

AGREEMENT
BETWEEN
PLAINVILLE BOARD OF EDUCATION
AND
PLAINVILLE PARAPROFESSIONALS AND TUTORS
CSEA, INC./SEIU, LOCAL 2001

For the Period July 1, 2021 through June 30, 2024

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ARTICLE I
RECOGNITION

The Board recognizes and certifies the CSEA, Inc./SEIU, Local 2001, (Plainville Paraprofessionals, Tutors and Registered Behavior Technicians) for the purpose of negotiations and the exclusive representative for all employees in the unit as provided by Public Act No. 491 and General Statutes §7-467 and under Case No. ME-5884 (Dec. #1939) and ME-25,815 (Dec. #4127) of the Connecticut State Board of Labor Relations.

ARTICLE II
GRIEVANCE PROCEDURE

Section 1

It is the intent and purpose of the parties hereto that their agreements promote and improve the quality of work in the School System and provide for orderly professional negotiations between the Board and the Union and secure prompt and fair disposition of grievances so as to promote a good influence upon the operation of the school program.

Section 2

A grievance is hereby defined to be any controversy, complaint, misunderstanding or dispute concerning the interpretation or application of any provision of this Agreement.

Section 3

If an employee does not file a grievance in writing within fifteen (15) work days after she/he knew, or should have known, of the act or condition on which the grievance is based, then the grievance shall be considered to have been waived.

Section 4

Grievances shall be handled in the following manner:

Level One

The aggrieved employee(s), accompanied by a union representative if so desired by employee(s), or the Union with or without the aggrieved employee, shall meet with the employee(s)' immediate supervisor and/or Principal.

Level Two - Superintendent of Schools

- a. In the event that such aggrieved member of the unit or the Union is not satisfied with the disposition of his/her grievance at Level One, or in the event that no decision has been rendered within ten (10) work days after presentation of the grievance, he/she or the Union may file a written grievance with the Superintendent or his/her designee within five (5) work days after the decision at Level One or fifteen (15) work days after the grievance was presented, whichever is sooner.

- b. The Superintendent or his/her designee shall represent the administration at this level of the grievance procedure. Within the ten (10) work days after receipt of the written grievance by the Superintendent, or his/her designee, the Superintendent or his/her designee shall meet with the aggrieved person in an effort to resolve it.

Level Three - Board of Education

In the event that the aggrieved member of the unit or the Union is not satisfied with the disposition of his/her grievance at Level Two, then within five (5) work days after the date a decision was rendered, or in the event no decision has been rendered, within ten (10) work days after he/she or the Union has first met with the Superintendent or his/her designee whichever is sooner, he/she or the Union may file a written grievance indicating such dissatisfaction with the Board of Education. Within thirty (30) work days after receiving the written grievance, a Committee of the Board shall meet with the aggrieved member of the unit or the Union for the purpose of resolving the grievance. The ultimate decision on the grievance at Level Three shall be rendered by the Plainville Board of Education, or its appointed subcommittee.

Level Four - Impartial Arbitration

In the event that the aggrieved member of the unit or the Union is not satisfied with the disposition of his/her or the Union's grievance at Level Three, or in the event no decision has been rendered within thirty (30) work days after he/she or the Union has first met with the Board Committee, the Union may within five (5) work days after a decision by the Board or thirty (30) work days after he/she or the Union has first met with the Board Committee, whichever is sooner, submit the matter to the American Arbitration Association. The cost of such submission and the cost of the arbitrator shall be borne equally by the parties. The decision rendered by the American Arbitration Association shall be final and binding on both parties.

Officers and/or Stewards, not to exceed one (1) member of the union, as shall be designated by the union for the purpose of resolving grievances and unfair labor complaints, or unsafe working conditions shall be afforded the necessary amount of time, without loss of pay, to conduct such business.

ARTICLE III
BULLETIN BOARD

The employer shall provide bulletin board space for the posting of union notices.

ARTICLE IV
UNION MEETING ON SCHOOL PROPERTY

The union may call meetings in each school before or after school or during lunch whenever necessary, providing that such meetings are approved in advance by the building principal or designee and do not conflict with other scheduled school activities or programs.

ARTICLE V
VISITATION CLAUSE

A duly authorized officer or Union representative may secure permission to enter the Employer's premises for the purpose of investigating working conditions and determining whether or not the terms of this Agreement are being adhered to if there is a dispute. The Union representative shall receive prior permission for such a visit from the Superintendent of Schools or his/her designee and the building principal or his/her designee and shall in no way interfere with the normal operation and business of the school system during the visit.

ARTICLE VI
WORKER'S COMPENSATION

Eligible employees shall receive workers' compensation benefits in accordance with applicable law.

ARTICLE VII
EMPLOYEE FACILITIES

Employees shall take reasonable care of equipment, shall return same to its assigned storage area and replace cover on all equipment so provided. Any defects, malfunctions or inadequacies in equipment shall be immediately reported to the Principal.

ARTICLE VIII
NO STRIKE

Pursuant to Connecticut General Statute §7-467 (Municipal Employees Relations Act), all employees included in this Agreement shall not hinder the Board's operation by strike or work stoppage and the Board shall not pursue lock-out tactics in any part of its operation.

ARTICLE IX
NEW EMPLOYEES

A. Probation

All new appointments shall be subject to a probationary period of ninety (90) working days and shall have no seniority or recourse to the grievance procedure during this period, but shall be subject to all other provisions of the Agreement. Probationary employees are entitled to paid sick leave on a pro-rated basis during their probationary period. They shall not be entitled to personal leave.

The ninety (90) working days is also applicable if there is a change in classification, however, in this case, seniority rights, recourse for grievances, and paid sick and personal leave will remain in effect. If an employee changes to another classification within the bargaining unit, and that employee should fail the probationary period, the employee has the right to return to her/his previous position. If that position is unavailable, the employee shall be returned to a comparable position within her/his previous classification.

B. Appointments to New Positions

Notice of vacancies and/or new positions shall be posted on all Union bulletin boards for five (5) working days. Any person interested in the position must apply, in writing, to the Superintendent of Schools within four (4) working days from such posting. All vacancies and/or positions shall be emailed to all bargaining unit members four (4) days prior to any public announcement of the vacancy and/or new position.

If an internal candidate applies for the position, the Board shall hire the most senior employee provided that he/she is qualified (by demonstrated skill, ability, past work performance, education and/or certification, results of test, if given, and physical fitness to perform the job).

C. Where a need to fill a vacancy of positions arises during the summer months, notification shall be made by posting on the appropriate bulletin boards at individual schools and the Superintendent's office. Positions shall also be posted on the Board's website.

D. The Board shall provide an up-to-date seniority list to the Union President by October 1st and April 1st of each school year.

ARTICLE X
TRANSFERS

Notification shall be given to all employees of vacancies or new positions in the bargaining unit and all employees applying will be given consideration. Transfers will be on the basis of ability and performance, where ability and performance are deemed equal, seniority shall prevail.

ARTICLE XI
LEAVES WITHOUT PAY

A. Leaves of absence without pay may be granted by the Superintendent for a limited, definite period not to exceed one (1) year for the following reasons:

1. For health reasons, upon-continued advice of a physician.
2. For other personal reasons subject to the review and recommendation of the Superintendent.

3. Extreme personal hardship, such as illness of wife, husband, mother, father, children, and/or legal dependents.
- B. Application for such leave of absence must be made in writing, stating the reason for the request and the length of time desired. A leave of absence expires automatically at the date of expiration approved for the leave. If an extension is required, it must be approved by the Board.
 - C. Accumulated seniority shall not be lost during the leave of absence.
 - D. A person returning from leave shall re-enter at the same level as if he/she had not taken a leave of absence. Seniority shall accrue for a period of up to twelve months during any leave of absence.
 - E. Any employee who is eligible for insurance benefits shall if he/she so desires receive insurance benefits at group rates paid for by the employee while he/she is on leave of absence without pay.

ARTICLE XII
RESIGNATIONS

- A. Written notice of resignation shall be filed with the Superintendent of Schools at least two (2) weeks in advance of separation. This notice should include a statement of the reasons for this action.
- B. An employee who resigns shall be entitled to pay, up to and including, the last day of work. The check will be available on the next pay day.

ARTICLE XIII
PERSONAL LEAVE

- A. Each employee shall be allowed a total of three (3) personal leave days per year, noncumulative, with no pay deduction for any or all of the following reasons:
 1. Religious requirements
 2. Legal requirements
 3. Graduation of immediate family
 4. Marriage of close friend or relatives.
- B. For purposes of this Article and Article XVIII (Sick Leave), "Immediate family" shall be defined as follows: spouse, parent (including step-parent), child (including step-child), grandparent, grandchild, sibling, father-in-law, mother-in-law, sister-in-law, brother-in-law and any person living in the employee's household.-
- C. The Superintendent is authorized to grant additional days leave upon request.

- D. Two (2) of the above days may be granted for personal business that can only be transacted during regular school hours.
- E. Application for leave as provided above shall be made to the immediate supervisor at least twenty-four (24) hours before leave is to be granted except in cases of illness or emergencies or where the event causing such leave occurs after the twenty-four (24) hour period. However, employees are encouraged to give as much notice as possible.
- F. Employees may take more than one consecutive personal day for attendance at the events described in section A above if such additional day(s) are required to travel to the location of the event.
- G. In addition to the personal leave entitlements set forth above, employees will be allowed a total of three (3) days, non-cumulative, with no pay deduction for bereavement leave due to the death of an immediate family member. Additional bereavement days may be granted by the Superintendent in his/her sole discretion to address specific situations where additional bereavement leave may be necessary in the event of a death of an immediate family member where the employee has exhausted the above bereavement leave.

ARTICLE XIV
MILEAGE

If an employee can demonstrate that during his/her work day, not including the travel to and from work, he/she is, with direct orders from the Superintendent or his/her designee, required to use his/her automobile for transportation as part of his/her work duty, the Board of Education shall reimburse him/her at the current I.R.S. rate.

ARTICLE XV
WORK DAY, WORK YEAR AND CLASSIFICATION

- A. The normal hours for part-time paraprofessionals shall be not less than twenty (20) hours per week nor more than twenty-nine (29) hours per week for the academic year.
- B. The regular work year for full-time paraprofessionals, tutors and RBTs shall consist of the academic year.
- C. The normal work hours for full-time tutors and RBTs shall be not less than thirty (30) hours per week.
- D. If any employee works beyond the above-noted work year, the Superintendent of Schools and the employee shall negotiate the additional hours or days that must be worked.

- E. The work day and/or work year of an individual bargaining unit member can be altered from the above if the circumstances of his/her assignment change and there is no vacancy available at his/her previous level of hours. Any bargaining unit member subject to a change in hours shall receive at least thirty (30) days' notice of the change. If an individual bargaining unit member's hours drop below twenty five (25) per week pursuant to the provisions of this paragraph, the Board shall maintain his/her health insurance benefits at the 25-hour level for the remainder of the school year.

There shall be three classifications of employees:

1. Paraprofessional

This classification includes, for example, media paraprofessionals, special education paraprofessionals, and student support paraprofessionals.

2. Tutor

This classification includes, for example, Literacy, Math, Kindergarten, Special Education, English Language Learners (ELL), Achievement Center, SEL Support Tutor and In School Suspension (ISS).

3. Registered Behavior Technician

**ARTICLE XVI
HOLIDAYS**

- A. All full-time employees shall be granted the following paid holidays:

Thanksgiving Day	Martin Luther King Day
Day after Thanksgiving	President's Day
Christmas Day	Memorial Day
Day after Christmas	Labor Day*
New Year's Day	Columbus Birthday
Good Friday	

- All part-time paraprofessionals shall be granted the following paid holidays:

Thanksgiving Day	President's Day
Christmas Day	Labor Day*
Good Friday	Columbus Day
New Year's Day	

**only when it falls within the school year*

- B. Additional paid holidays may be granted at the discretion of the Superintendent of Schools. Paid holidays occurring on Saturday shall be observed on the preceding Friday provided there is no school on said Friday.

Paid holidays occurring on Sunday shall be observed on the following Monday provided there is no school on said Monday.

ARTICLE XVII

INSURANCE

- A. For the individual member of the bargaining unit a Group Life Insurance of twenty-five thousand (\$25,000) dollar benefit.
- B. The Board shall provide single health insurance coverage for the individual employee and pay the premium in accordance with the following terms and conditions. New hires shall not be eligible for insurance until the first of the month following sixty (60) calendar days of continuous employment.

The Connecticut State Partnership Plan 2.0 (SPP) as summarized in Appendix A of this Agreement and any subsequent amendments or modifications made to the SPP by the State and its employee representatives. The dental benefits shall be provided through Delta Dental. Employees shall be offered a vision plan at 100% employee cost, which shall not be administered under the SPP.

Employees in the SPP are governed by the SPP's open enrollment, beneficiary eligibility and changes and other administration provisions established by the SPP.

Employees shall comply with the Health Enhancement Plan (HEP) in the SPP. If the SPP administrators impose the HEP non-participation or noncompliance \$100 per month premium cost increase or the \$350 per participant to a maximum of \$1400 family annual deductible, those sums shall be paid entirely by the non-participating or non-compliant employee. No portion or amount shall be paid by the Board. Any imposed premium cost increase shall be implemented through payroll deduction and any imposed annual deductible shall be implemented through claims administration.

If the SPP in its current form is no longer available or the benefit plan design is modified as a result of a change in the State's collective bargaining agreement with SEBAC, or if the Participation Agreement allows termination in the SPP as a result of a change in "...the benefit design or rate calculation for the health benefit plans procured under Section 5-259(a) and (m) is modified as a result of a change in the State's collective bargaining agreement or state statute" the Board and Union may reopen negotiations as to the sole issue of health insurance, including plan design and plan funding, premium cost share and/or introduction of replacement medical insurance in whole or in part. In any negotiation triggered through what is described above, the parties shall consider the High Deductible Plan with Health Savings Account set forth in Article XIII of the 2019-2020 collective bargaining agreement as the baseline for such negotiations, and the parties

shall consider trends in health insurance plan design outside of the SPP and the costs of different plan designs, including a high deductible health plan structure and a PPO plan structure. Should such negotiations be submitted to arbitration for resolution, the arbitration panel shall consider the foregoing in applying the statutory criteria in making its ruling.

Employees who work thirty (30) hours or more per week shall be responsible for 25.5% of the premium cost share. The Board shall be responsible for the remaining 74.5% of the premium cost share.

- C. Dependent, Two-Person and Family coverage: Employees who work thirty (30) hours or more may purchase dependent, two-person or family coverage for the above referenced SPP at one hundred percent (100%) of the cost
- D. Upon retirement and upon request, an individual shall be granted an opportunity to obtain all insurance coverage (e.g., CMS, Blue Cross, Major Medical and any other insurance covered by the Plainville Board of Education). This insurance coverage (at group rates) shall be paid at retiree's expense to the age of sixty-five (65). It is understood that the purchase of certain insurances may be prohibited by insurance companies.

For the purpose of this Article and Article XVIII the term retirement shall be tied into bona fide retirement under the Town Pension Plan and/or the Social Security Act.

For employees who do not participate in the Town Retirement Plan nor who are looking toward retirement under the Social Security Plan, retirement means at least the minimum under the Town Retirement Plan (age fifty-five (55) and five (5) years of service).

- E. Employees are eligible to participate in the medical insurance benefits described in this Article and the 401(a) Pension Plan.
- F. Dental coverage shall be available for employees and their spouses and/or dependents at the premium cost sharing percentages outlined below:

	<u>Board Portion</u>	<u>Employee Portion</u>
2021-2024	60%	40%

- G. The Patient Protection and Affordable Care Act ("PPACA"; Public Law 111-148) has set forth and codified under the Internal Revenue Code (IRC) §4980I the imposition of an excise tax related to employer provided health insurance plans that exceed certain value thresholds. The impact of the excise tax is scheduled to take effect in 2020. Should any Federal statute or regulation pertaining to IRC §4980I be mandated to take effect during the term of this Agreement, triggering the imposition of an excise tax with respect to any of the contractually agreed upon insurance plans offered herein, the parties agree to

commence mid-term negotiations in accordance with the Municipal Employees Relations Act (“MERA”). During such mid-term negotiations, the parties will reopen Article XVII (Insurance) for the purpose of addressing the impact of the excise tax. No other provision of the contract shall be reopened during such mid-term negotiations.

ARTICLE XVIII
SICK LEAVE

- A. All full-time employees shall be entitled to one sick day per month, cumulative to ten (10) paid sick leave days each year, accumulation to one hundred twenty (120) days. A doctor’s certificate showing date of illness or incapacity may be required after three (3) consecutive working days of absence or in cases of suspected abuse.
- B. All part-time employees shall be entitled to .7 (seven-tenths) sick days per month, equivalent to seven (7) paid sick leave days each year, accumulation to seventy (70) days.
- C. Each employee shall be able to view their accumulated hours of sick leave to date through the electronic time keeping system.
- D. If an employee dies while in the employ of the Plainville School System or resigns after at least ten years of continuous service in the Plainville School System or an employee retires under the provisions of the Town Pension Plan or any amendments or substitutions thereto, such employee or his/her estate shall, in addition to all other benefits due, be paid a sum of money equivalent to one-half (1/2) the number of days of sick leave accumulated by such employee under the authority of this Article, but not to exceed fifty (50) days. This provision shall not apply to employees hired on or after September 1, 2013.
- E. Employees may utilize five (5) sick days to care for an immediate family member on an annual basis. Immediate family member is defined in Article XIII (Personal Leave).

ARTICLE XIX
MATERNITY LEAVE - DUE TO PREGNANCY

Leave for disability due to pregnancy and child birth shall be treated as any other disability in accordance with the Connecticut State Statutes.

ARTICLE XX
NON-DISCRIMINATION

It is mutually agreed that there shall be no coercion, intimidation, or discrimination by the Plainville Board of Education or the Union on any prohibited basis including race, color, sex, age, creed, religion, national origin, alienage, political affiliation, physical or mental disability,

marital status, sexual orientation, gender identity or expression, genetic information or membership in any lawful organization. Any alleged violation, of this provision shall not be subject to the grievance procedure under this Article.

ARTICLE XXI
DISCIPLINARY ACTION

No employee shall be reprimanded, suspended or discharged except for just cause.

ARTICLE XXII
EDUCATION FUNCTIONS

Employees may be granted leave with pay for participation in education or training courses, which enhance the employee's value to the Plainville Board of Education. If such courses last beyond the scope of the regular work day, the employee shall receive the same hourly rate of pay as implemented in the pay plan of the labor agreement for that employee.

The Board of Education may also pay any registration fees for courses taken by the employees.

Any request for education or training courses must be in writing and must have prior approval of the Superintendent or his/her designee.

The Board of Education shall also pay for mileage between school buildings or for mileage necessary for employees to attend board-approved professional development activities. The mileage rate for all employees shall be the current I.R.S. rate.

ARTICLE XXIII
JURY LEAVE

Any employee who is called for jury duty may receive the necessary leave to fulfill this legal obligation. This leave shall not be deducted from sick leave or personal leave days.

The staff member shall receive a rate of pay equal to the difference between the employee wage and the jury fee.

ARTICLE XXIV
LAYOFF AND RECALL RIGHTS

- A. In the event that lay-offs become necessary the employee with the least seniority system wide affected shall be laid off first. When employees are to be recalled, the first to be recalled shall be those last laid off.

- B. Laid-off employees shall have recall rights thru a period of one (1) year from the date of lay-off.

An employee who waives recall rights and/or refuses recall from lay-off shall lose all recall rights.

- C. For the purpose of this Article, seniority shall be defined as an employee's continuous length of service with the Board from said employee's most recent date of hire.
- D. All benefits except what the statutes provide at the time of a layoff including but not limited to such items as unused sick leave, pension rights, seniority, etc., shall be restored to the employee upon his/her return to active employment, if within the specified one (1) year time period as defined above.
- E. All laid off employees shall be notified by mail of job openings.
- F. No new employee shall be hired until all laid off employees have been recalled and have been given notification by certification.
- G. If an employee has secured temporary employment elsewhere he/she shall be allowed 10 working days of time before being required to report to work.
- H. While on lay-off, the employee will have the option when permitted by Statute or the insurer to remain an active participant in fringe benefits programs by contributing the full amount.
- I. Before any employee is selected for layoff, the Board or its representative will meet with the Union to discuss possible alternatives to avert the layoff.
- J. If after meeting with the Union a layoff is still necessary, the Board will implement the layoff procedures above except that an employee selected for layoff will receive thirty (30) days notice if possible, but not less than two (2) weeks notice before being laid off.
- (If an employee is in a reduced hour position, the employee will still be eligible for call back to a full-time position according to language stated above.)
- K. Notwithstanding the above procedure and order of layoff, with respect to paraprofessionals, RBTs and tutors, the Superintendent may override seniority for good cause, including documented work performance, skills, training, experience, the specific needs of students and documented disciplinary matters. His/her decision shall be reasonable.

ARTICLE XXV
SHORTENED DAYS

- A. When the school day is shortened because of inclement weather emergency reasons employees shall remain at work until their presence is no longer required. On such days, employees shall receive their full daily rate of pay provided they have complied with the conditions set forth in the preceding sentence.

When the school day is shortened because of Minimum School Days (defined as those days preceding those designated holidays and the last day of school), employees shall remain at work until the students in their care are provided for and their presence is no longer required. On such days, employees shall receive their full daily rate of pay provided they have complied with the conditions set forth in the preceding sentence.

- B. On delayed opening days, employees will receive full pay for their regularly scheduled hours.
- C. On all other planned shortened days (e.g., open house, conference days, PLC, mid-term and final exam days) full-time employees may be assigned on-instructional tasks necessary to prepare for student learning (including for example, but not limited to, data entry, preparing program materials, clerical support tasks) and/or provided professional development in the afternoons and be paid for a full regular work day. The Board shall provide professional development to the bargaining unit members for at least twelve (12) hours total per school year on these shortened days. When non-instructional tasks and/or professional development activities are offered, full-time employees will be required to work for the full regular work day, subject to their normal work hours as set forth in Article XV. . When non-instructional tasks and/or professional development activities are not offered, full time employees shall have two options: (1) they may choose to leave fifteen (15) minutes after students are dismissed and be paid for hours actually worked, or (2) they may choose to work a full regular work day and be paid for a full regular work day by performing alternative job related tasks at the direction of the Administration.
- D. When Blood Borne Pathogen workshops or any other required workshops/training testing follows the workday, the paraprofessionals and tutors who work in the affected building can continue working up to the start of the workshops, etc. and be paid for continuous work through the end of the workshops, etc. beyond the normal work day.

ARTICLE XXVI
EMPLOYEE REVIEW OF OFFICIAL PERSONNEL FOLDERS

- A. Employees desiring to review their official personnel folders will be permitted to do so by making an appointment through the Human Resources Office.
- B. The employee will be afforded the opportunity to put on record any statement he/she wishes to make about unfavorable information contained in the mentioned folders. The employee may also make copies of any documents contained in his/her personnel folders.

- C. Any such report or written statement of criticism by a principal, teacher or any other school administrator, may not be contained in the individual employee's personnel file or any other file longer than thirty (30) days unless such report is shown to the employee in question, and such individual has acknowledged therefore by signature with a thirty (30) day period beginning with the date of the report. The parties agree that refusal to sign such a document upon request constitutes insubordination for which an employee may be subjected to discipline.

ARTICLE XXVII
SENIORITY

- A. For the purpose of this Article, seniority shall be defined as an employee's continuous length of service with the Board from said employee's most recent date of hire, regardless of hours worked.
- B. **Assignment of Employee**
Employees already in the school system shall receive notification of their assignment via email for the ensuing school year not later than August 1st if possible, of the current year.

ARTICLE XXVIII
UNION SECURITY

- A. During the life of this agreement, an employee retains the freedom of choice whether or not to become or remain a member of the Union.
- B. Union dues shall be deducted by the Board from the paycheck of each employee who signs and remits to either the Board or the Union an authorization form, and if remitted to the Union the form must be forwarded to the Board before any such deductions can begin. Such deduction shall be discontinued upon written request of an employee thirty (30) days in advance.
- C. The amount of dues deducted on a monthly basis under this Article together with a list of employees shall be remitted to CSEA, Inc./Local 2001, SEIU, within a week after the payroll period in which such deduction is made together with a list of employees for whom any such deduction is made.
- D. The Union shall agree to indemnify and save the employer harmless from and against any and all claims, demands, suits or other form of liability that may arise out of or by reason of action taken by the employer for the purpose of complying with the provisions of this Article.

ARTICLE XXIX
SEVERABILITY

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

ARTICLE XXX
WAGE SCHEDULE PLACEMENT

- A. The Board may place newly hired employees up to step six (6) of the wage schedule based on the Board's judgment of the new hires training and experience.
- B. Any employee hired and starting work after the start of school but before January 1 of any year, shall be credited with one (1) year longevity for that partial year.
- C. Any employee hired and starting work after January 1 shall maintain the same step on the salary schedule for the following year.
- D. No employee will be placed on the wage schedule at a lower wage than he/she is currently receiving but shall only advance on step based on years of experience in Plainville as an employee.
- E. Intensive Support Stipend. Paraprofessionals shall receive a differential of \$1.50 per hour in addition to their regular wage when such paraprofessionals are assigned a student who requires Intensive Support methods, per his/her Individual Education Plan (IEP). The supervisor of Special Education must approve the differential pay.
- F. Paraprofessionals who provide hygiene services to students as part of their regular and daily work assignment shall receive an annual total stipend of four hundred dollars (\$400.00). The stipend shall be paid in two equal installments of two hundred dollars (\$200.00) on or about January 15th of each year and on or about June 1st of each year. The stipends shall be pro-rated accordingly for new hires and/or employees who sever employment prior to June 1. In the event of an assignment change due to a student's departure on or before January 15th, the employee shall receive the full stipend amount of the first installment, specifically two hundred dollars (\$200.00). In the event of an assignment change due to a student's departure after January 15th, the employee shall receive the full stipend amount of the second installment, specifically two hundred dollars (\$200.00).
- G. Teacher Certification Stipend. Any Tutor that currently is a certified teacher in the State of Connecticut shall receive a yearly stipend of \$400, paid in the last month of the school year.

- H. Effective July 1, 2021, there shall be a new wage schedule added for certified RBTs who have completed the 40-hour certification course and the required training. As of July 1, 2021, any paraprofessional who becomes an RBT, or any new hire RBT with the qualifications described herein shall be paid in accordance with this wage schedule.
- I. The existing Tutors wage schedule shall apply to those RBTs employed by the Plainville Community Schools who as of June 30, 2021 have been paid as a Tutor.
- J. Effective July 1, 2021, a new SEL Support Tutor position shall be created in the Bargaining Unit and will be paid at the existing Tutor wage schedule. An RBT certification and Bachelors' Degree will be required to be hired to this position.

ARTICLE XXXI
LONGEVITY

- A.

Six (6) complete years of service	\$200.00
Fifteen (15) complete years of service	\$250.00
Twenty (20) complete years of service	\$350.00
- B. Employees at the maximum step as of June 30, 2010 shall receive an additional \$250 payment.
- C. Longevity payments shall be made within one month of the completion of the above noted years of services each year of the labor agreement.
- D. This article shall not apply to tutors.
- E. This article shall not apply to employees hired on or after September 1, 2013.

ARTICLE XXXII
WAGE SCHEDULES

When attending workshops, meetings, or other events so designated by the Board of Education prior to the first day of school of the new year, employees shall be paid wages from the new school year wage schedule.

Wage Schedules for employees for each year of the agreement are contained in Appendix A. Employees shall be paid by electronic direct deposit to the qualified financial institution of their choice.

ARTICLE XXXIII
DURATION

The provisions of this Agreement shall be in full effect from July 1, 2021 and shall continue in force through June 30, 2024.


CSEA, INC./SEIU, LOCAL 2001
PARAPROFESSIONALS
AND TUTORS

PLAINVILLE BOARD
OF EDUCATION

By: 
Frank Pizarro, Chief Negotiator

By: 
Becky Tyrrell, Board Chair

By: 
Anne Grosse, President

By: 
Steven LePage, Superintendent of Schools

Signed and Dated: October 6, 2021

WAGE SCHEDULES

2021-22

Step	Paras	RBT	Tutor	Para 20-21 Step
1	16.90	20.90	24.63	1-7
2	17.10	21.10	25.37	
3	17.29	21.29	25.63	8
4	17.48	21.48	25.93	
5	17.67	21.67	26.19	9
6	17.96	21.96	26.48	
7	18.25	22.25	26.73	10
8	18.54	22.54	27.10	
9	18.82	22.82	27.43	11
10	19.13	23.13	27.78	
11	19.43	23.43	28.13	12
12	19.73	23.73		
13	20.02	24.02		13
GWI: Step?	2.25% No			

2022-23

Step	Paras	RBT	Tutor
1	17.15	21.15	25.00
2	17.35	21.35	25.75
3	17.55	21.55	26.01
4	17.74	21.74	26.32
5	17.94	21.94	26.58
6	18.23	22.23	26.88
7	18.52	22.52	27.13
8	18.81	22.81	27.51
9	19.10	23.10	27.84
10	19.41	23.41	28.20
11	19.72	23.72	28.55
12	20.02	24.02	
13	20.32	24.32	
GWI: Step?	1.50% Yes		

2023-24

Step	Paras	RBT	Tutor
1	17.49	21.49	25.5
2	17.70	21.70	26.27
3	17.90	21.90	26.53
4	18.09	22.09	26.85
5	18.30	22.30	27.11
6	18.59	22.59	27.42
7	18.89	22.89	27.67
8	19.19	23.19	28.06
9	19.48	23.48	28.40
10	19.80	23.80	28.76
11	20.11	24.11	29.12
12	20.42	24.42	
13	20.73	24.73	
GWI:	2.00%		
Step?	No		

APPENDIX A AND APPENDIX B
INSURANCE SUMMARY DOCUMENTS



CONNECTICUT PARTNERSHIP PLAN



A Great Opportunity for Very Valuable Healthcare Coverage

Welcome to the Connecticut (CT) Partnership Plan—a low-/no-deductible Point of Service (POS) plan now available to you (and your eligible dependents up to age 26) and other non-state public employees who work for municipalities, boards of education, quasi-public agencies, and public libraries.

The CT Partnership Plan is the same POS plan currently offered to State of Connecticut employees.

You get the same great healthcare benefits that state employees get, including \$15 in-network office visits (average actual cost in CT: \$150*), free preventive care, and \$5 or \$10 generic drug copays for your maintenance drugs. You can see any provider (e.g., doctors, hospitals, other medical facilities) you want—in- or out-of-network. But, when you see in-network providers, you pay less. That's because they contract with Anthem Blue Cross and Blue Shield (Anthem)—the plan's administrator—to charge lower rates for their services. You have access to Anthem's State Bluecare POS network in Connecticut, and access to doctors and hospitals across the country through the BlueCard® program.

When you join the CT Partnership Plan, the state's Health Enhancement Program (HEP) is included. HEP encourages you to get preventive care screenings, routine wellness visits, and chronic disease education and counseling. When you remain compliant with the specific HEP requirements on page 5, you get to keep the financial incentives of the HEP program!

Look inside for a summary of medical benefits, and visit www.anthem.com/statect to find out if your doctor, hospital or other medical provider is in Anthem's network. Information about the dental plan offered where you work, and the amount you'll pay for healthcare and dental coverage, will be provided by your employer.

*Source: Healthcare Bluebook: healthcarebluebook.com

BENEFIT FEATURE	IN-NETWORK	OUT-OF-NETWORK
Preventive Care (including adult and well-child exams and immunizations, routine gynecologist visits, mammograms, colonoscopy)	\$0	20% of allowable UCR* charges
Annual Deductible (amount you pay before the Plan starts paying benefits)	Individual: \$350 Family: \$350 per member (\$1,400 maximum) <i>Waived for HEP-compliant members</i>	Individual: \$300 Family: \$900
Coinsurance (the percentage of a covered expense you pay <i>after</i> you meet the Plan's annual deductible)	Not applicable	20% of allowable UCR* charges
Annual Out-of-Pocket Maximum (amount you pay before the Plan pays 100% of allowable/UCR* charges)	Individual: \$2,000 Family: 4,000	Individual: \$2,300 (includes deductible) Family: \$4,900 (includes deductible)
Primary Care Office Visits	\$15 copay (\$0 copay for Preferred Providers)	20% of allowable UCR* charges
Specialist Office Visits	\$15 copay (\$0 copay for Preferred Providers)	20% of allowable UCR* charges
Urgent Care & Walk-In Center Visits	\$15 copay	20% of allowable UCR* charges
Acupuncture (20 visits per year)	\$15 copay	20% of allowable UCR* charges
Chiropractic Care	\$0 copay	20% of allowable UCR* charges
Diagnostic Labs and X-Rays ¹ ** High Cost Testing (MRI, CAT, etc.)	\$0 copay (<i>your doctor</i> will need to get prior authorization for high-cost testing)	20% of allowable UCR* charges (<i>you</i> will need to get prior authorization for high-cost testing)
Durable Medical Equipment	\$0 (<i>your doctor</i> may need to get prior authorization)	20% of allowable UCR* charges (<i>you</i> may need to get prior authorization)

¹ IN NETWORK: Within your carrier's immediate service area, no co-pay for preferred facility. 20% cost share at non-preferred facility. Outside your carrier's immediate service area: no co-pay.

¹ OUT OF NETWORK: Within your carrier's immediate service area, deductible plus 40% coinsurance. Outside of carrier's immediate service area: deductible plus 20% coinsurance.

BENEFIT FEATURE	IN-NETWORK	OUT-OF-NETWORK
Emergency Room Care	\$250 copay (waived if admitted)	\$250 copay (waived if admitted)
Eye Exam (one per year)	\$15 copay	50% of allowable UCR* charges
**Infertility (based on medical necessity)		
Office Visit	\$15 copay	20% of allowable UCR* charges
Outpatient or Inpatient Hospital Care	\$0	20% of allowable UCR* charges
**Inpatient Hospital Stay	\$0	20% of allowable UCR* charges
Mental Healthcare/Substance Abuse Treatment		
**Inpatient	\$0	20% of allowable UCR* charges (you may need to get prior authorization)
Outpatient	\$15 copay	20% of allowable UCR* charges
Nutritional Counseling (Maximum of 3 visits per Covered Person per Calendar Year)	\$0	20% of allowable UCR* charges
**Outpatient Surgery	\$0	20% of allowable UCR* charges
**Physical/Occupational Therapy	\$0	20% of allowable UCR* charges, up to 60 inpatient days and 30 outpatient days per condition per year
Foot Orthotics	\$0 (your doctor may need to get prior authorization)	20% of allowable UCR* charges (you may need to get prior authorization)
Speech therapy: Covered for treatment resulting from autism, stroke, tumor removal, injury or congenital anomalies of the oropharynx	\$0	Deductible plus Coinsurance (30 visits per Calendar Year)
Medically necessary treatment resulting from other causes is subject to Prior Authorization	\$0 (30 visits per Covered Person per Calendar Year)	Deductible plus Coinsurance (30 visits per Calendar Year)

*Usual, Customary and Reasonable. You pay 20% coinsurance based on UCR, plus you pay 100% of amount provider bills you over UCR.

** Prior authorization required: If you use in-network providers, your provider is responsible for obtaining prior authorization from Anthem. If you use out-of-network providers, you are responsible for obtaining prior authorization from Anthem.

Be the picture of health

Check out these programs and services to be your healthy best

Need a doctor? Choose a State of Connecticut preferred doctor and save

When you see a Primary Care Physician (PCP) or specialist in your State of Connecticut preferred network (also referred to as Tier 1 in your health plan), there's no office visit copay. These doctors cost less than doctors outside of your plan.

- Visit anthem.com/statect and choose **Find a Doctor**.
- Call the Enhanced Member Service Unit at 1-800-922-2232, for more information or to find out if your doctor is in Tier 1.

Use Site-of-Service providers to get 100% coverage for lab tests, X-rays, and high-cost imaging

Site-of-Service (SOS) providers give you 100% coverage with a \$0 copay. Your plan will cover only 80% of the cost when you get these services from other providers.

- Call the Enhanced Member Service Unit at 1-800-922-2232 to learn more.

Find support for mental health issues

If you or a family member needs mental health or substance use care or treatment, we have specialists and designated programs that can help and/or direct you to the type of care that you need.

- Call an Anthem Behavioral Health Care Manager at 1-888-605-0580.
- Visit anthem.com/statect.

See a doctor, psychologist or therapist from home or work with LiveHealth Online

With LiveHealth Online you can see a board-certified doctor on your smartphone, tablet or computer with a webcam. Doctors can assess your health, provide treatment options and send a prescription to the pharmacy of your choice, if needed.² If you're feeling stressed, worried or having a tough time, you can see a licensed psychologist or therapist through LiveHealth Online Psychology. It's private and in most cases you can see a therapist within 4 days or less.³

- Learn more and enroll at livehealthonline.com or use the free mobile app.

How to find care right away when it's not an emergency

The emergency room shouldn't be your first stop — unless it's a true emergency (then, call 911 or go to the ER). Depending on the situation, there are different types of providers you can see if your doctor isn't available.

- Visit a walk-in doctor's office, retail health clinic or urgent care center.
- Have a video visit with a doctor through LiveHealth Online.
- Call 24/7 NurseLine at 1-800-711-5947 to speak with a nurse about symptoms or get help finding the right care.

Get access to care wherever you go

If you travel out of Connecticut, but are in the U.S., you have access to doctors and hospitals across the country with the BlueCard® program. If you travel out of the U.S., you have access to providers in nearly 200 countries with the Blue Cross and Blue Shield Global Core® program.

- Call 1-800-810-BLUE (2583) to learn more about both programs. If you're outside the U.S., call collect at 1-804-673-1177.³

It's easy to manage your benefits online and on the go

- Find a doctor, check your claims and compare costs for care near you at anthem.com/statect.
- Use our free mobile app (search "Anthem Blue Cross and Blue Shield" at the App Store® or Google Play™) for benefit information and to show your ID card, get directions to a doctor or urgent care center and much more

Customer service helps you get answers and much more

The State of Connecticut Enhanced Member Service Unit can give you information on benefits, wellness programs and services and everything mentioned in this flier.

- Call them at 1-800-922-2232.
- Visit anthem.com/statect.

¹ Designated as Tier 1 in our Find a Doctor tool. Eligible specialties include allergy and immunology, cardiology, endocrinology, ear nose and throat (ENT), gastroenterology, OB/GYN, ophthalmology, orthopedic surgery, rheumatology and urology.

² Prescription availability is defined by physician judgment and state regulations.

³ Appointments subject to availability of therapist.

⁴ Blue Cross Blue Shield Association website: Coverage Home and Away (accessed March 2019):

bcbs.com/already-a-member/coverage-home-and-away.html.

LiveHealth Online is the trade name of Health Management Corporation, a separate company, providing telehealth services on behalf

of Anthem Blue Cross and Blue Shield. 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. 59142CTMENABS Rev. 03/19





PRESCRIPTION DRUGS	Maintenance⁺ (31-to-90-day supply)	Non-Maintenance (up to 30-day supply)	HEP Chronic Conditions
Generic (preferred/non-preferred)**	\$5/\$10	\$5/\$10	\$0
Preferred/Listed Brand Name Drugs	\$25	\$25	\$5
Non-Preferred/Non-Listed Brand Name Drugs	\$40	\$40	\$12.50
Annual Out-of-Pocket Maximum	\$4,600 Individual/\$9,200 Family		

+ Initial 30-day supply at retail pharmacy is permitted. Thereafter, 90-day supply is required—through mail-order or at a retail pharmacy participating in the State of Connecticut Maintenance Drug Network.

** Prescriptions are filled automatically with a generic drug if one is available, unless the prescribing physician submits a Coverage Exception Request attesting that the brand name drug is medically necessary.

Preferred and Non-Preferred Brand-Name Drugs

A drug’s tier placement is determined by Caremark’s Pharmacy and Therapeutics Committee, which reviews tier placement each quarter. If new generics have become available, new clinical studies have been released, new brand-name drugs have become available, etc., the Pharmacy and Therapeutics Committee may change the tier placement of a drug.

If your doctor believes a non-preferred brand-name drug is medically necessary for you, they will need to complete the Coverage Exception Request form (available at www.osc.ct.gov/ctpartner) and fax it to Caremark. If approved, you will pay the preferred brand co-pay amount.

If You Choose a Brand Name When a Generic Is Available

Prescriptions will be automatically filled with a generic drug if one is available, unless your doctor completes Caremark’s Coverage Exception Request form and it is approved. (It is not enough for your doctor to note “dispense as written” on your prescription; a separate

form is required.) If you request a brand-name drug over a generic alternative without obtaining a coverage exception, you will pay the generic drug co-pay PLUS the difference in cost between the brand and generic drug.

Mandatory 90-day Supply for Maintenance Medications

If you or your family member takes a maintenance medication, you are required to get your maintenance prescriptions as 90-day fills. You will be able to get your first 30-day fill of that medication at any participating pharmacy. After that your two choices are:

- Receive your medication through the Caremark mail-order pharmacy, or
- Fill your medication at a pharmacy that participates in the State’s Maintenance Drug Network (see the list of participating pharmacies on the Comptroller’s website at www.osc.ct.gov).



The Health Enhancement Program (HEP) is a component of the medical plan and has several important benefits. First, it helps you and your family work with your medical providers to get and stay healthy. Second, it saves you money on your healthcare. Third, it will save money for the Partnership Plan long term by focusing healthcare dollars on prevention.

Health Enhancement Program Requirements

You and your enrolled family members must get age-appropriate wellness exams, early diagnosis screenings (such as colorectal cancer screenings, Pap tests, mammograms, and vision exams). Here are the 2021 HEP Requirements:

PREVENTIVE SCREENINGS	AGE						
	0 - 5	6-17	18-24	25-29	30-39	40-49	50+
Preventive Visit	1 per year	1 every other year	Every 3 years	Every 3 years	Every 3 years	Every 2 years	Every year
Vision Exam	N/A	N/A	Every 7 years	Every 7 years	Every 7 years	Every 4 years	50-64: Every 3 years 65+: Every 2 years
Dental Cleanings	N/A	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year
Cholesterol Screening	N/A	N/A	Every 5 years (20+)	Every 5 years	Every 5 years	Every 5 years	Every 5 years
Breast Cancer Screening (Mammogram)	N/A	N/A	N/A	N/A	N/A	1 screening between age 45-49	As recommended by physician
Cervical Cancer Screening	N/A	N/A	Pap smear every 3 years (21+)	Pap smear every 3 years	Pap smear only every 3 years or Pap and HPV combo screening every 5 years	Pap smear only every 3 years or Pap and HPV combo screening every 5 years	Pap smear only every 3 years or Pap and HPV combo screening every 5 years to age 65
Colorectal Cancer Screening	N/A	N/A	N/A	N/A	N/A	N/A	Colonoscopy every 10 years, Annual FIT/FOBT to age 75 or Cologuard screening every 3 years



The Health Enhancement Program features an easy-to-use website to keep you up to date on your requirements.

Additional Requirements for Those With Certain Conditions

If you or any enrolled family member has 1) Diabetes (Type 1 or 2), 2) asthma or COPD, 3) heart disease/heart failure, 4) hyperlipidemia (high cholesterol), or 5) hypertension (high blood pressure), you and/or that family member will be required to participate in a disease education and counseling program for that particular condition. You will receive free office visits and reduced pharmacy copays for treatments related to your condition.

These particular conditions are targeted because they account for a large part of our total healthcare costs and have been shown to respond particularly well to education and counseling programs. By participating in these programs, affected employees and family members will be given additional resources to improve their health.

If You Do Not Comply with the requirements of HEP

If you or any enrolled dependent becomes non-compliant in HEP, your premiums will be \$100 per month higher and you will have an annual \$350 per individual (\$1,400 per family) in-network medical deductible.

Care Management Solutions, an affiliate of ConnectiCare, is the administrator for the Health Enhancement Program (HEP). The HEP participant portal features tips and tools to help you manage your health and your HEP requirements. You can visit www.cthep.com to:

- View HEP preventive and chronic requirements and download HEP forms
- Check your HEP preventive and chronic compliance status
- Complete your chronic condition education and counseling compliance requirement
- Access a library of health information and articles
- Set and track personal health goals
- Exchange messages with HEP Nurse Case Managers and professionals

You can also call Care Management Solutions to speak with a representative.

Care Management Solutions

(877) 687-1448 Monday – Thursday, 8:00 a.m. – 6:00 p.m. Friday, 8:00 a.m. – 5:00 p.m.

Office of the State Comptroller, Healthcare Policy & Benefit Services Division

www.osc.ct.gov/ctpartner
860-702-3560

Anthem Blue Cross and Blue Shield

www.anthem.com/statect
Enhanced Dedicated Member Services: **1-800-922-2232**

Caremark (Prescription drug benefits)

www.caremark.com
1-800-318-2572

CIGNA (Dental and Vision Rider benefits)

www.cigna.com/stateofct
1-800-244-6224

*Health Enhancement Program (HEP) Care Management Solutions
(an affiliate of ConnectiCare)*

www.cthep.com
1-877-687-1448

For details about specific plan benefits and network providers, contact the insurance carrier. If you have questions about eligibility, enrolling in the plans or payroll deductions, contact your Payroll/Human Resources office.

Calendar Year Deductible

- Per Person \$0
- Family Aggregate Maximum \$0

Plan Pays:

80%

Preventive & Diagnostic

- Oral Examinations (no frequency limit)
- Prophylaxis & Perio Maintenance (2 per calendar year, interchangeable with one another)
- Bitewing X-Rays (1 set of 2 bitewing x-rays per year)
- Topical Fluoride Applications (2 per calendar year through age 18)

Remaining Basic

80%

- Composite Fillings (on both anterior & posterior teeth)
- Stainless Steel Crowns (Replacement 1 per 2 years)
- Endodontics (initial root canal therapy covered 1 per lifetime per tooth)
- Simple Extractions (1 per lifetime per tooth)
- Relines and Rebases of Dentures (not billable within 12 months of placement, then 1 per 2 years)
- Repairs of Dentures and Partial Dentures (not billable within 12 months of placement, then 1 per 2 years)

Crowns & Prosthodontics

50%

- Space Maintainers (covered for dependents through the age of 18)
- Single Crowns (replacement 1 per 5 years)
- Bridges (new in nature, excludes replacement)
- Onlays & Inlays (replacement 1 per 5 years)
- Oral Surgery – Limited coverage based on CPT code

Calendar Year Maximum

Unlimited

Dependent children are covered to age 26.

Delta Dental has two networks available under this plan. The Delta Dental Premier® network is the largest of the Delta Dental networks with over 339,000 participating dentist offices nationally (80%+). Delta Dental PPO™ is a smaller, but more discounted network with over 269,000 participating dentist offices nationwide. Delta Dental's network discounts average 25% to 35% less.

You may use any fully licensed dentist under this plan, but it is to your advantage to use a network dentist, especially PPO, since they accept the Delta Dental allowance as their maximum charge and cannot bill Delta Dental patients for amounts above this level. Delta Dental PPO dentists offer the lowest fees of our networks.

Participating dentists will be paid directly by Delta Dental for covered services. Non-participating dentists will bill you directly, and Delta Dental may make claim payment directly to you. You will maximize benefits and reduce paperwork by using a Delta Dental participating dentist.

If you do not have a dentist, you may obtain a current listing of participating dentists in any area, by calling 1-800 DELTA OK (1-800-335-8265). Provide your zip code to the representative and a directory for that area will be mailed to your home. If you have Internet access, you may also visit our website at deltadentalct.com to locate participating dentists.

At the time of your first appointment, tell the dentist that you are covered under this program and provide your group number and ID number. Your dependents, if covered, should provide the employee's ID number.

Claim questions and other information needs should be directed to Delta Dental's customer service department at 1-800-452-9310.

Everyone Deserves a Healthy Smile



Manage Your Dental Benefits with MySmile®

Thank you for choosing Delta Dental. To access MySmile, go to DeltaDentalCT.com and click on 'Sign in or Register' at the top right of the page. Once registered and logged in, you will be able to:



- ▶ View your dental benefits to see important details regarding your dental coverage



- ▶ Print your ID card



- ▶ Provide an endorsement for your dentist to help others find the one that meets their needs

Other member tools available, include:



- ▶ Our Find a Dentist tool - find a dentist near where you work or live



- ▶ Dental Cost Estimator - find out cost ranges for common dental care needs



- ▶ Forms - download and use important Delta Dental forms



- ▶ Explanation of Benefits - view and print your EOBs



- ▶ Oral Health and Wellness - Check out *grin!* magazine to learn more about the connection between a healthy smile and overall wellbeing

Three Easy Ways to Find a Participating Dentist

1. Website. Use the Find a Dentist tool at DeltaDentalCT.com
2. Mobile App. Download the Delta Dental App on your smart phone.
3. Telephone. Call us at 800-DELTAOK to have a listing sent to you.



Plainville Town and Board of Education

SUMMARY OF BENEFITS

Vision Care Services	In-Network Member Cost	Out of Network Reimbursement
Exam With Dilation as Necessary	\$10 Copay	Up to \$40
Retinal Imaging	Up to \$39	N/A
Frames	\$0 Copay; \$130 allowance, 20% off balance over \$130	Up to \$91
Standard Plastic Lenses		
Single Vision	\$25 Copay	Up to \$30
Bifocal	\$25 Copay	Up to \$50
Trifocal	\$25 Copay	Up to \$70
Lenticular	\$25 Copay	Up to \$70
Standard Progressive Lens	\$80 Copay	Up to \$50
Premium Progressive Lens ^A	\$110 Copay - \$200 Copay	Up to \$50
Tier 1	\$110 Copay	Up to \$50
Tier 2	\$120 Copay	Up to \$50
Tier 3	\$135 Copay	Up to \$50
Tier 4	\$200 Copay	Up to \$50
Lens Options (paid by the member and added to the base price of the lens)		
UV Treatment	\$15	N/A
Tint (Solid and Gradient)	\$15	N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Polycarbonate - age 19 and over	\$40	N/A
Standard Polycarbonate - under age 19	\$40	N/A
Standard Anti-Reflective Coating	\$45	Up to \$5
Premium Anti-Reflective Coating ^A	\$57 - \$68	Up to \$5
Tier 1	\$57	Up to \$5
Tier 2	\$68	Up to \$5
Tier 3	\$85	N/A
Photochromic/Transitions	\$75	N/A
Polarized	20% off Retail Price	N/A
Other Add-Ons and Services	20% off Retail Price	N/A
Contact Lens Fit and Follow-up (Contact lens fit and two follow-up visits are available once a comprehensive eye exam has been completed.)		
Standard Contact Lens Fit & Follow-Up:	\$40	N/A
Premium Contact Lens Fit & Follow-Up:	10% off Retail Price	N/A
Contact Lenses (Contact Lens allowance includes materials only)		
Conventional	\$0 copay, \$130 allowance, 15% off balance over \$130	Up to \$130
Disposable	\$0 copay, \$130 allowance, plus balance over \$130	Up to \$130
Medically Necessary	\$0 copay, Paid-In-Full	Up to \$210
Laser Vision Correction		
LASIK or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Hearing Care		
Hearing Health Care from Amplifon Hearing Network	40% off hearing exams and low price guarantee on discounted hearing aids	
Frequency		
Examination	Once every 12 months	
Lenses (in lieu of contact lenses)	Once every 12 months	
Contacts (in lieu of lenses)	Once every 12 months	
Frame	Once every 24 months	

Additional discounts

40% OFF

Complete pair of prescription eyeglasses

20% OFF

Non-prescription sunglasses

20% OFF

Remaining balance beyond plan coverage

These discounts are not insured benefits and are for in-network providers only.

Take a sneak peek before enrolling

- You're on the Insight Network

- For a complete list of in-network providers near you, use our Enhanced Provider Locator on eyemed.com or call 1-866-804-0982

- For LASIK providers, call 1-877-5LASER6

QL-000052115

^A Premium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Benefits are not provided from services or materials arising from: 1) Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; 2) Medical and/or surgical treatment of the eye, eyes or supporting structures; 3) Any eye or Vision Examination, or any corrective eyewear required by a Policyholder as a condition of employment; Safety eyewear; 4) Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; 5) Plano (non-prescription) lenses; 6) Non-prescription sunglasses; 7) Two pair of glasses in lieu of bifocals; 8) Services or materials provided by any other group benefit plan providing vision care 9) Services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order. 10) Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next Benefit Frequency when Vision Materials would next become available. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Standard/Premium Progressive lens not covered-fund as a Bifocal lens. Standard Progressive lens covered-fund Premium Progressive as a Standard. Benefit allowance provides no remaining balance for future use within the same benefit year. Fees charged for a non-insured benefit must be paid in full to the Provider. Such fees or materials are not covered.