
AGREEMENT
BETWEEN
THE ANSONIA BOARD OF EDUCATION
AND
THE ANSONIA FEDERATION OF
PARAPROFESSIONALS
AFT-CT, LOCAL NO. 2181, AFL-CIO

July 1, 2021 through June 30, 2025

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This Agreement made as of the 1st of , July 2022 (hereinafter referred to as the "Agreement") by and between the Ansonia Board of Education (hereinafter referred to as the "Board") and the Ansonia Federation of Paraprofessionals, AFT-CT, Local #2181, AFL-CIO (hereinafter referred to as the "Union").

ARTICLE I RECOGNITION

Pursuant to elections held under the auspices of the Connecticut State Board of Labor Relations on September 16, 1971, and certification thereafter by said Board, the Board of Education agrees to, and does hereby recognize the Ansonia Federation of Paraprofessionals, AFT-CT, Local #2181, AFL-CIO, as the exclusive bargaining representative for all employees engaged as special class and helping aides, excluding all other personnel employed by the Ansonia Board of Education, for the purpose of collective bargaining with respect to rates of pay, wages, hours of employment or other conditions of employment.

ARTICLE II MANAGEMENT RIGHTS CLAUSE

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 Ansonia Public Schools in all its aspects, including but not limited to the following: to determine the type of work to be performed by bargaining unit members; to assign all work to unit members; to decide the methods, procedures and means of conducting the work; to select, hire and demote unit members; to discharge or otherwise discipline any unit member; to promote, transfer and lay off unit members; to decide the need for facilities; to establish or continue policies, practices, and procedures for the conduct of business and the management of operations, and from time to time to change or abolish such policies, practices or procedures. These rights, responsibilities, and prerogatives are not subject to delegation in whole or in part, except the same shall not be exercised in a manner inconsistent with or in violation of the specific terms and provisions of this Agreement.

ARTICLE III PAYROLL DEDUCTIONS

The Board shall deduct union dues from the paycheck of any bargaining unit member who signs and delivers to the Board a written form approved by the Union authorizing the Board to deduct Union dues from their salaries, or upon certification from the Union it has such written authorization from an employee. The Board will provide the Union with a copy of all membership cards or dues authorization forms it receives. The schedule of such deductions having been agreed upon by the Board and Union. All of the foregoing sums shall be forwarded to the Union within ten (10) days. Said forms shall continue in effect until such time as the Union provides written notice that said deductions are no longer authorized. Deductions may be revoked only pursuant to the terms of an employee's written authorization. The Union shall indemnify and save the Board harmless against all claims, demands, suits, or other forms of liability which may arise by reason of any action taken a result of this Section in accordance with C.G.S Sec.31-40bb(j). In any such action the Board and the Union shall select the Board's counsel by mutual agreement.

ARTICLE IV UNION SECURITY

- A. Notice of new employees: Within ten days of hiring a new employee, the Board will notify the Union president or designee of the new employee and include in an editable digital file format the employee's name, job title, department, work location, work e-mail, work telephone number and home address.
- B. Union Orientation: The Union shall have the right to meet with newly hired employees within the bargaining unit, during regular hours and without charge to the pay or leave time of the employees for not less than thirty minutes nor more than one hour. The Board shall provide a space and time for the Union president or designee to meet with the new employee or employees within thirty calendar days after the date of hire.
- C. Access to members and facilities: The Union shall have (1) the right to meet with individual employees on the premises of the public employer during the workday to investigate and discuss grievances, workplace related complaints and other workplace issues and (2) the right to conduct worksite meetings during meal periods and during other paid or unpaid breaks, and before and after the workday, on the employer's premises.
- D. Use of electronic mail: The Union shall have the right to use the electronic mail systems of the Board to communicate with bargaining unit members regarding collective bargaining, the administration of collective bargaining agreements, the investigation of grievances other workplace-related complaints and issues, and internal matters involving the governance or business of the Union.
- E. Other rights: Nothing herein shall be interpreted to limit or abrogate rights the Union has under the law.

ARTICLE V HOURS OF WORK

- A. The work year shall consist of the number of student days during which school is in session for students during each school year and the training days set forth in Section F of this Article. The Union retains the right to negotiate the impact of any change in the number of scheduled student days.
- B. The basic workday shall consist of seven hours, six hours thirty minutes (6:30) of assigned work and one-half (.5) hour of unpaid, duty-free lunch.
- C. Time and one-half will be paid for all time worked in excess of seven (7) hours per day. All overtime work must have prior approval of the Superintendent of Schools or his/her designee.
- D. Regularly assigned employees will have a fixed starting time which shall be determined by the Superintendent or his/her designee.
- E. All employees will maintain their regular hours during the school year.

- F. 1. Paraprofessionals shall attend two out of four scheduled in-service training days as determined by the Superintendent and shall receive a day's pay for each day they attend. Paraprofessionals are encouraged to participate in additional in-service training days and will be compensated, as previously stated, for each day they attend.
2. The Board may provide in-service training directly related to paraprofessional responsibilities. These days, if provided, will be included in the days referenced in paragraph number 1.

ARTICLE VI SENIORITY

- A. Effective July 1, 2017, new hires shall serve a probation period of six months. During the probation period said employees may be terminated without cause and will not have access to the Grievance and Arbitration Procedure described in Article XII. New hires shall be paid the probation rate for their first six months of employment.
- B. All employees in the bargaining unit shall have system-wide seniority in accordance with their hiring date. In case of the same hiring date, the employee with longer building seniority shall have preference. Effective July 1, 2017, all new hires shall have the time of hire noted on their date of hire. In case of the same hiring date, the employee with the earlier time noted shall have preference.

ARTICLE VII LAYOFF

Layoff shall be by seniority. When reduction in force is necessary, the least senior employee shall be laid off in each instance. Any employee who is laid off shall have recall rights in order of seniority for any paraprofessional position which becomes vacant for a period of eighteen (18) months following the date of layoff, or the length of the employee's service, whichever is less. In no case, however, shall the recall period be less than one year. An employee who wishes to exercise his/her recall right must do so within seven (7) calendar days following receipt of notice of a recall opportunity. Refusal of an offer of re-employment shall result in loss of recall rights. Each employee on the recall list shall be obligated to notify the Board of his/her current address. The Union President shall have top seniority with respect to layoffs and recalls.

ARTICLE VIII SALARIES

- A. The Salary schedule is as follows:

	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
Step 1	\$16.61	\$17.71	\$18.71	\$19.71	\$20.71
Step 2	\$17.60	\$18.60	\$19.60	\$20.60	\$21.60

Increases shall take effect July 1 of each year. Employees shall be hired at Step 1 and shall move to Step 2 at the end of their six-month probation period.

If a member is needed to cover a class for a teacher- volunteers will be requested, and will be compensated at the rate of time and half (1 ½) times his/her normal rate of pay for the duration of the assignment after the first hour. This requires prior approval by the building administrator.

B. Longevity

Members hired after July 1, 2022 will no longer receive longevity payments.

Members hired before July 1, 2022 will received the following:

1. After ten (10) years of continuous employment as a paraprofessional in Ansonia, each employee shall receive a lump sum of \$250 to be paid on the final pay date in June.
2. After fifteen (15) years of continuous employment as a paraprofessional in Ansonia, each employee shall receive a lump sum of \$500 to be paid on the final pay date in June.
3. After twenty (20) years of continuous employment as a paraprofessional in Ansonia, each employee shall receive a lump sum of \$800 to be paid on the final pay date in June.

**ARTICLE IX
JURY DUTY**

In the event that any employee is called for jury duty, the Board shall pay such employee an amount to guarantee no loss in income on account of absence from work. The employee must present proof of jury payment from the court in order to receive the differential.

**ARTICLE X
DISCIPLINE AND/OR DISCHARGE**

- A. The Board may immediately discharge, suspend without pay, or otherwise discipline, employees for just cause. This shall not prevent dismissal for a single act of serious misconduct that constitutes just cause.
- B. A first offense warning notice shall be removed from the employee's file after two (2) years.
- C. All notices must be in writing to the employee and to the Union.

ARTICLE XI LEAVE OF ABSENCE

- A. Subject to the approval of the Board, an employee may be granted a leave of absence without pay or benefits (except as may be required pursuant to a Family and Medical Leave request) for no more than one (1) year upon written request, for the following reasons:
1. Health reasons upon written statement from physician.
 2. Personal reasons.
 3. Maternity leave.
 - a. Disability leave (with benefits) shall be available for such reasonable period of time as a female employee is determined by her physician to be disabled from performing the duties of her job because of pregnancy or conditions attendant thereto.
 - b. Child-rearing leave:
 1. Any employee covered by this Agreement shall be entitled upon written request submitted to the Superintendent, to a leave without pay or benefits for purposes of child-rearing. Such written notice shall be submitted to the Superintendent ninety (90) days prior to the commencement of such leave and shall be submitted prior to any taking of pregnancy leave as set forth above.
 2. The minimum period of such leave shall be the remainder of any school year in which any leave is taken pursuant to the pregnancy leave as set forth above or child-rearing leave, whichever shall occur first.
 3. The employee shall give the Superintendent written notice of her voluntary termination of such maternity and/or child rearing leave at least ninety (90) days in advance of such termination. There is an eighteen. (18) month limit regarding recall from a child-rearing leave.
- B. An employee returning from leave will be placed in the most appropriate assignment available.
- C. In the event the employee fails to accept employment in said offered available position(s), the Board's obligation under this section shall terminate.
- D. All leaves above shall run concurrently with, and shall not be in addition to any available statutory Family and Medical Leave.

ARTICLE XII GRIEVANCE AND ARBITRATION PROCEDURE

A grievance is hereby defined to be any controversy, complaint, misunderstanding, or dispute concerning the interpretation or application of any provision of this Agreement. Any grievance arising between the Board and the employee, or any employee represented by the Union, shall be settled in the following manner:

A. STEP 1 - Informal Procedure

If a bargaining unit member believes that he/she has a grievance, he/she shall discuss the grievance informally with the building principal, or in the case of Central Office, his/her immediate supervisor.

B. STEP 2

If the matter cannot be resolved informally, the grievant or grievants must present to the Union President and to the Superintendent of Schools, a written grievance specifying the nature of the grievance within twenty (20) calendar days from the date on which the grievant knew or should have known of the act or condition complained of. If a satisfactory adjustment is not effected with the Superintendent of Schools within ten (10) calendar days from receipt of the written grievance, such written grievance shall proceed to Step 3.

C. STEP 3

If the matter cannot be resolved satisfactorily at Step 2, the Union Business Representative shall take the matter up by filing a request, specifying the nature of the grievance and the section of the contract that is claimed to have been violated, for a hearing before the Board, or a committee thereof, within fourteen (14) calendar days from the failure to resolve the grievance at Step 2. The Board (or a committee thereof) shall schedule a hearing with the grievant and appropriate Union representatives within twenty (20) calendar days from receipt of a request for such hearing. The Board of Education (or a committee thereof) shall inform the grievant and the Union Business Representative of its decision in writing within fourteen (14) calendar days following conclusion of the grievant's hearing. Any agreement settling the grievance shall be reduced to writing and signed by the parties.

D. STEP 4

If a settlement of the grievance has not been effected at Steps One through Three, only the Board or Union may process the grievance to arbitration by submitting it to the American Arbitration Association (AAA), with a copy to the other party within fourteen (14) calendar days from receipt of a decision at Step Three. The AAA shall hear the grievance under its rules and regulations and its decision shall be final and binding upon the Board, the Federation and the employees.

Any time limits expressed in this Article may be extended by mutual agreement in writing.

E. General Provisions:

1. Failure at any step of this procedure to communicate a decision within the specified time limits shall permit the aggrieved to proceed immediately to the

next step. Failure at any step to appeal within the specified time limits shall be considered acceptance by the aggrieved of the decision rendered, and such decision shall thereafter be binding upon the aggrieved and the Union. The time limits specified at any step may be extended in any particular instance by written agreement between the Superintendent and the Union.

2. Meetings held under this procedure shall be conducted at a time and place which will afford all persons proper to be present a fair and reasonable opportunity to attend. When such meetings are held during school hours, all persons who participate shall be excused without loss of pay for that purpose. Persons proper to be present for the purposes of this section are defined as an aggrieved employee or employees, their appropriate Union representative, and necessary witnesses.
3. The Union representative shall be permitted, when otherwise free from duty assignment insofar as he/she does not interfere with normal classroom procedure or work of others, to investigate and process grievances within his/her area of representation.
4. Any employee who is summoned to the Board building by an administrator shall be given such reasonable notice as the situation permits and shall be informed of the matter in regard to which his/her presence is required. If the employee so desires, he/she may be accompanied by a representative of the Union.

ARTICLE XIII FAIR PRACTICES

- A. The Board agrees to continue its policy of not discriminating against any employee on the basis of race, creed, color, national origin, age, sex, marital status, or membership or participation in, or association with, the activities of any employee organization.
- B. The Union agrees, in accordance with its constitution, to continue to admit persons to membership without discrimination on the basis of race, creed, color, national origin, age, sex, or marital status, and to represent equally all employees without regard to membership or participation in, or association with, the activities of any organization.

ARTICLE XIV JOB POSTINGS

- A. It is recognized that, during the course of a calendar year, opportunities in Special Education may arise for employees of this unit. Such opportunities shall be posted setting forth the requirements, schedules, rates of pay, and the procedures for application. Seniority will be a consideration if the other factors are equal.
- B. All postings shall be made as soon as reasonably possible after such openings are fixed.
- C. Employees shall have ten (10) working days to apply for openings except where, by mutual agreement, it may be necessary to post for less than this period of time. The

Union shall within five (5) working days be notified, in writing, of the names of employees chosen for the respective positions.

ARTICLE XV NOTICES AND ANNOUNCEMENTS

- A. All official circulars which emanate from the Superintendent's Office and/or the Board of Education and which are intended for the information of the employees shall be made available to the Union President as soon as possible after receipt in the schools. Copies of these circulars shall be filed in each school so that they will continue to be available to the employees as needed for their effective period.
- B. **Building Organizational Chart:** An organizational chart, showing lines of authority of all building personnel, shall be available in each school.
- C. **Notices and Announcements:** A copy of any notice, directive or bulletin relating to employees of this unit shall be sent to the steward.

ARTICLE XVI UNION RIGHTS

- A. The Union may call meetings in each school before or immediately after school upon three (3) days' notice to the principal. No meetings shall be scheduled so as to interfere with regular assignments.
- B. The Board agrees to furnish a copy of this Agreement to each employee.
- C. Upon the Union's request, there shall be made available to it any and all information, statistics, and records to the extent such material is readily available or is reasonably obtainable, which the Union may deem to be relevant or necessary for the proper enforcement and implementation of the terms of this Agreement. Records of employees other than those involved shall not be available without the approval of the individual employees.
- D. **Union Leave:** Employees who are elected or appointed to a full-time position with the Union (local, state or national) shall, upon proper application, be granted a one (1) year leave of absence without pay or benefits for the purpose of accepting a position. Such leave may be extended for one (1) additional year upon proper application prior to June 1. An employee granted such leave of absence shall accrue seniority, salary increment, and like benefits as though he/she were in regular service. Upon return to service, he/she shall be placed on the assignment which he/she left if the position has not been eliminated, otherwise in a comparable position with such accrued benefits and increments as he/she would have earned had he/she been on active service.
- E. **Personnel Files:**
 - 1. Employees shall have the right, during regular office hours, to inspect their own personnel files (except with respect to information obtained in the course of the hiring process), to make a copy of, and to make a written comment

concerning anything therein. However, employees shall not have the right to remove the file or any of its contents from the Administration office.

2. The Board agrees to maintain personnel files with the highest degree of confidentiality permitted by law.
3. A file may be updated at the request of an employee and with the agreement of the Superintendent.
4. An employee shall be notified when new material is placed in his/her personnel file unless such material is included at the employee's request.
5. Documents that are in the possession of the Board and are not available for inspection by the employee shall not be used as evidence in any hearing or punitive action.

ARTICLE XVII FRINGE BENEFITS

- A. **Life Insurance:** The Board shall cover each employee with life insurance and equal coverage for accidental death and dismemberment in the amount of ten thousand dollars (\$10,000).
- B. **Sick Leave:**
1. Members hired after July 1, 2022 will receive ten (10) sick days for the year. Unused sick leave shall be cumulative to seventy-five (75) days.
 2. Members hired before July 1, 2022 shall receive twelve (12) days of sick leave for the year. Unused sick leave shall be cumulative to one hundred (100) days.
 3. Upon retirement, each employee shall receive a lump sum payment equal to one-quarter of his/her accumulated sick leave at the employee's current rate of pay at the time of retirement.
 4. Members of the bargaining unit shall be required to utilize the District approved absence notification system for reporting absences. The district will provide necessary training for such system, and will ensure employees who do not have reliable access to internet at home have a method for reporting absences.
- C. **Funeral Leave:** An employee shall be entitled to the following:
1. Death of a spouse, child, parent five (5) days;
 2. Death in the immediate family, three (3) days, but in no event more than one day past the date of the funeral. (immediate family includes brother, sister, grandmother, grandfather, mother-in-law, father-in-law and grandchild)
- D. **Dental/Hospital/Medical Insurance:**

The following health and dental insurance will be made available to each employee and their eligible dependents.

1. A high deductible health insurance plan as described in Appendix A. The deductibles shall be \$2500 single and \$5000 family annual deductible for in-network services, with a 0% co-insurance after deductible. Out-of-network services will also be subject to an 80%/20% coinsurance and \$2,500/\$5,000 initial deductible, with an after deductible and out-of-network combined maximum of \$5,000/\$10,000. The Board shall provide a health savings account for each participating employee. (see, Appendix A attached)

HSA PRESCRIPTION DRUG COVERAGE:

Prescription drugs are covered as part of the HSA plan and will count toward satisfying the applicable \$2,500/\$5,000 deductible. Prescription drug copays for drugs purchased after the deductible has been satisfied will be subject to employee co-pays of \$10/\$40/\$50 for generic, preferred name brand, and non-preferred name brand, respectively, for a 30-day supply. A ninety-day supply is available through mail order at twice (2X) the normal 30-day copay.

2. The Board shall provide dental coverage to employees and their eligible dependents. Dental insurance is summarized in Appendix A.
3. Employees not able to participate in the HSA plan set for in Appendix A may participate in a Health Reimbursement Account with the same deductible.
4. Effective July 1, 2020, employees shall contribute fifteen (15) percent of the cost of health and dental insurance.
5. Effective July 1, 2021, employees shall contribute fifteen (15) percent of the cost of health and dental insurance.
6. Effective July 1, 2022, employees shall contribute zero (0) percent of the cost of health and dental insurance
7. Effective July 1, 2023, employees shall contribute zero (0) percent of the cost of health and dental insurance.
8. Effective July 1, 2024 Employees shall contribute zero (0) percent of the cost of health and dental insurance.
9. At the option of each employee, spousal, dependent, or family coverage may be added.
10. All employees who are subject to premium sharing, as a condition of enrollment in the foregoing program of health insurance, shall sign and deliver appropriate payroll withholding authorization forms to the Board, authorizing the withholding of the employee's share of insurance premiums from wages, salary and/or stipends and shall be subject to annual re-enrollment. Failure to deliver timely withholding authorization forms shall result in exclusion from the insurance program. Upon receipt of a properly executed payroll withholding

authorization form, the Board shall request insurance coverage as soon as practicable, subject to any late entrant requirements of the insurance carrier.

11. The Board shall have the right to change insurance carriers and/or to self-insure in whole or in part in order to provide the insurance coverages, benefits and administration set forth above, and provided further that coverages which result from change in carriers and/or self-insurance are equal to or better than the current plan on an overall basis.

The Union shall be notified in writing prior to ninety (90) days of any intention to change carriers and/or self-insure and shall have a reasonable opportunity to review the proposed changes. Should the Union and the Board disagree that the changes proposed will provide coverages substantially equal to or better than the coverages, benefits and administration described on an overall basis, the disagreements shall be subject to arbitration as set forth in Article XII, Section D of this Agreement, before an arbitrator with experience and expertise in insurance matters. The Board and the Union must agree upon the selection of any arbitrator. If no agreement can be reached, then the arbitrator will be appointed in accordance with the rules of the American Arbitration Association

12. Employees who participated in one of the health insurance plans offered by the Board from the start of 2004/05 school year and who have continuously participated in the health insurance plans since that time may select effective with the 2005/06 school year to waive, in writing, the health insurance coverage, and in lieu thereof receive an annual payment of \$1,000 from the Board for each year during which the employee continues to elect not to participate in such coverage. Such annual payment will be issued with the last payroll installment for the school year. In order to receive such payment, an eligible employee must complete and submit a form provided by the Board indicating his/her intent not to participate in the Board's insurance coverage, no later than June 1 of each year. Such employee may elect to resume Board provided health insurance coverage upon written notice to the Board. Upon receipt of such notice, insurance coverage shall be reinstated as soon as possible, including waiting periods, which may be prescribed by the applicable insurance carrier. In such event, the employee shall only receive a pro-rated portion of the waiver stipend provided under this section.

- E. The Board shall implement and maintain a "Section 125" Salary Reduction Agreement which shall be designed to permit exclusion from taxable income of the employees' share of health and life insurance premiums. The Board makes no representations or guarantees as to the initial or continued viability of such a Salary Reduction Agreement, and shall incur no obligation to engage in any form of impact bargaining in the event that a change in law reduces or eliminates the tax exempt status of employee insurance premium contributions. So long as the Board makes a good faith effort to comply with this paragraph, neither the Union nor any employee covered by this Agreement shall make any claim or demand, nor maintain any action against the Board or any of its members or agents for taxes, penalties, interest or other cost or loss arising from a flaw or defect in the Salary Reduction Agreement, or from a change in law which may reduce or eliminate the employee tax benefits to be derived therefrom.

F. **Option to Purchase Coverage:** Employees may purchase any additional coverage offered to other non-certified Board employees at the group rate. Upon retirement, with a minimum term of service of 10 years, at a minimum age of 55, bargaining unit members shall have the option to purchase insurance coverage at the group rate, subject to approval of the insurance carrier, until age 65, when they may purchase Blue Cross 65 or equivalent, if offered on a group basis by the Board.

G. **Holidays:** The holiday schedule shall provide a full days pay at the employee's rate of pay for the following holidays:

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

* Veteran's Day may be a school day at the sole discretion of the Board of Education. In such case each employee shall receive a floating holiday that must be taken prior to the end of the school year. If the employee has not taken the floating holiday prior to the end of the school year, it shall be included as a day's pay in the last paycheck of the school year.

H. **Personal Days:** Employees shall be paid for up to three (3) personal days per school year (one (1) day at a time) for legitimate and necessary personal business. The employee shall make all reasonable efforts to plan and conduct such personal business so that it does not conflict with assigned duties. The employee must request the leave in writing (Board of Education Form) at least forty-eight (48) hours in advance (except when impossible in cases of emergency) and state the general purpose of such leave. At the end of the school year members of the bargaining unit shall be compensated, at their base rate of pay, for all unused personal leave for that particular school year.

I. **Vacations:** The basic vacation periods shall be as follows:

1	year of service	5 days
2-7	years of service	10 days
8-13	years of service	15 days
14-19	years of service	20 days
20+	years of service	25 days

Employees shall not take vacation that interferes with the school calendar. Any vacation not taken in a given year shall be purchased back by the Board at the end of the school year.

J. The Board shall provide an opportunity for the employees to obtain, without cost, an individual flu shot and chest x-ray.

ARTICLE XVIII COMPENSATION FOR INJURY

Any employee's injury or physical disability due to the pursuit of his/her occupation shall be compensated for in accordance with the worker's compensation law of the State of Connecticut.

ARTICLE XIX SAVE HARMLESS CLAUSE

The obligation of the Board of Education to protect and save harmless its employees in damage suits is provided for in §10-235 of the General Statutes.

ARTICLE XX SAVING CLAUSE

- A. If any provision of this Agreement is, or shall at any time be, contrary to law, then such provision shall not be applicable or performed or enforced, except to the extent permitted by law, and any substitute action shall be subject to appropriate consultation between the Board and the Union.
- B. In the event that any provision of this Agreement is, or shall at any time be, contrary to law, all other provisions of this Agreement shall continue in effect.

ARTICLE XXI NEGOTIATION OVER MATTERS NOT COVERED BY TERMS OF THE AGREEMENT

This Agreement may be amended or modified by the mutual agreement of the parties, although it is recognized that neither party has any obligation to negotiate such amendment or modification during the life hereof.

ARTICLE XXII PARAPROFESSIONAL PLACEMENT

The Board shall notify each employee of his/her tentative assignment for the next school year on or before the last school day in each school year.

ARTICLE XXIII SCHOOL CLOSINGS

- A. If, during the year, the Ansonia schools are closed due to inclement weather, the Board shall allow employees covered by this contract to make-up said days. Employees shall have the option of taking a personal day for these days.
- B. If the work day is shortened by the Board for emergencies or otherwise, the Board agrees to pay affected employees their normal day's pay for that day.

ARTICLE XXIV WORK ASSIGNMENTS

During the course of the work day, paraprofessionals will perform any duty consistent with their job description deemed necessary for the good of the school, as assigned by the Principal or his/her designee. However, in the event a bargaining unit employee is required to cover

for a certified employee he/she shall be paid at time and one half (1 ½) times his/her normal rate of pay for the duration of the assignment after the first hour. Volunteers will be requested for this assignment and must be approved by the Administration. Lunch duty, paid at the regular rate of pay, shall be equitably assigned within each building. Substitution shall be equitably distributed.

ARTICLE XXV DURATION

This Agreement shall be in full force and effect during the period July 1, 2020 through June 30, 2025

FOR THE BOARD OF EDUCATION
CITY OF ANSONIA

By: Richard Balara

Date: 9-19-2022

FOR THE ANSONIA FEDERATION OF
PARAPROFESSIONALS, AFT-CT
LOCAL 2181, AFL-CIO

By: Denice Hunt

Date: 9-19-2022



Lumenos HSA Plan Summary

The Lumenos® HSA plan is designed to empower you to take control of your health, as well as the dollars you spend on your health care. This plan gives you the benefits you would receive from a typical health plan, plus health care dollars to spend your way. And you'll have access to personalized services and online tools to help you reach your health potential.

Your Lumenos HSA Plan

First – Use your HSA to pay for covered services: Health Savings Account

With the Lumenos Health Savings Account (HSA), you can contribute pre-tax dollars to your HSA account. Others may also contribute dollars to your account. You can use these dollars to help meet your annual deductible responsibility. Unused dollars can be saved or invested and accumulate through retirement.

Contributions to Your HSA

For 2020, contributions can be made to your HSA up to the following:

\$3,550 individual coverage
\$7,100 family coverage

Note: These limits apply to all combined contributions from any source including HSA dollars from incentives.

Earn More Money for Your Account

What's special about your Lumenos HSA plan is that you may earn additional funds for your health account through the Healthy Rewards Incentive program.

To receive funds earned through the Healthy Rewards program, you must have an open HSA with Mellon Bank or with another bank through which your employer is sponsoring your HSA.

Earn Rewards

If you do this:

- Future Move for participation and completion
- Healthy Lifestyles online participation
- ConditionCare participation and completion.

You can earn:

Up to \$200
Up to \$150
Up to \$300

Some eligibility requirements apply. See page 2 for program descriptions.

Plus – To help you stay healthy, use:

Preventive Care

100% coverage for nationally recommended services. Included are the preventive care services that meet the requirements of federal and state law, including certain screenings, immunizations and physician visits.

Preventive Care

No deductions from the HSA or out-of-pocket costs for you as long as you receive your preventive care from an in-network provider. If you choose to go to an out-of-network provider, your deductible or Traditional Health Coverage benefits will apply.

Then –

Your Bridge Responsibility

The Bridge is an amount you pay out of your pocket until you meet your annual deductible responsibility. Your bridge amount will vary depending on how many of your HSA dollars, if any, you choose to spend to help you meet your annual deductible responsibility. If you contribute HSA dollars up to the amount of your deductible and use them, your Bridge will equal \$0.

HSA dollars spent on covered services plus your Bridge responsibility add up to your annual deductible responsibility.

Health Account + Bridge = Deductible

Bridge

Your Bridge responsibility will vary.

Annual Deductible Responsibility

In Network and Out of Network Providers

\$2,500 individual coverage
\$5,000 family coverage

If Needed –

Traditional Health Coverage

Your Traditional Health Coverage begins after you have met your Bridge responsibility.

Traditional Health Coverage

After your bridge, the plan pays:

100% for in-network providers 80% for out-of-network providers

Additional Protection

For your protection, the total amount you spend out of your pocket is limited. Once you spend that amount, the plan pays 100% of the cost for covered services for the remainder of the plan year.

Annual Out-of-Pocket Maximum

In-Network Providers	Out-of-Network Providers
\$ 5,000 individual coverage	\$ 5,000 individual coverage
\$ 7,350 family coverage	\$ 10,000 family coverage

Your annual out-of-pocket maximum consists of funds you spend from your HSA, your Bridge responsibility and your coinsurance amounts.

If you have questions, please call toll-free 1-888-224-4896.

Ansonia



Lumenos HSA Plan Summary

Healthy Rewards Program

Your employer will provide you with additional health care dollars in your HSA for the following:

Future Moms: Individualized obstetric support for expectant high-risk and non-high-risk mothers. Members can earn up to a \$200 Future Mom's Incentive. This includes three milestones: \$100 initial enrollment, \$50 interim, and \$50 postpartum; timing and rules apply.

Healthy Lifestyles Online: Each adult family member can earn up to \$150 each year. Members earn a \$50 incentive at each 3,000, 5,000 and 10,000 point milestone. Your employees can quickly achieve their first milestone of 3,000 points by completing the Well-Being Assessment and setting up their Well-Being Plan.

Enroll in ConditionCare: (Incentive \$100) Disease management for prevalent, high-cost conditions (asthma, diabetes, chronic obstructive pulmonary disease, coronary artery disease and heart failure). Each family member can get one incentive per year. In the first year and later years, members must stay qualified to enroll and earn incentives. Members who have more than one health problem will enroll in one combined program — not separate ones for each condition.

Graduate from ConditionCare: (Incentive \$200) There's no limit to the number of family members that can graduate and earn the incentive. Each family member can earn one credit per year. In the first year and later years, members must stay qualified to enroll, graduate and earn incentives. Members who have more than one health problem will graduate from one combined program — not separate ones for each condition.

To receive funds earned through Healthy Rewards, you must have an open HSA with Mellon Bank or with another bank through which your employer is sponsoring your HSA.

Summary of Covered Services

Preventive Care

Anthem's Lumenos HSA plan covers preventive services recommended by the U.S. Preventive Services Task Force, the American Cancer Society, the Advisory Committee on Immunization Practices (ACIP) and the American Academy of Pediatrics. The Preventive Care benefit includes screening tests, immunizations and counseling services designed to detect and treat medical conditions to prevent avoidable premature injury, illness and death.

All preventive services received from an in-network provider are covered at 100%, are not deducted from your HSA and do not apply to your deductible. If you see an out-of-network provider, then your deductible or out-of-network coinsurance responsibility will apply.

The following is a list of covered preventive care services:

Well Baby and Well Child Preventive Care

Office Visits through age 18; including preventive vision exams.

Screening Tests for vision, hearing, and lead exposure. Also includes pelvic exam, Pap test and contraceptive management for females who are age 18, or have been sexually active.

Immunizations:

Hepatitis A
Hepatitis B
Diphtheria, Tetanus, Pertussis (DtaP)
Varicella (chicken pox)
Influenza – flu shot
Pneumococcal Conjugate (pneumonia)
Human Papilloma Virus (HPV) – cervical cancer
H. Influenza type b
Polio
Measles, Mumps, Rubella (MMR)

Adult Preventive Care

Office Visits after age 18; including preventive vision exams.

Screening Tests for vision, hearing, coronary artery disease, colorectal cancer, prostate cancer, diabetes, and osteoporosis. Also includes mammograms, as well as pelvic exams, Pap test and contraceptive management.

Immunizations:

Hepatitis A
Hepatitis B
Diphtheria, Tetanus, Pertussis (DtaP)
Varicella (chicken pox)
Influenza – flu shot
Pneumococcal Conjugate (pneumonia)
Human Papilloma Virus (HPV) – cervical cancer

If you have questions, please call toll-free 1-888-224-4896.

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CGHSA4839 w inc Rx copays NGF (EN. 07/16)



Lumenos HSA Plan Summary

Summary of Covered Services (Continued)

Medical Care

Anthem's Lumenos HSA plan covers a wide range of medical services to treat an illness or injury. You can use your available HSA funds to pay for these covered services. Once you spend up to your deductible amount for covered services, you will have Traditional Health Coverage available to help pay for additional covered services.

The following is a summary of covered medical services under Anthem's Lumenos HSA plan.

- Physician Office Visits
- Inpatient Hospital Services
- Outpatient Surgery Services
- Diagnostic X-rays/Lab Tests - *see AIM FAQ
- Emergency Hospital Services
- Inpatient and Outpatient Mental Health and Substance Abuse Services
- Maternity Care
- Chiropractic Care
- Prescription Drugs
- Home health care and hospice care
- Physical, Speech and Occupational Therapy Services *see AIM FAQ
- Durable Medical Equipment
- Morbid Obesity

Some covered services may have limitations or other restrictions. * With Anthem's Lumenos HSA plan, the following services are limited:

- Skilled nursing facility services limited to 220 days per calendar year.
- Home health care services are limited to 200 visits per calendar year.
- Inpatient rehabilitative services are subject to an unlimited maximum per member per calendar year.
- Physical, speech and occupational therapy and chiropractic services limited to a combined total of 50 visits per member per calendar year.
- Inpatient hospitalizations require authorizations.
- Your Lumenos HSA plan includes an unlimited lifetime maximum for in- and out-of-network services.

* For a complete list of exclusions and limitations, please reference your Certificate of Coverage.

Prescription Drugs - copay after deductible (when purchased from a network pharmacy*)

Retail (30 day supply)

\$10 Tier 1 copayment
\$40 Tier 2 copayment
\$50 Tier 3 copayment

Mail Order (90 day supply)

\$10 Tier 1 copayment
\$80 Tier 2 copayment
\$100 Tier 3 copayment

*See attached RX factsheet

*See attached AIM requirements

This summary of benefits has been updated to comply with federal and state requirements, including applicable provisions of the recently enacted federal health care reform laws. As we receive additional guidance and clarification on the new health care reform laws from the U.S. Department of Health and Human Services, Department of Labor and Internal Revenue Service, we will update this summary of benefits. Please call 1-800-224-4896 for more information.

Ansonia



Lumenos HSA Plan Summary

This summary is a brief outline of the benefits and coverage provided under the Lumenos plan. It is not intended to be a complete list of the benefits of the plan. This summary is for a full year in the Lumenos plan. If you join the plan mid-year or have a qualified change of status, your actual benefit levels may vary.

Additional limitations and exclusions may apply.



In Connecticut, Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans, Inc. In New Hampshire, Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans of New Hampshire, Inc. In Maine, Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans of Maine, Inc., independent licensees of the Blue Cross and Blue Shield Association. ® Registered marks Blue Cross and Blue Shield Association. ® LUMENOS is a registered trademark.

If you have questions, please call toll-free 1-800-224-4896.

Ansonia

Appendix A-Dental Insurance Summary

Your Summary of Benefits Ansonia Board of Education Anthem Dental Complete



WELCOME TO YOUR DENTAL PLAN!

This benefit summary outlines how your dental plan works and provides you with a quick reference of your dental plan benefits. For complete coverage details, please refer to your certificate of coverage.

Dental coverage you can count on

Your Anthem dental plan lets you visit any licensed dentist or specialist you want - with costs that are normally lower when you choose one within our large network.

Savings beyond your dental plan benefits - you get more for your money.

You pay our negotiated rate for covered services from in-network dentists even if you exceed your annual benefit maximum.

YOUR DENTAL PLAN AT A GLANCE		In-Network	Out-of-Network	
Annual Benefit Maximum	Calendar Year			
• Per insured person		\$1,500	\$1,500	
D&P applies to Annual Maximum		Yes	Yes	
Annual Maximum Carryover		No	No	
Orthodontic Lifetime Benefit Maximum				
• Per eligible insured person		\$2,000	\$2,000	
Annual Deductible (The Deductible does not apply to Orthodontic Services)	Calendar Year			
• Per insured person		\$0	\$0	
• Family maximum		3X Individual	3X Individual	
Deductible Waived for Diagnostic/Preventive Services		Yes	Yes	
Out-of-Network Reimbursement Options:		Prime (MAC)		
Dental Services		In-Network Anthem Pays:	Out-of-Network Anthem Pays:	Waiting Period
Diagnostic and Preventive Services		100% Coinsurance	100% Coinsurance	No Waiting Period
• Periodic oral exam				
• Teeth cleaning (prophylaxis)				
• Bitewing X-rays 2X per 12 months				
• Intraoral X-rays				
Basic Services		80% Coinsurance	80% Coinsurance	No Waiting Period
• Amalgam (silver-colored) Filling				
• Front composite (tooth-colored) Filling				
• Back composite Filling, Alternated to Amalgam Benefit				
• Simple Extractions				
Endodontics		80% Coinsurance	80% Coinsurance	No Waiting Period
• Root Canal				
Periodontics		80% Coinsurance	80% Coinsurance	No Waiting Period
• Scaling and root planing				
Oral Surgery		80% Coinsurance	80% Coinsurance	No Waiting Period
• Surgical Extractions				
Major Services		50% Coinsurance	50% Coinsurance	No Waiting Period
• Crowns				
Prosthodontics		50% Coinsurance	50% Coinsurance	No Waiting Period
• Dentures				
• Bridges				
• Dental implants	Not Covered			
Prosthetic Repairs/Adjustments		50% Coinsurance	50% Coinsurance	No Waiting Period
Orthodontic Services				
• Dependent Children Only*		50% Coinsurance	50% Coinsurance	No Waiting Periods

This is not a contract, it is a partial listing of benefits and services. All covered services are subject to the conditions, limitations, exclusions, terms and provisions of your certificate of coverage. In the event of a discrepancy between the information in this summary and the certificate of coverage, the certificate will prevail.

*Child orthodontic coverage begins at age eight and runs through age 18. This means that the child must have been banded between the ages of eight and 19 in order to receive coverage. If children are dependents until age 19, they can continue to receive coverage, but they must have been banded before age 19.

CT POLG-FI-Custom

Appendix A-Dental Insurance Summary



Emergency dental treatment for the international traveler

As an Anthem dental member, you and your eligible, covered dependents automatically have access to the International Emergency Dental Program.** With this program, you may receive emergency dental care from our listing of credentialed dentists while traveling or working nearly anywhere in the world.

** The International Emergency Dental Program is managed by DeCare Dental, which is an independent company offering dental-management services to Anthem Blue Cross Life and Health Insurance Company.

Finding a dentist is easy.

To select a dentist by name or location:

- Go to anthem.com/mydentalvision or the website listed on the back of your ID card.
- Call the toll-free customer service number listed on the back of your ID card.

TO CONTACT US:

Call	Write
Refer to the toll-free number indicated on the back of your plan ID card to speak with a U.S.-based customer service representative during normal business hours. Calling after hours? We may still be able to assist you with our interactive voice-response system.	Refer to the back of your plan ID card for the address.

Limitations & Exclusions

Limitations - Below is a partial listing of dental plan limitations when these services are covered under your plan. Please see your certificate of coverage for a full list.

Diagnostic and Preventive Services

Oral evaluations (exams) limited to two per Calendar Year
 Teeth cleaning (prophylaxis) limited to two per Calendar Year
 Intraoral X-rays, single film, limited to four (4) per 12-month period
 Complete series X-rays (panoramic or full-mouth) Coverage Every 3 Years
 Topical fluoride application limited to once every 12 months for members through age 18

Sealants limited to first and second molars once every 24 months per tooth for members through age 15; sealants may be covered under Diagnostic and Preventive or Basic Services
Basic and/or Major Services***
 Fillings limited to once per surface per tooth in any 24 months
 Space Maintainers limited to extracted primary posterior teeth once per lifetime per tooth for members through age 15; Space Maintainers may be covered under Diagnostic and Preventive or Basic Services

Crowns limited to once per tooth in a seven-year period
 Fixed or removable prosthodontics - dentures, partials, bridges

Covered once in any seven-year period; benefits are provided for the replacement of an existing bridge, denture or partial for members age 16 or older if the appliance is seven years old or older and cannot be made serviceable.

Root canal therapy limited to once per lifetime per tooth; coverage is for permanent teeth only

Periodontal surgery limited to one complex service per single tooth or quadrant in any 36 months, and only if the pocket depth of the tooth is five (5) millimeters or greater

Periodontal scaling and root planing limited to once per quadrant in 36 months when the tooth pocket has a depth of four millimeters or greater

Brush biopsy Not Covered

***Waiting periods for endodontic, periodontic and oral surgery services may differ from other Basic Services or Major Services under the same dental plan.

There is a waiting period of up to 24 months for replacement of congenitally missing teeth or teeth extracted prior to coverage under this plan.

ADDITIONAL LIMITATION FOR ORTHODONTIC SERVICES

Orthodontics limited to one course of treatment per member per lifetime

Exclusions - Below is a partial listing of noncovered services under your dental plan. Please see your certificate of coverage for a full list.

Services provided before or after the term of this coverage

Services received before your effective date or after your coverage ends, unless otherwise specified in the dental plan certificate

Orthodontics (unless included as part of your dental plan benefits) Orthodontic braces, appliances and all related services

Cosmetic dentistry Services provided by dentists solely for the purpose of improving the appearance of the teeth when tooth structure and function are satisfactory and no pathologic conditions (cavities) exist

Drugs and medications Intravenous conscious sedation, IV sedation and general anesthesia when performed with nonsurgical dental care

Anesthesia: anesthetic agents, endorphins, nitrous oxide, therapeutic drug injections, medicines or drugs for nonsurgical or surgical dental care except that intravenous conscious sedation is eligible as a separate benefit when performed in conjunction with complex surgical services

Extraction - Surgical removal of third molars (wisdom teeth) that do not exhibit symptoms or impact the oral health of the member

The network dental providers mentioned in this communication are independently contracted providers who exercise independent professional judgment. They are not agents or employees of Anthem Blue Cross Life and Health Insurance Company.

Appendix A-Dental Insurance Summary



Choice of dentists

While your dental plan lets you choose any dentist, you may end up paying more for a service if you visit an out-of-network dentist.

Here's why:

In-network dentists have agreed to payment rates for various services and cannot charge you more. On the other hand, out-of-network dentists don't have a contract with us and are able to bill you for the difference between the total amount we allow to be paid for a service – called the "maximum allowed amount" – and the amount they usually charge for a service. When they bill you for this difference, it's called "balance billing."

How Anthem dental decides on maximum allowed amounts

For services from an out-of-network dentist, the maximum allowed amount is determined in one of the following ways:

- Out-of-network dental fee schedule/rate developed by Anthem, which may be updated based on such things as reimbursement amounts accepted by dentists contracted with our dental plans, or other industry cost and usage data
- Information provided by a third-party vendor that shows comparable costs for dental services
- In-network dentist fee schedule

Here's an example of higher costs for out-of-network dental services

This is an example only. Your experience may be different, depending on your insurance plan, the services you receive and the dentist who provides the services.

Ted gets a crown from an out-of-network dentist, who charges \$1,200 for the service and bills Anthem for that amount.

Anthem's maximum allowed amount for this dental service is \$800. That means there will be a \$400 difference, which the dentist can "balance bill" Ted.

Since Ted will also need to pay \$400 coinsurance, the total he'll pay the out of network dentist is \$800.

Here's the math:

- Dentist's charge: \$1,200
- Anthem's maximum allowed amount: \$800
- Anthem pays 50%: \$400
- Ted pays 50% (coinsurance): \$400
- Balance Ted owes the provider: $\$1,200 - \$800 = \$400$
- Ted's total cost: $\$400 \text{ coinsurance} + \$400 \text{ provider balance} = \800

In the example, if Ted had gone to an in-network dentist, his cost would be only \$400 for the coinsurance because he would not have been "balance billed" the \$400 difference.