New Jersey Public Employment Relations Commission NON-POLICE AND FIRE FOUR NEGOTIATIONS AGREEMENT SUMMARY FORM

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM Line# **SECTION I: Parties and Term of Contracts** Public Employer: Ocean City Board of Education County: Cape May 1 Number of Employees in Unit: 209 Ocean City Education Association 2 **Employee Organization:** 07/01/17 - 06/30/20 7/1/21 - 6/30/24 **New Contract Term** 3 **Base Year Contract Term:** SECTION II: Type of Contract Settlement (please check only one) Contract settled without neutral assistance Contract settled with assistance of mediator 5 Contract settled with assistance of fact-finder 7 Contract settled with assistance of super-conciliator 8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations? **SECTION III: Salary Base** The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases. 18,730,496 9 Salary Costs in Base Year 355,500 10 Longevity Costs in Base Year 19,085,996 11 **Total Salary Base** SECTION IV: Salary Increases for Each Year of New Agreement* Year 1 Year 2 Year 3 Year 4 Year 5 12 Effective Date 7/1/21 7/1/22 7/1/23 (month/day/year) 13 Cost of Salary 501,541 519.990 536,323 Increments (\$) 14 Salary Increase Above Increments (\$) 15 Longevity Increase (\$) 28,500 33,000 29,500 Total \$ Increase 534,541 549,490 564,823 (sum of lines 13-15) New Salary Base (\$) 19,620,537 20,170,027 20,734,850

2.80%

2.80%

18 Percentage increase

over prior year

2.80%

^{*}If contract duration is longer than five years, please add an additional page.

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	NONE - N/A						
20	Totals(\$):						

^{*}If contract duration is longer than five years, please add an additional page.

	SECTION VI: Medical Costs		
		Base Year	Year 1
21	Health Plan Cost	\$ 3,348,960	\$ 2,930,820
22	Prescription Plan Cost	ş 790,332	\$ 689,244
23	Dental Plan Cost	\$ 138,060	\$ 134,225
24	Vision Plan Cost	\$ 0	ş <mark>0</mark>
25	Total Cost of Insurance	\$ 4,227,352	\$3,754,289
26	Employee Insurance Contributions	\$ 1,160,294	\$ <mark>815,034</mark>
27	Employee Contributions as % of Total Insurance Cost	27.45%	₆ 21.71 _%

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Emplo	yer: Ocean City	/ Board of Education	Employee Organization:	Ocean City Education Association	Page 3			
	n VI: Medical Co							
28	Identify any insurance changes that were included in this CNA.							
	SECTION VII: C	Certification and Signature						
29	The undersigne	ed certifies that the forego	ing figures are true:					
	Print Name:	Timothy E Kelley		<u></u>				
	Position/Title:	School Business Adr	mnistrator	<u></u>				
	Signature:	Jundy EK	aly	[
	Date:	September 27, 2024						
	Sand this come	ploted and signed form ale	ang with an electronic co	any of the contract and the signed co	rtification			
		acts@perc.state.nj.us	ong with an electronic co	opy of the contract and the signed ce	rtification			
	NI Public Emple	nyment Relations Commiss	sion					

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016