

COLLECTIVE BARGAINING AGREEMENT
BETWEEN
THE EAST HAMPTON BOARD OF EDUCATION
AND
THE EAST HAMPTON SCHOOL SECRETARIES
MUNICIPAL EMPLOYEES UNION INDEPENDENT

July 1, 2024 – June 30, 2027

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PREAMBLE

This Agreement is entered into by and between the Board of Education of the Town of East Hampton (hereinafter referred to as the "Board") and the Municipal Employees Union Independent Inc. (hereinafter referred to as the "Union").

ARTICLE I RECOGNITION

1. The Board recognizes the Union as the exclusive bargaining agent for all clerical and secretarial employees who work twenty (20) or more hours per week including, but not limited to: Administrative Assistants and Fiscal Services Associates.
2. The Board agrees to inform the Union about the creation of new jobs that might be appropriately classed in the bargaining unit.

ARTICLE II UNION SECURITY

1. During the term of this contract or extension thereof, all employees in the Collective Bargaining Unit may elect to either become or remain members of the Union. The Board shall provide the Union with electronic notification of the name, job title, home or cell phone numbers, home address, and personal and work email addresses of any newly hired employee within seven (7) days of the date of hire.
2. The Board agrees to deduct from the pay of its bargaining unit members such membership dues as may be fixed by the Union. Such deductions shall continue for the duration of the Agreement or any extension thereof. Employees may express authorization for payroll deduction of membership dues and/or COPE contributions by submitting to the Union a written membership form, or by any other means of indicating agreement allowable under state and federal law. The Union will submit to the Board a list of members who have authorized payroll deduction and shall provide the Board with verification that payroll deduction and/or COPE contributions have been authorized by the employee only in the event a question arises about an employee's membership status. An employee who is paying dues may withdraw from membership in the Union and stop making those payments by giving written notice to the Union and the Board which notice must be received or postmarked during the period not less than thirty (30) and not more than forty-five (45) days before the annual anniversary date of the employee's authorization or the date of termination of the applicable contract between the Board and the Union, whichever occurs sooner. The Board will honor employee checkoff authorizations unless they are revoked in writing during the window period, regardless of whether the employee is a member of the Union.

3. The Union shall supply to the Board written notice at least thirty (30) days prior to the effective date of any change in the rate of dues. In addition, the Union shall furnish the Board with a statement signed by the employee authorizing the Board to make dues deduction(s).
4. The deduction of Union dues or for any month shall be made during the applicable month and shall be remitted to the Financial Officer of the Union not later than the third Thursday of the following month. The monthly dues remittances to the Union will be accompanied by the list of names of employees from whose wages dues deductions have been made. The Board will use any new form provided by the Union that the Superintendent has approved in advance.
5. No dues will be deducted from an employee on sick leave who has exhausted accumulated sick leave or while collecting Workers' Compensation.
6. The Union agrees to indemnify and to hold and save the Board harmless against any and all claims, damages, suits, judgments or other forms of liability, including attorney fees, that shall or may arise out of or by reason of any action taken by the Board for the purpose of complying with the provisions of this article.
7. The Board shall post a copy of the contract on its website within thirty (30) days after the signing of the Agreement.
8. New employees shall be provided with an electronic copy of this Agreement when they are hired.
9. The Board shall provide the Union office with one (1) signed contracts after the signing of this Agreement.
10. Union representatives and stewards shall be permitted to enter any of the schools with approval of the building principal for the purpose of discussing, processing, or investigating grievances or fulfilling the Union's role as bargaining agent, so long as school operations, including the flow of work within the building, are not disrupted.
11. Any steward shall be released from his/her work assignment to fulfill the duties above upon permission from his/her supervisor. When contacting an employee, the steward shall first report to and obtain permission from the employee's supervisor to see the employee.
12. The Board agrees to provide space on a bulletin board in each building under its supervision in which a member of the bargaining unit works, for the exclusive use of the Union. The bulletin board space shall be for information only and not for derogatory purposes. Statements to be posted must be approved by the Superintendent or his/her designee in advance.

ARTICLE III
NON-DISCRIMINATION

1. All provisions of this Agreement shall apply equally to all employees without discrimination on the basis of race, color, creed or religion, sex, national origin, age, physical or mental disability, political or labor affiliation. This provision may be grieved only through the Superintendent's level. This provision does not preclude a grievant from pursuing a charge of discrimination through other agencies.

ARTICLE IV
HOURS OF WORK, OVERTIME AND HOLIDAY PREMIUM PAY

The hours of work for employees shall be:

1. Twelve Month Employees

The standard work schedule for twelve-month employees shall be 7 ½ hours per day, 37 ½ hours per week excluding an unpaid lunch. During the month of July twelve month secretaries will be released on Fridays four-and-a-half hours after their workday begins with no loss of pay. This provision will not permit a twelve-month secretary to use vacation time in less than a full-day increment on any Fridays in July in which the secretary wishes to use a vacation day.

2. Ten Month Employees

- a. The work year for ten-month employees shall be the student school year plus ten (10) days before school begins and ten (10) days after school ends. The standard work schedule for ten-month employees shall be 7 ½ hours per day, 37 ½ hours per week, excluding an unpaid lunch. With the agreement of the administration, ten-month employees may be permitted to work fewer than ten (10) days after the end of the school year. Any days not worked after the end of the school year pursuant to such an agreement with the administration shall be unpaid. The administration may require that secretaries attend in-service workshops or training during the school year including up to four days when school is not in session. Employees shall be paid for the workshop day at the appropriate hourly rate.
- b. Ten month employees who work in the summer beyond the ten days after school ends and before the ten days before school begins shall be paid a differential of \$1.50 per hour above their school time rate for hours worked during that time.

3. All employees shall be entitled to an uninterrupted half-hour unpaid lunch break and one fifteen (15) minute paid break per day.

4. Overtime

- a. Time and one-half shall be paid for:

1. All work performed in excess of forty (40) hours per week;
 2. All time worked on Saturdays.
 - b. Straight time will be paid up to and including forty (40) hours per week, except where otherwise noted in this section of this Agreement.
 - c. Double time shall be paid for work performed on Sundays and holidays.
 - d. Overtime work shall be distributed as equally as possible within each school provided the employee has the requisite knowledge and skills to perform the task.
 - e. When a paid holiday, hereinafter defined, falls during the work week, it shall not be included as hours worked in determining overtime.
 - f. Overtime hours shall not be worked except where expressly authorized by the Administration.
5. Payment of Wages
- Employees shall be paid on an hourly basis. Wage payments shall be provided on a bi-weekly basis.
6. Employees shall be notified of schedule changes or transfer between work sites one (1) week in advance. When the employer wishes to make a schedule change, the Board shall notify the Union of the change and the reason therefore.
 7. Time worked shall be recorded electronically by each employee via the Board's electronic time keeping system.

ARTICLE V
PRIOR RIGHTS AND BENEFITS

1. This Agreement contains the full and complete agreement between the Board and the Union on all negotiable issues, and neither party shall be required during the term thereof to negotiate any issue whether it is covered or not covered in this Agreement.
2. Any item not covered in this Agreement may be covered by existing policies, rules or regulations of the Board, or by modification of existing policies, rules or regulations or adoption of new policies, rules or regulations.
3. All past practices, procedures and customs not specifically incorporated in or protected by this Agreement are hereby rendered null and void.

4. It is recognized that the Board has and will continue to retain, whether exercised or not, the sole and unquestioned right, responsibility, and prerogative to direct the operation of the public schools in the Town of East Hampton in all its aspects including, but not limited to, the following:

To maintain public elementary and secondary schools and such other educational activities as in its judgment will best serve the interests of the Town of East Hampton; to decide the need for school facilities; to determine the care, maintenance, and operation of buildings, land, apparatus, and other property used for school purposes; to determine the type of work to be performed; to assign all work to employees or other persons; to determine shift schedules and hours of work; to decide the methods, procedures, and means of conducting the work; to select, hire, and demote employees, including the right to prescribe and enforce reasonable rules and regulations for the maintenance of discipline and for the performance of work in accordance with the requirements of the Board of Education, provided such rules and regulations are made known in a reasonable manner to the employees affected by them; to discharge or otherwise discipline any employee for just cause; to promote, transfer, and lay off any employee; to prepare and submit budgets to the Town, and to allocate monies appropriated by the Town for the maintenance of the schools, and to make such transfers of funds within the appropriated budget as it shall deem desirable. Their rights, responsibilities and prerogatives are not subject to delegation in whole or part, except that the same shall not be exercised in violation of any of the specific terms and provisions of this Agreement.

ARTICLE VI **SENIORITY**

1.
 - a. The Board shall prepare a list of all employees covered by this Agreement showing their seniority and length of service with the Board and shall electronically deliver the same to the Union and the Union Steward on or before October 1 of each year. New employees shall be added to this list in accordance with Section 2.
 - b. By October 1st of each year, the Board shall prepare a list of all employees covered by this agreement showing their name, location, status, class, step, and hourly rate of pay and electronically deliver the same to the Union and the Union Steward.
2. No employee shall attain seniority or other rights under this Agreement until he/she has been continuously on the payroll of the Board for a period of six (6) months. An employee who does not successfully complete his/her first six months shall be entitled to a conference with the Superintendent or his/her designee to discuss reasons for such failure. Upon successful completion of this period, the name of the new employee shall be added to the seniority list with seniority commencing on the date of his/her employment. An employee who is discharged during his/her probationary period shall have no recourse to the grievance procedure.

3. Seniority shall be defined as status for specific purposes based on an employee's uninterrupted service with the Board from date of last hire including all authorized paid leave provided the employee returns to work immediately at the conclusion of such leave.
4. Seniority will not be broken by any authorized unpaid leave, but seniority will not accrue during an unpaid leave. Seniority will continue to accrue while an employee is receiving Workers' Compensation benefits. Seniority will accrue during a period of layoff provided the employee returns to work within two (2) years.
5. Union stewards who have permanent status in the system and have served as stewards for at least four (4) months shall be deemed to have the highest seniority for purposes of layoff.
6. For employees covered by this Agreement, all bargaining unit work time within the school system shall be prorated and added to an employee's overall seniority provided the work time has been continuous.

ARTICLE VII

VACANCY

1. Job vacancy is defined as an opening created by a death, retirement, resignation, dismissal, or new position in the classifications listed in Appendix A (salary schedule). The Board shall retain the sole and exclusive discretion as to whether a vacancy shall be filled.
2. In the event that a vacancy is to be filled, job openings covered by this Agreement shall be electronically posted on the District's website for at least five (5) working days. The Union and Union members shall be electronically notified of the vacancy.
3. Employees desiring to apply for a vacancy shall file an application online or as directed by the notice and within the posted time limit.
 - a. Promotions and vacancies shall be filled by management in any of the following ways:
 1. by promotion of the qualified employees from lower level classifications within the bargaining unit; or
 2. by transfer of employees from higher or equal classifications within the bargaining unit; or
 3. by qualified new applicants.
 - b. Notwithstanding the above, an employee with a transfer request on file may be considered first to fill a vacancy. Transfer requests shall be renewed annually.
4. In filling vacancies, consideration shall be given first to the present staff on the basis of seniority provided, however, the most qualified applicant, as determined by the

Superintendent, either from within or outside the bargaining unit, shall be appointed to the vacancy.

5. When an employee is temporarily retained in a vacancy or new position for a period of sixty (60) calendar days, he/she, if qualified, will be considered during the selection process for permanent retention in the position.

During the period the employee is temporarily retained in a vacancy or new position of a different class or grade which has a higher maximum rate of pay, he/she shall temporarily be paid at the lowest step in the higher class or grade which produces an increase of at least one (1) pay increment provided, however, the employee has worked in such position for at least five (5) consecutive days.

6. An employee transferred involuntarily by the Board to a position with a lower rate of pay shall continue to be paid at the higher rate of pay until the end of the fiscal year. This provision shall not apply to employees who are transferred involuntarily due to poor performance or as a disciplinary consequence.

ARTICLE VIII **LAYOFF AND RECALL**

1. Whenever a workforce reduction in a classification is required, the reduction shall be made in the following manner: bargaining unit employees shall be the last group laid off and in inverse order to their length of service with the Board, provided all qualifications as called for in the job description are substantially equal.
2. There shall be two (2) categories for purposes of layoff and recall: ten month employees; and twelve month employees.
3. In the event of a layoff, the employee in the position being eliminated shall have the right to bump the employee in the appropriate category (either 10 or 12 month) who has the least amount of seniority.
4. A twelve-month employee can bump another twelve-month employee who has the least amount of seniority or a ten-month employee can bump another ten-month employee with the least amount of seniority.
5. For purposes of recall, the employee's name will be placed on the appropriate list (ten-month or twelve-month) for a period of two (2) years, subject to recall in order of seniority (from highest to lowest).
6. The laid off individual shall have the right to be recalled to a similar position to which he/she was laid off if a position should become vacant. In the event an employee is appointed to a position from a recall list but such position is in a lower salary group than the class from which he/she was laid off, he/she shall remain eligible for recall to a higher evaluated position in the same category. The choice of employees to be rehired shall be

based upon seniority, provided the employee can, in the judgment of the Superintendent of Schools, satisfactorily perform the work available.

7. The language contained in this Article does not prevent an employee from being recalled into a higher evaluated position.
8. No person shall be newly employed to a position if a recall list exists until all persons in that category have been notified by certified mail sent to the individual's last known address and such individual either is offered employment or declines such re-employment offer. It shall be the laid off individual's responsibility to notify the Superintendent of Schools of his/her current address.
9. An individual who declines an offer of re-employment shall forfeit recall rights. Failure to respond in writing to a notice of an opening within ten (10) working days after the mailing thereof shall be deemed to be a refusal to accept re-employment.
10. Returning individuals must return to work within thirty (30) calendar days from the date of the mailing of the notification. The failure to return to work within this thirty (30) day period shall be deemed a refusal to accept employment.

ARTICLE IX **PERSONNEL RECORDS**

1. An employee covered hereunder shall, upon his/her request, be permitted to examine and copy any and all materials in his/her personnel file. The Union may have access to any employee's records upon presentation of written authorization of said employee.
2. No new material derogatory to an employee hereunder shall be placed in his/her personnel file unless he/she has been provided an opportunity to review and sign the document (indicating receipt of such material) and has received a copy of such material. An employee or the Union may avail himself/herself/itself of the opportunity to explain or rebut materials submitted in his/her file. If a determination by the Superintendent is made in an employee's favor, the questioned material shall be expunged from the file.
3. An employee retains the right to grieve up to and including the Superintendent level, any material in his/her personnel file. If a determination by the Administration is made in the employee's favor, the questioned material shall be expunged from the file.

ARTICLE X **LEAVE PROVISIONS**

1. All employees shall receive sick leave with full pay of fifteen (15) working days per year with an accumulation of one hundred and thirty (130) days of unused sick leave for ten-month employees and one hundred eighty (180) days of unused sick leave for twelve month

employees. Each employee shall be notified electronically of his/her accumulated sick leave via the Board's electronic time-keeping system.

2. All employees hired on or after July 1, 2017, shall receive sick leave with full pay of ten (10) working days per year with an accumulation of one hundred (100) days of unused sick leave for ten-month employees and one hundred twenty-five (125) days of unused sick leave for twelve month employees. Each employee shall be notified electronically of his/her accumulated sick leave via the Board's electronic time-keeping system.
3. Sick leave may be used in the following cases:
 - a. personal illness or injury;
 - b. enforced quarantine of the employee in accordance with community health regulations;
 - c. medical and dental appointments. Such leave may be taken in two hour increments at the end or beginning of the work schedule, with the approval of the employee's supervisor.
 - d. Up to five (5) paid sick days per year may be used for family member illness care.
4. Other Personal Absence
 - a. A total of five (5) personal days for twelve-month secretaries and four (4) personal days for ten month secretaries will be granted with the following guidelines:
 1. The days may not be taken in a continuous manner, except for funeral leave;
 2. The days may not be taken just prior to or the day after a paid school holiday;
 3. Advance notification of the personal leave day will be given to the immediate supervisor as soon as possible;
 4. In the case of extenuating circumstances, Personal Leave time may be used in conjunction with other leave with approval from the Superintendent or his/her designee;
 5. The above leave may only be taken for business which cannot otherwise be transacted or scheduled outside school hours but is necessary to be performed or attended to on a workday.
 - b. Other days without salary deduction in cases of emergency or hardship may be granted at the discretion of the Superintendent of Schools.

5. Workers' Compensation, as distinguished from sick leave, shall mean leave given to an employee due to absence from duty caused by an accident or injury that occurred while the employee was engaged in the performance of his duties.

The Board of Education covers all employees with Workers' Compensation Insurance which pays an eligible employee a percentage of his/her earnings during the period of absence.

The difference between his/her Workers' Compensation and his/her current straight-time wages shall be provided by the Board of Education for a total period not to exceed sixty (60) days. Said amount shall be payable at the time benefits are paid by the compensation carrier and in accordance with the procedures, rules and regulations of the Board and carrier.

In exceptional cases, the Board may grant additional injury leave beyond the original sixty (60) days, upon request of the employee and analysis of the individual case. If the Board refuses to grant additional injury leave beyond the original sixty (60) days, an employee may elect to use a portion of sick leave. An employee may request the use of his/her sick leave or vacation pay while awaiting Workers' Compensation payment. When the compensation check is paid, it will be sent to the Board who will audit the time and make the necessary adjustments.

6. Jury Duty

Employees shall be entitled to full pay at their base rate for absence because of jury duty during their regularly scheduled work shift, less the fee paid with respect to such jury duty. In order to be eligible for full pay, an employee who is dismissed from jury duty before 1:00 p.m. shall return to work. Employees are encouraged to exercise their option to initially postpone jury duty to summer non-school months.

7. Upon the voluntary termination of employment, retirement or death of any employee who has completed ten (10) continuous years with the Board, he/she or the legal representative of his/her estate, shall be compensated at the employee's applicable wage rate for twenty-five (25) percent of the total accrued and unused sick leave.
8. An employee who is disabled and unable to work may use accumulated sick leave to cover the period of disability. The Superintendent may require, at regular intervals, written certification from the employee's physician of continued disability. Any disability lasting more than thirty (30) days may be subject to further medical review and evaluation by a Board selected physician at the Board's expense.
9. Seniority will continue to accrue while an employee is receiving paid leave and will not be broken if an employee returns to his/her job within eight (8) weeks of authorized unpaid leave. Seniority will be interrupted during further periods of authorized unpaid leave and will resume upon return to work if within the authorized leave period.

10. Military leave shall be granted in accordance with federal and state statutes, such as the Federal Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) and Section 7-462a and 27-33a of the Connecticut General Statutes. The time spent at such military leave will continue to count as uninterrupted service, and the Board shall continue paying benefits to the employee on military leave including retirement. Reserve training not to exceed three (3) weeks per year, as defined in Connecticut State Statutes, shall not result in a loss of pay. The Board of Education will make up the difference between pay received from the military and the secretary's regular salary.
11. Prior to the exhaustion of sick leave, an employee may request in writing an unpaid leave of absence with position held with the approval of the Board. An employee may also request a leave of absence for other reasons in writing with position held subject to the Board's approval. The Board may also grant an unpaid leave with position not held. Upon written request by an employee for continuation of paid insurance coverage, the Board will consider and act upon such request dependent upon the reasons given for the request for leave of absence. An employee's unauthorized leave or absence from work shall constitute just cause for disciplinary action up to and including termination of employment.

ARTICLE XI

GRIEVANCE PROCEDURE

1. Purpose

The purpose of this procedure is to secure at the lowest possible administrative level solutions to grievances.

2. Definitions

- a. A grievance shall mean a complaint by a bargaining unit member, a group of bargaining unit members or the Union that his/her/its rights under the specific language of this Agreement have been violated, or that as to him/her/them, there is a misinterpretation or misapplication of a specific provision of this Agreement.
- b. Grievant shall mean any member of the bargaining unit or a group of bargaining unit members or the Union similarly affected by a grievance seeking recourse under the terms of this Article.
- c. Days shall mean days when school is in session, except during summer recess when days shall mean business days.

3. Time Limits

- a. If a grievance is not filed in writing at Level One, or Level Two in cases of dismissal, suspension, demotion or for class-wide grievances, within twenty (20) days after the grievant knows or should have known of the act or conditions on which the grievance is based, then the grievance shall be considered to have been

waived and any subsequent grievance filed to address the same or substantially similar subject shall be deemed waived as well. Furthermore, if a grievance situation continues or reoccurs, such continuation or recurrence shall not extend the initial time for filing a grievance and shall not be considered as a separate grievance.

- b. The time limits specified within this Article, except for the initial filing, may be extended by mutual agreement of the Union and Board or its designee, provided that if a grievance is not submitted to a higher step in the above procedure, it shall be deemed settled on the basis of the answer in the last step considered.
- c. Failure by any administrator or the Board of Education to render his/her decision within the specified time limits shall be deemed to be a denial of the grievance and the grievance shall proceed to the next level.

4. Level One - School Principal / Immediate Supervisor

- a. If an employee feels that he/she may have a grievance, he/she and/or his/her Union steward or union representative may first discuss the matter with his/her principal or other appropriate administrator in an effort to resolve the problem informally.
- b. If the employee is still not satisfied with the disposition of the matter, he/she shall reduce the grievance to writing and submit it to the principal or other appropriate administrator. The principal shall, within seven (7) days of that filing of the grievance in writing, give a written answer, with a copy to the Union.

5. Level Two - Superintendent of Schools/Designee

- a. If the grievant is not satisfied with the disposition of his/her grievance at Level One, he/she may, within five (5) days after receipt of the decision, file his/her written grievance with the Superintendent of Schools or his/her designee.
- b. The Superintendent or his/her designee shall, within seven (7) days after receipt of the referral, meet with the grievant and a representative of the Union for the purpose of resolving the grievance.
- c. The Superintendent or his/her designee shall, within seven (7) days after the meeting, render his/her decision and the reasons therefore in writing to the grievant, with a copy to the Union.

6. Level Three - Board of Education

- a. If the grievant is not satisfied with the disposition of his/her grievance at Level Two, he/she may, within seven (7) days after the decision, submit the grievance to the Board of Education.
- b. The Board of Education or a committee of the Board shall hold a meeting within forty-five (45) days after receipt of the grievance, at which time it shall meet with

the grievant and with representatives of the Union for the purpose of resolving the grievance.

- c. The Board or Board committee shall, within ten (10) days after such meeting, render its decision and reasons therefore in writing to the grievant, with a copy to the Union.

7. Level Four – Mediation

- a. If the grievance is not resolved, the Union may submit the matter to a mediator appointed by the State Board of Mediation and Arbitration for the purpose of helping to resolve the grievance within ten (10) days after receipt of the Step Three answer. A copy of the request shall be sent to the Board. The Union may bypass Level Four and raise the matter to Level Five within ten (10) days after receipt of the Level Three answer.

8. Level Five - Arbitration

- a. If the grievance is processed to Level Four and is not resolved to the Union's satisfaction, or in the case where Level Four is bypassed, if the grievance is not resolved to the Union's satisfaction at Level Three, the Union may, at its option, submit the grievance to arbitration within fourteen (14) days of receiving the Level Four, or when bypassed, Level Three answer. The submission of the grievance shall state the provisions of the contract allegedly violated and the remedy sought. Grievances shall be submitted to the American Arbitration Association (AAA) or a mutually agreed upon alternative.
 - b. The arbitrator shall have no power to add to, subtract from, alter or modify this Agreement. The arbitrator shall render his/her decision in writing in accordance with applicable rules. The decision of the arbitrator shall be final and binding.
 - c. The cost of arbitration will be borne equally by the parties.
 - d. The arbitrator will hear only one grievance at a time. This provision will not prevent the arbitrator from hearing a Union or class action grievance; neither will it prevent discussion of the arbitrability and the merits of the grievance at the same hearing.
9. In case of grievances brought over a bargaining member's dismissal, suspension, demotion, or on behalf of the entire bargaining unit, the grievance shall be submitted directly to Level Two.

ARTICLE XII
INSURANCE AND PENSION BENEFITS

1. Employees may participate in health and dental insurance plans provided by the Board of Education as set forth in this Article.
2. Employees shall receive life insurance with accidental death and dismemberment benefits totaling to the nearest \$500 of each employee's wage at the Board expense. Upon retirement, an employee may elect to participate in a life insurance program if permitted to do so by the existing life insurance agency. Retirees will assume the full cost of such coverage. Employees who lose life insurance coverage due to unpaid leave status may be eligible to pay for continued coverage at their own expense subject to life insurance carrier requirements and policy.
3. For budgetary reasons, the Board has discretion to change insurance carriers, managed care providers or health care administrators at any time, provided there is no decrease in the level of existing benefits (the HDHP/HSA plan set forth in the parties' 2017-2020 collective bargaining agreement shall be used as the basis of comparison). The Board will make efforts to consult with the Union when changing carriers. The Board will arrange for information sessions with the employees covered by such insurance in order to provide for the smooth transition in the practices and procedural changes that may occur because of the change to new insurance carriers.

Each year, those employees employed prior to July 1, 2011 may elect not to participate in the insurance benefits set forth above, and, instead, shall receive an annual payment equal to \$1,100. The election must be made in writing between May 15th and May 31st, or, if hired after May 31st, within the first two weeks of employment. The full or prorated portion of the payment shall be paid to the employee in June each year in one lump sum payment for the previous year. Once an election has been exercised, it cannot be changed until May 15th through May 31st of the following year.

4. Subject to the provisions of Article XII, Section 3 above, the medical, Rx and dental insurance plan offered by the Board shall be the United Healthcare Block Purchasing Group medical and prescription drug insurance plan (the "United Plan").
5. The premium cost share percentages for medical and Rx benefits and associated administrative fees shall be as follows:
 - Effective July 1, 2024, the employee shall pay 20.5% of the premium cost share for medical and Rx coverage.
 - Effective July 1, 2025, the employee shall pay 21% of the premium cost share for medical and Rx coverage.
 - Effective July 1, 2026, the employee shall pay 21.5% of the premium cost share for medical and Rx coverage.
6. The Board shall offer dental insurance with the same administration, level of benefits, services and coverage as either the CIGNA Full-Service Dental with Rider A or CIGNA

Flex Dental Plans in effect at the time of execution of this Agreement. For informational purposes, a summary of dental benefits is set forth in Appendix B. Effective July 1, 2024, employees shall pay 17% of the premium cost for such coverage.

7. The Board shall offer vision benefits (lenses and frames) as set forth in the attached Anthem Proposed Blue View Vision Plan Summary which is attached hereto as Appendix C. Premium cost-sharing percentages for vision coverage will be at the same percentage rates as premium cost-sharing for medical and Rx coverage as set-forth above.
8. The Board shall retain its rights under Section 3 of this Article to change insurance carriers (including a change in third-party administrators) in whole or in part, provided there is no decrease in the level of existing benefits as compared with the HDHP/HSA plan offering as set forth in the parties' 2017-2020 collective bargaining agreement. Such HDHP/HSA plan shall be the baseline for determining whether there is a decrease in the level of existing benefits. The Board will not be required to use the United Plan as such baseline.
9. If the total cost of the insurance plans offered pursuant to this agreement triggers an excise tax under the Patient Protection and Affordable Care Act (Internal Revenue Code Section 4980I), or any local, state or federal statute or regulation, or the Board reasonably anticipates that such a tax will apply for a future coverage period, the Board shall have discretion to reopen negotiations with respect to health insurance plan design and funding, premium cost share and/or introduction of an additional optional or alternative health insurance plan.
10. For twelve-month and ten-month secretaries who are employed by the Board on a less than full-time basis, the Board's contribution towards the Board's portion of the total (including any HSA deductible) cost of insurance shall be proportionate to the amount of time the secretary works on a weekly basis. For example, the Board's contribution to the cost of insurance on behalf of a .5 FTE ten-month secretary shall be 50% of the contribution it makes to the total cost of insurance for a 1.0 FTE ten-month secretary. Likewise, the Board's contribution to the cost of insurance on behalf of a .8 FTE twelve-month secretary shall be 80% of the contribution it makes to the total cost of insurance for a 1.0 FTE twelve-month secretary.
11. Employees hired on or after July 1, 2017 may be eligible to participate in the Town of East Hampton's Money Purchase Plan & Trust retirement plan (the "Plan"), which became effective January 1, 2013 and which may be amended from time to time. Employees hired on or after July 1, 2017 shall receive Plan information upon hire. Such employees hired on or after July 1, 2017 shall not be eligible for participation in any other pension or retirement plan. This provision of the Agreement is included for informational purposes only and this benefit is not subject to the grievance procedure. Employees shall remain eligible to voluntarily contribute to a Board sponsored 403b retirement plan. No Board matching contributions shall be made to such plan.

ARTICLE XIII
WAGES

1. When an employee is required to work temporarily in a job classification higher than that to which the employee has been permanently assigned, the employee shall be compensated at the rate of compensation in his/her temporary classification which is one full increment more than the employee's rate of compensation in the permanent classification.
2. Whenever an employee is permanently moved from a class or grade which has a higher maximum rate of pay, the employee will be paid at the lowest step in the higher class or grade which produces an increase of at least one pay increment.
3. The Superintendent shall have discretion to place existing bargaining unit employees who transfer from a position within one class to a position within another class at the step of the salary schedule which he or she deems appropriate. The union representative and the steward of the bargaining group shall be notified electronically of all new bargaining unit employees within seven (7) days of hire. Notification shall include the new employee's hourly rate, job title and school assignment.
4. If an employee is permanently moved from a class or grade to a different class or grade which has a lower maximum rate of pay, he/she shall be paid at the step in the lower class or grade which is closest to his/her current rate of pay.
5. Negotiated wages shall be retroactive to July first of each year, except if otherwise noted in Appendix A.
6. The Board shall provide wages as set forth in Appendix A (Wage Schedule).
7. The job positions in each job classification of Appendix A are as follows:

Classification I - Fiscal Services Associate for Payroll and Insurance and Fiscal Services Associate for Accounts Payable and Insurance, Administrative Assistant to the Curriculum Director, and Administrative Assistant to the Director of Special Education.

Classification II - Administrative Assistant to the Director of Facilities to the Principals of Memorial, Center, Middle, High School, and the High School Guidance Office, Main Office Administrative Assistant at Memorial, Middle School, and High School, and Support Services Administrative Assistant at Memorial, Center, Middle and High School.

ARTICLE XIV
UNION CONVENTION

The Board shall, upon reasonable advance notice, permit one employee to attend one MEUI/CEUI convention or training session each year for a period of one day without loss of compensation.

ARTICLE XV
SAVINGS CLAUSE

If any section, sentence, clause or phrase of this Agreement shall be held for any reason to be inoperative, void, or invalid, the validity of the remaining portions of this Agreement shall not be affected hereby, it being the intention of the parties in adopting this Agreement that no portion thereof or provision herein shall become inoperative or fail by reason of the invalidity of any other portion or provision and the parties do hereby declare that it would have severally approved of and adopted the provisions contained herein, separately and apart from the other. The parties agree to immediately negotiate a substitute for the invalidated articles, section, sentence, clause and phrase.

ARTICLE XVI
PREGNANCY DISABILITY LEAVE

Employees shall be granted pregnancy disability leave in accordance with the state and federal law. An employee will continue to accrue earned time while she is on a paid pregnancy disability leave. If the employee is unable to report back to her job at the end of her pregnancy disability leave, she may make a request to the Superintendent or his or her designee for a leave of absence of up to six (6) months with her job held or a comparable position.

ARTICLE XVII
HOLIDAYS

1. Twelve Month Employees

The following days shall be designated as paid holidays:

New Year's Day	Labor Day
Presidents' Day	Columbus Day
Good Friday	Veteran's Day*
Memorial Day	Thanksgiving Day
Independence Day	Day after Thanksgiving
Martin Luther King Day	Christmas Eve Day
Day after Christmas (if Christmas is on a Thursday)	Christmas Day
One Floating Holiday	New Year's Eve

* Veteran's Day shall only be a holiday when school is not in session. If school is in session, the Superintendent shall designate another day off when school is not in session.

2. Ten Month Employees

The following days shall be designated as paid holidays:

Christmas Day	Presidents' Day
Labor Day	Good Friday
Columbus Day	Thanksgiving Day
Veteran's Day*	Day after Thanksgiving
Martin Luther King Day	One Floating Holiday
Memorial Day	Christmas Eve Day

Independence Day, provided the holiday falls within the 10 month employee's regular employment year.

* Veteran's Day shall only be a holiday when school is not in session. If school is in session, the Superintendent shall designate another day off when school is not in session.

3. Ten (10) and twelve (12) month employees will be dismissed early and be paid for a full day on the last day of school prior to the Thanksgiving and Christmas holidays (when school is in session for a half day). Dismissal time shall be 5 1/2 hours (including lunch) from the employee's normal starting time.
4. State Statute shall be used to determine the day holidays are observed.
5. An employee who is required to work on the day of observance of any of the aforesaid holidays when school is not in session shall be compensated at the rate of one and a half times his/her regular hourly rate of all hours worked on said day in addition to his/her holiday pay.
6. Whenever any of these holidays shall occur while an employee is out on sick leave, the employee shall be paid for the holiday at his/her earned rate and his/her sick leave shall not be charged for that holiday.
7. When a holiday occurs during regular vacation, said holiday shall not be charged against the employee's earned vacation time. The employee shall be granted an additional day off mutually agreeable to both the employee and the Superintendent or his/her designee.
8. Any employee required to work on a day designated by the Governor of the State of Connecticut or the President of the United States as a state or national day of mourning shall be allowed a substitute day off with compensation on a date mutually acceptable to the employee and the Board. The compensatory day will be paid at the employee's straight-time rate.
9. If school is scheduled to be in session on any designated holidays, an employee may use a floating holiday with the prior approval of a supervisor.

ARTICLE XVIII
VACATION

1. All full-time clerical employees covered under the terms of the Agreement employed on a twelve (12) month basis shall annually be entitled to vacations as follows:

- a. New Hires: newly hired employees shall accumulate vacation at the rate of one-half working day per full month of active employment service up to July 1. For both new hires and bargaining unit members, employment service from date of hire to July 1 shall be considered one year of completed employment service for purposes of the vacation schedule that follows.
 - b. One year of completed employment service but less than five: ten (10) working days
 - c. Five years of completed employment service but less than ten: fifteen (15) working days
 - d. Ten years of completed employment service but less than fifteen: twenty (20) working days.
 - e. Fifteen years of completed employment service or more: twenty-five (25) working days.
2. The vacation schedule will be set by mutual agreement between the Superintendent or his/her designee and the employee, except that seniority will govern in the case of conflicts between employees' selections. Requests for vacations must be submitted by April 1st. Requests after that date no longer have prerogative of seniority prevailing.
 3. Pro rata vacation pay to the end of the preceding month shall be granted to an employee in the event he /she terminates his/her services with the Board, providing the employee gives the Superintendent or his/her designee at least two (2) weeks' advance written notice of his/her desire to terminate. In the event of an emergency termination this period can be shortened to meet the specific situation through mutual agreement.
 4. In the event of an employee's death, his/her pro rata accumulated vacation shall be paid to his/her estate.
 5. Vacation time may be accrued in the following manner:

1-4 years of completed service	3 days may be carried over per year
5-9 years of completed service	4 days may be carried over per year
Over 10 years of completed service	5 days may be carried over per year
- A total of no more than fifteen (15) carryover days can be accrued at any time.
6. During an authorized unpaid leave of absence in excess of ten (10) days in any given month, vacation days shall not accrue on a pro rata basis for that month. Workers' Compensation shall not be construed as unpaid leave.

7. For accumulation of vacation time, completed years of service for East Hampton Public Schools will be used to determine time granted. Employees who have worked a ten-month schedule and subsequently take a twelve-month position shall have their ten-month work prorated (10/12) to determine the amount of vacation coverage they receive as a twelve-month employee.

ARTICLE XIX
MISCELLANEOUS

1. Early Dismissal for Emergency/Weather

In the event schools are closed early and the faculty is dismissed, employees will be allowed to leave with no loss of pay once the Superintendent or his/her designee notifies each building, and until buses have delivered students from their school and have been brought home and buses are back to the bus yard.

2. Late Opening for Emergency/Weather Reasons

In the event schools are open late (one to two hours) due to weather or other emergency reasons, employees are to report to work at the same time as the delay and will be compensated at their full rate as if they had worked a full day. On days when school is closed, 12 month employees shall be allowed to work or work from home, except that the Superintendent or his or her designee may require secretaries to work from the District's offices if the necessary work cannot be effectively performed at home by the secretary (i.e. payroll).

3. Employees shall have the option to use paid personal leave or vacation days when school is closed due to inclement weather or other emergencies.

4. Cars

Personal vehicles will not be used for school business except when authorized by the Superintendent or Principal; reimbursement will be at the applicable IRS rate. Secretaries shall not drive students in their personal vehicles.

5. First Aid

In accordance with Connecticut General Statutes Section 10-212a, school secretaries will not be required to administer first aid or medication.

6. Training

New hires or transfers will receive mandatory computer training if the administration deems it necessary before being asked to perform the complete job duties of the position.

7. Substitute Coverage

In the event a member of the bargaining unit is absent from their position due to illness, personal reason, or vacation, or the position becomes vacant, a non-bargaining unit substitute may be hired to cover that position with the following conditions:

- a. All paid hours available will be offered to present union staff first and they will be paid at their current hourly rate for all hours covered.
- b. If no union employee is available to cover, a substitute may be hired at the discretion of the building administrator (ie. Part time secretary) and they will be paid at their current hourly rate not to exceed a two week period.
- c. If the absence is longer than two weeks, and a substitute is hired to cover the position and will be working more than 19 ¾ hours per week, then, effective on the eleventh (11th) day, the substitute will be placed on step 1 of the contract until such time as the employee returns or a new person is hired for the position.

**ARTICLE XX
UNION PICNIC**

Each member of this bargaining unit may be released from one-half of his/her shift in order to attend one Union picnic per year.

**ARTICLE XXI
PAYMENT FOR SERVICES**

All employees shall be paid through direct deposit at a participating bank or qualified financial institution of the employee's choice on a biweekly basis on the same day of every other week.

**ARTICLE XXII
SCHOOL FACILITIES**

Upon request through the principal of the school, the Union will have the right to use school buildings at reasonable times at no cost as long as such use does not disrupt school operations.

**ARTICLE XXIII
JOB DESCRIPTIONS**

The Board shall notify the Union about the content of any new job descriptions after they are written, but before they are implemented.

ARTICLE XXIV
RE-EVALUATION

An employee whose duties have significantly been changed may request a meeting with the building principal to discuss the situation. If the employee's supervisor agrees that an employee's job duties have changed significantly, the supervisor must request a re-evaluation of that position by the Superintendent or designee.

ARTICLE XXV
PERFORMANCE EVALUATION

1. If management elects to do performance evaluations, management will make a reasonable effort to evaluate every bargaining unit member in writing.
2. An employee may request to meet with their building principal to discuss significant changes to their job duties. If the building principal agrees that the employee's job duties have changed significantly, the building principal shall advise the Superintendent of the same and request that the employee receive additional compensation as appropriate or a reassignment of job duties. Advances in technology (i.e. the use of new computer software) do not constitute significant changes to job duties.

ARTICLE XXVI
DISCIPLINARY ACTION

Written reasons for all suspensions and discharges must be given to the employee in person or by mail/email and the Union at the time of the suspension or discharge, except in cases of emergency suspension or discharge, in which case written reasons will be supplied as soon as possible.

ARTICLE XXVII
PROFESSIONAL SEMINARS

1. There shall be established a \$1,100 pool per fiscal year to be used at a rate of no more than \$225 by any one individual each year for the purpose of attending professional seminars. Funds would be granted on a first come, first serve basis subject to approval by the immediate supervisor and the Superintendent. Time off will be granted, at the Superintendent's discretion, to attend these seminars should they fall within the work week. Every effort will be made to allow each member of the bargaining group an equal opportunity to attend seminars over the life of the contract.
2. One thousand fifty dollars (\$1,050) will be budgeted during each year of this contract to reimburse employees for college tuition and related expenses. Employees wishing to apply for such reimbursement shall apply in writing, in advance of attending the course, to the Superintendent of Schools. Such application must include: name of school/college; course name; cost information; and a detailed explanation of how such a course will upgrade the

skills and/or knowledge necessary for performing the employee's job. Reimbursements per year per employee will not exceed \$350.00 and will be processed for payment upon submission of a paid receipt. Requests will be approved on a first-come, first-serve basis until all the money is expended.

ARTICLE XXVIII
LONGEVITY

1. Employees on the payroll on the specified dates of longevity payments shall receive longevity compensation.
2. Longevity shall be based solely on years of completed employment service with the Board as of November 1 each year. Longevity payments shall be made on the following schedule:

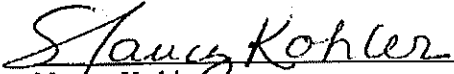
5 years of completed service	\$300.00
10 years of completed service	\$450.00
15 years of completed service	\$600.00
20 years of completed service	\$750.00
25 years of completed service	\$875.00
3. The annual longevity payment shall be due and payable in one (1) installment, no later than November 30. Longevity payments shall be included in the employee's total earnings for the purpose of determining their pension benefits.
4. New employees hired by the Board on or after July 1, 2017 shall not be eligible for longevity payments.

ARTICLE XXIX
DURATION

This Agreement shall be effective on July 1, 2024, and remain in full force and effect through the thirtieth day of June 2027.

IN WITNESS WHEREOF, the parties hereto have set their hands this _____ day of _____, 2024.

**For the Town of East Hampton
Board of Education**



Nancy Kohler
Board Chairperson

7.18.24

**For the East Hampton School Secretaries
Municipal Employees Union Independent**



Kelly Cafuso
Union President

7/18/24

APPENDIX A*
SALARY SCHEDULES**

<u>Step</u>	<u>Effective</u> <u>7/1/24</u>	<u>Effective</u> <u>7/1/25</u>	<u>Effective</u> <u>7/1/26</u>
Class I			
1	\$28.78	\$29.57	\$30.31
2	29.71	30.53	31.30
3	30.31	31.14	31.92
4	32.40	33.29	34.12
Class II			
1	\$24.69	\$25.37	\$26.01
2	25.48	26.18	26.84
3	26.28	27.00	27.68
4	27.02	27.76	28.46
5	27.87	28.64	29.35
6	28.74	29.53	30.27
7	29.66	30.48	31.24

*Effective July 1, 2024 all Class I Secretaries and Class II Secretaries who are not at top step shall advance one step. There will be no step movement in the second year of the agreement. Effective July 1, 2026 all eligible employees who are not at top step shall advance one step.

**Secretaries who are at top-step or off step shall receive general wage increases corresponding to the percentage value of the combined general wage increase and step increment movement of the highest step level employees on the salary schedule in 2024-25 and 2026-27 only.

***New Employees – Initial Salary Placement – The initial step placement of a new employee shall generally be on Step 1; however the Superintendent shall have the discretion to place a new employee on up to Step 3 of the wage schedule based upon his or her assessment of the new employee's successful prior experience as a secretary.

****Effective July 1, 2024 incumbents in the positions of Administrative Assistant to the Director of Curriculum and Administrative Assistant to the Director of Support Services shall be placed at Class I, Step 1 of the Salary Schedule pursuant to the redesignation of such positions from Class II to Class I.

Cigna Healthcare Financial Exhibit for:
East Hampton Board of Education
DPPO

Effective Date: July 01, 2023



This is a summary of benefits for your dental plan.
 All deductibles, plan maximums, and service specific maximums (dollar and occurrence) cross accumulate between in and out of network.
 Your DPPO plan allows you to see any licensed dentist, but using an in-network dentist may minimize your out-of-pocket expenses.

Plan Design	Total Cigna DPPO	Out-of-Network
Calendar Year Maximum (Class I, II, III Expenses)	Unlimited	Unlimited
Calendar Year Deductible		
Per Individual	\$0	\$0
Per Family	\$0	\$0
Class I Expenses - Preventive & Diagnostic Care		
Oral Exams Cleanings Routine X-rays Sealants Non-Routine X-rays Brush Biopsy	100%, No Deductible	100%, No Deductible
Class II Expenses - Basic Restorative Care		
Emergency Care to Relieve Pain Fillings (Amalgam and composite on all teeth) Oral Surgery - Simple Extractions Minor Periodontics Root Canal Therapy / Endodontics Relines, Rebases, and Adjustments Repairs - Bridges, Crowns, and Inlays Repairs - Dentures Stainless Steel/Resin Crowns Fluoride Application	80%, No Deductible	80%, No Deductible
Anesthetics	Not Covered	Not Covered
Class III Expenses - Major Restorative Care		
Space Maintainers (limited to non-orthodontic treatment) Oral Surgery - All Except Simple Extraction Surgical Extraction of Impacted Teeth Crowns/Inlays/Onlays Major Periodontics	67%, No Deductible	67%, No Deductible
Bridges Dentures	Not Covered Not Covered	Not Covered Not Covered
Class IV Expenses - Orthodontia		
	Not Covered	Not Covered
Dental Plan Reimbursement Levels	Based on Contracted Fees	95th Percentile of Submitted Charges***
Additional Member Responsibility in excess of Coinsurance	None	Yes, the difference between the member's dentist's billed charges and the dental plan reimbursement level***
Student/Dependent Age	26/26	

P0010 Network. Prepared by Underwriting.

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Cigna Healthcare Financial Exhibit for:
East Hampton Board of Education
DPPO
 Effective Date: July 01, 2023

Cigna Dental PPO / Indemnity Exclusions and Limitations:

Procedure	Exclusions & Limitations
Exams	Two per calendar year
Prophylaxis (cleanings)	Two routine and 2 periodontal cleanings following active therapy per calendar year
Fluoride	2 per calendar year for people under 18
X-Rays (routine)	Bitewings: 1 per calendar year
X-Rays (non-routine)	Full mouth: 1 every 5 calendar years; Panorax: 1 every 5 calendar years
Model	Payable only when in conjunction with Ortho workup
Minor Pano (non-surgical)	Various limitations depending on the service
Perio Surgery	Various limitations depending on the service
Crowns	Replacement every 7 years
Prosthesis over Implants	1 per every 7 years if unserviceable and cannot be repaired. Benefits are based on the amount payable for non-precious metals. No porcelain or white tooth colored material on molar crowns or bridges
Bridges	Not Covered
Dentures and Partials	Not Covered
Resins, Rebases	Covered if more than 6 months after installation
Adjustments	Covered if more than 6 months after installation
Repairs - Bridges	Reviewed if more than once
Repairs - Dentures	Reviewed if more than once
Sealants	Limited to posterior teeth. One treatment per tooth every three years up to age 18
Space Maintainers	Limited to non-Orthodontic treatment. No frequency limit for participants under age 19.
Alternate Benefit	When more than one covered Dental Service could provide suitable treatment based on common dental standards, Cigna HealthCare will determine the covered Dental Service on which payment will be based and the expenses that will be included as Covered Expenses.
Missing Tooth Provision	No Limitation (teeth missing prior to the effective date of coverage are covered)
Late Enrolment Limit****	No coverage until next open enrollment period
Pre-Treatment Review	Available on a voluntary basis when extensive work in excess of \$200 is proposed

Benefit Exclusions:

- * Services performed primarily for cosmetic reasons;
- * Replacement of a lost or stolen appliance;
- * Replacement of a bridge or denture within five years following the date of its original installation;
- * Replacement of a bridge or denture which can be made useable according to accepted dental standards;
- * Procedures, appliances or restorations, other than full dentures, whose main purpose is to change vertical dimension, diagnose or treat conditions of TMJ, stabilize periodontally involved teeth, or restore occlusion;
- * Veneers of porcelain or acrylic materials on crowns or pontics on or replacing the upper and lower first, second and third molars;
- * Bite registrations; precision or semi-precision attachments; spinning; Surgical implant of any type;
- * Instruction for plaque control, oral hygiene and diet;
- * Dental services that do not meet common dental standards;
- * Services that are deemed to be medical services;
- * Services and supplies received from a hospital;
- * Charges which the person is not legally required to pay;
- * Charges made by a hospital which performs services for the U.S. Government if the charges are directly related to a condition connected to a military service;
- * Experimental or investigational procedures and treatments;
- * Any injury resulting from, or in the course of, any employment for wage or profit;
- * Any sickness covered under any workers' compensation or similar law;
- * Charges in excess of the reasonable and customary allowances;
- * To the extent that payment is unlawful where the person resides when the expenses are incurred;
- * Procedures performed by a Dentist who is a member of the covered person's family (covered person's family is limited to a spouse, siblings, parents, children, grandparents, and the spouse's siblings and parents).
- * For charges which would not have been made if the person had no insurance: For charges for unnecessary care, treatment or surgery;
- * To the extent that you or any of your Dependents is in any way paid or entitled to payment for those expenses by or through a public program, other than Medicaid;
- * To the extent that benefits are paid or payable for those expenses under the mandatory part of any auto insurance policy written to comply with a "no-fault" insurance law or an uninsured motorist insurance law. Cigna HealthCare will take into account any adjustment option chosen under such part by you or any one of your Dependents.
- * In addition, these benefits will be reduced so that the total payment will not be more than 100% of the charge made for the Dental Service if benefits are provided for that service under this plan and any medical expense plan or prepaid treatment program sponsored or made available by your Employer.

*** In Texas, the insured dental product offered by CGLIC and CHLIC is referred to as the Cigna Dental Choice Plan, and this plan utilizes the national Cigna Dental PPO network.*

**** Charges are based upon an independent third party organization that is the industry standard. Percentile data is based upon the third party organization's aggregated industry-wide claims data.*

***** Late Enrolment coverage limitation does not apply to New Mexico Residents for Insured Dental Products.*

This benefit summary highlights some of the benefits available under the proposed plan. A complete description regarding the terms of coverage, exclusions and limitations, including legislated benefits, will be provided in your insurance certificate or plan description.

Benefits are insured and/or administered by Cigna HealthCare.

Did you know that most of Cigna's dental plans include the Cigna Dental Oral Health Integration Program? This program was designed to address research that supports the association of oral health to overall health and provides reimbursement of copays or coinsurance for customers with qualifying medical conditions for program eligible procedures. Additionally, registered program members can access articles on behavioral conditions that impact oral health.

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Prepared by Underwriting
 Cigna DPPO Network (P0010)

03/30/2023 03:56 PM

Group Name: East Hampton BOE
Proposed Blue View Vision plan design

Blue View Vision plan benefits

Routine Eye Exam

A comprehensive eye examination

In-Network

\$15 copay

Out-of-Network

Up to \$45 reimbursement

Frequency

Once every 12 months

Eyeglass Frames

One pair of eyeglass frames

\$175 allowance, then 20% off any balance

Up to \$126 reimbursement

One every 12 months

Eyeglass Lenses *(instead of contact lenses)*

One pair of standard plastic prescription lenses:

- o Single vision lenses
- o Bifocal lenses
- o Trifocal lenses
- o Lenticular lenses

\$0 copay
\$0 copay
\$0 copay
\$0 copay

Up to \$40 reimbursement
Up to \$65 reimbursement
Up to \$75 reimbursement
Up to \$100 reimbursement

One every 12 months

Contact Lenses¹ *(instead of eyeglass lenses)*

- o Elective conventional (non-disposable); OR
- o Elective disposable; OR
- o Non-elective (medically necessary)

\$360 allowance, 15% off any balance
\$360 allowance (no additional discount)

Covered in full

Up to \$345 reimbursement
Up to \$345 reimbursement
Up to \$345 reimbursement

Once every 12 months

¹ Contact lens allowance will only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases in the same benefit period, nor can any unused amount be carried over

Group Name: East Hampton BOE

Proposed Blue View Vision plan design

Additional savings available from Access in-network providers when obtaining covered eyewear from a Blue View Vision provider, members may choose to upgrade their new eyeglass lenses at a discounted cost. Costs shown are after any applicable eyeglass lens copayment.

Blue View Vision plan benefits	In-Network Member Copay	Out-of-Network	Frequency
Eyeglass Lens Enhancements			
<ul style="list-style-type: none"> Transitions Lenses (pediatric) Standard polycarbonate (pediatric) Factory scratch coating (pediatric) Transitions Lenses (adults) Standard polycarbonate (adults) Factory scratch coating (adults) 	<ul style="list-style-type: none"> \$75 \$0 \$15 \$75 \$40 \$15 	<ul style="list-style-type: none"> N/A N/A N/A N/A N/A N/A 	Same as covered eyeglass lenses
Progressive Lenses			
<ul style="list-style-type: none"> Standard Premium Tier 1 Premium Tier 2 Premium Tier 3 Premium Tier 4 	<ul style="list-style-type: none"> \$65 \$85 \$95 \$110 20% off retail price 	<ul style="list-style-type: none"> Up to \$65 reimbursement Up to \$65 reimbursement Up to \$65 reimbursement Up to \$65 reimbursement Up to \$65 reimbursement 	Same as covered eyeglass lenses
Anti-Reflective Coating			
<ul style="list-style-type: none"> Standard Premium Tier 1 Premium Tier 2 Premium Tier 3 	<ul style="list-style-type: none"> \$45 \$57 \$68 20% off retail price 	<ul style="list-style-type: none"> N/A N/A N/A N/A 	Same as covered eyeglass lenses
Tint (Solid and Gradient)			
<ul style="list-style-type: none"> UV Coating Oversized Lenses Other lens upgrades and add-ons 	<ul style="list-style-type: none"> \$15 \$15 \$0 20% off retail price 	<ul style="list-style-type: none"> N/A N/A N/A N/A 	Same as covered eyeglass lenses
Retinal Imaging (obtained at same time as covered eye exam)			
<ul style="list-style-type: none"> Standard contact lens fitting and follow-up after comprehensive eye exam Premium contact lens fitting and follow-up after comprehensive eye exam 	<ul style="list-style-type: none"> Up to \$39 Up to \$55 10% off retail price 	<ul style="list-style-type: none"> N/A N/A 	
<ul style="list-style-type: none"> Additional supplies of conventional contact lenses after benefits have been used Additional complete pairs of eyeglasses Eyeglass materials purchased separately Other items including most non-prescription sunglasses, eyewear accessories such as lens cleaning supplies, contact lens solutions, eyeglass cases, etc. 	<ul style="list-style-type: none"> 15% off retail price 40% off retail price 20% off retail price 20% off retail price 	<ul style="list-style-type: none"> N/A N/A N/A N/A 	

Other discount offers on LASIK surgery and much more available through Anthem's Special Offers program.

This information is intended to be a brief outline of plan benefits. The most detailed description of benefits, exclusions, and restrictions can be found in the Certificate of Coverage. Discounts are subject to change without notice. Laws in some states may prohibit network providers from discounting products and services that are not covered benefits under the plan. Discounts will not apply when a manufacturer has imposed a no discount policy on the item.

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Memorandum of Understanding Between
The East Hampton Board of Education
and
East Hampton School Secretaries Municipal Employees Union Independent

This Memorandum of Understanding is made by and between the **East Hampton Board of Education (the "Board")** and the **East Hampton School Secretaries Municipal Employees Union Independent (the "Union")**. The purpose of this Memorandum is to set forth the terms and conditions of the Board's adoption and implementation of a medical and prescription drug insurance plan through Anthem Blue Cross Blue Shield's Century Preferred PPO Choice CSV PCP\$0/SPEC\$0/\$0/\$250/\$0 Rx \$5/\$35/\$40 (the "Anthem Plan").

WHEREAS, the Board currently provides health insurance benefits through the United Healthcare Block Purchasing Group medical and prescription drug insurance plan (the "United Plan") pursuant to a memorandum of understanding that was entered into by the Board and the Union on or around June 15, 2023 (the "United Plan MOU"), and;

WHEREAS, the Board was quoted a 2024-25 renewal premium for the United Plan of approximately 23%, and;

WHEREAS, the Board and the Union mutually desire to reduce the cost of insurance while preserving existing benefits and;

WHEREAS, the Board and the Union (collectively referred to as the "Parties") agree that it is in their mutual interest for the Board to adopt and implement the Anthem Plan pursuant to the terms and conditions set forth in this Memorandum.

NOW THEREFORE, the Parties agree to the following:

1. Effective July 1, 2024, or as soon as the Board may do so, the Board shall apply to the appropriate entity for coverage under the Anthem Plan. Upon the first day of the month after being accepted into the Anthem Plan, or as soon thereafter as may occur, the Board will cease providing health insurance and prescription benefits through the United Plan and will instead provide health insurance and prescription benefits through the Anthem Plan. A summary of this insurance plan and benefits of the Anthem Plan is attached as Exhibit A to this Memorandum. If the Board's application to provide health insurance through the Anthem Plan is not accepted, the Board shall continue to provide such insurance through the United Plan pursuant to the terms of the United Plan MOU or as otherwise permitted pursuant to the parties' collective bargaining agreement.
2. The Board agrees that the Anthem Plan shall provide benefit levels and coverages, which are substantially equivalent to or better than the United Plan Medical and Pharmacy plan benefits, as it relates to copays, coinsurance, deductibles, and plan maximums. In the event a teacher or his/her dependents have a denied service previously covered by the United Plan, the Board shall instruct Anthem to amend the Anthem Plan to reflect its coverage position and, if needed, reprocess the claim and/or reimburse the member of any out-of-

7

pocket expenses exceeding the Anthem Plan's copay requirement, except when there is a clinical, medical policy that precludes it and in cases where there is a difference in prescription drug formulary.

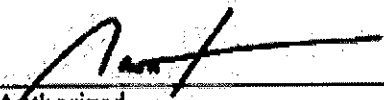
3. To minimize disruption to covered employees as a result of changing plans, the Anthem Plan shall feature a six-month transition of care benefit program ("TOC") through which the Parties have agreed to cooperate in attempting to bring into the Anthem network, employee physicians who are in the current United Network, but are not in the Anthem network. With respect to medications: A. For any medication that a member was taking prior to enrolling in the Anthem Plan that is listed as non-formulary medication under the Anthem Plan, the member's provider may seek authorization from Anthem to allow the member to continue taking said medication if they feel it is clinically necessary. Anthem has committed to authorizing all such requests; B. Anthem has committed to covering all generic medications at the Tier 1 co-pay level.
4. For the term of this Memorandum, the Anthem Plan shall be fully-insured and shall comply with all state mandates for fully-insured insurance plans.
5. Similar to the United Plan, the Anthem Plan will offer in-network provider designations enabling members to pay \$0 copay for Value Tier 1 In-Network Providers, or \$15 copays for all other in-network office and specialist visits.
6. Diabetic medication and supplies will be covered 100%.
7. The Anthem Plan shall not include Health Enhancement Plan ("HEP") compliance requirements and/or similar wellness plan requirements.
8. The Anthem Plan shall include Anthem's Preventative Rx Plus Drug List for preventive medications covered at 100%, a copy of which is attached hereto as Exhibit B.
9. Anthem shall obtain, and the Anthem Plan shall honor, all prior authorizations in place with United.
10. The Board shall continue the current Dental Plan through CIGNA with premium cost share increases for 2024-25 as set forth in the Parties' 2022-2025 collective bargaining agreement.
11. Vision Plan benefits will continue to be provided through Anthem. In accordance with current practice, employees will pay the same premium cost share for vision benefits as is paid for health and Rx benefits. The terms of such vision coverage shall be as set forth in the attached Anthem Proposed Blue View Vision Plan Summary which is attached hereto as Exhibit C.
12. The Board shall coordinate meeting times in May and/or June of 2024 so that members can familiarize themselves with the Anthem Plan, reach out to Anthem representatives,

research alternative care providers and medications, and, with Union assistance, help facilitate outreach to member's providers who are not currently in the Anthem network.

13. Except as otherwise expressly provided for herein, nothing in this Agreement shall be deemed to impair or supersede the insurance provisions set forth in the Parties' collective bargaining agreement.
14. Effective July 1, 2024, employees shall pay 20.5% of the premium cost share for the medical and Rx coverage set forth in this Agreement.
15. The Parties agree that the Board and the Union have fully complied with all requirements with respect to notification of a potential change in carrier as set forth in the Parties' collective bargaining agreement, and the Union expressly waives any and all claims with respect to such notification process.
16. The terms of this Memorandum shall remain in effect until July 1, 2025 or prior thereto if the Board elects to exercise its right to change insurance carriers in accordance with the provisions of the Parties collective bargaining agreement.
17. The Board and the Union agree that this Memorandum and its contents shall not be relied upon by either party as evidence of a) a violation of the parties' collective bargaining agreement (or any past practice) between them, b) an obligation to bargain over this matter, or c) a failure to bargain over terms and conditions of employment. This Memorandum and its contents shall not constitute a precedent or an instance of a past practice in any future matter. In addition, nothing herein shall be deemed to affect a) any provision of the collective bargaining agreement between the parties except as expressly stated herein, or b) any other condition or term of employment (including any past practice). The parties herewith reserve their rights in future negotiations and further reserve any and all rights that they may have. The Parties may only use this Memorandum in future proceedings if it is necessary to establish a breach of this Memorandum or to enforce the terms of this Memorandum.
18. This Memorandum shall become effective following full ratification by the Board and the Union.

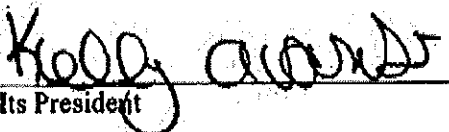
[SIGNATURE PAGE FOLLOWS]

EAST HAMPTON
BOARD OF EDUCATION

By 
Duly Authorized

5/20/24
Date

East Hampton School Secretaries Municipal Employees Union Independent


Its President

5/20/24
Date

Your summary of benefits



Anthem® Blue Cross and Blue Shield

Your Plan: Anthem Century Preferred PPO Choice CSV PCP\$0/SPEC\$0/\$0/\$250/\$0 Rx \$5/\$25/\$40

Your Network: Century Preferred Tiered

Visits with Virtual Care-Only Providers	Cost through our mobile app and website
Primary Care, and medical services for urgent/acute care	No charge
Mental Health & Substance Use Disorder Services	No charge
Specialist care	No charge

Covered Medical Benefits	Cost if you use a Value Tier 1 In-Network (INET) Provider	Cost if you use a Participating Tier 2 In-Network (INET) Provider	Cost if you use an Out-of-Network (OON) Provider
Overall Deductible	\$0 person / \$0 family		\$300 person / \$900 family
Overall Out-of-Pocket Limit	\$2,000 person / \$4,000 family		\$2,000 person / \$4,000 family

The family deductible and out-of-pocket limit are embedded, meaning the cost shares of one family member will be applied to the per person deductible and per person out-of-pocket limit; in addition, amounts for all covered family members apply to both the family deductible and family out-of-pocket limit. No one member will pay more than the per person deductible or per person out-of-pocket limit.

All medical and prescription drug deductibles, copayments and coinsurance apply to the out-of-pocket limit (excluding Non-Network Human Organ and Tissue Transplant (HOTT), Cellular and Gene Therapy services).

In-Network and Non-Network out-of-pocket limit amounts are separate and do not accumulate toward each other.

The out-of-pocket limits for Value Tier 1 In-Network (INET) and Participating Tier 2 In-Network (INET) cross apply, meaning satisfying one helps satisfy the other.

Doctor Visits (virtual and office) You are encouraged to select a Primary Care Physician (PCP).

Primary Care (PCP) virtual and office	No charge	\$15 copay per visit	20% coinsurance after deductible is met
Mental Health and Substance Use Disorder Services virtual and office	No charge	\$15 copay per visit	20% coinsurance after deductible is met
Specialist Care virtual and office	No charge	\$15 copay per visit	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use a Value Tier 1 In-Network (INET) Provider	Cost if you use a Participating Tier 2 In-Network (INET) Provider	Cost if you use an Out-of-Network (OON) Provider
<p><u>Other Practitioner Visits</u></p> <p>Routine Maternity Care (Prenatal and Postnatal)</p> <p>Retail Health Clinic for routine care and treatment of common illnesses; usually found in major pharmacies or retail stores.</p> <p>Manipulation Therapy Coverage is unlimited per benefit period for In network visits and limited to 30 visits per benefit period for non-network visits.</p> <p>Acupuncture Coverage is limited to services provided for pain management. Coverage is limited to 20 visits per benefit period.</p>	No charge	No charge	20% coinsurance after deductible is met
<p><u>Other Services in an Office</u></p> <p>Allergy Testing</p> <p>Prescription Drugs Dispensed in the office</p> <p>Surgery</p>	No charge [†]	\$15 copay per visit [†]	20% coinsurance after deductible is met
<p>Preventive care / screenings / immunizations</p>	No charge	No charge	20% coinsurance after deductible is met
<p>Preventive Care for Chronic Conditions per IRS guidelines</p>	No charge	No charge	20% coinsurance after deductible is met
<p><u>Diagnostic Services</u></p> <p>Lab</p> <p>Office</p> <p>Freestanding/Site of Service Lab</p> <p>Outpatient Hospital</p>	No charge [†]	\$15 copay per visit [†]	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use a Value Tier 1 In-Network (INET) Provider	Cost if you use a Participating Tier 2 In-Network (INET) Provider	Cost if you use an Out-of-Network (OON) Provider
X-Ray			
Office	No charge [†]	\$15 copay per visit [†]	20% coinsurance after deductible is met
Freestanding/Site of Service Radiology Center	No charge	No charge	20% coinsurance after deductible is met
Outpatient Hospital	No charge	No charge	20% coinsurance after deductible is met
Advanced Diagnostic Imaging <i>for example: MRI, PET and CAT scans</i> <i>Member cost share will not exceed \$375 copayment maximum for MRI, MRA, CAT, CTA, PET, and SPECT scans, per member per benefit period.</i>			
Office	No charge [†]	No charge	20% coinsurance after deductible is met
Freestanding/Site of Service Radiology Center	No charge	No charge	20% coinsurance after deductible is met
Outpatient Hospital	No charge	No charge	20% coinsurance after deductible is met
Emergency and Urgent Care			
Urgent Care <i>includes doctor services. Additional charges may apply depending on the care provided.</i>	\$15 copay per visit	\$15 copay per visit	20% coinsurance after deductible is met
Emergency Room Facility Services <i>Your copay will be waived if admitted.</i>	\$250 copay per visit	\$250 copay per visit	Covered as In-Network
Emergency Room Doctor and Other Services	No charge	No charge	Covered as In-Network
Ambulance <i>Authorized Non-Network non-emergency ambulance services are limited to an Anthem maximum payment of \$50,000 per trip.</i>	No charge	No charge	Covered as In-Network
Outpatient Mental Health and Substance Use Disorder Services at a Facility			
Facility Fees	\$15 copay per visit	\$15 copay per visit	20% coinsurance after deductible is met
Doctor Services	No charge	No charge	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use a Value Tier 1 In-Network (INET) Provider	Cost if you use a Participating Tier 2 In-Network (INET) Provider	Cost if you use an Out-of-Network (OON) Provider
<p><u>Outpatient Surgery</u></p> <p>Facility Fees</p> <p>Hospital</p> <p>Ambulatory Surgical Center/Site of Service Provider</p> <p>Physician and other services including surgeon fees</p> <p>Hospital</p> <p>Ambulatory Surgical Center/Site of Service Provider</p>	<p>No charge</p> <p>No charge</p> <p>No charge</p> <p>No charge</p> <p>No charge</p>	<p>No charge</p> <p>No charge</p> <p>No charge</p> <p>No charge</p> <p>No charge</p>	<p>20% coinsurance after deductible is met</p> <p>20% coinsurance after deductible is met</p> <p>20% coinsurance after deductible is met</p> <p>20% coinsurance after deductible is met</p>
<p><u>Hospital (Including Maternity, Mental Health and Substance Use Disorder Services)</u></p> <p><i>If readmitted within 72 hours for the same condition, no additional facility copay is required. If transferred between facilities, only one copay will apply.</i></p> <p>Facility Fees</p> <p>Physician and other services including surgeon fees</p>	<p>No charge</p> <p>No charge</p>	<p>No charge</p> <p>No charge</p>	<p>20% coinsurance after deductible is met</p> <p>20% coinsurance after deductible is met</p>
<p>Home Health Care</p> <p><i>Coverage is limited to 200 visits per benefit period. Limits are combined for all home health services.</i></p>	<p>No charge</p>	<p>No charge</p>	<p>20% coinsurance after deductible is met</p>
<p>Rehabilitation and Habilitation services including physical, occupational and speech therapies.</p> <p><i>Coverage for physical, occupational and speech therapies is unlimited per benefit period for in network visits and limited to 30 visits per therapy per benefit period for non-network visits.</i></p> <p>Office</p> <p>Outpatient Hospital</p>	<p>No charge</p> <p>No charge</p>	<p>No charge</p> <p>No charge</p>	<p>20% coinsurance after deductible is met</p> <p>20% coinsurance after deductible is met</p>

Covered Medical Benefits	Cost if you use a Value Tier 1 In-Network (INET) Provider	Cost if you use a Participating Tier 2 In-Network (INET) Provider	Cost if you use an Out-of-Network (OON) Provider
Pulmonary rehabilitation			
Office	No charge	No charge	20% coinsurance after deductible is met
Outpatient Hospital	No charge	No charge	20% coinsurance after deductible is met
Cardiac rehabilitation office and outpatient hospital <i>Coverage is limited to 36 visits per benefit period.</i>	No charge	No charge	20% coinsurance after deductible is met
Dialysis/Hemodialysis			
Office	No charge [†]	No charge	20% coinsurance after deductible is met
Outpatient Hospital	No charge	No charge	20% coinsurance after deductible is met
Chemo/Radiation Therapy			
Office	No charge [†]	No charge	20% coinsurance after deductible is met
Outpatient Hospital	No charge	No charge	20% coinsurance after deductible is met
Skilled Nursing Care (facility) <i>Coverage is unlimited per benefit period for in network visits and limited to 60 visits per benefit period for non-network visits.</i>	No charge	No charge	20% coinsurance after deductible is met
Inpatient Hospice	No charge	No charge	20% coinsurance after deductible is met
Durable Medical Equipment	No charge	No charge	20% coinsurance after deductible is met
Prosthetic Devices <i>Coverage for wigs is limited to 1 item after cancer treatment per benefit period.</i>	No charge	No charge	20% coinsurance after deductible is met

Covered Medical Benefits	Cost if you use a Value Tier 1 In-Network (INET) Provider	Cost if you use a Participating Tier 2 In-Network (INET) Provider	Cost if you use an Out-of-Network (OON) Provider
Hearing Aids <i>Coverage is limited to 1 item per ear every 24 months.</i>	No charge	No charge	20% coinsurance after deductible is met
Bariatric Surgery	Coverage is based on place of service	Coverage is based on place of service	20% coinsurance after deductible is met
Temporomandibular Joint (TMJ) Services	Coverage is based on place of service	Coverage is based on place of service	20% coinsurance after deductible is met

Covered Prescription Drug Benefits	Cost if you use an In-Network Pharmacy	Cost if you use a Non-Network Pharmacy
Pharmacy Deductible	Not applicable	Not applicable
Pharmacy Out-of-Pocket Limit	\$4,600 person / \$9,200 family	\$4,600 person / \$9,200 family
Prescription Drug Coverage Network: Base Network Drug List: Essential		
Day Supply Limits: Retail Pharmacy 30 day supply (cost shares noted below) Retail 90 Pharmacy 90 day supply (3 times the 30 day supply cost share(s) charged at In-Network Retail Pharmacies noted below applies). Home Delivery Pharmacy 90 day supply (maximum cost shares noted below). Maintenance medications are available through CarelonRx Pharmacy. You will need to call us on the number on your ID card to sign up when you first use the service. Specialty Pharmacy 30 day supply (cost shares noted below for retail and home delivery apply). We may require certain drugs with special handling, provider coordination or patient education be filled by our designated specialty pharmacy.		
Tier 1 - Typically Generic	\$5 copay per prescription (retail) and \$5 copay per prescription (home delivery)	20% coinsurance (retail and home delivery)
Tier 2 – Typically Preferred Brand	\$25 copay per prescription (retail) and \$25 copay per prescription (home delivery)	20% coinsurance (retail and home delivery)

Covered Prescription Drug Benefits	Cost if you use an In-Network Pharmacy	Cost if you use a Non-Network Pharmacy
Tier 3 - Typically Non-Preferred Brand	\$40 copay per prescription (retail) and \$40 copay per prescription (home delivery)	20% coinsurance (retail and home delivery)

Covered Vision Benefits	Cost if you use an In-Network Provider	Cost if you use a Non-Network Provider
<i>This is a brief outline of your vision coverage. Adult and children's vision services count towards your out-of-pocket limit.</i>		
Child Vision exam <i>Limited to 1 exam every 2 benefit periods.</i>	No charge	20% coinsurance after deductible is met
Adult Vision exam <i>Limited to 1 exam every 2 benefit periods.</i>	No charge	20% coinsurance after deductible is met
Vision Therapy <i>Unlimited visits per benefit periods.</i>	No charge	20% coinsurance after deductible is met

Notes:

If you have an office visit with your Primary Care Physician or Specialist at an Outpatient Facility (e.g., Hospital or Ambulatory Surgical Facility), benefits for Covered Services will be paid under "Outpatient Facility Services". Costs may vary by the site of service. Other cost shares may apply depending on services provided. Check your Certificate of Coverage for details.

Certain screening and diagnostic testing for the detection of ovarian and breast cancer are covered in full as required by state mandate.

Screening and diagnostic imaging for the detection of breast cancer, including diagnostic mammograms, 3D mammography, breast ultrasounds and MRIs are covered in full as required by state mandate.

Breast biopsies, prophylactic mastectomies, and breast reconstructive surgery are covered in full as required by state mandate.

The first two office visits for Mental Health or Substance Use Disorder services are covered in full.

The limits for physical, occupational, and speech therapy, if any apply to this plan, will not apply if you get care as part of the Mental Health and Substance Use Disorder benefit.

‡ You will pay the PCP's office visit copay when services are provided in their office.

The representations of benefits in this document are subject to CT Department of Insurance (CT DOI) approval and are subject to change.

This summary of benefits is a brief outline of coverage, designed to help you with the selection process. This summary does not reflect each and every benefit, exclusion and limitation which may apply to the coverage. For more details, important limitations and exclusions, please review the formal Evidence of Coverage (EOC). If there is a difference between this summary and the Evidence of Coverage (EOC), the Evidence of Coverage (EOC), will prevail.

Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans, Inc. Independent licensee of the Blue Cross and Blue Shield Association. ® ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

Questions: (833) 899-7070 or visit us at www.anthem.com

PreventiveRx Plus Drug List

PreventiveRx Plus Plan (Essential)



PreventiveRx covers drugs that may keep you healthy because they may prevent illness and other health conditions. You can get the products on this list at low or no cost to you depending on your benefit.

This list includes only prescription products. Brand-name drugs are listed with a first capital letter. Non-brand drugs (generics) are in lowercase letters.

Most brand-name drugs that have a generic equivalent available are not covered under this PreventiveRx benefit.

Drugs* listed below may be covered for plans with the Essential Drug List. If your plan has a different drug list, please check to see if these drugs are included on your drug list. PreventiveRx Plus drugs are only covered if they are included on your specific drug list.

*Some drugs and supplies may be excluded from your benefits. Please refer to your Certificate or Evidence for Coverage for coverage limitations and exclusions.

Please note: The drug list is subject to change and all previous versions of the drug list are no longer in effect.

HEART HEALTH AND HIGH BLOOD PRESSURE

acebutolol
 amlodipine/ benazepril
 atenolol
 atenolol/ chlorthalidone
 benazepril
 benazepril/ hctz
 betaxolol
 bisoprolol fumarate
 bisoprolol/ hctz
 captopril
 captopril/ hctz
 carvedilol
 enalapril
 enalapril/ hctz
 fosinopril
 fosinopril/ hctz
 labetalol
 lisinopril
 lisinopril/ hctz
 metoprolol succinate er
 metoprolol tartrate
 metoprolol/ hctz
 moexipril
 nadolol
 nebivolol
 perindopril
 pindolol
 propranolol
 propranolol er
 propranolol/ hctz
 quinapril
 quinapril/ hctz
 ramipril

sorine
 sotalol
 sotalol af
 timolol
 trandolapril
 trandolapril/ verapamil

OSTEOPOROSIS

alendronate sodium
 amabelz
 calcitonin salmon
 Climara Pro
 Combipatch
 dotti
 estradiol
 estradiol/ norethindrone
 evamist
 Fosamax Plus D
 fyavolv
 ibandronate sodium
 jintell
 lopreeza
 mimvey
 mimvey lo
 Premarin (oral)
 Premphase
 Prempro
 raloxifene
 risedronate
 risedronate DR

ASTHMA

Arnuity Ellipta
 Breo Ellipta
 budesonide suspension
 budesonide/ formoterol

Flovent Diskus
 Flovent HFA
 fluticasone/ salmeterol
 Inhalation powder
 fluticasone/ vilanterol
 formoterol nebulization
 solution
 QVAR RediHaier
 Trelegy Ellipta
 wixela Inhub

DIABETES

(Diabetic supplies including blood glucose meters, test strips and lancets require a prescription to be covered by this plan. Only blood glucose meters & blood glucose test strips for OneTouch and Accu-Chek products will be covered by this benefit. Continuous Glucose Monitors (CGMs) are not included in PreventiveRx Coverage.
 acarbose
 alogliptin
 alogliptin/metformin
 alogliptin/pioglitazone
 Farxiga
 glimepiride
 glipizide
 glipizide er
 glipizide xl
 glipizide/ metformin
 glyburide
 glyburide micronized
 glyburide/ metformin
 Glyxambi
 Humalog
 Humalog Junior Kwikpen
 Humalog Kwikpen
 Humalog Mix 50/50
 Humalog Mix 50/50 Kwikpen
 Humalog Mix 75/25
 Humalog Mix 75/25 Kwikpen
 Humulin 70/30
 Humulin 70/30 Kwikpen
 Humulin N
 Humulin N Kwikpen
 Humulin R
 Humulin R U-500
 Humulin R U-500 Kwikpen
 Insulin Glargine
 Insulin Glargine Solostar
 Insulin Lispro
 Insulin Lispro Junior Kwi
 Insulin Lispro Kwikpen
 Insulin Lispro Protamine
 Janumet
 Janumet XR
 Januvia
 Jardiance
 Lantus
 Lantus Solostar
 Levemir
 Levemir Flextouch
 Lyumjev
 Lyumjev KwikPen

PreventiveRx Plus Drug List
PreventiveRx Plus Plan (Essential)



metformin	HIGH
metformin er (generic for Glucophage XR)	CHOLESTEROL
miglitol	amlodipine/ atorvastatin
nateglinide	atorvastatin
Ozempic	ezetimibe/ simvastatin
pioglitazone	fluvastatin
pioglitazone/ metformin	lovastatin
pioglitazone/ glimepiride	pravastatin
repaglinide	rosuvastatin
Rybelsus	simvastatin
Soliqua	
Symlinpen 120	
Symlinpen 60	
Synjardy	
Synjardy Xr	
tolbutamide	
Toujeo Max Solostar	
Toujeo Solostar	
Tresiba	
Tresiba Flextouch	
Trijardy XR	
Trulicity	
Victoza	
Xigduo XR	
Xultophy	

MENTAL HEALTH

citalopram
escitalopram oxalate
fluoxetine
fluoxetine DR
fluvoxamine
fluvoxamine ER
paroxetine
paroxetine ER
sertraline

This list may change without notice which may affect your benefit coverage. To be sure your medication is covered under the PreventiveRx benefit, call the member services number located on your ID card.
Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. Copies of Colorado network access plans are available on request from member services or can be obtained by going to anthem.com/colonetworkaccess. In Connecticut: Anthem Health Plans, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Massachusetts (excluding 30 counties in the Kansas City area): Right ChoiceSM Managed Care, Inc. (RMC), Healthy AllianceSM Life Insurance Company (HALC), and HMO Missouri, Inc. RMC and certain affiliates administer non-HMO benefits underwritten by FAUC and HMO benefits underwritten by HMO Missouri, Inc. RMC and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. also HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In Ohio: Community Insurance Company of Virginia; Anthem Health Plans of Virginia, Inc. (trades as Anthem Blue Cross and Blue Shield in Virginia), and its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI), and its service area administers PPO and indemnity policies and underwrites the out-of-network benefits in POS policies offered by Corporate Health Services Insurance Corporation (Corporate) or Wisconsin Collaborative Insurance Corporation (WCIC). Corporate underwrites or administers HMO or POS policies; WCIC underwrites or administers Well PrioritySM HMO or POS policies. Independent licensees of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.
0438EMUMENABS-1 Rev. 1/17/2024

**Group Name: East Hampton BOE
Proposed Blue View Vision plan design
Blue View Vision plan benefits**

Routine Eye Exam	In-Network	Out-of-Network	Frequency
A comprehensive eye examination	\$15 copay	Up to \$45 reimbursement	Once every 12 months
Eyeglass Frames One pair of eyeglass frames	\$175 allowance, then 20% off any balance	Up to \$126 reimbursement	One every 12 months
Eyeglass Lenses <i>(instead of contact lenses)</i> One pair of standard plastic prescription lenses: <ul style="list-style-type: none"> • Single vision lenses • Bifocal lenses • Trifocal lenses • Lenticular lenses 	<ul style="list-style-type: none"> • \$0 copay • \$0 copay • \$0 copay • \$0 copay 	<ul style="list-style-type: none"> • Up to \$40 reimbursement • Up to \$65 reimbursement • Up to \$75 reimbursement • Up to \$100 reimbursement 	One every 12 months
Contact Lenses ¹ <i>(instead of eyeglass lenses)</i> <ul style="list-style-type: none"> • Elective conventional (non-disposable); OR • Elective disposable; OR • Non-elective (medically necessary) 	<ul style="list-style-type: none"> • \$360 allowance, 15% off any balance • \$360 allowance (no additional discount) • Covered in full 	<ul style="list-style-type: none"> • Up to \$345 reimbursement • Up to \$345 reimbursement • Up to \$345 reimbursement 	Once every 12 months

¹ Contact lens allowance will only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases in the same benefit period, nor can any unused amount be carried over

Group Name: East Hampton BOE

Proposed Blue View Vision plan design

Additional savings available from Access in-network providers

When obtaining covered eyewear from a Blue View Vision provider, members may choose to upgrade their new eyeglass lenses at a discounted cost. Costs shown are after any applicable eyeglass lens copayment.

Blue View Vision plan benefits	In-Network Member Copay	Out-of-Network	Frequency
<ul style="list-style-type: none"> • Eyeglass Lens Enhancements <ul style="list-style-type: none"> ◦ Transitions Lenses (pediatric) ◦ Standard polycarbonate (pediatric) ◦ Factory scratch coating (pediatric) ◦ Transitions Lenses (adults) ◦ Standard polycarbonate (adults) ◦ Factory scratch coating (adults) 	\$75 \$0 \$15 \$75 \$40 \$15	N/A N/A N/A N/A N/A N/A	Same as covered eyeglass lenses
<ul style="list-style-type: none"> • Progressive Lenses <ul style="list-style-type: none"> ◦ Standard ◦ Premium Tier 1 ◦ Premium Tier 2 ◦ Premium Tier 3 ◦ Premium Tier 4 	\$65 \$85 \$95 \$110 20% off retail price	Up to \$65 reimbursement Up to \$65 reimbursement Up to \$65 reimbursement Up to \$65 reimbursement	Same as covered eyeglass lenses
<ul style="list-style-type: none"> • Anti-Reflective Coating <ul style="list-style-type: none"> ◦ Standard ◦ Premium Tier 1 ◦ Premium Tier 2 ◦ Premium Tier 3 	\$45 \$57 \$68 20% off retail price	N/A N/A N/A N/A	Same as covered eyeglass lenses
<ul style="list-style-type: none"> • Tint (Solid and Gradient) • UV Coating • Over-sized Lenses • Other lens upgrades and add-ons 	\$15 \$15 \$0 20% off retail price	N/A N/A N/A N/A	Same as covered eyeglass lenses
<ul style="list-style-type: none"> • Retinal Imaging (obtained at same time as covered eye exam) 	Up to \$39	N/A	
<ul style="list-style-type: none"> • Standard contact lens fitting and follow-up after comprehensive eye exam • Premium contact lens fitting and follow-up after comprehensive eye exam 	Up to \$55 10% off retail price	N/A N/A	
<ul style="list-style-type: none"> • Additional supplies of conventional contact lenses after benefits have been used • Additional complete pairs of eyeglasses • Eyeglass materials purchased separately • Other items including most non-prescription sunglasses, eyewear accessories such as lens cleaning supplies, contact lens solutions, eyeglass cases, etc. 	15% off retail price 40% off retail price 20% off retail price 20% off retail price	N/A N/A N/A N/A	

Other discount offers on LASIK surgery and much more available through Anthem's SpecialOffers program.

This information is intended to be a brief outline of plan benefits. The most detailed description of benefits, exclusions, and restrictions can be found in the Certificate of Coverage. Discounts are subject to change without notice. Laws in some states may prohibit network providers from discounting products and services that are not covered benefits under the plan. Discounts will not apply when a manufacturer has imposed a no discount policy on the item.

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