, inter alia, by the Consolidated Appropriations Act of 2016 [P.L. 114-113] and/or if there is any material amendment to the ACA or related state or federal law. Reopener negotiations shall be governed by the provisions of Conn. Gen. Stat. Section 10-153f(e), and such negotiations shall be limited to health insurance plan design and funding, premium cost share and/or the introduction of an additional optional health insurance plan.

IN WITNESS WHEREOF, the parties hereunto set their hands and seals this 21st day of April, 2020.

SIMSBURY EDUCATION ASSOCIATION



Kara Maslar, Co-President



Jamie Sepa, Co-President

SIMSBURY BOARD OF EDUCATION



Susan Salina, BOE Chairperson

EXHIBIT I

SIMSBURY TEACHERS' SALARY SCHEDULE

2020 - 2021

Salary Schedule

Step	Bachelor	Masters	6th Year	7th Year
1	48,048	50,914	53,779	57,746
2	49,591	53,449	56,204	60,170
3	51,795	56,534	59,509	63,366
4	54,549	59,839	63,586	67,444
5	57,857	64,138	67,995	73,395
6	61,108	69,924	74,525	79,732
7	68,051	75,709	81,054	86,068
8		81,494	87,584	92,404
9		92,289	99,515	104,408

Inasmuch as no future increment is awarded to teachers beyond the last step of the salary schedule, the Board shall grant a \$725 supermax payment to teachers in each of the 4 years following achievement of the last step and a \$925 supermax payment in the 5th and subsequent years. Scheduled increments shall be granted annually to members of the staff whose work is deemed satisfactory or better in accordance with the school district's evaluation procedure.

The Superintendent shall make recommendations to the Board for the granting or withholding of increments or the equivalent for teachers whose work is deemed unsatisfactory, and the granting or withholding of increments shall be accomplished by Board action.

In no case shall an increment be withheld except on the recommendation of the Superintendent, providing, however, that the Board may grant an increment notwithstanding recommendations by the Superintendent that the same be withheld.

In the event of termination of contract, total earnings shall be based on the actual number of contractual days worked.

EXHIBIT II

SIMSBURY TEACHERS' SALARY SCHEDULE

2021 - 2022

Salary Schedule

Step	Bachelor	Masters	6th Year	7th Year
1	48,288	51,169	54,047	58,035
2	49,839	53,716	56,485	60,471
3	52,054	56,817	59,807	63,683
4	54,822	60,138	63,904	67,781
5	58,146	64,459	68,335	73,762
6	61,414	70,273	74,897	80,130
7	69,242	76,087	81,460	86,499
8		81,902	88,022	92,866
9		93,904	101,256	106,235

Inasmuch as no future increment is awarded to teachers beyond the last step of the salary schedule, the Board shall grant a \$725 supermax payment to teachers in each of the 4 years following achievement of the last step and a \$925 supermax payment in the 5th and subsequent years. Scheduled increments shall be granted annually to members of the staff whose work is deemed satisfactory or better in accordance with the school district's evaluation procedure.

The Superintendent shall make recommendations to the Board for the granting or withholding of increments or the equivalent for teachers, whose work is deemed unsatisfactory, and the granting or withholding of increments shall be accomplished by Board action.

In no case shall an increment be withheld except on the recommendation of the Superintendent, providing, however, that the Board may grant an increment notwithstanding recommendations by the Superintendent that the same be withheld.

In the event of termination of contract, total earnings shall be based on the actual number of contractual days worked.

EXHIBIT III

SIMSBURY TEACHERS' SALARY SCHEDULE

2022 - 2023

Salary Schedule

Step	Bachelor	Masters	6th Year	7th Year
1	48,530	51,425	54,318	58,325
2	50,088	53,985	56,767	60,774
3	52,314	57,101	60,106	64,002
4	55,096	60,439	64,224	68,120
5	58,437	64,781	68,677	74,131
6	61,721	70,625	75,272	80,531
7	70,440	76,468	81,867	86,931
8		82,311	88,462	93,330
9		95,529	103,008	108,073

Inasmuch as no future increment is awarded to teachers beyond the last step of the salary schedule, the Board shall grant a \$725 supermax payment to teachers in each of the 4 years following achievement of the last step and a \$925 supermax payment in the 5th and subsequent years. Scheduled increments shall be granted annually to members of the staff whose work is deemed satisfactory or better in accordance with the school district's evaluation procedure.

The Superintendent shall make recommendations to the Board for the granting or withholding of increments or the equivalent for teachers whose work is deemed unsatisfactory, and the granting or withholding of increments shall be accomplished by Board action.

In no case shall an increment be withheld except on the recommendation of the Superintendent, providing, however, that the Board may grant an increment notwithstanding recommendations by the Superintendent that the same be withheld.

In the event of termination of contract, total earnings shall be based on the actual number of contractual days worked.

EXHIBIT IV

ADVANCEMENT ON SALARY SCHEDULE

SECTION A – MASTER’S SALARY SCHEDULE

- I. The Master’s Salary Schedule includes the categories Master's Degree and Professional Educator Certificate.
 - A. The category Master's Degree means that the individual has been awarded a Master's Degree by a regionally accredited college or university.
 - B. The category Professional Educator Certificate means that the Connecticut State Department of Education has issued the individual a Professional Educator Certificate.
 - C. In order to advance to the Master’s Schedule, a teacher shall earn a Master’s Degree from an accredited institution with prior written approval of the Superintendent of Schools or designee. This requirement will apply beginning with all new teachers hired for the 2000-2001 school year.
- II. Instructional personnel who wish to be placed on the Master’s Salary Schedule must make written application to the Superintendent of Schools by February 1 of a given year for placement on that schedule.
 - A. Personnel who apply for such placement by February 1 and who qualify by the end of the first half of the next school year (ninety-first school day) shall be placed on this schedule as of the ninety-first (91st) day of the school year.
- III. Instructional personnel who have applied for placement on this schedule must file with the Superintendent of Schools, prior to the effective date of such placement, evidence of courses offered to qualify for such placement and completed satisfactorily.
- IV. Credit for any course taken in a foreign college/university or an institution that is not regionally accredited may be determined by the Superintendent of Schools on the basis of his/her own evaluation of the course.

SECTION B - SIXTH YEAR SCHEDULE

- I. The Sixth Year Schedule includes the categories Certificate of Advanced Graduate Study (CAGS) and Master's Degree plus 30.
 - A. The category Certificate of Advanced Graduate Study means that the individual:

1. Holds, or has held, either an Initial Educator, a Provisional, or a Professional Educator Certificate issued by the Bureau of Certification of the Connecticut State Department of Education.
 2. Has been awarded a Certificate of Advanced Graduate Study by a regionally accredited college or university.
- B. In order to advance to the Sixth Year Salary Schedule, a teacher shall earn a Certificate of Advanced Graduate Study (CAGS), or earn 30 graduate credits beyond the Master's Degree, with prior written approval by the Superintendent of Schools or designee.

This requirement will apply to those who fall under the provisions of Section A above, and who were hired commencing with the 2000-2001 school year.

- II. Instructional personnel who wish to be placed on the Sixth Year Schedule must make written application to the Superintendent of Schools by February 1 of a given year for placement on this schedule.
 - A. Personnel who apply for such placement by February 1 and who qualify by the end of the first half of the next school year (ninety-first school day) shall be placed on this schedule as of the ninety-first (91st) day of the school year.
- III. Instructional personnel who have applied for placement on this schedule must file with the Superintendent of Schools, prior to the effective date of such placement, evidence of courses offered to qualify for such placement and completed satisfactorily.
- IV. To qualify for the Master's Degree plus 30 category:
 - A. Only courses within an interval of ten years can be offered for the 30 semester hours beyond the Master's Degree.
 - B. At least 15 of the 30 semester hours must be in general education in addition to the credits offered for the requirements for a Master's Degree or for a Professional Educator Certificate.
 - C. The credits must be earned in a planned program approved by the Superintendent.
 - D. Teachers whose Master's program requires at least 60 credits will be placed on the Sixth Year schedule, effective July 1, 2020.

SECTION C - SEVENTH YEAR SCHEDULE

- I. The Seventh Year Schedule includes the categories Doctor of Philosophy (Ph.D.), Doctor of Education (Ed.D.), Certificate of Advanced Graduate Study (CAGS) plus 30 and Master's Degree plus 60.
 - A. The categories Doctor of Philosophy (Ph.D.) and Doctor of Education (Ed.D.) mean that the individual:

1. Holds, or has held, either an Initial Educator, a Provisional, or a Professional Educator Certificate issued by the Bureau of Certification of the Connecticut State Department of Education.
2. Has been awarded either an earned Doctor of Philosophy Degree or Doctor of Education Degree, by a regionally accredited college or university.

B. The category Certificate of Advanced Graduate Study plus 30 means that the individual:

1. Holds, or has held, either an Initial Educator, a Provisional, or a Professional Educator Certificate issued by the Bureau of Certification of the Connecticut State Department of Education.
2. Has been awarded a Certificate of Advanced Graduate Study by a regionally accredited college or university.
3. Has satisfactorily completed 30 semester hours of study beyond the CAGS in a planned program approved by the Superintendent.
4. Has complied with the requirements listed below in parts II, III, and IV.

C. The category Master's Degree plus 60 means that the individual:

1. Holds, or has held, either an Initial Educator, a Provisional, or a Professional Educator Certificate issued by the Bureau of Certification of the State Department of Education.
2. Has met all the requirements of the Master's Degree plus 30 as detailed in SECTION B, Sub-section B.
3. Has satisfactorily completed 30 semester hours of study beyond the Master's Degree plus 30 in a planned program approved by the Superintendent.
4. Has complied with the requirements listed below in Parts II, III, and IV.

II. Instructional personnel who wish to be placed on the Seventh Year Schedule must make written application to the Superintendent of Schools by February 1 of a given year for placement on this schedule.

A. Personnel who apply for such placement by February 1 and who qualify by the end of the first half of the next school year (ninety-first school day) shall be placed on this schedule as of the ninety-first (91st) day of the school year.

III. Instructional personnel who have applied for placement on this schedule must file with the Superintendent of Schools, prior to the effective date of such placement, evidence of courses offered to qualify for such placement and completed satisfactorily.

IV. To qualify for the Certificate of Advanced Graduate Study plus 30 category, or for the Master's Degree plus 60 category:

- A. Only courses within an interval of ten years can be offered for the 30 semester hours beyond the CAGS or for the 30 semester hours beyond the Master's Degree plus 30.
- B. At least 15 of the 30 semester hours must be in general education in addition to the credits offered for the requirements for the Sixth Year Schedule.

SECTION D - IMPLEMENTATION

The requirement in Section B and Section C that credits be earned in a planned program approved by the Superintendent shall not apply where a teacher has earned any of the required number of credits prior to July 1, 2005.

EXHIBIT V

ADDITIONAL REMUNERATION

A. Military Service Increment

Veterans of the Armed Services are to receive one (1) year of teaching experience credit for each year of service, up to a maximum of two (2) years; half a year of service (180 days) shall be counted as one (1) year. Simsbury teachers on a military leave of absence shall be granted teaching credit for military service to a maximum of two (2) years, unless otherwise specified by law.

B. Mentor Teachers

Teachers who have successfully completed mentor training through an approved Connecticut State Department of Education program and who demonstrate exemplary teaching as reflected in the established selection process will be assigned as mentor teachers as needed and when so assigned shall be awarded a stipend in year one and year two for mentoring a new teacher and, if necessary, year three of mentoring the same teacher in the Teacher Education and Mentoring (TEAM) program (see Exhibit V, item K).

Additionally, mentors who have completed appropriate training and are appointed to serve as master mentors (appointments shall be made on an annual basis) shall be awarded an annual stipend (see Exhibit V, item K).

C. National Board Certification (National Board for Professional Teaching Standards)

Teachers who are certified by the National Board for Professional Teaching Standards and agree to conduct in-service/staff training workshops or serve as a mentor for other teachers seeking such certification as directed by the Superintendent or designee will receive \$1000 annually while serving in that capacity.

D. Long-Term Substitute Coverage

Contracted teachers who are certified in the content area and who accept a long-term substitute coverage assignment for a secondary teacher which is in addition to their regular assignment as authorized by the Director of Personnel will be compensated at a rate of \$70 per class for the duration of the assignment. Long-term is defined as coverage which will exceed ten (10) consecutive work days.

E. Retirement Benefits

1. Advanced Longevity of Retirement

If requested in writing prior to the close of the school year (June 30) and three full years before retirement, a teacher eligible for retirement under statute shall submit his/her irrevocable resignation for purposes of retirement (effective three years thereafter) and receive an added annual stipend for each of the last three years of service subject to the following schedule and conditions:

<u>Years of Service in Simsbury upon Retirement</u>	<u>Stipend</u>
15 years	\$ 600
20 years	\$ 1750
30 years	\$ 2900

If a teacher achieves a new level during the period before his/her retirement is effective (e.g. achieves 20 years of service two years after providing notification of retirement), he/she shall receive a retroactive adjustment reflecting payment for the level achieved for each of the three years before retirement. In extraordinary circumstances, such resignation may be withdrawn by mutual agreement between the teacher and the Superintendent or his/her designee.

- a. Teachers will have the option of having the stipend listed in Section I divided over twenty-two or twenty-seven payrolls in each of the three years prior to retirement.

2. Health Insurance Benefits

The Board will provide, up to a maximum of 84 months, to teachers who participate in the longevity retirement programs and who remain enrolled in our group health insurance plan, from the date of retirement to age 65, the following amounts toward their health insurance premium:

<u>Years of Service In Simsbury</u>	<u>Amount Toward Premium</u>
15 years	\$ 600
20 years	\$ 800
30 years	\$ 900

If a teacher achieves a new level during the period before his/her retirement is effective (e.g., achieves 20 years of service two years after providing notification of retirement), he/she shall receive a retroactive adjustment reflecting payment for the level achieved for each of the three years before retirement.

A teacher eligible for retirement under statute but not participating in the longevity retirement program shall be eligible for these health insurance benefits if a written statement from a medical doctor indicates that the individual can no longer function as a teacher and should retire.

3. Severance Retirement

Teachers not participating in the longevity retirement program shall be eligible for severance benefits as follows:

<u>Years of Service in Simsbury upon Retirement</u>	<u>Stipend</u>
15 years	\$ 900
20 years	\$ 1200
30 years	\$ 1600

F. Reimbursement for Advanced Study:

1. Sixth Year and Seventh Year Program of Studies

Certified staff members who are on, or above, the Master's Year Schedule, will be granted a 50% tuition reimbursement for advanced study, to a maximum allowance of \$1000 per fiscal year, provided that prior approval for the study has been granted by the Superintendent of Schools, and that a certificate of satisfactory completion of course work has been submitted to document the request for reimbursement. Credit hours in excess of six (6) per fall or spring semester must be granted by the Superintendent of Schools.

2. Advanced Study Beyond Seventh Year

Certified staff members who are on the Seventh Year Schedule will be granted reimbursement for advanced study and professional activities such as institutes, seminars and courses up to \$1,000 per year subject to the prior approval of the Superintendent of Schools.

G. Professional Employment:

When school is not in session and if a member of the certified staff is to be employed by the Board in a professional capacity, that person shall be compensated at a rate of \$42/hour for the 2020-2021 year; \$42/hour for the 2021-2022 year; and \$43/hour for the 2022-2023 year, based on an eight (8) hour work day.

H. Part-time Teacher Compensation

Teachers who teach less than full-time will be compensated in the categories of supermax and longevity on a pro-rated basis according to their percentage of teaching time.

I. Clarification of Interim Teacher

An "interim teacher" is a temporary employee hired to replace a member of the bargaining unit on leave employed under the following conditions:

1. Said interim teacher must be certified for the teaching assignment.
2. Said interim teacher must serve a minimum of forty (40) consecutive days in the same assignment.

3. Said interim teacher shall be paid as follows:

- Starting with the forty-first (41st) day, BA track, Step 1.
- Starting with the ninety-first (91st) day, at the step and track appropriate to his/her experience.

When the Board anticipates that an interim assignment will last more than ninety days, it may place the interim teacher on the step and track appropriate to his/her experience before the ninety-first (91st) day.

4. Other conditions of employment are as follows:

- The interim teacher shall earn sick leave at the rate of 1.5 days per month of employment.
- The interim teacher will not earn seniority credit or be placed on a recall list after the assignment is completed.
- Starting with the ninety-first (91st) day in the same assignment, the interim teacher shall be eligible and is invited to join the Association.

J. Extra Compensation for Extra Duties

POSITION	2020-21	2021-22	2022-23
Coordinators			
Family and Consumer Science, 7-12	\$5,248	\$5,340	\$5,434
Tech Ed/Project Lead the Way, 7-12	\$5,248	\$5,340	\$5,434
Special Services, 9-12	\$3,315	\$3,373	\$3,432
Library Media Services, K-12	\$5,248	\$5,340	\$5,434
School Psychologist, K-12	\$1,933	\$1,967	\$2,002
Guidance, 7-8	\$1,933	\$1,967	\$2,002
Phys. Ed., 7-8	\$1,933	\$1,967	\$2,002
Music 7-8	\$1,933	\$1,967	\$2,002
Team Leader, 7-8	\$1,933	\$1,967	\$2,002
Unified Arts Team Leader	\$968	\$985	\$1,002
Elementary Writing/Social Studies Coordinator	\$6,632	\$6,748	\$6,866
Elementary Math/Science Coordinator	\$6,632	\$6,748	\$6,866
Elementary Technology Resource	\$6,632	\$6,748	\$6,866
Building Coordinator (4 elementary)	\$3,315	\$3,373	\$3,432
Homebound Tutor Coordinator, 7-8	\$1,113	\$1,133	\$1,152
Homebound Tutor Coordinator, 9-12	\$2,225	\$2,264	\$2,304
Department Supervisors			
Art, K-12	\$8,911	\$9,067	\$9,226
Career & Technology Education, 9-12	\$8,911	\$9,067	\$9,226
English, 7-8	\$8,911	\$9,067	\$9,226
English, 9-12	\$8,911	\$9,067	\$9,226
World Language, 6-8	\$8,911	\$9,067	\$9,226
World Language, 9-12	\$8,911	\$9,067	\$9,226
Guidance, 7-12	\$8,911	\$9,067	\$9,226
Mathematics, 7-8	\$8,911	\$9,067	\$9,226
Mathematics, 9-12	\$8,911	\$9,067	\$9,226
Music, K-12	\$8,911	\$9,067	\$9,226
PE/Health, K-12	\$8,911	\$9,067	\$9,226
Science, 7-8	\$8,911	\$9,067	\$9,226
Science, 9-12	\$8,911	\$9,067	\$9,226
Social Studies, 7-8	\$8,911	\$9,067	\$9,226
Social Studies, 9-12	\$8,911	\$9,067	\$9,226
Special Services, 7-8	\$8,911	\$9,067	\$9,226
Special Services, 9-12	\$8,911	\$9,067	\$9,226
Supervisor of Related Svces, PK-12	\$8,911	\$9,067	\$9,226
Supervisor, Preschool	\$8,911	\$9,067	\$9,226
Supervisor, FVTA	\$4,455	\$4,533	\$4,612
Supervisor, Pathways	\$4,455	\$4,533	\$4,612

Miscellaneous					
Math Olympiads - Elementary (5)		\$557	\$566	\$576	
TEAM Mentor - Year 1		\$557	\$566	\$576	
TEAM Mentor - Year 2		\$890	\$906	\$922	
Master Mentor		\$1,335	\$1,358	\$1,382	
Music Festival Chaperones		\$105	\$107	\$109	
Group I					
SHS Winter Musical - Director		\$4,586	\$4,666	\$4,748	
SHS Winter Musical-Vocal Director		\$2,973	\$3,025	\$3,078	
SHS Pinnacle Advisor* (2)		\$2,973	\$3,025	\$3,078	
SHS Spring Play Director		\$2,973	\$3,025	\$3,078	
FIRST Robotics		\$2,973	\$3,025	\$3,078	
Group II					
SHS Pep Band		\$2,573	\$2,618	\$2,664	
HJMS Musical - Director		\$2,573	\$2,618	\$2,664	
Group III					
SHS Winter Musical-Choreographer		\$2,174	\$2,212	\$2,251	
SHS Winter Musical-Lighting Designer		\$2,174	\$2,212	\$2,251	
SHS Winter Musical-Costume Designer		\$2,174	\$2,212	\$2,251	
SHS Winter Musical-Pit Conductor		\$2,174	\$2,212	\$2,251	
SHS Future Business Leaders		\$2,174	\$2,212	\$2,251	
SHS Senior Class* (2)		\$2,174	\$2,212	\$2,251	
SHS Student Council		\$2,174	\$2,212	\$2,251	
SHS Math Team		\$2,174	\$2,212	\$2,251	
SHS Mock Trial		\$2,174	\$2,212	\$2,251	
SHS Fall One-Acts		\$2,174	\$2,212	\$2,251	
SHS Jazz Band		\$2,174	\$2,212	\$2,251	
SHS Debate Team		\$2,174	\$2,212	\$2,251	
SHS Unified Theater		\$2,174	\$2,212	\$2,251	
HJMS Chamber Orchestra		\$2,174	\$2,212	\$2,251	
HJMS Leadership Academy*(2)		\$2,174	\$2,212	\$2,251	
HJMS Mathcounts		\$2,174	\$2,212	\$2,251	
HJMS Jazz Band		\$2,174	\$2,212	\$2,251	
HJMS Student Council		\$2,174	\$2,212	\$2,251	
HJMS Yearbook		\$2,174	\$2,212	\$2,251	
HJMS Select Chorus		\$2,174	\$2,212	\$2,251	
HJMS Unified Theater		\$2,174	\$2,212	\$2,251	
HJMS Wind Ensemble		\$2,174	\$2,212	\$2,251	
Elementary Select Chorus		\$2,174	\$2,212	\$2,251	
Elementary Jazz Band		\$2,174	\$2,212	\$2,251	
Group IV					
SHS Nat'l Honor Society* (2)	-	\$1,783	\$1,814	\$1,846	
SHS Forum	-	\$1,783	\$1,814	\$1,846	
SHS Readers' Theater	-	\$1,783	\$1,814	\$1,846	
SHS Junior Class* (2)	-	\$1,783	\$1,814	\$1,846	

SHS Women's Empowerment Club	-	\$1,783	\$1,814	\$1,846
SHS Sophomore Class* (2)	-	\$1,783	\$1,814	\$1,846
SHS Percussion Instructor	-	\$1,783	\$1,814	\$1,846
SHS Tri-M Advisor	-	\$1,783	\$1,814	\$1,846
SHS Trojan Wall	-	\$1,783	\$1,814	\$1,846
SHS Stock Market Club	-	\$1,783	\$1,814	\$1,846
SHS United Nations	-	\$1,783	\$1,814	\$1,846
SHS Winter Musical -Asst Director	-	\$1,783	\$1,814	\$1,846
SHS Best Buddies	-	\$1,783	\$1,814	\$1,846
HJMS Service Club	-	\$1,783	\$1,814	\$1,846
HJMS Musical - Asst Director	-	\$1,783	\$1,814	\$1,846
HJMS FACS	-	\$1,783	\$1,814	\$1,846
HJMS Drama Club	-	\$1,783	\$1,814	\$1,846
Elementary Drama Club	-	\$1,783	\$1,814	\$1,846
Elementary Musical Theater	-	\$1,783	\$1,814	\$1,846
Group V				
SHS Freshman Class* (2)		\$998	\$1,016	\$1,033
SHS Spectrum Magazine		\$998	\$1,016	\$1,033
SHS Junior Civitan		\$998	\$1,016	\$1,033
SHS National Art Honor Society		\$998	\$1,016	\$1,033
SHS Gender Sexuality Alliance		\$998	\$1,016	\$1,033
SHS - Nat'l Business Honor Society		\$998	\$1,016	\$1,033
SHS - Chinese Club/Honor Society		\$998	\$1,016	\$1,033
SHS - French Club/Honor Society		\$998	\$1,016	\$1,033
SHS - Spanish Club/Honor Society		\$998	\$1,016	\$1,033
SHS - Latin Club/Honor Society		\$998	\$1,016	\$1,033
SHS - Mural Club		\$998	\$1,016	\$1,033
SHS - Anime Club		\$998	\$1,016	\$1,033
SHS - CT Youth Forum Coordinator		\$998	\$1,016	\$1,033
SHS - Key Club		\$998	\$1,016	\$1,033
SHS - Chess Club		\$998	\$1,016	\$1,033
SHS - "As School Match Wits"		\$998	\$1,016	\$1,033
HJMS Pep Band		\$998	\$1,016	\$1,033
HJMS Science Club		\$998	\$1,016	\$1,033
HJMS Art Gallery		\$998	\$1,016	\$1,033
HJMS Talent Show		\$998	\$1,016	\$1,033

*For club activities that have 2 advisors; each advisor is compensated as listed above.

K. Interscholastic Athletics

When necessary, more than one individual may hold the same position as long as money, duties and responsibilities are agreed to by the parties and the cost does not exceed the budgeted amount. Prior to the implementation of such agreements, the Director of Personnel must give approval and the Association must be informed.

POSITION	2020-21	2021-22	2022-23
Baseball - Head Coach	\$ 6,340	\$ 6,451	\$ 6,564
Baseball - Asst .Coach	\$ 4,417	\$ 4,494	\$ 4,573
Baseball - JV Coach	\$ 4,416	\$ 4,493	\$ 4,571
Baseball - Freshman Coach	\$ 4,416	\$ 4,493	\$ 4,571
Basketball - Head Coach	\$ 7,285	\$ 7,413	\$ 7,542
Basketball - Asst Coach	\$ 5,025	\$ 5,113	\$ 5,203
Basketball - JV Coach	\$ 5,025	\$ 5,113	\$ 5,203
Basketball - Freshman Coach	\$ 5,025	\$ 5,113	\$ 5,203
Cheerleading - Head Coach **	\$ 4,323	\$ 4,399	\$ 4,476
Cheerleading - Assistant Coach **	\$ 3,136	\$ 3,190	\$ 3,246
Crew - Head Coach **	\$ 7,255	\$ 7,382	\$ 7,511
Crew - JV Coach **	\$ 5,408	\$ 5,503	\$ 5,599
Crew - Novice Coach**	\$ 5,068	\$ 5,158	\$ 5,248
Cross Country - Head Coach	\$ 5,887	\$ 5,990	\$ 6,095
Cross Country - Assistant Coach	\$ 4,416	\$ 4,493	\$ 4,571
Cross Country (Ski) - Head Coach	\$ 6,005	\$ 6,110	\$ 6,217
Field Hockey - Head Coach	\$ 6,005	\$ 6,110	\$ 6,217
Field Hockey - Assistant Coach	\$ 4,416	\$ 4,493	\$ 4,571
Field Hockey - JV Coach	\$ 4,416	\$ 4,493	\$ 4,571
Football - Head Coach	\$ 8,012	\$ 8,152	\$ 8,295
Football - Assistant Coach	\$ 5,477	\$ 5,573	\$ 5,671
Football - JV Coach	\$ 5,477	\$ 5,573	\$ 5,671
Football - Freshman Coach	\$ 5,477	\$ 5,573	\$ 5,671
Golf - Head Coach	\$ 4,588	\$ 4,668	\$ 4,750
Golf - JV Coach	\$ 3,260	\$ 3,317	\$ 3,375
Ice Hockey - Head Coach	\$ 6,916	\$ 7,037	\$ 7,160
Ice Hockey - Assistant Coach	\$ 4,950	\$ 5,036	\$ 5,124
Ice Hockey - JV Coach	\$ 4,950	\$ 5,036	\$ 5,124
Lacrosse - Head Coach	\$ 6,093	\$ 6,200	\$ 6,309
Lacrosse - Asst Coach	\$ 4,416	\$ 4,493	\$ 4,571
Lacrosse - JV Coach	\$ 4,416	\$ 4,493	\$ 4,571
Lacrosse - Freshman Coach	\$ 4,416	\$ 4,493	\$ 4,571

Rugby - Head Coach		\$ 6,093	\$ 6,200	\$ 6,309
Rugby - Assistant Coach		\$ 4,417	\$ 4,494	\$ 4,573
Soccer - Head Coach		\$ 6,402	\$ 6,514	\$ 6,628
Soccer - Asst Coach		\$ 4,417	\$ 4,494	\$ 4,573
Soccer - JV Coach		\$ 4,416	\$ 4,493	\$ 4,571
Soccer - Freshman Coach		\$ 4,416	\$ 4,493	\$ 4,571
Softball - Head Coach		\$ 6,340	\$ 6,451	\$ 6,564
Softball - JV Coach		\$ 4,416	\$ 4,493	\$ 4,571
Strength & Conditioning**		\$ 6,005	\$ 6,110	\$ 6,217
Swimming - Head Coach		\$ 6,640	\$ 6,756	\$ 6,875
Swimming - Assistant Coach		\$ 4,950	\$ 5,036	\$ 5,124
Tennis - Head Coach		\$ 4,526	\$ 4,605	\$ 4,686
Track (Outdoor) - Head Coach		\$ 6,024	\$ 6,130	\$ 6,237
Track (Outdoor) - Assistant Coach		\$ 4,417	\$ 4,494	\$ 4,573
Track (Indoor) - Head Coach		\$ 6,006	\$ 6,111	\$ 6,218
Track (Indoor) - Assistant Coach		\$ 4,417	\$ 4,494	\$ 4,573
Unified Sports - Head Coach (2)		\$5,730	\$5,830	\$5,932
Volleyball - Head Coach		\$ 6,024	\$ 6,130	\$ 6,237
Volleyball - JV Coach		\$ 4,417	\$ 4,494	\$ 4,573
Volleyball - Thirds Coach		\$ 4,417	\$ 4,494	\$ 4,573
Wrestling - Head Coach		\$ 6,745	\$ 6,863	\$ 6,983
Wrestling - Assistant Coach		\$ 4,950	\$ 5,036	\$ 5,124
Event Manager**		\$ 4,888	\$ 4,973	\$ 5,060
** Positions for multiple seasons are compensated each season at the amount listed.				

EXHIBIT VI

APPOINTMENT AND CONTRACTING OF STAFF

A. Contract of Employment

A contract shall be issued to all employees represented by the Association. The Superintendent is authorized to sign all contracts for the Board of Education. The Simsbury Board of Education and the Association recognize the attached as the official form to be used.

B. Annual Salary Notification

A written wage statement shall be issued annually to all individuals represented by the Association.

EXHIBIT VI – A

CONTRACT OF EMPLOYMENT

The Board of Education at the Town of Simsbury, Connecticut, hereby agrees to employ _____ and _____ (to whom the term “teacher” hereinafter refers) hereby agrees to serve, under the direction of the Superintendent of Schools, as a(n) _____ in the public schools of said town beginning _____. Said Board of Education agrees to pay said teacher an annual salary in accordance with the prevailing salary schedule of the Board of Education for said town, and as set forth in an annual salary notification.

This contract of employment shall continue in force from year to year subject to the following conditions:

- (a) It may be terminated by mutual consent at any time.
- (b) The teacher may resign for good reason by submitting at least thirty days written notice at any time except during the month of August, during which month, unless the contract has been terminated by mutual consent or Board action, the teacher will accept employment with no other Board of Education in Connecticut.
- (c) The Board may terminate this contract at any time as provided by the General Statutes of Connecticut.

This contract shall become operative when properly signed in duplicate and one copy returned by the teacher to the Office of the Superintendent of Schools.

This contract is and shall be subject to the statutes of the State of Connecticut and the rules and regulations of the Board of Education.

Signed

Board of Education

By _____
Teacher

By _____
Superintendent of Schools

Date _____

Date _____

EXHIBIT VI – B

SIMSBURY PUBLIC SCHOOLS ANNUAL SALARY NOTIFICATION

TO:

FROM: Matthew T. Curtis, Superintendent

DATE:

SUBJECT: Annual Salary Notification

This is to notify you that in accordance with the Board of Education salary schedule established for the school year _____ beginning _____ and ending June 30, _____, your base salary will be as listed below, less required deductions for the State Teachers' Retirement Fund, Withholding Tax, and any other deduction which you may authorize:

Salary Amount: \$

In addition to the base salary indicated above, the following stipends will also be included:

- A. Plus Special Services Differential
- B. Plus Supermax - 1 to 4 years beyond maximum
- C. Plus Supermax - 5th year and above beyond maximum
- D. Plus Longevity Retirement Payment (3 years)
- E. Plus Department Supervisor Stipend
- F. Plus Coordinator Stipend
- G. Plus National Board Certification Stipend

Base Salary	\$	Step:	Schedule:	FTE %
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Total Salary: \$
(includes base plus appropriate items A-G)

Experience:
Simsbury

Other

Total

Please retain one copy of this notification for your records. The other copy is to be signed and returned to the Superintendent of Schools (Personnel Office).

Signature/Date

For Office Use Only

Change in Degree from _____ To _____

Date Approved _____

Approval Signature

Amount: _____

School Assignment: _____

EXHIBIT VII

SIMSBURY PUBLIC SCHOOLS SABBATICAL LEAVE AGREEMENT

The Simsbury Board of Education recognizes that additional training or specific project endeavors that a teacher pursues and which result in direct benefit to the school system and the teacher deserve its encouragement. To this end, the Board of Education permits sabbatical leaves where the following criteria are satisfied:

1. Certified teacher must have at least six (6) years of service in Simsbury to be considered.
2. The teacher can be temporarily replaced without a serious dislocation to the system.
3. The teacher makes a written application to the Superintendent of Schools by the last school day of September of the year preceding the year in which the leave is to occur.
4. The Superintendent recommends to the Board of Education approval of the Sabbatical Leave proposal and the Board votes its approval.

The Simsbury Board of Education approved a Sabbatical Leave on _____ for _____ to occur during period _____ to _____ based upon his/her proposal to:

Description or Title of Training Project

The Board of Education endorses this proposal and will provide one hundred percent of his/her salary for the _____ school year. If _____ receives any grant payments, which added to the salary provided, exceed 110% of normal earnings, the Board will reduce the salary it pays to insure that the maximum earnings do not exceed 110%.

It is anticipated that due to the granting of this sabbatical leave that _____ will return to the Simsbury Public Schools for three years at the conclusion of the sabbatical leave. One third of the salary paid to _____ during the sabbatical period will be forgiven during each of these years. Should _____ not return to the Simsbury Public Schools following the Sabbatical Leave or complete three years of service, any unforgiven salary must be returned to the Simsbury Public Schools within thirty calendar days. In the event of death or disability which causes _____ to be incapable of performing his or her duties, the Board of Education shall release him/her and his/her estate from these obligations.

Acknowledged

Superintendent

Date

Acknowledged

Teacher

Date

N.B. This document is drafted in conformance with the Agreement between the Simsbury Education Association and the Simsbury Board of Education, Article V B. Leaves 2. Sabbatical Leave

EXHIBIT VIII

SIMSBURY PUBLIC SCHOOLS PER DIEM UNDERSTANDING

Per diem payment applies to bargaining unit personnel in the following categories:

1. Teaching state-mandated Adult Education courses
2. Teaching courses enrolling K-12 students as part of the Continuing Education program
3. Summer employment such as Guidance Department, Work Experience coordination and curriculum projects
4. In-service teaching beyond one's school day

In order to qualify within categories 1, 2 and 4, a teacher must possess a current Connecticut Teacher Certification for the content area, or currently be teaching a specific course. The only exception to the above definition is SAT Review Courses.

EXHIBIT IX

SIMSBURY PUBLIC SCHOOLS HEALTH BENEFIT PROGRAM OVERVIEW

I. Plan Design

A. PPO/OAP ("Open Access Plus") & OAPIN (In-Network) & HMO

Co-Pay	2020 – 2021	Year 2	Year 3
<i>Provider</i>			
Office Visit	\$30	\$30	\$30
Specialist	40	40	40
Emergency Room	125	125	125
Urgent Care	75	75	75
Inpatient Hospital	250	250	250
Outpatient	250	250	250
High End Imaging	75/375	75/375	75/375
<i>Prescription</i>			
• Retail	\$10/25/40	\$10/25/40	\$10/25/40
• Mail Order	20/50/80	20/50/80	20/50/80
• Maximum Out-of-Pocket (MOOP)	Unlimited	Unlimited	Unlimited
• Duration (Retail/Mail Order)	30/90 days	30/90 days	30/90 days
• Edits	* See Note	* See Note	* See Note

*Note: Edits include: (1) generic substitution with a “dispensed as written” (DAW) provider override for brand drugs, (2) mandatory specialty drugs dispensed through Accredo specialty pharmacy.

B. PPO/OAP (Non Network)

Deductible	\$500/1,000/ 1,500	\$500/1,000/ 1,500	\$500/1,000/ 1,500
Coinsurance Cap	1,000/2,000/ 3,000	1000/2000/ 3,000	1,000/2,000/ 3,000
Max. Out-of-Pocket (MOOP)	1,500/3,000/ 4,500	1,500/3,000/ 4,500	1,500/3,000/ 4,500

C. HSA HDHP

Deductible	\$2,000/4,000	\$2,000/4,000	\$2,000/4,000
Coinsurance	100/80%	100/80%	100/80%
MOOP In-Network	Blended*	Blended*	Blended*
MOOP Out-of-Network	\$5,000/10,000	\$5,000/10,000	\$5,000/10,000
Script Copays ⁽¹⁾	\$5/30/45	\$5/30/45	\$5/30/45

* Blended means Max. Out-of-Pocket (MOOP) accumulates in- and out-of-network claims together.

HSA HDHP (continued)

Mail Script Copays	\$10/60/90	\$10/60/90	\$10/60/90
Preventive Services ⁽²⁾	100%	100%	100%

Assumes Plan Sponsor (Simsbury Board of Education) will make an HSA deposit equal to 50% of appropriate deductible value.

⁽¹⁾ For Scripts after Deductible has been met.

⁽²⁾ Scheduled Preventive Services paid by Plan at 100%, not charged to Deductible.

D. Dental

Deductible			
- Annual	\$50/150	\$50/150	\$50/150
- Orthodontic	50	50	50
Coinsurance			
- Class I	100%	100%	100%
- Class II	85	85	85
- Class III	50	50	50
- Class IV	50	50	50
Maximums			
- Annual	\$1,500	\$1,500	\$1,500
- Orthodontic	1,000	1,000	1,000

Premium Contribution Percentages (employee only and dependents)**A Current Employee Contributions**

Plan Option	2020-21	2021-22	2022-23
PPO/OAP & HMO	Buy-up	Buy-up	Buy-up
PPO/OAPIN	Buy-up	Buy-up	Buy-up
HDHP & HSA	18.5%	19.0%	20.0%
Dental	18.5%	19%	20%

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services
Simsbury, Board of Education - SEA: Choice Fund Open Access Plus HSA

Coverage Period: 07/01/2019 - 06/30/2020
Coverage for: Individual/Individual + Family | **Plan Type:** OAP

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 be provided separately. This is only a summary.** For more information about your coverage, or to get a copy of the complete terms of coverage, go online at www.cigna.com/sp. 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 <https://www.healthcare.gov/sbc-glossary> or call 1-800-Cigna24 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible ?	For in-network providers : \$2,000 /individual or \$4,000 /family For out-of-network providers : \$2,000 /individual or \$4,000 /family Combined medical/behavioral and pharmacy deductible Amount your employer contributes to your account: Up to \$1,000 /individual or \$2,000 /family.	Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan , each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible .
Are there services covered before you meet your deductible ?	Yes. In-network preventive care & immunizations, in-network preventive drugs.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible . See a list of covered preventive services at https://www.healthcare.gov/coverage/preventive-care-benefits/ .
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the out-of-pocket limit for this plan ?	For in-network providers \$3,000 /individual or \$6,000 /family For out-of-network providers \$5,000 /individual or \$10,000 /family Combined medical/behavioral and pharmacy out-of-pocket limit	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan , they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit ?	Penalties for failure to obtain pre-authorization for services, premiums , balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit .

Important Questions	Answers	Why This Matters:
Will you pay less if you use a network provider ?	Yes. See www.myCigna.com or call 1-800-Cigna24 for a list of network providers .	This plan uses a provider network . You will pay less if you use a provider in the plan's network . You will pay the most if you use an out-of-network provider , and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance billing). Be aware your network provider might use an out-of-network provider for some services (such as lab work). Check with your provider before you get services.
Do you need a referral to see a specialist ?	No.	You can see the specialist you choose without a referral .



All [copayment](#) and [coinsurance](#) costs shown in this chart are after your [deductible](#) has been met, if a [deductible](#) applies.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you visit a health care provider's office or clinic	Primary care visit to treat an injury or illness	No charge/visit	20% coinsurance	None
	Specialist visit	No charge/visit	20% coinsurance	None
	Preventive care/ screening/ immunization	No charge/visit** No charge/screening** No charge/immunizations**	20% coinsurance /visit 20% coinsurance /screening 20% coinsurance /immunizations	None None None
		** Deductible does not apply		You may have to pay for services that aren't preventive. Ask your provider if the services you need are preventive. Then check what your plan will pay for.
If you have a test	Diagnostic test (x-ray, blood work)	No charge	20% coinsurance	None
	Imaging (CT/PET scans, MRIs)	No charge	20% coinsurance	None

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you need drugs to treat your illness or condition More information about prescription drug coverage is available at www.myCigna.com	Generic drugs (Tier 1)	\$5 copay /prescription (retail 30 days), \$10 copay /prescription (retail 90 days); \$10 copay /prescription (home delivery 90 days)	20% coinsurance /prescription (retail); Not covered (home delivery)	Coverage is limited up to a 90-day supply (retail and home delivery); up to a 30-day supply (retail) and a 90-day supply (home delivery) for Specialty drugs. Certain limitations may apply, including, for example: prior authorization, step therapy, quantity limits. In-network Federally required preventive drugs will be provided at no charge
	Preferred brand drugs (Tier 2)	\$30 copay /prescription (retail 30 days), \$60 copay /prescription (retail 90 days); \$60 copay /prescription (home delivery 90 days)	20% coinsurance /prescription (retail); Not covered (home delivery)	
	Non-preferred brand drugs (Tier 3)	\$45 copay /prescription (retail 30 days), \$90 copay /prescription (retail 90 days); \$90 copay /prescription (home delivery 90 days)	20% coinsurance /prescription (retail); Not covered (home delivery)	
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	No charge	20% coinsurance	None
	Physician/surgeon fees	No charge	20% coinsurance	None
If you need immediate medical attention	Emergency room care	No charge/visit	No charge/visit	None
	Emergency medical transportation	No charge	No charge	None
	Urgent care	No charge/visit	No charge/visit	None
If you have a hospital stay	Facility fee (e.g., hospital room)	No charge	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification.
	Physician/surgeon fees	No charge	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification.
If you need mental health, behavioral health, or substance abuse services	Outpatient services	No charge/office visit No charge/all other services	20% coinsurance /office visit 20% coinsurance /all other services	None
	Inpatient services	No charge/admission	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you are pregnant	Office visits	No charge	20% coinsurance	Primary Care or Specialist benefit levels apply for initial visit to confirm pregnancy. Depending on the type of services, a copayment , coinsurance or deductible may apply. Maternity care may include tests and services described elsewhere in the SBC (i.e. ultrasound).
	Childbirth/delivery professional services	No charge	20% coinsurance	
	Childbirth/delivery facility services	No charge	20% coinsurance	
If you need help recovering or have other special health needs	Home health care	No charge	20% coinsurance	16 hour maximum per day
	Rehabilitation services	No charge/visit	20% coinsurance /visit	Coverage for Rehabilitation, including Cardiac rehab and Chiropractic care, services is limited to 90 days annual max. Limits are not applicable to mental health conditions for Physical, Speech and Occupational therapies.
	Habilitation services	No charge/visit	20% coinsurance /visit	Services are covered when Medically Necessary to treat a mental health condition (e.g. autism). Limits are not applicable to mental health conditions for Physical, Speech and Occupational therapies.
	Skilled nursing care	No charge	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification. Coverage is limited to 120 days annual max.
	Durable medical equipment	No charge	20% coinsurance	None
	Hospice services	No charge/inpatient; No charge/outpatient services	20% coinsurance /inpatient; 20% coinsurance /outpatient services	Lesser of 50% or \$300 penalty for no precertification.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If your child needs dental or eye care	Children's eye exam	No charge/visit	20% coinsurance /visit	Limit to one eye exam per contract year
	Children's glasses	Not covered	Not covered	None
	Children's dental check-up	Not covered	Not covered	None

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](#).)

- | | | |
|--|--|---|
| <ul style="list-style-type: none"> • Acupuncture • Cosmetic surgery • Dental care (Adult) • Dental care (Children) | <ul style="list-style-type: none"> • Long-term care • Non-emergency care when traveling outside the U.S. | <ul style="list-style-type: none"> • Private-duty nursing • Routine foot care • Weight loss programs |
|--|--|---|

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

- | | | |
|--|---|--|
| <ul style="list-style-type: none"> • Bariatric surgery (if you qualify for services) • Chiropractic care (combined with Rehabilitation Services) | <ul style="list-style-type: none"> • Hearing aids (coverage through age 13) • Infertility treatment | <ul style="list-style-type: none"> • Routine eye care (Adult) (limit to one exam per contract year) |
|--|---|--|

Note: This is an abbreviated version of the most recent Summary of Benefits available for July 1, 2019 – June 30, 2020. It summarizes the benefits in the 2020 -2023 Teacher's contract, except for explanation of the prescription drug "edits" (managed care) that newly take effect as of July 1, 2020 per Article III(B)(2) of the teacher's contract: (1) generic substitution with a "dispensed as written" (DAW) provider override for a brand name drug, and (2) mandatory specialty drugs dispensed through Accredo mail order specialty pharmacy. All pages of this Summary are updated annually by the insurance carrier during Open Enrollment before July 1 of each year. All annual updates and complete details on each health plan are provided to the teachers on the district website. From the "Human Resources" page, click on "Employee Benefits" and then "Medical Insurance."

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services
Simsbury, Board of Education - SEA: Open Access Plus IN (HMO)

Coverage Period: 07/01/2019 - 06/30/2020
Coverage for: Individual/Individual + Family | **Plan Type:** OAP

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 be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, go online at www.cigna.com/sp. 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 <https://www.healthcare.gov/sbc-glossary> or call 1-800-Cigna24 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible ?	\$0	See the Common Medical Events chart below for your costs for services this plan covers.
Are there services covered before you meet your deductible ?	No.	You will have to meet the deductible before the plan pays for any services.
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the out-of-pocket limit for this plan ?	For in-network providers \$6,350/individual or \$12,700/family Combined medical/behavioral and pharmacy out-of-pocket limit	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan , they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit ?	Deductibles , premiums , balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit .
Will you pay less if you use a network provider ?	Yes. See www.myCigna.com or call 1-800-Cigna24 for a list of network providers .	This plan uses a provider network . You will pay less if you use a provider in the plan's network . You will pay the most if you use an out-of-network provider , and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance billing). Be aware your network provider might use an out-of-network provider for some services (such as lab work). Check with your provider before you get services.
Do you need a referral to see a specialist ?	No.	You can see the specialist you choose without a referral .

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you visit a health care provider's office or clinic	Primary care visit to treat an injury or illness	\$30 copay /visit	Not covered	None
	Specialist visit	\$40 copay /visit	Not covered	None
	Preventive care / screening / immunization	No charge/visit No charge/screening No charge/immunizations	Not covered	None None None You may have to pay for services that aren't preventive. Ask your provider if the services you need are preventive. Then check what your plan will pay for.
If you have a test	Diagnostic test (x-ray, blood work)	No charge	Not covered	None
	Imaging (CT/PET scans, MRIs)	\$75 copay per type of scan/day (up to maximum of \$375)	Not covered	None
If you need drugs to treat your illness or condition More information about prescription drug coverage is available at www.myCigna.com	Generic drugs (Tier 1)	\$10 copay /prescription (retail 30 days), \$20 copay /prescription (retail 90 days); \$20 copay /prescription (home delivery 90 days)	Not covered	Coverage is limited up to a 90-day supply (retail and home delivery); up to a 30-day supply (retail) and a 90-day supply (home delivery) for Specialty drugs. Certain limitations may apply, including, for example: prior authorization, step therapy, quantity limits.
	Preferred brand drugs (Tier 2)	\$25 copay /prescription (retail 30 days), \$50 copay /prescription (retail 90 days); \$50 copay /prescription (home delivery 90 days)	Not covered	
	Non-preferred brand drugs (Tier 3)	\$40 copay /prescription (retail 30 days), \$80 copay /prescription (retail 90 days); \$80 copay /prescription (home delivery 90 days)	Not covered	
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$250 copay /visit	Not covered	Per visit copay is waived for non-surgical procedures.
	Physician/surgeon fees	No charge	Not covered	None

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you need immediate medical attention	Emergency room care	\$125 copay /visit	\$125 copay /visit	Per visit copay is waived if admitted
	Emergency medical transportation	No charge	No charge	None
	Urgent care	\$75 copay /visit	\$75 copay /visit	None
If you have a hospital stay	Facility fee (e.g., hospital room)	\$250 copay /admission	Not covered	None
	Physician/surgeon fees	No charge	Not covered	None
If you need mental health, behavioral health, or substance abuse services	Outpatient services	\$40 copay /office visit No charge/all other services	Not covered	None
	Inpatient services	\$250 copay /admission	Not covered	None
If you are pregnant	Office visits	No charge	Not covered	Primary Care or Specialist benefit levels apply for initial visit to confirm pregnancy. Depending on the type of services, a copayment , coinsurance or deductible may apply. Maternity care may include tests and services described elsewhere in the SBC (i.e. ultrasound).
	Childbirth/delivery professional services	No charge	Not covered	
	Childbirth/delivery facility services	\$250 copay /admission	Not covered	

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you need help recovering or have other special health needs	Home health care	No charge	Not covered	16 hour maximum per day
	Rehabilitation services	\$30 copay /PCP visit \$40 copay /Specialist visit	Not covered	Coverage for Rehabilitation, including Cardiac rehab and Chiropractic care, services is limited to 90 days annual max. Limits are not applicable to mental health conditions for Physical, Speech and Occupational therapies.
	Habilitation services	\$30 copay /PCP visit \$40 copay /Specialist visit	Not covered	Services are covered when Medically Necessary to treat a mental health condition (e.g. autism). Limits are not applicable to mental health conditions for Physical, Speech and Occupational therapies.
	Skilled nursing care	No charge	Not covered	Coverage is limited to 120 days annual max.
	Durable medical equipment	No charge	Not covered	None
	Hospice services	No charge/inpatient; No charge/outpatient services	Not covered	None
If your child needs dental or eye care	Children's eye exam	No charge	Not covered	Limit to one eye exam per calendar year
	Children's glasses	Not covered	Not covered	None
	Children's dental check-up	Not covered	Not covered	None

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.)

- | | | |
|--------------------------|--|------------------------|
| • Acupuncture | • Long-term care | • Private-duty nursing |
| • Cosmetic surgery | • Non-emergency care when traveling outside the U.S. | • Routine foot care |
| • Dental care (Adult) | | • Weight loss programs |
| • Dental care (Children) | | |

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

- | | | |
|---|--|--|
| • Bariatric surgery (if you qualify for services) | • Hearing aids (coverage through age 13) | • Routine eye care (adult) (limited to one exam per calendar year) |
| • Chiropractic care (combined with Rehabilitation Services) | • Infertility treatment | |

Note: This is an abbreviated version of the most recent Summary of Benefits available for July 1, 2019 – June 30, 2020. It summarizes the benefits in the 2020 -2023 Teacher's contract, except for explanation of the prescription drug "edits" (managed care) that newly take effect as of July 1, 2020 per Article III(B)(2) of the teacher's contract: (1) generic substitution with a "dispensed as written" (DAW) provider override for a brand name drug, and (2) mandatory specialty drugs dispensed through Accredo mail order specialty pharmacy. All pages of this Summary are updated annually by the insurance carrier during Open Enrollment before July 1 of each year. All annual updates and complete details on each health plan are provided to the teachers on the district website. From the "Human Resources" page, click on "Employee Benefits" and then "Medical Insurance."

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services
Simsbury, Board of Education - SEA: Open Access Plus (PPO)

Coverage Period: 07/01/2019 - 06/30/2020

Coverage for: Individual/Individual + Family | **Plan Type:** OAP

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 be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, go online at www.cigna.com/sp. 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 <https://www.healthcare.gov/sbc-glossary> or call 1-800-Cigna24 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible ?	For in-network providers : \$0/individual, \$0/individual + 1 or \$0/family For out-of-network providers : \$500/individual, \$1,000/individual + 1 or \$1,500/family	Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan , each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible .
Are there services covered before you meet your deductible ?	Yes. Out-of-network prescription drugs , out-of-network urgent care facility visits.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost-sharing and before you meet your deductible . See a list of covered preventive services at https://www.healthcare.gov/coverage/preventive-care-benefits/ .
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the out-of-pocket limit for this plan ?	For in-network providers \$6,350/individual, \$12,700/individual + 1 or \$12,700/family For out-of-network providers \$1,500/individual, \$3,000/individual + 1 or \$4,500/family Combined medical/behavioral and pharmacy out-of-pocket limit	The out-of-pocket limit is the most you could pay in a year for covered services. If you have other family members in this plan , they have to meet their own out-of-pocket limits until the overall family out-of-pocket limit has been met.
What is not included in the out-of-pocket limit ?	Penalties for failure to obtain pre-authorization for services, premiums , balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit .

Important Questions	Answers	Why This Matters:
Will you pay less if you use a network provider ?	Yes. See www.myCigna.com or call 1-800-Cigna24 for a list of network providers .	This plan uses a provider network . You will pay less if you use a provider in the plan's network . You will pay the most if you use an out-of-network provider , and you might receive a bill from a provider for the difference between the provider's charge and what your plan pays (balance billing). Be aware your network provider might use an out-of-network provider for some services (such as lab work). Check with your provider before you get services.
Do you need a referral to see a specialist ?	No.	You can see the specialist you choose without a referral .



All [copayment](#) and [coinsurance](#) costs shown in this chart are after your [deductible](#) has been met, if a [deductible](#) applies.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you visit a health care provider's office or clinic	Primary care visit to treat an injury or illness	\$30 copay /visit	20% coinsurance	None
	Specialist visit	\$40 copay /visit	20% coinsurance	None
	Preventive care / screening / immunization	No charge/visit	20% coinsurance /visit	None
		No charge/screening	20% coinsurance /screening	None
		No charge/immunizations	20% coinsurance /immunizations	None
If you have a test	Diagnostic test (x-ray, blood work)	No charge	20% coinsurance	None
	Imaging (CT/PET scans, MRIs)	\$75 copay per type of scan/day (up to a maximum of \$375)	20% coinsurance	None

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you need drugs to treat your illness or condition More information about prescription drug coverage is available at www.myCigna.com	Generic drugs (Tier 1)	\$10 copay /prescription (retail 30 days), \$20 copay /prescription (retail & home delivery 90 days)	\$10 copay /prescription (retail 30 days); Not covered (home delivery)	Coverage is limited up to a 90-day supply (retail and home delivery); up to a 30-day supply (retail and home delivery) for Specialty drugs. Certain limitations may apply, including, for example: prior authorization, step therapy, quantity limits.
	Preferred brand drugs (Tier 2)	\$25 copay /prescription (retail 30 days), \$50 copay /prescription (retail & home delivery 90 days)	\$25 copay /prescription (retail 30 days); Not covered (home delivery)	
	Non-preferred brand drugs (Tier 3)	\$40 copay /prescription (retail 30 days), \$80 copay /prescription (retail & home delivery 90 days)	\$40 copay /prescription (retail 30 days); Not covered (home delivery)	
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$250 copay /visit	20% coinsurance	Per visit copay is waived for non-surgical procedures.
	Physician/surgeon fees	No charge	20% coinsurance	None
If you need immediate medical attention	Emergency room care	\$125 copay /visit	\$125 copay /visit** **Deductible does not apply	Per visit copay is waived if admitted
	Emergency medical transportation	No charge	No charge** **Deductible does not apply	None
	Urgent care	\$75 copay /visit	\$75 copay /visit** **Deductible does not apply	None
If you have a hospital stay	Facility fee (e.g., hospital room)	\$250 copay /admission	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification.
	Physician/surgeon fees	No charge	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification.
If you need mental health, behavioral health, or substance abuse services	Outpatient services	\$40 copay /office visit No charge/all other services	20% coinsurance /office visit 20% coinsurance /all other services	None
	Inpatient services	\$250 copay /admission	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If you are pregnant	Office visits	No charge	20% coinsurance	Primary Care or Specialist benefit levels apply for initial visit to confirm pregnancy. Depending on the type of services, a copayment , coinsurance or deductible may apply. Maternity care may include tests and services described elsewhere in the SBC (i.e. ultrasound).
	Childbirth/delivery professional services	No charge	20% coinsurance	
	Childbirth/delivery facility services	\$250 copay /admission	20% coinsurance	
If you need help recovering or have other special health needs	Home health care	No charge	20% coinsurance	16 hour maximum per day
	Rehabilitation services	\$30 copay /PCP visit \$40 copay /Specialist visit	20% coinsurance /PCP visit 20% coinsurance /Specialist visit	Coverage for Rehabilitation, including Cardiac rehab and Chiropractic care, services is limited to 90 days annual max. Limits are not applicable to mental health conditions for Physical, Speech and Occupational therapies.
	Habilitation services	\$30 copay /PCP visit \$40 copay /Specialist visit	20% coinsurance /PCP visit 20% coinsurance /Specialist visit	Services are covered when Medically Necessary to treat a mental health condition (e.g. autism). Limits are not applicable to mental health conditions for Physical, Speech and Occupational therapies.
	Skilled nursing care	No charge	20% coinsurance	Lesser of 50% or \$300 penalty for no precertification. Coverage is limited to 120 days annual max.
	Durable medical equipment	No charge	20% coinsurance	None
	Hospice services	No charge/inpatient; No charge/outpatient services	20% coinsurance /inpatient; 20% coinsurance /outpatient services	Lesser of 50% or \$300 penalty for no precertification.

Common Medical Event	Services You May Need	What You Will Pay		Limitations, Exceptions, & Other Important Information
		In Network Provider (You will pay the least)	Out of Network Provider (You will pay the most)	
If your child needs dental or eye care	Children's eye exam	No charge	No charge	Limit to one eye exam per calendar year
	Children's glasses	Not covered	Not covered	None
	Children's dental check-up	Not covered	Not covered	None

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.)

- | | | |
|--|--|---|
| <ul style="list-style-type: none"> • Acupuncture • Cosmetic surgery • Dental care (Adult) • Dental care (Children) | <ul style="list-style-type: none"> • Long-term care • Non-emergency care when traveling outside the U.S. | <ul style="list-style-type: none"> • Private-duty nursing • Routine foot care • Weight loss programs |
|--|--|---|

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

- | | | |
|--|---|---|
| <ul style="list-style-type: none"> • Bariatric surgery (if you qualify for services) • Chiropractic care (combined with Rehabilitation Services) | <ul style="list-style-type: none"> • Hearing aids (coverage through age 13) • Infertility treatment | <ul style="list-style-type: none"> • Routine eye care (adult) (limit one exam per calendar year) |
|--|---|---|

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COMPLEX CONDITIONS. PERSONALIZED SERVICE.

Accredo is now a Cigna specialty pharmacy.



Accredo has joined the Cigna family.

Accredo, one of the leading specialty pharmacies in the United States, is now a Cigna specialty pharmacy. Accredo can help you manage your complex medical condition. They can also fill and ship your specialty medication to your home (or location of your choice).^{1,2} Specialty medications are used to treat complex conditions like multiple sclerosis, hepatitis C and rheumatoid arthritis.

Your health and well-being are our first priority.

Managing a complex medical condition isn't easy. The Accredo team of specialty-trained pharmacists and nurses will provide you with the personalized care and support you need to manage your therapy. Accredo will help you work through side effects, check in with you and your doctor to see how your therapy's going, help you get your medications approved for coverage, and more.

What's a "specialty pharmacy"? A specialty pharmacy fills specialty medications. Specialty medications are typically injected or infused and may need special handling (like refrigeration).

Three ways Accredo supports you.

Personalized care and support.

1

- › You have 24/7 access to pharmacists and nurses with experience and training in complex conditions that require specialty medications.
- › You have access to a wide range of personalized care services. This includes counseling, help managing side effects and one-on-one guidance from a clinician on how to administer your medication.
- › Accredo will work with your doctor to help make sure you're getting the care and medication you need.
- › Accredo will give you more choice in how you want to connect with them – by text, phone and/or online resources.

2

Making it easy for you to get your medication.

- › Accredo will schedule and quickly ship your medications (at no extra cost to you) – even those that need special handling, like refrigeration.
- › Accredo will send supplies (like syringes and a sharps container) at no extra cost to you.
- › Accredo will send you refill reminders to help make sure you don't miss a dose. You can also refill certain prescriptions by text.³
- › Get real-time updates once Accredo ships your order.⁴

Together, all the way.®



3

Help understanding your plan's coverage and medication costs.

- › Many specialty medications need approval from Cigna before your plan will cover them. **Accredo will help you and your doctor's office work through that process.**
- › You have access to a dedicated team that coordinates **copay assistance and other options** if you need help paying for your medication.

Some of the conditions Accredo supports:

- › Age-related macular degeneration
- › Alpha-1 antitrypsin deficiency
- › Anemia
- › Severe asthma
- › Cancer
- › Crohn's disease
- › Cystic fibrosis
- › Deep vein thrombosis
- › Growth hormone deficiency
- › Hemophilia
- › Hepatitis C
- › Hereditary angioedema
- › Hereditary tyrosinemia
- › Immune deficiency
- › Infertility
- › Lysosomal storage disorders
- › Multiple sclerosis
- › Neutropenia
- › Orphan and ultra-orphan conditions
- › Osteoarthritis
- › Osteoporosis
- › Psoriasis
- › Pulmonary arterial hypertension
- › Respiratory syncytial virus
- › Rheumatoid arthritis

Two easy ways to manage your specialty medication

1. **Log in to the myCigna® app or website.** Simply go to the home delivery dashboard. As soon as Accredo ships your medication, you'll see it listed under "Accredo." Then click on the button next to your medication name. We'll automatically connect you to your Accredo dashboard.
2. **Go to Accredo.com.** You'll be asked to create an account to get to your dashboard. It's important to know that you'll need an Accredo Rx number to log in. That means you won't be able to do this until you've filled a prescription with Accredo.



Learn more about Accredo.

Go to **Cigna.com/specialty**. You can also call **877.826.7657** to talk with an Accredo representative.



1. As allowable by law. 2. Not all specialty prescriptions moved to Accredo. Cigna will let you know which of your prescriptions has moved. 3. The ability to refill prescriptions by text is only available for certain medications. To get text messages, you'll have to sign up for Accredo's texting service. You can do this when you call Accredo to refill your prescription. Once you sign up, simply reply to their welcome text to get started. Standard text messaging rates apply. 4. You'll see your first order in the myCigna app or website once Accredo ships it.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Accredo Health Group, Inc., and HMO or service company subsidiaries of Cigna Health Corporation. "Accredo" refers to Accredo Health Group, Inc. The Cigna name, logo, "Together, all the way," and "myCigna" are trademarks of Cigna Intellectual Property, Inc. "Accredo" is a trademark of Express Scripts Strategic Development, Inc.

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MetLife Dental Insurance Plan Summary

Network: PDP

Coverage Type	In-Network % of Negotiated Fee [*]	Out-of-Network % of R&C Fee ^{**}
Type A: Preventive (cleanings, exams, X-rays)	100%	100%
Type B: Basic Restorative (extractions, oral surgery)	85%	85%
Type C: Major Restorative (bridges, dentures, TMJ)	50%	50%
Type D: Orthodontia	50%	50%

Deductible [†]		
Individual	\$50	\$50
Family	\$150	\$150
Annual Maximum Benefit		
Per Person	\$1,500	\$1,500
Orthodontia Lifetime Maximum		
Per Person	\$1,000	\$1,000

Child(ren)'s eligibility for dental coverage is from birth up to age 26.

Late enrollment waiting period: There is a one year waiting period for all services following date of request.

^{*} Negotiated Fee refers to the fees that participating dentists have agreed to accept as payment in full, subject to any copayments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.

^{**} R&C fee refers to the Reasonable and Customary (R&C) charge, which is based on the lowest of (1) the dentist's actual charge, (2) the dentist's usual charge for the same or similar services, or (3) the charge of most dentists in the same geographic area for the same or similar services as determined by MetLife.

[†] Applies only to Type B & C Services.

List of Primary Covered Services & Limitations

Type A - Preventive	How Many/How Often
Prophylaxis (cleanings)	• Two per calendar year
Oral Examinations	• Two exams per calendar year
Topical Fluoride Applications	• One fluoride treatment per calendar year for dependent children up to 19 th birthday
X-rays	• Full mouth X-rays: one per 36 months • Bitewing X-rays: two sets per calendar year
Space Maintainers	
Sealants	• Two applications of sealant material for each non-restored, non-decayed 1st and 2 nd molar of a dependent child up to 16th birthday
Fillings	
Endodontics	• Root canal treatment
Type B - Basic Restorative	How Many/How Often
Simple Extractions	
Crown, Denture, and Bridge Repair/Recementations	
General Anesthesia	• When dentally necessary in connection with oral surgery, extractions or other covered dental services
Oral Surgery	
Periodontics	• Periodontal scaling and root planing • Periodontal surgery • Total number of periodontal maintenance treatments and prophylaxis cannot exceed four treatments in a calendar year
Type C - Major Restorative	How Many/How Often
Implants	• Replacement once every 60 months
Bridges and Dentures	• Initial placement to replace one or more natural teeth, which are lost while covered by the Plan • Dentures and bridgework replacement: one every 5 calendar years • Replacement of an existing temporary full denture if the temporary denture cannot be repaired and the permanent denture is installed within 12 months after the temporary denture was installed
Crowns/Inlays/Onlays	• Replacement once every 5 calendar years.
TMJ	
Type D - Orthodontia	How Many/How Often
	• Your Children, up to age 26 are covered while Dental Insurance is in effect. • All dental procedures performed in connection with orthodontic treatment are payable as Orthodontia • Payments are on a repetitive basis • 20% of the amount charged by the dentist will be considered at initial placement of the appliance and paid based on the plan benefit's coinsurance level for Orthodontia as defined in the Plan Summary. • Orthodontic benefits end at cancellation of coverage

The service categories and plan limitations shown above represent an overview of your plan benefits. This document presents the majority of services within each category, but is not a complete description of the plan.