

Vernon Police Contract

Agreement Between the

Town of Vernon

And

The Vernon Police Association

For the Period of

July 1, 2022

Through

June 30, 2026

VERNON POLICE CONTRACT

ALPHABETICAL INDEX

SUBJECT	ARTICLE	PAGE
CLOTHING ALLOWANCE	XIV	22
COURT DUTY	XVII	29
DISCIPLINE AND DISCHARGE	XV	23
DUES CHECKOFF	III	2
DURATION	XXI	31
EDUCATIONAL INCENTIVE PROGRAM	XVIII	30
EXTRA WORK	XII	20
GENERAL PROVISIONS	XVI	24
GRIEVANCE PROCEDURE	VI	5
VACATION AND HOLIDAYS	IX	11
INSURANCE AND PENSIONS	X	13
LEAVES AND ABSENCES	VIII	11
MANAGEMENT RIGHTS	II	2
MERIT RAISES	XXII	32
NO STRIKE	XX	31
OVERTIME	XI	18
INSURANCE AND PENSION	X	13
PROMOTION	XIII	20
RATES OF PAY (APPENDIX G)	XIX	30
RECOGNITION	I	2
SENIORITY	IV	3
SICK LEAVE PROGRAM	VII	7
SIGNATURES		32
UNION SECURITY	V	4

APPENDIX A – HEALTH SAVINGS ACCOUNT (HSA)

APPENDIX B – ANTHEM BLUE CROSS BLUE SHIELD FULL SERVICE DENTAL CARE

APPENDIX C – PENSION CALCULATION

APPENDIX D – EXPLANATORY MATERIAL

APPENDIX E – ANTHEM BC/BS BLUE VISION RIDER

APPENDIX F – PHYSICIAN'S CERTIFICATION

APPENDIX G – RATES OF PAY (WAGES)

TABLE OF CONTENTS

ARTICLE	DESCRIPTION	PAGE
I	RECOGNITION	2
II	MANAGEMENT RIGHTS	2
III	DUES CHECKOFF	2
IV	SENIORITY	3
V	UNION SECURITY	4
VI	GRIEVANCE PROCEDURE	5
VII	SICK LEAVE PROGRAM	7
VIII	LEAVES AND ABSENCES	11
IX	VACATIONS AND HOLIDAYS	11
X	INSURANCE AND PENSION	13
XI	OVERTIME	18
XII	EXTRA WORK	20
XIII	PROMOTIONS	20
XIV	CLOTHING ALLOWANCES	22
XV	DISCIPLINE AND DISCHARGE	23
XVI	GENERAL PROVISIONS	24
XVII	COURT DUTY	29
XVIII	EDUCATIONAL INCENTIVE PROGRAM	30
XIX	RATES OF PAY (Appendix G)	30
XX	NO STRIKE	31
XXI	DURATION	31
XXII	MERIT RAISES	32

APPENDIX A – HEALTH SAVINGS ACCOUNT (HSA)

APPENDIX B – ANTHEM BLUE CROSS BLUE SHIELD FULL SERVICE DENTAL CARE

APPENDIX C – PENSION CALCULATION

APPENDIX D – EXPLANATORY MATERIAL

APPENDIX E – ANTHEM BLUE BC/BS BLUE VISION RIDER

APPENDIX F – PHYSICIAN'S CERTIFICATION

APPENDIX G – RATES OF PAY (WAGES)

AGREEMENT

1. This agreement entered into effective the first day of July 2022 by and between THE TOWN OF VERNON (hereinafter referred to as the "Town") and VERNON POLICE ASSOCIATION (hereinafter referred to as the "Union"). This agreement is for a period of four (4) years.

ARTICLE I – RECOGNITION

2. Section 1 - The Town recognizes the Union as the sole and exclusive bargaining agent for all full-time, permanent, investigatory and uniformed members of the Vernon Police Department with authority to exercise police powers, up to and including the rank of lieutenant.

ARTICLE II - MANAGEMENT RIGHTS

3. Section 1 - Unless expressly and specifically limited, modified, abridged or relinquished by a specific provision of this Agreement, and whether exercised or not, the rights, powers and authority heretofore held by the Town, pursuant to any charter, general or special statute, ordinance, regulation or other lawful provision, over the complete operations, practices, procedures and regulations with respect to employees of the Police Department, shall remain solely and exclusively in the Town including, but not limited to the following: to determine the standards of services to be offered by Police Department employees; determine the standards of selection for employment in the Police Department; direct its employees; take disciplinary action; relieve its employees from duty because of lack of work or for other legitimate reasons; issue rules and regulations affecting working conditions not specifically covered by this Agreement; enforce them and from time to time change them, provided that the reasonableness of such newly issued or changed rules or regulations shall be subject to the grievance procedure; maintain the efficiency of governmental operations; determine duty assignments and the number of individuals needed for specific assignments and shifts; determine work schedules and hours of work; determine the methods, means and personnel by which the Police Department's operations are to be conducted; determine the content of job classifications; prepare and utilize forms necessary to operate the Police Department; exercise complete control and discretion over its organization and technology of performing its work; and fulfill all of its responsibilities to the citizens of Vernon.

ARTICLE III — DUES CHECKOFF

4. Section 1 - The Town agrees to deduct dues with each paycheck as specified by the Secretary of the Union from the wages of all dues-paying members of the Vernon Police Association covered by this Agreement. A signed card authorizing the deduction will be provided to the Finance Office, by the Union, on behalf of each employee for whom the deductions are to be made,

however, any individual employee may withdraw this assent by written communication to the Finance Office. The Town shall notify the Union of the assent withdrawal within 72 hours of receiving such notice. These dues shall be remitted not later than the last day of the month in which the deductions have been made.

If the Union President or Treasurer is advised that any bargaining unit member has elected to no longer pay dues, the Union shall notify the Town, in writing, of said change within 72 hours of notification. Any and all liability, whether financial or otherwise, stemming from, resulting from, or alleged result of the Union's failure to provide such notification will be assigned, in its entirety and without the right of appeal, to the Union.

The Union shall, to the fullest extent of the law, indemnify and hold the Town harmless from any and all damages, costs, and expenses arising from the making of authorized deductions and or from compliance by the Town with the Union security provisions of this section. Damages include, without limitation, consequential and incidental damages.

5. Section 2 - In the event an employee receives no pay on the payday of which Union dues are deducted, no deduction shall be made for that week.

6. Section 3 - When a member's dues are not deducted by reason of the conditions described in Section 2 of this Article or by reason of an extended absence from the Police Department, during which time he/she is not paid, and such member returns to active duty, it shall be the responsibility of the member to reactivate the deduction of his/her dues.

ARTICLE IV — SENIORITY

7. Section 1 - Department seniority as used in this Article is defined as the total length of continuous service with the Vernon Police Department.

8. Section 2 - Rank seniority as used in this Article is defined as the total length of service of an employee as a permanent appointee to a rank. No employee shall acquire rank seniority in any rank for any period that he/she serves in such rank as a temporary or provisional appointee. During such period of temporary service he/she shall continue to accrue rank seniority in the last rank he/she served in as a permanent appointee.

9. Section 3 - Consecutive years shall not be broken by vacation time, sick time or any approved leave of absence or suspension.

10. Section 4 - Seniority shall apply within each division provided any divisions are formed during the term of this contract. The employee with the least seniority shall be considered at the bottom of the seniority list. In the event of a reduction

in force, the employee with the least seniority in the entire Department shall be laid off first. Provided, however, that whenever any regular member of the Department may be laid off, such member shall be afforded the opportunity of returning to the former position or rank before any new members are appointed to the Department for a period equal to the Officer's seniority or two (2) years, whichever is less. Recall rights shall be available for a period of fourteen (14) days after notification of recall is made by certified mail, return receipt requested, to the last known address of the employee.

11. Section 5 - In the event of any personnel action by the Chief of Police, where seniority should have been applied and appears not to have been, the Officer involved shall have the right to seek redress through the grievance procedure outlined in Article V of this contract.

12. Section 6 - No employee shall attain seniority rights under this Agreement until he/she has been continuously on the payroll of the Town as a member of the Police Department for a probationary period which shall be of sufficient length to enable the Town to fully determine the employee's ability to perform departmental duties. The normal length of the probationary period shall be one (1) year from the date of successful completion of instruction required by the Connecticut Police Officer Standards and Training Council. The Town will make every effort to secure the employee's training at the earliest possible date. New employees shall be covered by all Articles and Sections of this Agreement except that they may be terminated at the discretion of the Town for any reason whatsoever. During their probationary period, neither such employees nor the Union on their behalf shall have recourse to the grievance procedure in the case of discharge. At the conclusion of an employee's probationary period, that employee's seniority shall date back to his/her original date of employment.

13. Section 7 - Seniority shall prevail in the selection of work shifts, which shall be selected quarterly on the first (1st) day of each January, April, July and October.

ARTICLE V - UNION SECURITY

14. Section 1 - All present employees and all employees hired after the date on which this Agreement is signed may become and remain members of the Union.

15. Section 2 - The Union will be afforded time to meet with a new employee during orientation. So as not to delay the hiring process, if the Union Representative is unavailable to attend new employee orientation, the Union Representative may meet with the new employee within sixty (60) days of hire to conduct its own orientation.

ARTICLE VI — GRIEVANCE PROCEDURE

16. Section 1 - Purpose. The purpose of the grievance procedure shall be to settle employee grievances on as low an administrative level as possible to insure efficiency and morale.

17. Section 2 - Definition. A grievance for purposes of this procedure shall be considered to be an employee or police union complaint concerned with:

- A. Discharge or other disciplinary action.
- B. Interpretation and application of rules and regulations and policies of the Police Department.
- C. Matters relating to the interpretation and application of the Articles and Sections in this Agreement.

18. Section 3 - Procedure.

- A. Any employee may use this grievance procedure with or without union assistance. Should an employee process a grievance through one or more of the steps provided herein prior to seeking Union aid, the Union may, at its discretion, process the grievance anew from the first step or from the next succeeding step following that which the employee has utilized.
- B. No grievance settlement made as a result of an individually processed grievance shall contravene the provisions of this Agreement without a Memorandum of Understanding drawn between the parties.

19. INFORMAL COMPLAINT - Any employee who has an informal complaint shall first bring the informal complaint to the Officer's immediate supervisor before processing a grievance at step one. The supervisor shall submit the decision regarding the informal complaint within three (3) workdays of the initial presentation. Any informal complaint by the Union shall be directed to the Captain.

20. STEP ONE - Any employee who has a grievance shall reduce the grievance to writing and submit it within fifteen (15) to the Captain of Police, who shall use best efforts to settle the dispute. The Captain's decision shall be submitted in writing to the aggrieved employee and the union representative, if the employee is represented, within ten (10) calendar days of receipt of the grievance. If the Captain position is not filled, the grievance shall be filed in writing directly to the Chief of Police within the fifteen (15) day timeframe set forth in this section.

21. STEP TWO - If the complainant or the representative, if represented, are not satisfied with the decision rendered, either the employee or representative shall submit the grievance in writing to the Chief of Police or the designee within ten (10) calendar days. The Chief or the designee shall meet with the grievant and, if represented, with up to two (2) representatives, only one (1) of whom shall be paid, within five (5) calendar days of receipt of the grievance. The Chief or the designee shall, within ten (10) calendar days of such meeting, submit the decision to the complainant and the representative, if represented.

22. STEP THREE - If the grievant and the representative, if represented, are not satisfied with the decision rendered, either the grievant or representative shall submit the grievance in writing to the Town Administrator or the designee within ten (10) calendar days. The Town Administrator or the designee shall meet with the grievant and, if represented, with up to two (2) representatives, only one (1) of whom shall be paid, within ten (10) calendar days of receipt of the grievance. The Town Administrator or the designee shall, within ten (10) calendar days of such meeting, submit the decision to the complainant and the representative, if represented.

23. Section 4 - Grievance Arbitration. If the grievance shall not have been disposed of to the satisfaction of the aggrieved and if it concerns the interpretation or application of any of the provisions of this Agreement, either party may submit it to State Board of Mediation and Arbitration within twenty-one (21) calendar days with notice to the Town, and the decision rendered by the arbitrator(s) shall be final and binding upon the parties. The arbitrator(s) shall be bound by and shall apply only the terms of this Agreement and shall not add to, delete from or modify this Agreement in any way. The arbitrator's decision shall be in writing and in accordance with the rules and regulations of the State Board of Mediation and Arbitration. The arbitrator(s) shall arbitrate only one grievance at a time unless grievances arise directly out of the same incident. By mutual agreement the parties can submit a representative grievance to arbitration.

24. Section 5 - Police Union as a Complainant. The Police Union shall be entitled to submit original grievances in the name of the Police Union in the same manner as is provided herein for employees. The Town may also use the grievance and arbitration procedure.

25. Section 6 - Time Extensions. Time extensions beyond those stipulated in this Grievance procedure may be arrived at by mutual agreement of the parties concerned. The Union has the option of filing to the next step of the grievance procedure if no response is received from the Town within the time limits established at the applicable step of the grievance procedure by filing at the next step within ten (10) days of the Town's decision due date.

26. Section 7 - Representation. Employees and the Police Union shall have the right and choice of representation whenever representation is desired by either individual employees or the Police Union. The Town shall have the right and choice of representation whenever desired at its own expense. However, the said right of representation – for either party – may not create undue delay in the resolution of the grievance at issue.

27. Section 8 - A grievance which arises as a result of disciplinary action taken by the Town may be filed in accordance with this Agreement at the step next above where such action was taken.

28. Section 9 - When a person, during the grievance procedure, calls upon, subpoenas or otherwise summons another employee to speak, testify or otherwise be present at any step of the grievance procedure, said cost and/or wages of said employee will not be paid by the Town if said employee is off duty. Wages will be paid for:

1. The aggrieved party at all times while on duty;
2. One additional party while on duty, as required to appear.

ARTICLE VII — SICK LEAVE PROGRAM

29. Section 1 - Sick leave shall be considered to be absence from duty with pay for the following reasons:

- A. Illness or injury, except where directly traceable to employment by an employee other than the Town of Vernon.
- B. When the employee is required to undergo medical, optical or dental treatment and only when this cannot be accomplished on off duty hours.
- C. When the serious illness of a member of the employee's immediate family (including civil union partner) requires his/her personal attendance a medical certificate may be required after two (2) days.
- D. In the event that an employee requests sick leave after having commenced his/her shift, the employee will be paid for all hours worked and sick leave will be charged or deducted in one (1) hour increments for the remainder of the shift.

30. Section 2

- A. Employees who are absent from duty due to illness or accident for which they are entitled to compensation under the Workers' Compensation Act shall not be charged sick time.
- B. An employee who is entitled to compensation under the Workers' Compensation Act shall receive compensation from the Town in an amount which, when added to Workers' Compensation payments received, shall provide him/her with compensation equal to his/her regular pay for a period not to exceed one (1) year.
- C. Said amounts shall be payable by the Town at the time Workers' Compensation benefits are paid. The Town may, however, in its discretion, pay an employee his/her full compensation from the date an injury or illness commenced, provided that the employee involved shall make the Town whole by endorsing over to the Town any Workers' Compensation checks he/she receives for which he/she has already received money, provided further that if it is eventually determined that the employee is not entitled to Workers' Compensation benefits the employee shall make the Town whole for all monies received.
- D. Nothing herein shall be construed so as to prohibit an employee from petitioning the Town Council for an extension of the one (1) year limit set forth herein.
- E. During an emergency or pandemic the parties agree to discuss and negotiate the impacts of such in a reasonable and timely manner, appropriate to the circumstances.

31. Section 3 - Leave shall be granted when in accordance with this Article and leave and reasonable accommodations shall also be granted in accordance with section 46a-60(a)(7) of the Connecticut General Statutes for disabilities due to pregnancies. Should the above cited law become invalid or unconstitutional for any reason, the parties agree to renegotiate the Agreement.

32. Section 4 - Sick leave allowance shall be earned by each employee at the rate of one and one-quarter (1 1/4) days for each calendar month of service. Employees hired after July 1, 2012 shall earn sick leave at the rate of one (1) day for each calendar month of service. Each employee, as they are hired, shall receive a reserve of six (6) days of sick leave credit, which shall be given back to the Town once an employee has accumulated eighteen (18) days of sick leave.

33. A. Any employee who has three (3) months of continuous service who has not used more than seven (7) hours of sick time shall receive one (1) earned day. The total days that an employee may accumulate shall be four (4) in one (1) year and the employee must take this time within one year from when it is earned or it will be given back to the Town. The employee may take this time at their request with the approval of the Chief of Police.
34. B. Any employee who has completed four (4) years of service and terminates employment with the Vernon Police Department in good standing shall be paid fifty percent (50%) of all sick time accumulated to the employee's maximum sick time as set forth in Section 6 of this Article.
35. C. An employee who has completed twenty (20) years of service with the Vernon Police Department in good standing and terminates his/her employment or elects early retirement will be paid seventy five percent (75%) of all sick time accumulated to the employee's maximum sick time as set forth in Section 6 of this Article.
36. D. Any employee hired after July 1, 2012 who terminates employment from the Vernon Police Department in good standing shall be paid up to thirty (30) days of accumulated sick time.
37. E. Any employee hired after July 1, 2017 may accumulate up to ninety (90) sick days but shall not be paid for any accumulated sick time upon termination or retirement.
38. Section 5 - Sick leave earned in any month of service shall be available at any time during any subsequent month.
39. Section 6 - For all employees hired prior to July 1, 2003, all unused sick leave earned during continuous employment may be accumulated to a maximum of one hundred and eighty (180) days, and the maximum shall remain one hundred and eighty (180) days for the Officer's career with the Vernon Police Department and the Town of Vernon. For all Officers hired after January 1, 2004, all unused sick leave earned during continuous employment may be accumulated to a maximum of one hundred fifty (150) days, and the maximum shall remain one hundred fifty (150) days. For all Officers hired after July 1, 2012, all unused sick leave earned during continuous employment may be accumulated to a maximum of ninety (90) days, and the maximum shall remain ninety (90) days.
40. Section 7 - Sick leave shall continue to accumulate during leaves of absence with pay and during the time an employee is authorized sick leave or vacation time.

- 41. Section 8** - No credit for sick leave shall be granted for time worked by an employee in excess of his/her normal work week.
- 42. Section 9** - No sick leave shall accrue during a leave of absence without pay.
- 43. Section 10** - A doctor's certificate may be required for submission to the Department head for a period of absence consisting of more than three (3) consecutive working days. Nothing herein shall preclude the Chief of Police and/or his/her designee from requesting a doctor's certificate when the Chief and/or his/her designee has a good faith reason to suspect an abuse of sick leave. Abuse of sick leave will be addressed through the progressive disciplinary procedure in accordance with the provisions of this Agreement.
- 44. Section 11** - An employee, upon retirement, shall receive, on the basis of his/her current wages, full compensation for any of his/her unused accumulated sick leave as severance pay. If an employee's accumulation is depleted by an injury or illness during the final three (3) years of employment for which a physician's certificate is provided, the Town shall credit to the employee, upon retirement, the number of days of sick leave previously earned and forfeited to the Town to the employee's maximum sick time accumulation as set forth in Section 6 of this Article. In the event of the death of any employee, his/her unused accumulated sick pay shall be paid to the beneficiary designated by the employee in writing and retained in his/her service folder. In the event said employee has failed to designate a beneficiary in writing prior to his/her death, the Town shall pay said pay to the spouse of the employee, if any, and if said spouse is not alive, to the children of said deceased employee. In the event no designation in writing is made and the employee has no spouse or children, the pay shall be given to the estate of the deceased employee. In the event of an employee's death, any spouse or minor children, or his/her estate, shall be entitled to full pay for any vacation time that has been earned and unused in that fiscal year.
- 45. Section 12** - There shall be maintained by the Department a record for each employee of all sick leave taken, accumulated and forfeited. At the end of each fiscal year each employee will receive from the Department a copy of his/her accumulated sick leave.
- 46. Section 13** - In exceptional cases where sick leave has been used up, the Town Council may honor requests for additional sick leave. Such requests shall be in writing from the employee or his/her designated representative to the Town Administrator. The Town Administrator will forward the request to the Town Council.

ARTICLE VIII - LEAVES AND ABSENCES

47. Section 1 – Military Leave shall be granted, not to exceed fourteen (14) days, to permanent employees when required to serve on active reserve or National Guard duty. Any notice of active duty shall be conveyed to the Chief of Police within 72 hours of receipt of such notice. Copies of military orders must be supplied to the Chief of Police prior to the employee reporting for active duty. During this period, the employee shall be paid the difference, if any, between his/her regular police pay and military pay. Employees in the National Guard and Reserves must provide their military pay rate to the Records Supervisor by January 15th of each year. Employees in the National Guard and Reserves shall provide their annual drill schedule and annual training schedule to the scheduling Supervisor and Records Supervisor as soon as it is received. Time on military leave shall be included in computing seniority earned in the police service. Unpaid military leave shall be granted, consistent with the Uniformed Services Employment and Reemployment Rights Act ("USERRA"), to permanent employees when required to serve on active reserve or National Guard duty.

48. Section 2 - In the event of death in the immediate family, leave not to exceed three (3) days shall be granted with full pay. The immediate family shall include mother, father, sister, brother, husband, wife, civil union partner, son, daughter, grandchild, mother-in-law, father-in-law or any relative who is an actual member of the household. In case such relative's death and burial take place at a distant location and the employee does not attend, one (1) day off will be allowed.

49. Section 3 - In the event of a death of a grandparent, brother-in-law, sister-in-law, aunt, uncle, niece or nephew of the employee or spouse, or civil union partner, one (1) day will be allowed, provided the employee attends the funeral.

50. Section 4 - Jury Duty Leave - Any member of the Union who is required to perform jury duty shall be compensated in accordance With the Conn. Gen. Stat. §51-247.

51. Section 5 – Any employee who takes FMLA must exhaust all paid benefit time prior to taking unpaid leave.

ARTICLE IX — VACATIONS AND HOLIDAYS

52. Section 1 - The following days shall be observed as paid holidays. The holidays listed in Column A will be observed on the traditional day; the holidays listed in Column B will be observed in accordance with the schedule of the Town of Vernon.

COLUMN A

New Year's Day
Juneteenth
Easter Sunday
Independence Day
Labor Day
Thanksgiving Day
Christmas Day

COLUMN B

Martin Luther King Day (Monday)
Presidents' Day
Good Friday or Yom Kippur
Memorial Day (Monday)
Columbus Day (Monday)
Veterans' Day

53. Section 2 - Employees who may be off duty on paid sick leave or who may be on vacation shall be paid for any holidays that occur during such periods.

54. Section 3 - An employee working on a holiday shall receive the rate of time and one-half (1 and 1/2) for the hours so worked and shall, in addition, receive eight (8) hours holiday pay based upon his/her regular rate of pay. An employee working on Thanksgiving Day and/or Christmas Day shall receive the rate of two (2) times for the hours worked and shall, in addition, receive eight (8) hours holiday pay based upon his/her regular rate of pay.

55. Section 4 - An employee who has completed one (1) year of service shall be entitled to a vacation of ten (10) working days annually, five (5) of which may be taken upon completion of six (6) months of service.

56. Section 5 - An employee who has completed five (5) years of credited service shall be entitled to a vacation of fifteen (15) working days annually

57. Section 6 - The vacation period shall be between July 1st of one year through June 30th of the next. All vacations must be completed during this time and are not cumulative. The Town must afford opportunity for the employee to take his/her vacation within the fiscal year. Vacation time may be taken in one (1) hour blocks provided such shall not result in any Departmental overtime.

58. Section 7 - An employee, hired prior to July 1, 2012, who has completed six (6) years of service, shall receive one (1) additional vacation day, plus one (1) additional day of vacation for each additional year of service beyond six (6) years, to a maximum of twenty (20) working days. An employee, hired prior to July 1, 2012, who has completed fifteen (15) years of service shall received one (1) additional vacation day, plus one (1) additional day of vacation for each additional year of service beyond fifteen (15) years to a maximum of twenty-five (25) days per year. An employee hired after July 1, 2012 shall receive vacation days as referenced above limited to a maximum of twenty (20) working days after fifteen (15) years of service.

59. Section 8 - Choice of date by employees shall be granted wherever practical, but operating requirements of the Police Department shall prevail. When a choice of date has been granted, it will not be interfered with, except in

the case of emergency. Rank seniority shall govern in case of conflict between employees of similar rank. Employees who fail to submit a choice of vacation dates shall forfeit vacation choice by seniority for that year. An employee may be paid for up to five (5) days vacation if the Town is unable to provide the employee with the vacation period of his/her choice and one (1) alternate period of choice, provided such request is made within guidelines of established departmental procedure.

60. Section 9 – Newly hired employees who have been previously certified as police officers shall be entitled to ten days of vacation time after ninety (90) days of employment.

61. Section 10 – Any employee hired after July 1, 2012 who fails to complete his, or her, probationary period shall not be entitled to any accrued vacation days upon termination.

ARTICLE X — INSURANCE AND PENSION

Section 1

62. A. An employee may choose medical coverage through a Town sponsored Health Savings Account. ("HSA") Plan details are set forth in Appendix A attached hereto. The annual deductible shall be \$2,000 individual account / \$4,000 two person and family accounts. The deductible contribution to the HSA shall be as follows:

Town 50% / Employee 50%

63. B. Each year of the contract the Town will deposit half of the Town's contribution in the first pay cycle of July and deposit the remaining half of the Town's contribution in the first pay cycle of January. HSA funding for employees hired after July 1, 2017 shall be prorated in their first year of hire.

64. C. The Town shall provide Anthem Blue Cross Blue Shield Full Service Dental Care. Dental riders shall be available in accordance with Appendix B attached hereto.

65. D. Employees shall contribute to the premium cost of the HSA and Anthem Blue Cross Blue Shield Full Service Dental Care as set forth below:

July 1, 2022: 15%

July 1, 2023: 16%

July 1, 2024: 17%

July 1, 2025: 17%

- 66. E.** Any medical or dental premium contributions, and any deductible contributions, shall be made on a pre-tax basis. The Town shall pay any group administrative costs charged by the carrier in connection with integrated HSA account management. Any fees associated with an HSA bank deposit account will be the responsibility of each employee.
- 67. F.** An open enrollment period shall be provided annually for a two week period during May for the purpose of choosing health insurance coverage. During the open enrollment period, an employee may voluntarily elect to waive, in writing, the coverage set forth above, and in lieu thereof, shall receive an annual payment of one thousand dollars (\$1,000.00), paid in two (2) installments of five hundred dollars (\$500.00) on or about October 1st and April 1st.
- 68. G.** The Town shall contribute the additional deductible contribution upon notification that an employee is changing status from an individual account to a two person or family account. An employee shall reimburse the Town for any excess deductible contribution made during any fiscal year when the employee's status changes from two person or family account to an individual account.
- 69. H.** Additionally, the Town shall provide the following:
- a. Group term life insurance in the amount of forty thousand dollars (\$40,000.00) for employees only.
 - b. Accidental Death and Dismemberment insurance in the amount of Eighty Thousand Dollars (\$80,000) for employees only.
 - c. The Town agrees to provide an Employee Assistance Program to all employees.
 - d. Anthem BC/BS Blue View Vision rider coverage at no cost to a covered employee (Single, Employee Plus One or Family Coverage, whichever is applicable to the member).

70. Section 2 - The premium share set forth in Article X, Section 1.A. is not applicable to this section of the contract.

The Town agrees to provide the insurance coverage specified in Article X, Section 1. A. for employees who retire after July 1, 1988.

A. The following exceptions shall apply:

1. none of the insurance specified in Article X, Section 1 shall be provided for the dependents of employees;
2. retiring employees shall have the option to purchase additional coverage for dependents at their own expense;
3. once a retired employee reaches age 65, the Town will provide the Blue Cross 65/CMS 65 Supplemental Plan; and

B. Provision of these insurance coverage will begin in the month following the retiree's birth date according to the following schedule:

Retirement Age	Town-paid Percentage	Employee-paid Percentage
Early retirement	50%	50%
49	50%	50%
50	50%	50%
51	50%	50%
52	50%	50%
53	50%	50%
54	50%	50%
55	75%	25%
56	75%	25%
57	75%	25%
58	75%	25%
59	75%	25%
60	100%	0%
61	100%	0%
62	100%	0%
63	100%	0%
64	100%	0%
65	100%	0%

C. The Town agrees to provide fifty percent (50%) of the cost of the insurance coverages specified in Article X, Section 1. A. for employees who retire after July 1, 1992, subject to the following terms and conditions:

1. none of the insurances specified in Article X, Section 1 shall be paid by the Town for the dependents of employees or for employees who elect early retirement;
2. an employee who elects an early retirement date may purchase the insurances specified in Article X, Section 1 and retiring employees shall have the option to purchase coverage for dependents at their own expense;
3. The Town shall pay fifty percent (50%) of the cost of the insurance specified in Article X, Section 1 in the month following the employee's normal retirement date; and,
4. Once a retired employee reaches age 65, the employee may purchase a Medicare Supplemental plan at his/her own expense.
5. Employees hired after July 1, 2012 shall not be entitled to medical insurance coverage from the Town of Vernon upon retirement.

71. Section 3

- A. 1. The Town may change or substitute insurance carriers or managed care organizations for the above-referenced health benefit programs as long as the level of benefits are the same or better than those provided under Article X, Section 1 and 2 of this Agreement.
2. In the event that the level of benefits, as defined below, are decreased, either by Anthem Blue Care, the Town or by a new insurance carrier the parties agree to reopen negotiations for the limited purposes of negotiating over health insurance. The level of benefits will be determined on July 1st of each contract year.

The "level of benefits" shall be defined as the benefit designs in effect on January 1, 2001. Changes in the "level of benefits" caused by the following shall not be considered a "decrease" in the level of benefits and therefore there would be no obligation to reopen negotiations:

- Changes caused by state mandates;
- Changes made to pediatric and/or adult care schedules due to changes made to the American

Medical Association (AMA) and/or the American Academy of Pediatric (AAP) guidelines.

Changes made to the network of doctors and/or hospitals shall not be deemed as a change in the level of benefits.

The parties agree that Article X, Section 3, subsection A. 2. shall be in effect only through June 30, 2003 and shall expire by its terms at such time.

- A. In the event that the insurance carrier providing the benefits terminates the current insurance plan, is no longer in business, has merged or been acquired by another carrier, the parties agree to negotiate for new insurance coverage immediately.

72. Section 4 - Pension. The provisions of the retirement system of the Town of Vernon, as it applies to the employees of the police department, shall be amended effective July 1, 2000 in accordance with Amendment XVII of the Town of Vernon Police Pension Plan appended hereto, and incorporated in and made part of this Agreement.

73. Effective July 1, 2012 employees shall contribute seven and one-half (7.50%) of their salaries on a pre-tax basis to the Town of Vernon Police Pension Plan.

74. All employees hired after July 1, 2012 shall contribute eight and one-half (8.50%) of their salaries on a pre-tax basis to the Town of Vernon Police Pension Plan.

75. All employees hired after July 1, 2017 shall contribute nine and one-half percent (9.50%) of their salaries on a pre-tax basis to the Town of Vernon Police Pension Plan.

76. Employees hired prior to July 1, 2012 shall have accrued sick days calculated as part of their pensions in accordance with Appendix C attached hereto and made a part hereof.

77. All employees hired after July 1, 2012 shall have their pensions calculated based upon salary only. Extra payments, such as overtime, private duty pay, extra duty pay, accrued sick time and accrued vacation time shall not be factored into any pension calculation.

78. All employees hired after July 1, 2012 will be eligible for full pension benefits consistent with this Agreement upon working at least twenty-five (25) years. Any retirement earlier than such shall be subject to discount in accordance with the terms of the Town of Vernon Police Pension Plan.

79. New employees may purchase, during the first two years of employment, for retirement plan purposes only, up to three years of service as a sworn police officer in another municipality, provided the employee actually performed law enforcement work, and provided the employee is not entitled to a pension from the other municipality.

80. The Town shall submit pension paperwork within ten (10) business days upon receipt from the employee of notice of intent to retire.

81. Section 5 - The Town agrees to provide a long term disability insurance benefit after 365 days of continuous disability at the rate of sixty percent (60%) of Basic Monthly Salary to a maximum of four thousand dollars (\$4,000.00), payable to normal retirement date or earlier recovery.

82. Section 6 - The Union agrees to participate in a health insurance committee formed to review issues related to health insurance.

ARTICLE XI - OVERTIME

83. Section 1 - All assigned, authorized or approved service outside of the out-of-turn of an employee's regularly scheduled tour of duty or shift, including service on an employee's scheduled day off or sick day, or during his/her vacation and service performed prior to the scheduled starting time for his/her regular tour of duty and service. Time worked in excess of eight (8) hours on any work day or forty (40) hours in a work week shall be considered overtime and shall be paid at the rate of time and one-half (1 and 1/2) of the applicable rate. There shall be no pyramiding of overtime in any instance.

84. Section 2 - Employees required to return to work on their day(s) off shall be paid not less than four (4) hours at time and one-half (1 and 1/2) their respective rate of pay or the hours worked at time and one-half (1 and 1/2) their respective rate of pay, whichever is greater.

Employees who are on benefit time, which does not cause overtime at the time the leave was authorized, may be contacted to work overtime on their shift through the normal overtime procedures and receive compensation for hours worked at one and one half (1 and 1/2) times their rate of pay.

Employees who are on benefit time, for which overtime was used to cover their shift at the time their leave was authorized, may be contacted to work an open shift, however, if accepted the benefit time will be credited back to the employee and they will be compensated at straight time for hours worked.

Employees, on benefit time, electing to work overtime on a shift other than the one assigned, will be compensated at one and one-half (1 and 1/2) times their rate of pay.

85. Section 3 - Employees required to return to duty to perform overtime duties on a regular working day, and when such hours are not continuous with the initial or terminal hours of the regular shift hours, shall be paid not less than four (4) hours pay at time and one-half (1 and 1/2) or the hours worked at time and one-half (1 and 1/2).

86. Section 4 - An employee shall not be required to reduce his/her regularly assigned tour of duty when required to report, as in Section 3 above, to avoid the payment of overtime.

87. Section 5 - Regular member of the Department shall be given first preference for all overtime assignments when the replacement is to replace regularly assigned employees.

88. Section 6 - In the event the Town elects to fill a vacancy by volunteers on a shift and cannot do so, the least senior officer going off duty will be held over for four (4) hours and the least senior officer on the shift coming on duty will be called in early for four (4) hours, and so forth until all vacancies are filled, provided that no bargaining unit member will be held over or called in early for more than one (1) day consecutively. The least senior officer shall be selected from those patrol officers normally assigned to a shift that are working that day and shall not include patrol officers already working overtime or an exchange day.

89. Section 7 - Employees will not work more than twenty (20) hours per week at private job overtime (excluding regular days off) in any one work week period. Employee overtime should not overlap regular duty or other jobs. The Chief of Police and/or his/her designee may approve exceptions to these provisions.

90. Section 8 - Compensatory time may be accrued in lieu of overtime wages at the rate of one and one-half (1 and 1/2) times the hours worked. No employee may hold more than forty (40) hours of compensatory time but there shall be no limit on the time accrued and used during a fiscal year. The Chief of Police or his designee may offer compensatory time in lieu of overtime payment in certain instances where the employee's attendance at meetings, seminars, or other work details is completely voluntary, except that where established procedures and policies exist for the fair and equitable dispensing of overtime, no employee shall be penalized or passed over for not accepting compensatory time. The choice of compensatory time or overtime pay remains that of the employee provided the employee chooses prior to the work being performed. At no time will the use of compensatory time trigger overtime in order for the employee to be replaced. Compensatory time may be used either at the beginning or an end of a tour of

duty, or may be used to take whole tours of duty off. Any compensatory time not scheduled for use prior to June 15th of each fiscal year shall be paid to the employee at the applicable rate. However, an employee may elect to carry over up to forty (40) hours of compensatory time to the following year. It shall be the responsibility of the Town to maintain and have available a list of those employees who hold compensatory time in order that requests for time off to be evaluated promptly.

ARTICLE XII — EXTRA WORK

91. Section 1 - The procedure for assignment of extra duty work shall be set forth in the attached Appendix D. Any employee assigned Extra Work or Extra Police duty from such roster shall be paid: at the rate of time and one and one-half (1 and 1/2) the top Lieutenant's rate with a minimum of four (4) hours and in four (4) hour blocks thereafter.

92. Section 2 - Available Regulars shall have first right of refusal on all Extra Work.

93. Section 3 - Cancellation of Extra Work shall require four (4) hours' notice or the minimum of four (4) hours shall be paid. If not so cancelled, the employee shall be paid for all hours booked for the assignment.

ARTICLE XIII - PROMOTIONS

94. Section 1 - All ranks as described hereinafter, and any new ranks in the bargaining unit that may be created hereinafter, shall be filled by examination.

95. Section 2 - The Town of Vernon shall conduct any such examination which shall be consistent with recognized and established examination procedures designed to determine in a fair and just manner the individuals best qualified for the rank or position for which the examination was given. Such examinations for Lieutenants and Sergeants shall consist of two (2) parts: a written test which shall carry a weight of fifty percent (50%), and an oral test which shall carry a weight of fifty percent (50%). A passing score of 70% or more on each part will be required for the candidate to continue with the testing process. The Town reserves the right to select from among the three (3) most highly ranked candidates for each individual promotional vacancy. In lieu of the above examination, for Lieutenants the Town may use an assessment center or any combination thereof All test lists shall remain active for a period of one (1) year starting from the date that the list is established. The Mayor or his/her designee shall notify the Union in writing that a list has expired and may be extended. However, said lists cannot be extended for an additional year per the Mayor of Vernon or his/her designee if someone becomes eligible to take the

examination within the initial year and so notifies the Mayor of Vernon of their desire to take the test. The Mayor or his/her designee shall notify the Union in writing if the existing list will be extended for an additional year consistent with the preceding sentence.

96. Section 3 - A Patrol Officer will be eligible for promotion to Sergeant upon completion of five (5) years of continuous service with the Vernon Police Department based upon the date of the first phase of the examination. Registration and filing of resumes are not considered to be the examination. A Sergeant will have two (2) years of continuous service with the Vernon Police Department as a Sergeant before he will be eligible for promotion to Lieutenant. The position of Captain will be filled from among Lieutenants of the Vernon Police Department provided qualified candidates are available on this basis. All promotions will be made from the ranks of the Vernon Police Department with the exception of the position of Chief of Police.

97. Section 4 - Promotion to any rank governed by this Agreement will have a nine (9) month probationary period. If said probationary period is not successfully completed, the employee will revert to his/her last held rank without loss of seniority. Said employee may grieve any such reduction in rank under Article VI (Grievance Procedure) of this Agreement.

98. Section 5 - The Town will establish a rank of Police Officer on Special Assignment/Detective. Police Officers may be assigned as investigative trainees in the Detective Division for no longer than six (6) months. At the end of such time, such employee will be appointed as Police Officer on Special Assignment/Detective or returned to patrol duty as a Police Officer. There will be no additional compensation for employees on Special Assignment/Detective. Removal from Police Officer on Special Assignment/Detective positions after the initial six (6) month training period by the Chief of Police will be allowed for just cause reasons.

99. Section 6 - Rotational Assignment of Supervisors

- A. The assignment of Sergeant to non-patrol assignments shall rotate among those who desire such assignment every two years by rank seniority. Sergeants who do not desire such assignment shall not be required to accept it. In the event that no Sergeant desires the assignment, the least senior Sergeant will be assigned on a yearly basis. After one (1) year, a rotation by seniority shall again proceed, however, if there is no desire for the assignment again, the next-to-least senior will be assigned on a rotating annual basis. This shall not apply to Sergeants during their probationary period. This shall include the Sergeant(s) assigned to the Detective Division and any other non-patrol supervisory assignments that are made in the future.

Lieutenants shall rotate assignments every three years beginning July 1, 2012.

- B. The employee assigned to Administration, Planning & Training shall not be if included in this rotation.
- C. The rotation of sergeants assigned to the Detective Division shall begin January 1, 1995. The position shall be offered to sergeants who have not previously worked in the Detective Division as sergeants in order by seniority. Sergeants who have previously worked in the Detective Division as sergeants shall not be offered the position in the first rotation. Once the position has been offered to all sergeants who have not previously worked as sergeants in the Detective Division as sergeants, the position shall be offered to the senior sergeant and shall then rotate among all sergeants by seniority.
- D. The rotation of lieutenants assigned to the Detective Division shall begin January 1, 1996. The position shall be offered to lieutenants who have not previously worked in the Detective Division as lieutenants in order by seniority. Lieutenants who have previously worked in the Detective Division as lieutenants shall not be offered the position in the first rotation. Once the position has been offered to all lieutenants who have not previously worked as lieutenants in the Detective Division as lieutenants, the position shall be offered to the senior lieutenant and shall then rotate among all lieutenants by seniority.
- E. The Chief of Police may transfer any supervisor from the Detective Division to patrol due to ineffective performance. The supervisor next on the rotational list who desires such assignment to the Detective Division shall complete the un-expired portion of the rotation and shall then receive his/her rightful rotation.
- F. Temporary positions may not exceed twelve (12) months.

ARTICLE XIV - CLOTHING ALLOWANCES

100. Section 1 - Effective July 1, 2022, employees will be granted a draw at the beginning of each fiscal year for clothing allowance in the amount of \$900.00. An additional draw equal to \$1,350.00 will be granted to a new Patrol Officer at the time hired to purchase required clothing.

101. Section 2 - The Town agrees to pay the cost of cleaning of uniforms for the employees of the Police Department, not to exceed the following:

- a. Five (5) shirts per week.
- b. Three (3) pairs of trousers per week.
- c. Six (6) coats per year.

102. Section 3 - Each employee who terminates his/her service with the Police Department shall return to the Town any and all uniforms and equipment issued to such member.

103. Section 4 - The Town shall provide soft body armor (bullet-proof vest) as recommended by the Grooming Standards Committee and approved by the Chief of Police to any newly hired officer. Officers are required to wear soft body armor while on patrol. Replacement vests will be provided to any Officer at such time as the current equipment or part thereof is no longer certified for use by the manufacturer.

104. Section 5 - Any expendable supplies required by the Town shall be provided and replaced at Town expense, such supplies to be determined by the Grooming Standards Committee, subject to the approval of the Chief of Police.

ARTICLE XV — DISCIPLINE AND DISCHARGE

105. Section 1 - The Town shall have the right to discipline or discharge employees for just cause.

106. Section 2 - The Union shall receive a copy of any disciplinary action within twenty four (24) hours after such action has been taken.

107. Section 3 - The Chief of Police or his/her designee shall have the authority to discipline an employee or take other appropriate action for that employee's acts or omissions in accordance with this Article provided that no employee shall be suspended, demoted or removed without a hearing within five (5) days unless such employee waives the right to a hearing in writing. Nothing herein contained shall deprive the Town of the power to suspend a Police Officer from duty immediately without a hearing who has been charged with misconduct which would affect his/her ability to perform his/her duties without prejudice to the rights of the officer.

108. Section 4 - Any employee against whom it is decided disciplinary action may be instituted shall be confronted with the charges against him/her in writing and shall be given an opportunity to respond to those charges along with the right to examine copies of all documentary evidence used against him/her at any Town hearing.

109. Section 5 - Any hearing held pursuant to this Article shall be informal and closed to the public provided that witnesses shall be sworn and subject to cross-examination and any party to the hearing shall have the right and choice of representation, the right to reasonable notice of the time and place of the hearing and the right to present evidence at the hearing. The disciplinary procedures of the Police Rules and Regulations are incorporated into this Agreement by reference. If any conflict between those procedures and this Article or another Article in this Agreement exists, this Agreement shall prevail.

110. Section 6 - Any disciplinary action or discharge may be grieved.

111. Section 7 - Any employee who has been disciplined or discharged and who is completely exonerated shall be reinstated without prejudice or loss of seniority and compensated for loss in regular wages. No record of such disciplinary action shall be retained in the employee's personnel file.

112. Section 8 - The Union recognized that the members of said Union are governed by Police Department Rules of Conduct in accordance with Chapter XI, Section 10 of the Charter of the Town of Vernon presently in effect in the Vernon Police Department and agrees to be governed by said Rules as amended from time to time in the future.

ARTICLE XVI — GENERAL PROVISIONS

113. Section 1 - Union officers and delegates of the local Union shall be given time off to attend meetings and conventions without loss of pay, provided that at no time shall more than two (2) employees of the Department be granted this privilege without loss of pay, the total of which shall not exceed ninety six (96) hours during any year. The Union agrees to give reasonable notice to the Town of intention to be absent from work and both parties agree that time off will be allowed only after considering the manpower needs of the Police Department.

114. Section 2 - The Town of Vernon further agrees to continue in force, for the duration of this Agreement, all those benefits and privileges previously granted to and enjoyed by the members of the Department, but which may not have been specifically mentioned herein.

115. Section 3 - If any Article or Section of this Agreement is declared invalid for any reason; such declaration of invalidity shall not affect the other Articles and Sections or portions thereof which shall remain valid and in full force.

116. Section 4 - The following inoculations will be offered to employees: rabies, hepatitis-B, influenza, COVID, tuberculosis and tetanus shots. These shots will be provided by the Town and shall be done during the time when the employee is available. These inoculations shall be taken if the employee desires them and

will be of a voluntary nature. Further, the Town agrees to provide testing for any employee who has reasonable grounds to believe he/she has been exposed to an employee has indicated in writing a desire to receive such testing.

117. Section 5 - This language shall apply only to Associate, Bachelor and for first Masters courses. Accordingly, bargaining unit members shall not be eligible for an allowance for Ph. D., Juris Doctor or second Masters.

- 118. A.** Employees may enroll in any college courses in subjects such as law enforcement, criminal justice, police science, police administration, public administration, accounting, business administration, economics, psychology, sociology, pre-law, human services, or other subjects with the approval of the Chief of Police. The parties understand and agree approval of the Chief of Police applies to any courses.
- 119. B.** Prior to enrolling in such a course (as set forth in Section 5. A. above) or purchasing any materials for such a course, an employee shall make a written request to the Chief of Police for an allowance to attend the course(s). The request should provide such details as the name of the course(s) the employee proposes to take, a brief description of the course(s), the name of the institution where the course(s) will be given, etc. The employee seeking an allowance must comply with this language.
- 120. C.** Upon approval, the employee shall be entitled to reimbursement of three thousand dollars (\$3,000.00) per fiscal year for the purpose of paying tuition, registration fees, and textbooks for the above-described course or courses. A grade of pass, or a grade point of at least 2.0 is required for reimbursement. Reimbursement payment will be made within 30 days of presentment of invoice.
- 121. D.** Upon completion of any courses taken pursuant to this Section and prior to the end of the fiscal year, receipts for all fees or tuition paid or books purchased for courses shall be provided to the Chief of Police or his/her designee, as well as a copy of the transcript or some other official document indicating the grade(s) received.

122. Section 6 - The Town shall provide insurance to protect the employees of the Police Department from suits brought for alleged false arrest, and the Town shall provide the services of the Town Counsel or other legal counsel to defend the employees, at the expense of the Town.

123. Section 7 - The Town shall make the pay period weekly, beginning with the effective date of this contract. Credit Union deductions shall also be made weekly. The Town will provide for direct deposit of pay checks to banking

institutions chosen by employees provided appropriate administrative arrangements can be made with such institutions in the Town of Vernon. The Town may implement a bi-weekly payroll system with ninety (90) days' advance notice to all employees and the Union president.

124. Section 8 - Before an employee begins his/her employment, the insurance coverages and personnel rules pertaining to the Police Department shall be fully explained by a representative of the Administrative Office.

125. Section 9 - Each member of the Department shall be reimbursed a maximum of \$250.00 per occurrence by the Town for any loss or damage to clothing or personal property not otherwise covered by insurance or Workers' Compensation. Each claim for clothing or personal property must be supported by proof of loss or damage, including a statement as to the value of loss of property. Each claim made must be reported at the end of the shift for the day in which the loss was sustained to the office in charge of that shift.

126. Section 10 - Physical Examinations:

- A. If the Chief of Police determines that an Officer's physical or mental health affects the Officer's ability to competently perform his/her job, the Chief of Police may order said employee to be examined by a physician at the Town's complete expense. The Chief of Police will receive a copy of said examination report. If said examination report indicates a condition that should be corrected on the advice of the examining physician, said advice will be followed. The Chief of Police will have the right to counsel any employee who fails to comply with this Section. Nothing herein shall restrict the employee from seeking a second opinion in his/her defense. The Chief of Police will handle any such incidents under this Section with strict confidentiality.
- B. Each employee will be required to complete a physical examination in accordance with the appended schedule (see Appendix E). The choice of a physician will remain strictly with the employee. The Town shall not receive, nor is entitled to receive, the employee's medical records or to discuss said medical records with the employee's physician unless so authorized in writing by the employee.
- C. The employee's physician shall certify that he has examined the employee's position description and has determined that the employee is medically able to perform the duties of the position; if the employee's physician refuses to certify conformance to the above conditions, the employee agrees that the Town may obtain

medical records and discuss the same with the employee's physician.

- D. The required physical examination and testing specified in Appendix E will be completed during the employee's regular working hours and shall be paid through available employee's health insurance plans, provided the Town shall pay for any deductible or co-insurance expenses. Employees who cannot complete the required physical examination during regular working hours shall be compensated at the rate of one and one half (1 and 1/2) times his/her base hourly rate to a maximum of eight (8) hours. The Town recognizes that the examining physician may require further examinations and tests which may not be specified in Appendix E, but which are deemed necessary by the examining physician, which will be paid through the employee's health insurance plan, provided the Town agrees to pay for such additional examinations and tests consistent with the intent of this Section not covered by the employee's health insurance plan.
- E. Individuals hired after July 1, 1988 shall be required to stop smoking within thirty (30) days of employment and shall not smoke while employed by the Vernon Police Department.
- F. The use of marijuana, in any form, for any purpose is prohibited.

127. Section 11 - Space shall be provided in the Police Department for a Union bulletin board of reasonable size, to be supplied by the Town for posting of announcements relating to official Union business and activity.

128. Section 12 - Copies of existing General Orders, Special Orders and Personnel Orders shall be supplied to the Union. The reasonableness of any General Orders, Special Orders or Personnel Orders shall be subject to the grievance procedure.

129. Section 13 - All parties to this Agreement shall cooperate in the enforcement of safety rules and regulations. Complaints with respect to unsafe or unhealthy working conditions shall be brought to the attention of an employee's superior officer or the Chief of Police. Employees shall not be required to operate unsafe vehicles.

130. Section 14 - Employees shall not be required to shovel snow or wash police cars while on duty, or to perform non-police duties except under emergency circumstances.

131. Section 15 - The Town shall prepare and type a copy of this Agreement subject to Union approval. The Union shall have responsibility for printing copies of this Agreement for all employees and two (2) copies for the Town.

132. Section 16 - The Town shall provide to the Union on January 1st of each year a list of those employees scheduled to receive pay increases due to service.

133. Section 17 - In case of an accident involving the driver of a police cruiser, the driver shall not be relieved of duty or suspended until a complete investigation has been made by a superior officer appointed by the Chief of Police or his/her designee, and the driver has been found at fault, but he/she may be re-assigned at the discretion of the Chief.

134. Section 18 - Any charge or complaint by a member of the public which is made against a bargaining unit employee will be investigated by the Chief of Police or his/her designee within twenty four (24) hours, if possible, when presented in writing and sworn and signed by the complainant. If after an investigation, the Chief or his/her designee determines that there is probable cause to the charge or complaint, the Union and the employee involved shall be appraised of the facts alleged and be given an opportunity to respond. Employees shall be entitled to all their rights under Article XV, Discipline and Discharge, and no employee shall be suspended, demoted or discharged without being provided an opportunity to examine the member(s) of the public who accused that employee. With respect to complaints and/or charges not in writing, nothing herein shall prohibit the Town from investigating any complaint that is not presented in writing or sworn or signed by the complainant. In the event that the Chief of Police or his designee decides to investigate such complaint and if the complaint is non-criminal in nature, the involved employee and the Union shall be notified within twenty-four (24) hours of any such charge or complaint being made, the initiation of any investigation against any employee, and the nature of any such charge, complaint or investigation.

135. Section 19 - A Grooming Standards Committee will be appointed by the Chief of Police for the purpose of recommending reasonable guidelines for Police Department dress and grooming. The members will include: one (1) representative of the Chief, one (1) Lieutenant, one (1) Sergeant, two (2) Patrol Officers, and one (1) employee of the Detective Division.

136. Section 20 - All Department vehicles purchased, leased or otherwise acquired shall be equipped with air conditioners.

137. Section 21 - Meal Allowance:

- A. The Town shall provide a meal allowance not to exceed seventy dollars (\$70.00) per day (\$10.00 for breakfast, \$20.00 for lunch,

\$40.00 for dinner) for overnight training classes or seminars at which no meals are provided.

- B. The Town shall provide a meal allowance not to exceed twenty dollars (\$20.00) for daily training classes or seminars held outside the Town of Vernon at which no meals are provided.

138. Section 22 - Employees shall be entitled to enroll in, or make changes to the status of their ICMA Retirement Corporation 457 Deferred Compensation Plan account at any time.

139. Section 23 - Any Officer suffering an injury off-duty which limits his/her capacity to perform at full duty will be required to provide the Chief of Police with written notice as soon as they have medical verification of such injury. When a physician determines that the employee can no longer perform at full duty, the employee may be given a light duty assignment on a case by case basis determined by the Chief of Police, within the parameters of his/her ability, until it is determined by a doctor that the Employee can return to full duty. Upon returning to full duty, the Employee must provide a Doctor's certificate stating that the Employee can return to full duty. An Employee may choose to initiate his/her sick leave in lieu of a light duty assignment.

140. Section 24 - In the event a Police Officer is placed on an administrative assignment by the Chief of Police, or his designee, as a result of discharging a firearm, then in such event the employee will be paid their regular duty rate of pay. Upon completion of the investigation(s) into the firearm discharge event and if the Police Officer's discharge is deemed justified, the employee will receive a retroactive payment based upon their average weekly pay for the three month period immediately preceding the administrative assignment. Average weekly pay shall include base pay, overtime and extra duty pay. During the administrative assignment period, the Officer shall not be eligible for overtime or extra duty assignments. Should the employee be out of work during any period of time that they are on administrative assignment as a result of an authorized paid leave other than Worker's Compensation, then they shall be paid at their regular base rate for that period of time with no right to adjustment for overtime pay, compensatory time off or extra duty pay, as otherwise mentioned herein. Workers' Compensation rates shall be paid as required by State statute. Nothing herein shall affect the department's right to, or method of, disciplining employees as a result of said discharging of a firearm.

ARTICLE XVII - COURT DUTY

141. Section 1 - If an employee is required to use his/her own vehicle to travel to and from the court, he will be paid the IRS rate per mile and will be covered for liability in excess of his/her own coverage and covered by Workers' Compensation by the Town.

142. Section 2 - Employees who may be required to attend court to meet with Court officials or testify for any purpose during their off-duty hours shall receive one and one half (1 and 1/2) times their hourly rate of pay for each, or any portion of, an hour, to be paid by the Town. There shall be a minimum of four (4) hours pay at time and one half (1 and 1/2) if present in court for four (4) hours or less. This time shall not overlap the employee's regular shift. Employees present in court for four (4) or more hours shall be paid at a rate of one and one half (1 and 1/2), provided such time does not overlap the employee's regular shift. If court time does extend into the Officer's regular shift he/she shall revert to the Officer's regular rate of pay. If such time is the employee's regular day off, he/she shall be paid a minimum of four (4) hours at time and one half (1 and 1/2), if present in court for four (4) hours or less. Employee's present in court for more than four (4) hours shall be paid a minimum of eight (8) hours at time and one half (1 and 1/2). Any employee who, prior to attending court, is personally notified at least two hours prior to the time he or she is scheduled to be in court that he or she is not needed is not entitled to compensation. In the event that personal notification cannot be made, such notification shall be left on the officer's departmental voice mail. Officers shall be responsible for checking their voice mail for such notification prior to attending court. In the event that the departmental voice mail is not functioning for any reason, personal notification of the officer is required.

ARTICLE XVIII - EDUCATIONAL INCENTIVE PROGRAM

143. Section 1 - Employees shall be eligible to receive an additional two and one-half percent (2.5 %) increase in their base salary for earning an associate's degree and a four percent (4%) increase in their base salary for earning a bachelor's degree from an accredited college or university.

144. Section 2 - An employee's major must be in law enforcement, criminal justice, police science, police administration, public administration, sociology, psychology, pre-law or human services.

145. Section 3 - All degrees must be approved by the Chief of Police prior to being eligible for incentive payment.

ARTICLE XIX - RATES OF PAY (Appendix F)

146. Section 1 - Effective July 1, 2022, the employees' wages as scheduled for fiscal year 2022-2023 will be increased by three percent (3.00%). For all employees hired after July 1, 1992, a five-step (inclusive of the START step) pay schedule will be in effect. Pay increases shall be retroactive to July 1, 2022.

147. Section 2 - Effective July 1, 2023, the employees' wages as scheduled for fiscal year 2023-2024 will be increased by three percent (3.00%). Pay increases shall be retroactive to July 1, 2023. For all employees hired after July 1, 1992, a five-step (inclusive of the START step) pay schedule will be in effect.

148. Section 3 - Effective July 1, 2024, the employees' wages as scheduled for fiscal year 2024-2025 will be increased by three percent (3.00%).

149. Section 4 - Effective August 1, 2024, a new three step wage schedule shall be implemented for all positions. As such, Step 2 will become Step 0, Step 3 will become Step 1, and Step 4 will become Step 2. Also effective August 1, 2024, all employees employed as of the date of this Agreement will be placed on top step of their wage schedule (Step 2 of the new schedule). Any employees hired after the date of this Agreement but prior to August 1, 2024, will start at Step 0 of their current wage schedule, and upon their anniversary date, will move to Step 1 of their new wage schedule. Any employees hired after August 1, 2024 will start at Step 0 of their new wage schedule and move steps on their anniversary date thereafter.

150. Section 5 - Effective July 1, 2025, the employees' wages as scheduled for fiscal year 2025-2026 will be increased by three percent (3.00%). For all employees hired after July 1, 2024, a three-step pay schedule will be in effect.

151. Section 6 - Employees will be entitled to longevity pay for continuous service as follows:

After 10 years — \$300.00
After 15 years — \$350.00
After 20 years — \$400.00

152. Section 7 - Effective October 11, 2023, all top steps of the respective wage schedules shall receive a one time \$3,000 increase.

ARTICLE XX — NO STRIKE

153. Section 1 - During the life of this Agreement there shall be no strikes.

154. Section 2 - The Vernon Police Association expressly agrees that they will take every reasonable, prompt and positive measure within their power to prevent and stop any act described in Section 1 above.

ARTICLE XXI – DURATION

155. This Agreement shall be effective as of the first day of July 1, 2022 and shall remain in full force and effect until the 30th day of June, 2026. It shall automatically be renewed from year to year thereafter, unless either party shall notify the other, in writing, six (6) months prior to the expiration date that it desires to modify this Agreement. In the event such notice is given, negotiations shall begin no later than thirty (30) days following such notice.

ARTICLE XXII - MERIT RAISES

156. The Town and the Union agree to re-open negotiations to discuss merit raises proposed by the Town. Such re-opener shall be requested in writing by either party at least one hundred and twenty (120) days prior to the Agreement anniversary date (July 1st) following a twelve (12) consecutive month period during which an evaluation system has been established and formally operated by the Town.


TOWN OF VERNON



Michael J. Purcaro
Town Administrator



VERNON POLICE ASSOCIATION



Thomas Van Tassel
President



Dawn R. Maselek
Assistant Town Administrator

BENEFIT SUMMARY



Administered by - Cigna Health and Life Insurance Co.

For - Vernon Town and Board of Education

Choice Fund Open Access Plus HSA Plan

HSA1 - Union

Effective - 07/01/2023

Selection of a Primary Care Provider - your plan may require or allow the designation of a primary care provider. You have the right to designate any primary care provider who participates in the network and who is available to accept you or your family members. If your plan requires designation of a primary care provider, Cigna may designate one for you until you make this designation. For information on how to select a primary care provider, and for a list of the participating primary care providers, visit www.mycigna.com or contact customer service at the phone number listed on the back of your ID card. For children, you may designate a pediatrician as the primary care provider.

Direct Access to Obstetricians and Gynecologists - You do not need prior authorization from the plan or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, visit www.mycigna.com or contact customer service at the phone number listed on the back of your ID card.

Your coverage includes a health savings account that you can use to pay for eligible out-of-pocket expenses.

Employer Contribution

Employee - \$1,000
Family - \$2,000

Plan Highlights

Plan Highlights		In-Network	Out-of-Network
Lifetime Maximum		Unlimited	Unlimited
Plan Year Accumulation		Your Plan's Deductibles, Out-of-Pockets and benefit level limits accumulate on a contract year basis unless otherwise stated. In addition, all plan maximums and service-specific maximums (dollar and occurrence) cross-accumulate between In- and Out-of-Network unless otherwise noted.	
Plan Coinsurance		Plan pays 100%	Plan pays 80%
Maximum Reimbursable Charge		Not Applicable	200%
Plan Deductible		Individual - Employee Only: \$2,000 Family Maximum: \$4,000	Individual - Employee Only: \$2,000 Family Maximum: \$4,000
<ul style="list-style-type: none"> The amount you pay for all covered expenses counts toward both your in-network and out-of-network deductibles. Plan deductible always applies before any benefit copay/deductible or coinsurance. Plan deductible does not apply to in-network preventive services. All family members contribute towards the family deductible. An individual cannot have claims covered under the plan coinsurance until the total family deductible has been satisfied. This plan includes a combined Medical/Pharmacy plan deductible. 			
Note: Services where plan deductible applies are noted with a caret (^).			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

1 of 15

©Cigna 2023

Plan Highlights		In-Network	Out-of-Network
Plan Out-of-Pocket Maximum		Individual - Employee Only: \$2,500 Family Maximum: \$5,000	Individual - Employee Only: \$4,000 Family Maximum: \$8,000
<ul style="list-style-type: none"> The amount you pay for all covered expenses counts towards both your in-network and out-of-network out-of-pocket maximums. Plan deductible contributes towards your out-of-pocket maximum. All benefit copays/deductibles contribute towards your out-of-pocket maximum. Covered expenses that count towards your out-of-pocket maximum include coinsurance and charges for Mental Health and Substance Use Disorder. Out-of-network non-compliance penalties or charges in excess of Maximum Reimbursable Charge do not contribute towards the out-of-pocket maximum. All eligible family members contribute towards the family out-of-pocket maximum. Once the family out-of-pocket maximum has been met, the plan will pay each eligible family member's covered expenses at 100%. This plan includes a combined Medical/Pharmacy out-of-pocket maximum. 			
Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Physician Services - Office Visits			
Primary Care Physician (PCP) Services/Office Visit		Plan pays 100% ^	Plan pays 80% ^
Specialty Care Physician Services/Office Visit		Plan pays 100% ^	Plan pays 80% ^
NOTE: Obstetrician and Gynecologist (OB/GYN) visits are subject to either the PCP or Specialist cost share depending on how the provider contracts with Cigna (i.e. as PCP or as Specialist).			
Surgery Performed in Physician's Office		Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit
Allergy Treatment/Injections and Allergy Serum		Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit
Virtual Care			
Dedicated Virtual Providers - MDLIVE			
MDLIVE Urgent Virtual Care Services		Plan pays 100% ^	Not Covered
MDLIVE Primary Care Services		Plan pays 100% ^	Not Covered
MDLIVE Specialty Care Services		Plan pays 100% ^	Not Covered
<ul style="list-style-type: none"> Primary Care cost share applies to routine care. Virtual wellness screenings are payable under Preventive Care. For MDLIVE Behavioral Services, please refer to the Mental Health and Substance Use Disorder section (below). Lab services supporting a virtual visit must be obtained through dedicated labs. Includes charges for the delivery of medical and health-related services and consultations by dedicated virtual providers as medically appropriate through audio, video, and secure internet-based technologies. 			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

2 of 15

©Cigna 2023

Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Virtual Physician Services - Office Visits			
Primary Care Physician (PCP) Services/Office Visit		Plan pays 100% ^	Plan pays 80% ^
Specialty Care Physician Services/Office Visit		Plan pays 100% ^	Plan pays 80% ^
<ul style="list-style-type: none"> Physicians may deliver services virtually that are payable under other benefits (e.g., Preventive Care, Outpatient Therapy Services). Includes charges for the delivery of medical and health-related services and consultations as medically appropriate through audio, video, and secure internet-based technologies that are similar to office visit services provided in a face-to-face setting. 			
NOTE: Obstetrician and Gynecologist (OB/GYN) visits are subject to either the PCP or Specialist cost share depending on how the provider contracts with Cigna (i.e. as PCP or as Specialist).			
Convenience Care Clinic			
Convenience Care Clinic		Plan pays 100% ^	Plan pays 80% ^
Preventive Care			
Preventive Care		Plan pays 100%	PCP: Plan pays 80% ^ Specialist: Plan pays 80% ^
<ul style="list-style-type: none"> Includes coverage of additional services, such as urinalysis, EKG, and other laboratory tests, supplementing the standard Preventive Care benefit when billed as part of office visit. Annual Limit: Unlimited 			
Immunizations			
		Plan pays 100%	PCP: Plan pays 80% ^ Specialist: Plan pays 80% ^
Mammogram, PAP, and PSA Tests			
		Plan pays 100%	Covered same as other x-ray and lab services, based on Place of Service
<ul style="list-style-type: none"> Coverage includes the associated Preventive Outpatient Professional Services. Diagnostic-related services are covered at the same level of benefits as other x-ray and lab services, based on Place of Service. 			
Inpatient			
Inpatient Hospital Facility Services		Plan pays 100% ^	Plan pays 80% ^
Note: Includes all Lab and Radiology services, including Advanced Radiological Imaging as well as Medical Specialty Drugs			
Inpatient Hospital Physician's Visit/Consultation		Plan pays 100% ^	Plan pays 80% ^
Inpatient Professional Services		Plan pays 100% ^	Plan pays 80% ^
<ul style="list-style-type: none"> For services performed by Surgeons, Radiologists, Pathologists and Anesthesiologists 			
Outpatient			
Outpatient Facility Services		Plan pays 100% ^	Plan pays 80% ^
Outpatient Professional Services		Plan pays 100% ^	Plan pays 80% ^
<ul style="list-style-type: none"> For services performed by Surgeons, Radiologists, Pathologists and Anesthesiologists 			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

3 of 15

©Cigna 2023

Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Emergency Services			
Emergency Room			
<ul style="list-style-type: none"> Includes Professional, X-ray and/or Lab services performed at the Emergency Room and billed by the facility as part of the ER visit. 	Plan pays 100% ^	Plan pays 100% ^	
Urgent Care Facility			
<ul style="list-style-type: none"> Includes Professional, X-ray and/or Lab services performed at the Urgent Care Facility and billed by the facility as part of the urgent care visit. 	Plan pays 100% ^	Plan pays 80% ^	
Ambulance			
Ambulance services used as non-emergency transportation (e.g., transportation from hospital back home) generally are not covered.	Plan pays 100% ^	Plan pays 100% ^	
Inpatient Services at Other Health Care Facilities			
Skilled Nursing Facility, Rehabilitation Hospital, Sub-Acute Facilities			
<ul style="list-style-type: none"> Annual Limit: 120 days 	Plan pays 100% ^	Plan pays 80% ^	
Laboratory Services			
Physician's Services/Office Visit			
	Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit	
Independent Lab			
	Plan pays 100% ^	Plan pays 80% ^	
Outpatient Facility			
	Plan pays 100% ^	Plan pays 80% ^	
Radiology Services			
Physician's Services/Office Visit			
	Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit	
Outpatient Facility			
	Plan pays 100% ^	Plan pays 80% ^	
Advanced Radiological Imaging (ARI)			
	Includes MRI, MRA, CAT Scan, PET Scan, etc.		
Outpatient Facility			
	Plan pays 100% ^	Plan pays 80% ^	
Physician's Services/Office Visit			
	Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit	
Outpatient Therapy Services			
Outpatient Therapy and Chiropractic Services			
	Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit	
Annual Limits:			
<ul style="list-style-type: none"> All Therapies Combined - Includes Chiropractic Care, Cognitive Therapy, Occupational Therapy, Physical Therapy, Pulmonary Rehabilitation, and Speech Therapy - Unlimited days 			
Note: Therapy days, provided as part of an approved Home Health Care plan, accumulate to the applicable outpatient therapy services maximum.			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

4 of 15

©Cigna 2023

Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Cardiac Rehabilitation Services		Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit
Annual Limit:			
• Cardiac Rehabilitation - Unlimited days			
Hospice			
Inpatient Facilities		Plan pays 100% ^	Plan pays 80% ^
Outpatient Services		Plan pays 100% ^	Plan pays 80% ^
Note: Includes Bereavement counseling provided as part of a hospice program.			
Bereavement Counseling (for services not provided as part of a hospice program)			
Services Provided by a Mental Health Professional		Covered under Mental Health benefit	Covered under Mental Health benefit
Medical Specialty Drugs			
Outpatient Facility		Plan pays 100% ^	Plan pays 80% ^
Physician's Office		Plan pays 100% ^	Plan pays 80% ^
Home		Plan pays 100% ^	Plan pays 80% ^
Note: This benefit only applies to the cost of the Infusion Therapy drugs administered. This benefit does not cover the related Facility, Office Visit or Professional charges.			
Maternity			
Initial Visit to Confirm Pregnancy		Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit
All Subsequent Prenatal Visits, Postnatal Visits and Physician's Delivery Charges (Global Maternity Fee)		Plan pays 100% ^	Plan pays 80% ^
Office Visits in Addition to Global Maternity Fee (Performed by OB/GYN or Specialist)		Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit
Delivery - Facility (Inpatient Hospital, Birthing Center)		Covered same as plan's Inpatient Hospital benefit	Covered same as plan's Inpatient Hospital benefit
Abortion			
Abortion Services		Coverage varies based on Place of Service	Coverage varies based on Place of Service
Note: Elective and non-elective procedures			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

5 of 15

©Cigna 2023

Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Family Planning			
Women's Services		Plan pays 100%	Coverage varies based on Place of Service
Includes contraceptive devices as ordered or prescribed by a physician and surgical sterilization services, such as tubal ligation (excludes reversals)			
Men's Services		Coverage varies based on Place of Service	Coverage varies based on Place of Service
Includes surgical sterilization services, such as vasectomy (excludes reversals)			
Infertility			
Infertility Treatment		Coverage varies based on Place of Service	Coverage varies based on Place of Service
Infertility covered services: lab and radiology test, counseling, surgical treatment, in-vitro fertilization, GIFT, ZIFT, etc. • Lifetime Maximum: Unlimited			
Outpatient Dialysis Services			
Physician's Services/Office Visit		Covered same as Physician Services - Office Visit	Covered same as Physician Services - Office Visit
Home Dialysis		Covered same as plan's Home Health Care benefit	Covered same as plan's Home Health Care benefit
Note: Dialysis visits will not accumulate to Home Health Care maximum			
Outpatient Facility Services		Covered same as plan's Outpatient Facility Services benefit	Covered same as plan's Outpatient Facility Services benefit
Outpatient Professional Services		Covered same as plan's Outpatient Professional Services benefit	Covered same as plan's Outpatient Professional Services benefit
Other Health Care Facilities/Services			
Home Health Care		Plan pays 100% ^	Plan pays 80% ^
<ul style="list-style-type: none"> Annual Limit: 200 days (The limit is not applicable to mental health and substance use disorder conditions.) 16 hour maximum per day 			
Note: Includes outpatient private duty nursing when approved as medically necessary			
Organ Transplants			
Inpatient Hospital Facility Services		Plan pays 100% ^	Not Applicable
LifeSOURCE Facility		Covered same as plan's Inpatient Hospital benefit	Covered same as plan's Inpatient Hospital benefit
Non-LifeSOURCE Facility			
Inpatient Professional Services		Plan pays 100% ^	Not Applicable
LifeSOURCE Facility		Covered same as plan's Inpatient Professional benefit	Covered same as plan's Inpatient Professional benefit
Non-LifeSOURCE Facility			
• Travel Maximum - Cigna LifeSOURCE Transplant Network® Facility Only: After the plan deductible is met, \$10,000 maximum per Transplant			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

6 of 15

©Cigna 2023

Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Durable Medical Equipment	<ul style="list-style-type: none"> Annual Limit: Unlimited 	Plan pays 100% ^	Plan pays 80% ^
Breast Feeding Equipment and Supplies	<ul style="list-style-type: none"> Limited to the rental of one breast pump per birth as ordered or prescribed by a physician Includes related supplies 	Plan pays 100%	Plan pays 80% ^
External Prosthetic Appliances (EPA)	<ul style="list-style-type: none"> Annual Limit: Unlimited 	Plan pays 100% ^	Plan pays 80% ^
Temporomandibular Joint Disorder (TMJ)	<ul style="list-style-type: none"> Unlimited lifetime maximum 	Coverage varies based on Place of Service	Coverage varies based on Place of Service
Note: Provided on a limited, case-by-case basis. Excludes appliances and orthodontic treatment.			
Bariatric Surgery	<ul style="list-style-type: none"> Unlimited lifetime limit 	Coverage varies based on Place of Service	Coverage varies based on Place of Service
Treatment of Clinically severe obesity, as defined by the body mass index (BMI) is covered. The following are excluded: <ul style="list-style-type: none"> medical and surgical services to alter appearances or physical changes that are the result of any surgery performed for the management of obesity or clinically severe (morbid) obesity weight loss programs or treatments, whether prescribed or recommended by a physician or under medical supervision 			
Routine Foot Care		Not Covered	Not Covered
Note: Services associated with foot care for diabetes and peripheral vascular disease are covered when approved as medically necessary.			
Hearing Aids	<ul style="list-style-type: none"> Annual Limit: Unlimited Maximum of 2 devices per 24 months Includes testing and fitting of hearing aid devices at Physician Office Visit cost share 	Plan pays 100% ^	Plan pays 80% ^
Wigs	<ul style="list-style-type: none"> Annual Limit: Unlimited 	Plan pays 100% ^	Plan pays 100% ^

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

7 of 15

©Cigna 2023

Benefit		In-Network	Out-of-Network
Note: Services where plan deductible applies are noted with a caret (^). Plan deductible always applies before benefit copays/deductibles.			
Mental Health and Substance Use Disorder			
Inpatient Mental Health		Plan pays 100% ^	Plan pays 80% ^
Outpatient Mental Health – Physician's Office		Plan pays 100% ^	Plan pays 80% ^
Outpatient Mental Health - MDLIVE Behavioral Services		Plan pays 100% ^	Not Covered
Outpatient Mental Health – All Other Services		Plan pays 100% ^	Plan pays 80% ^
Inpatient Substance Use Disorder		Plan pays 100% ^	Plan pays 80% ^
Outpatient Substance Use Disorder – Physician's Office		Plan pays 100% ^	Plan pays 80% ^
Outpatient Substance Use Disorder - MDLIVE Behavioral Services		Plan pays 100% ^	Not Covered
Outpatient Substance Use Disorder – All Other Services		Plan pays 100% ^	Plan pays 80% ^
Annual Limits:			
<ul style="list-style-type: none"> Unlimited maximum 			
Notes:			
<ul style="list-style-type: none"> Inpatient includes Acute Inpatient and Residential Treatment. Outpatient - Physician's Office and MDLIVE Behavioral Services - may include individual, family and group therapy, psychotherapy, medication management, etc. Outpatient - All Other Services - may include Partial Hospitalization, Intensive Outpatient Services, Applied Behavior Analysis (ABA Therapy), etc. Services are paid at 100% after you reach your out-of-pocket maximum. 			
Mental Health/Substance Use Disorder Utilization Review, Case Management and Programs			
Cigna Total Behavioral Health - Inpatient and Outpatient Management			
<ul style="list-style-type: none"> Inpatient utilization review and case management Outpatient utilization review and case management Partial Hospitalization Intensive outpatient programs Changing Lives by Integrating Mind and Body Program Lifestyle Management Programs: Stress Management, Tobacco Cessation and Weight Management. Narcotic Therapy Management inMyndSM program - a comprehensive, holistic solution to help recognize and find resources to treat behavioral health conditions. 			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

8 of 15

©Cigna 2023

Pharmacy		In-Network	Out-of-Network
Cost Share and Supply			
Cigna Pharmacy Cost Share <ul style="list-style-type: none">Retail – up to 90-day supply (except Specialty up to 30-day supply)Home Delivery – up to 100-day supply (except Specialty up to 30-day supply)		Retail (per 34-day supply): Generic: You pay \$5 ^ Preferred Brand: You pay \$15 ^ Non-Preferred Brand: You pay \$35 ^ Retail (per 90-day supply): Generic: You pay \$10 ^ Preferred Brand: You pay \$30 ^ Non-Preferred Brand: You pay \$70 ^ Home Delivery (per 100-day supply): Generic: You pay \$10 ^ Preferred Brand: You pay \$30 ^ Non-Preferred Brand: You pay \$70 ^	Retail: You pay 20% ^ Your plan pays 80% ^ Home Delivery: Not Covered
<ul style="list-style-type: none">You can choose to fill your retail medications in a 34- or 90-day supply at any network pharmacy.You can choose to fill your mail order medications up to 100-day supply at home delivery.Cigna 90 Now Program: You can choose to fill your medications in a 30- or 90-day supply. If you choose to fill a 30-day prescription, it can be filled at any network retail pharmacy or network home delivery pharmacy. If you choose to fill a 90-day prescription, it must be filled at a 90-day network retail pharmacy or network home delivery pharmacy to be covered by the plan.Specialty medications are used to treat an underlying disease which is considered to be rare and chronic including, but not limited to, multiple sclerosis, hepatitis C or rheumatoid arthritis. Specialty Drugs may include high cost medications as well as medications that may require special handling and close supervision when being administered.Patient is responsible for the applicable cost share based upon the tier of the dispensed medication.Your pharmacy benefits share an annual deductible and out-of-pocket maximum with the medical/behavioral benefits. The applicable cost share for covered drugs applies after the combined deductible has been met.If you receive a supply of 34 days or less at home delivery (including a Specialty Prescription Drug), the home delivery pharmacy cost share will be adjusted to reflect a 30-day supply.			
Drugs Covered			
Prescription Drug List: Your Cigna Legacy Prescription Drug List includes a full range of drugs including all those required under applicable health care laws. To check which drugs are included in your plan, please log on to myCigna.com.			
Some highlights:			
<ul style="list-style-type: none">Coverage includes Self Administered injectables and optional injectable drugs – but excludes infertility drugs.Contraceptive devices and drugs are covered with federally required products covered at 100%.Insulin, glucose test strips, lancets, insulin needles & syringes, insulin pens and cartridges are covered.Lifestyle drugs are covered - limited to sexual dysfunction.Oral Fertility drugs are covered.Prescription smoking cessation drugs are covered.			

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

9 of 15

©Cigna 2023

Pharmacy Program Information

Pharmacy Clinical Management

Your plan features drug management programs and edits to ensure safe prescribing, and access to medications proven to be the most reliable and cost effective for the medical condition, including:

- Prior authorization requirements
- Quantity over time edits and dose optimization edits
- Age edits, and refill-too-soon edits
- Plan exclusion edits
- Your plan includes Specialty Drug Management features, such as prior authorization and quantity limits, to ensure the safe prescribing and access to specialty medications.
- For customers with complex conditions taking a specialty medication, we will offer Accredo Therapeutic Resource Centers (TRCs) to provide specialty medication and condition counseling. For customers taking a specialty medication not dispensed by Accredo, Cigna experts will offer this important specialty medication and condition counseling.

Additional Information

Case Management

Coordinated by Cigna HealthCare. This is a service designated to provide assistance to a patient who is at risk of developing medical complexities or for whom a health incident has precipitated a need for rehabilitation or additional health care support. The program strives to attain a balance between quality and cost effective care while maximizing the patient's quality of life.

Health Advisor - A

Support for healthy and at-risk individuals to help them stay healthy

- Health Assessments
- Health and Wellness Coaching
- Gaps in Care Coaching
- Treatment Decision Support
- Educate and Refer

Included

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

10 of 15

©Cigna 2023

Additional Information

Maximum Reimbursable Charge

The allowable covered expense for non-network services is based on the lesser of the health care professional's normal charge for a similar service or a percentage of a fee schedule (200%) developed by Cigna that is based on a methodology similar to one used by Medicare to determine the allowable fee for the same or similar service in a geographic area. In some cases, the Medicare based fee schedule will not be used and the maximum reimbursable charge for covered services is based on the lesser of the health care professional's normal charge for a similar service or a percentile (80th) of charges made by health care professionals of such service or supply in the geographic area where it is received. If sufficient charge data is unavailable in the database for that geographic area to determine the Maximum Reimbursable Charge, then data in the database for similar services may be used. Out-of-network services are subject to a Contract Year deductible and maximum reimbursable charge limitations.

Out-of-Network Emergency Services Charges

1. Emergency Services are covered at the In-Network cost-sharing level as required by applicable state or federal law if services are received from a non-participating (Out-of-Network) provider.
2. The allowable amount used to determine the Plan's benefit payment for covered Emergency Services rendered in an Out-of-Network Hospital, or by an Out-of-Network provider in an In-Network Hospital, is the amount agreed to by the Out-of-Network provider and Cigna, or as required by applicable state or federal law.

The member is responsible for applicable In-Network cost-sharing amounts (any deductible, copay or coinsurance). The member is not responsible for any charges that may be made in excess of the allowable amount. If the Out-of-Network provider bills you for an amount higher than the amount you owe as indicated on the Explanation of Benefits (EOB), contact Cigna Customer Service at the phone number on your ID card.

Medicare Coordination

In accordance with the Social Security Act of 1965, this plan will pay as the Secondary plan to Medicare Part A and B as follows:

- (a) a former Employee such as a retiree, a former Disabled Employee, a former Employee's Dependent, or an Employee's Domestic Partner who is also eligible for Medicare and whose insurance is continued for any reason as provided in this plan (including COBRA continuation);
- (b) an Employee, a former Employee, an Employee's Dependent, or former Employee's Dependent, who is eligible for Medicare due to End Stage Renal Disease after that person has been eligible for Medicare for 30 months.

When a person is eligible for Medicare A and B as described above, this plan will pay as the Secondary Plan to Medicare Part A and B **regardless if the person is actually enrolled in Medicare Part A and/or Part B and regardless if the person seeks care at a Medicare Provider or not for Medicare covered services.**

Multiple Surgical Reduction

Multiple surgeries performed during one operating session result in payment reduction of 50% to the surgery of lesser charge. The most expensive procedure is paid as any other surgery.

One Guide

Available by phone or through myCigna mobile application. One Guide helps you navigate the health care system and make the most of your health benefits and programs.

Pre-Certification - Continued Stay Review - Basic Care Low Management Inpatient - required for all inpatient admissions

In-Network: Coordinated by your physician

Out-of-Network: Customer is responsible for contacting Cigna Healthcare. Subject to penalty/reduction or denial for non-compliance.

- The lesser of 50% of covered expenses or \$500 penalty applied to hospital inpatient charges for failure to contact Cigna Healthcare to precertify admission.
- Benefits are denied for any admission reviewed by Cigna Healthcare and not certified.
- Benefits are denied for any additional days not certified by Cigna Healthcare.

Pre-Existing Condition Limitation (PCL) does not apply.

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

11 of 15

©Cigna 2023

Additional Information

Holistic health support for the following chronic health conditions:

- Heart Disease
- Coronary Artery Disease
- Angina
- Congestive Heart Failure
- Acute Myocardial Infarction
- Peripheral Arterial Disease
- Asthma
- Chronic Obstructive Pulmonary Disease (Emphysema and Chronic Bronchitis)
- Diabetes Type 1
- Diabetes Type 2
- Metabolic Syndrome/Weight Complications
- Osteoarthritis
- Low Back Pain
- Anxiety
- Bipolar Disorder
- Depression

Your Health First - 200

Individuals with one or more of the chronic conditions, identified on the right, may be eligible to receive the following type of support:

- Condition Management
- Medication adherence
- Risk factor management
- Lifestyle issues
- Health & Wellness issues
- Pre/post-admission
- Treatment decision support
- Gaps in care

Definitions

Coinsurance - After you've reached your deductible, you and your plan share some of your medical costs. The portion of covered expenses you are responsible for is called Coinsurance.

Copay - A flat fee you pay for certain covered services such as doctor's visits or prescriptions.

Deductible - A flat dollar amount you must pay out of your own pocket before your plan begins to pay for covered services.

Out-of-Pocket Maximum - Specific limits for the total amount you will pay out of your own pocket before your plan coinsurance percentage no longer applies. Once you meet these maximums, your plan then pays 100 percent of the "Maximum Reimbursable Charges" or negotiated fees for covered services.

Place of Service - Your plan pays based on where you receive services. For example, for hospital stays, your coverage is paid at the inpatient level.

Prescription Drug List - The list of prescription brand and generic drugs covered by your pharmacy plan.

Professional Services - Services performed by Surgeons, Assistant Surgeons, Hospital Based Physicians, Radiologists, Pathologists and Anesthesiologists

Transition of Care - Provides in-network health coverage to new customers when the customer's doctor is not part of the Cigna network and there are approved clinical reasons why the customer should continue to see the same doctor.

Exclusions

What's Not Covered (not all-inclusive):

Your plan provides for most medically necessary services. The complete list of exclusions is provided in your Certificate or Summary Plan Description. To the extent there may be differences, the terms of the Certificate or Summary Plan Description control. Examples of things your plan does not cover, unless required by law or covered under the pharmacy benefit, include (but aren't limited to):

- Care for health conditions that are required by state or local law to be treated in a public facility.
- Care required by state or federal law to be supplied by a public school system or school district.
- Care for military service disabilities treatable through governmental services if you are legally entitled to such treatment and facilities are reasonably available.

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

12 of 15

©Cigna 2023

Exclusions

- Treatment of an Injury or Sickness which is due to war, declared, or undeclared.
- Charges which you are not obligated to pay or for which you are not billed or for which you would not have been billed except that they were covered under this plan. For example, if Cigna determines that a provider or Pharmacy is or has waived, reduced, or forgiven any portion of its charges and/or any portion of Copayment, Deductible, and/or Coinsurance amount(s) you are required to pay for a Covered Expense (as shown on The Schedule) without Cigna's express consent, then Cigna in its sole discretion shall have the right to deny the payment of benefits in connection with the Covered Expense, or reduce the benefits in proportion to the amount of the Copayment, Deductible, and/or Coinsurance amounts waived, forgiven or reduced, regardless of whether the provider or Pharmacy represents that you remain responsible for any amounts that your plan does not cover. In the exercise of that discretion, Cigna shall have the right to require you to provide proof sufficient to Cigna that you have made your required cost share payment(s) prior to the payment of any benefits by Cigna. This exclusion includes, but is not limited to, charges of a non-Participating Provider who has agreed to charge you or charged you at an In-Network benefits level or some other benefits level not otherwise applicable to the services received.
- Charges arising out of or relating to any violation of a healthcare-related state or federal law or which themselves are a violation of a healthcare-related state or federal law.
- Assistance in the activities of daily living, including but not limited to eating, bathing, dressing or other Custodial Services or self-care activities, homemaker services and services primarily for rest, domiciliary or convalescent care.
- For or in connection with experimental, investigational or unproven services.
- Experimental, investigational and unproven services are medical, surgical, diagnostic, psychiatric, substance use disorder or other health care technologies, supplies, treatments, procedures, drug or Biologic therapies or devices that are determined by the utilization review Physician to be:
 - o not approved by the U.S. Food and Drug Administration (FDA) or other appropriate regulatory agency to be lawfully marketed;
 - o not demonstrated, through existing peer-reviewed, evidence-based, scientific literature to be safe and effective for treating or diagnosing the condition or Sickness for which its use is proposed;
 - o the subject of review or approval by an Institutional Review Board for the proposed use except as provided in the "Clinical Trials" sections of this plan; or
 - o the subject of an ongoing phase I, II or III clinical trial, except for routine patient care costs related to qualified clinical trials as provided in the "Clinical Trials" sections of this plan.

In determining whether any such technologies, supplies, treatments, drug or Biologic therapies or devices are experimental, investigational and/or unproven, the utilization review Physician may rely on the clinical coverage policies maintained by Cigna or the Review Organization. Clinical coverage policies may incorporate, without limitation and as applicable, criteria relating to U.S. Food and Drug Administration-approved labeling, the standard medical reference compendia and peer-reviewed, evidence-based scientific literature or guidelines.

- Cosmetic surgery and therapies. Cosmetic surgery or therapy is defined as surgery or therapy performed to improve or alter appearance or self-esteem.
- The following services are excluded from coverage regardless of clinical indications: abdominoplasty; panniculectomy; rhinoplasty; redundant skin surgery; removal of skin tags; acupuncture; craniosacral/cranial therapy; dance therapy; movement therapy; applied kinesiology; rolfing; prolotherapy; and extracorporeal shock wave lithotripsy (ESWL) for musculoskeletal and orthopedic conditions.
- Dental treatment of the teeth, gums or structures directly supporting the teeth, including dental X-rays, examinations, repairs, orthodontics, periodontics, casts, splints and services for dental malocclusion, for any condition. Charges made for services or supplies provided for or in connection with an accidental Injury to teeth are covered provided a continuous course of dental treatment is started within six months of an accident.
- Medical and surgical services, initial and repeat, intended for the treatment or control of obesity, except for treatment of clinically severe (morbid) obesity as shown in Covered Expenses, including: medical and surgical services to alter appearance or physical changes that are the result of any surgery performed for the management of obesity or clinically severe (morbid) obesity; and weight loss programs or treatments, whether prescribed or recommended by a

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

13 of 15

©Cigna 2023

Exclusions

Physician or under medical supervision.

- Unless otherwise covered in this plan, for reports, evaluations, physical examinations, or hospitalization not required for health reasons including, but not limited to, employment, insurance or government licenses, and court-ordered, forensic or custodial evaluations.
- Court-ordered treatment or hospitalization, unless such treatment is prescribed by a Physician and listed as covered in this plan.
- Any medications, drugs, services or supplies for the treatment of male or female sexual dysfunction such as, but not limited to, treatment of erectile dysfunction (including penile implants), anorgasm, and premature ejaculation.
- Medical and Hospital care and costs for the infant child of a Dependent, unless this infant child is otherwise eligible under this plan.
- Non-medical counseling and/or ancillary services including, but not limited to, Custodial Services, educational services, vocational counseling, training and rehabilitation services, behavioral training, biofeedback, neurofeedback, hypnosis, sleep therapy, return to work services, work hardening programs and driver safety courses.
- Therapy or treatment intended primarily to improve or maintain general physical condition or for the purpose of enhancing job, school, athletic or recreational performance, including but not limited to routine, long term, or maintenance care which is provided after the resolution of the acute medical problem and when significant therapeutic improvement is not expected.
- Consumable medical supplies other than ostomy supplies and urinary catheters. Excluded supplies include, but are not limited to bandages and other disposable medical supplies, skin preparations and test strips, except as specified in the "Home Health Services" or "Breast Reconstruction and Breast Prostheses" sections of this plan.
- Private Hospital rooms and/or private duty nursing except as provided under the Home Health Services provision.
- Personal or comfort items such as personal care kits provided on admission to a Hospital, television, telephone, newborn infant photographs, complimentary meals, birth announcements, and other articles which are not for the specific treatment of an Injury or Sickness.
- Artificial aids including, but not limited to, corrective orthopedic shoes, arch supports, elastic stockings, garter belts, corsets and dentures.
- Aids or devices that assist with non-verbal communications, including but not limited to communication boards, pre-recorded speech devices, laptop computers, desktop computers, Personal Digital Assistants (PDAs), Braille typewriters, visual alert systems for the deaf and memory books.
- Eyeglass lenses and frames and contact lenses (except for the first pair of contact lenses for treatment of keratoconus or post cataract surgery).
- Routine refractions, eye exercises and surgical treatment for the correction of a refractive error, including radial keratotomy.
- Treatment by acupuncture.
- All non-injectable prescription drugs, unless Physician administration or oversight is required, injectable prescription drugs to the extent they do not require Physician supervision and are typically considered self-administered drugs, non-prescription drugs, and investigational and experimental drugs, except as provided in this plan.
- Routine foot care, including the paring and removing of corns and calluses or trimming of nails. However, services associated with foot care for diabetes and peripheral vascular disease are covered when Medically Necessary.
- Membership costs or fees associated with health clubs, weight loss programs and smoking cessation programs.
- Genetic screening or pre-implantations genetic screening. General population-based genetic screening is a testing method performed in the absence of any symptoms or any significant, proven risk factors for genetically linked inheritable disease.
- Dental implants for any condition.
- Fees associated with the collection or donation of blood or blood products, except for autologous donation in anticipation of scheduled services where in the utilization review Physician's opinion the likelihood of excess blood loss is such that transfusion is an expected adjunct to surgery.
- Blood administration for the purpose of general improvement in physical condition.
- Cost of biologicals that are immunizations or medications for the purpose of travel, or to protect against occupational hazards and risks.
- Cosmetics, dietary supplements and health and beauty aids.
- All nutritional supplements and formulae except for infant formula needed for the treatment of inborn errors of metabolism.

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

14 of 15

©Cigna 2023

Exclusions

- For or in connection with an Injury or Sickness arising out of, or in the course of, any employment for wage or profit.
- Charges for the delivery of medical and health-related services via telecommunications technologies, including telephone and internet, unless provided as specifically described under Covered Expenses.
- Massage therapy.

These are only the highlights

This summary outlines the highlights of your plan. For a complete list of both covered and not covered services, including benefits required by your state, see your employer's insurance certificate, service agreement or summary plan description -- the official plan documents. If there are any differences between this summary and the plan documents, the information in the plan documents takes precedence.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Evernorth Care Solutions, Inc., Evernorth Behavioral Health, Inc., Cigna Health Management, Inc., and HMO or service company subsidiaries of Cigna Health Corporation. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

EHB State: CT

07/01/2023

ASO

Choice Fund Health Savings Account (HSA) Open Access Plus - HSA1 - Union

Proclaim - 16624940 - V 27 - 05/17/23 02:32 PM ET

15 of 15

©Cigna 2023

DISCRIMINATION IS AGAINST THE LAW

Medical coverage

Cigna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Cigna does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Cigna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact customer service at the toll-free number shown on your ID card, and ask a Customer Service Associate for assistance.

If you believe that Cigna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file

a grievance by sending an email to ACAGrievance@Cigna.com or by writing to the following address:

Cigna
Nondiscrimination Complaint Coordinator
PO Box 188016
Chattanooga, TN 37422

If you need assistance filing a written grievance, please call the number on the back of your ID card or send an email to ACAGrievance@Cigna.com. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, DC 20201
1.800.368.1019, 800.537.7697 (TDD)

Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.



All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Evernorth Care Solutions, Inc., Evernorth Behavioral Health, Inc., Cigna Health Management, Inc., and HMO or service company subsidiaries of Cigna Health Corporation and Cigna Dental Health, Inc. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. ATTENTION: If you speak languages other than English, language assistance services, free of charge are available to you. For current Cigna customers, call the number on the back of your ID card. Otherwise, call 1.800.244.6224 (TTY: Dial 711). ATENCIÓN: Si usted habla un idioma que no sea inglés, tiene a su disposición servicios gratuitos de asistencia lingüística. Si es un cliente actual de Cigna, llame al número que figura en el reverso de su tarjeta de identificación. Si no lo es, llame al 1.800.244.6224 (los usuarios de TTY deben llamar al 711).

Proficiency of Language Assistance Services

English – ATTENTION: Language assistance services, free of charge, are available to you. For current Cigna customers, call the number on the back of your ID card. Otherwise, call 1.800.244.6224 (TTY: Dial 711).

Spanish – ATENCIÓN: Hay servicios de asistencia de idiomas, sin cargo, a su disposición. Si es un cliente actual de Cigna, llame al número que figura en el reverso de su tarjeta de identificación. Si no lo es, llame al 1.800.244.6224 (los usuarios de TTY deben llamar al 711).

Chinese – 注意：我們可為您免費提供語言協助服務。對於 Cigna 的現有客戶，請致電您的 ID 卡背面的號碼。其他客戶請致電 1.800.244.6224（聽障專線：請撥 711）。

Vietnamese – XIN LƯU Ý: Quý vị được cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Dành cho khách hàng hiện tại của Cigna, vui lòng gọi số ở mặt sau thẻ Hội viên. Các trường hợp khác xin gọi số 1.800.244.6224 (TTY: Quay số 711).

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna 가입자님들께서는 ID 카드 뒷면에 있는 전화번호로 연락해주십시오. 기타 다른 경우에는 1.800.244.6224 (TTY: 다이얼 711)번으로 전화해주십시오.

Tagalog – PAUNAWA: Makakakuha ka ng mga serbisyo sa tulong sa wika nang libre. Para sa mga kasalukuyang customer ng Cigna, tawagan ang numero sa likuran ng iyong ID card. O kaya, tumawag sa 1.800.244.6224 (TTY: I-dial ang 711).

Russian – ВНИМАНИЕ: вам могут предоставить бесплатные услуги перевода. Если вы уже участвуете в плане Cigna, позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки участника плана. Если вы не являетесь участником одного из наших планов, позвоните по номеру 1.800.244.6224 (TTY: 711).

Arabic – برجاء الانتباه خدمات الترجمة المجانية متاحة لكم. لعملاء Cigna الحاليين برجاء الاتصال بالرقم المذكور على ظهر بطاقةكم الشخصية. أو اتصل بـ 1.800.244.6224 (TTY: اتصل بـ 711).

French Creole – ATANSYON: Gen sèvis èd nan lang ki disponib gratis pou ou. Pou kliyan Cigna yo, rele nimewo ki deyè kat ID ou. Sinon, rele nimewo 1.800.244.6224 (TTY: Rele 711).

French – ATTENTION: Des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes un client actuel de Cigna, veuillez appeler le numéro indiqué au verso de votre carte d'identité. Sinon, veuillez appeler le numéro 1.800.244.6224 (ATS : composez le numéro 711).

Portuguese – ATENÇÃO: Tem ao seu dispor serviços de assistência linguística, totalmente gratuitos. Para clientes Cigna atuais, ligue para o número que se encontra no verso do seu cartão de identificação. Caso contrário, ligue para 1.800.244.6224 (Dispositivos TTY: marque 711).

Polish – UWAGA: w celu skorzystania z dostępnej, bezpłatnej pomocy językowej, obecni klienci firmy Cigna mogą dzwonić pod numer podany na odwrocie karty identyfikacyjnej. Wszystkie inne osoby prosimy o skorzystanie z numeru 1 800 244 6224 (TTY: wybierz 711).

Japanese – 注意事項: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。現在のCignaのお客様は、IDカード裏面の電話番号まで、お電話にてご連絡ください。その他の方は、1.800.244.6224 (TTY: 711) まで、お電話にてご連絡ください。

Italian – ATTENZIONE: Sono disponibili servizi di assistenza linguistica gratuiti. Per i clienti Cigna attuali, chiamare il numero sul retro della tessera di identificazione. In caso contrario, chiamare il numero 1.800.244.6224 (utenti TTY: chiamare il numero 711).

German – ACHTUNG: Die Leistungen der Sprachunterstützung stehen Ihnen kostenlos zur Verfügung. Wenn Sie gegenwärtiger Cigna-Kunde sind, rufen Sie bitte die Nummer auf der Rückseite Ihrer Krankenversicherungskarte an. Andernfalls rufen Sie 1.800.244.6224 an (TTY: Wählen Sie 711).

Persian (Farsi) – توجه: خدمات کمک زبانی، به صورت رایگان در شما ارائه می‌شود. برای مشتریان فعلی Cigna، لطفاً با شماره‌ای که در پشت کارت شناسایی شماست تماس بگیرید. در غیر اینصورت با شماره 1.800.244.6224 تماس بگیرید (شماره تلفن ویژه ناشنوا: شماره 711 را شماره بگیرید). (شماره تلفن 711)

**Full Dental
Vernon Town and Public Schools
Effective Date: 2023**

Summary of Benefits

Annual Maximum	Unlimited	
Individual/Family Deductible	N/A	
Covered Services	(In-network) We will pay:	(Out-of-network) We will pay:
Diagnostic and preventive	100%	100%
<ul style="list-style-type: none"> Oral evaluations Prophylaxis (cleaning) Fluoride treatments X-rays Amalgam and composite restorations (fillings) Stainless steel crowns Pulp capping – direct Root canal therapy Periodontal maintenance Simple extractions Denture repairs Denture relines 		
Rider A	Not Covered	Not Covered
<ul style="list-style-type: none"> Inlays Onlays Crowns Surgical extractions 		
Rider B	Not Covered	Not Covered
<ul style="list-style-type: none"> Removable complete Partial dentures Fixed bridges Bridge repairs 		
Rider C	Not Covered	Not Covered
<ul style="list-style-type: none"> Scaling and root planing Gingivectomy Osseous surgery Full mouth debridement 		
Rider D	Not Covered	Not Covered
<ul style="list-style-type: none"> Covered services include exams, diagnostic records, tooth guidance, repositioning (straightening) of the teeth 		
Orthodontic Lifetime Maximum	N/A	



FULL DENTAL PLAN

The Full Dental Plan covers diagnostic, preventive and restorative procedures necessary for adequate dental health.

COVERED SERVICES INCLUDE:

- ☐ Oral Examinations
- ☐ Periapical and bitewing x-rays
- ☐ Topical fluoride applications for members under age 19
- ☐ Prophylaxis, including cleaning, scaling and polishing
- ☐ Relining of dentures
- ☐ Repairs of broken removable dentures
- ☐ Palliative emergency treatment
- ☐ Routine fillings consisting of silver amalgam and tooth color materials; including stainless steel crowns (primary teeth)*
- ☐ Simple extractions **
- ☐ Endodontics-including pulpotomy, direct pulp capping and root canal therapy (excluding restoration)

* Payment for an inlay, onlay or crown will equal the amount payable for a three-surface amalgam filling when the member is not covered by Dental Amendatory Rider A.

** Payment for a surgical extraction or a hemisection with root removal will equal the amount payable for a simple extraction when the member is not covered by the Dental Amendatory Rider A.

ACCESSING BENEFITS:

Participating Dentists Benefits

When a member receives care from one of over 1,800 Participating Dentists, he or she simply presents his or her identification card showing dental coverage. The dentist bills us directly for all covered services.

For dental care provided by a Participating Dentist, we will pay the lesser of the dentist's usual charge or the Usual, Customary and Reasonable Charge as determined by us. The dentist accepts our reimbursement as full payment and may not bill the member for any additional charges.

Non-Participating Dentists Benefits

For covered dental services provided by a Non-Participating Dentist, in or out of Connecticut, we pay the lesser of the dentist's charge or the applicable allowance for the procedure, as determined by us. The member is responsible for any difference between the amount paid by us and the fee charged by the dentist.

This does not constitute your health plan or insurance policy. It is only a general description for the purposes of this Request for Proposal, of the Anthem Blue Cross Blue Shield Full Dental Plan. Refer to your Master Group Policy or Description of Benefits, on file with your employer, for a complete listing of benefits, maximums, exclusions and limitations.



Dental Amendatory Rider A Additional Basic Benefits

In addition to the services provided under your dental program, the following additional basic benefits are provided:

- ◆ Inlays (not part of bridge)
- ◆ Onlays (not part of bridge)
- ◆ Crown (not part of bridge)
- ◆ Space Maintainers
- ◆ Oral surgery consisting of fracture and dislocation treatment, diagnosis and treatment of cyst and abscess, surgical extractions and impaction
- ◆ Apicoectomy

The dental services listed above are subject to the following qualifications:

We will pay for individual crowns, inlays and onlays only when amalgam or synthetic fillings would not be satisfactory for the retention of the tooth, as determined by us.

We will not pay for a replacement provided less than five (5) years following a placement or replacement which was covered under this Rider. We will not pay for individual crowns, inlays or onlays placed to alter vertical dimension, for the purpose of precision attachment of dentures, or when they are splinted together for any reason.

ACCESSING BENEFITS:

Participating Dentists Benefits

Anthem Blue Cross and Blue Shield will pay the lesser of 50% of the dentist's usual charge or 50% percent of the Usual, Customary and Reasonable Charge, as determined by us, for the dental services described in this Rider. Dentists who participate in our dental programs agree to accept our allowance as full payment and may not bill the member for any additional charges except for the remaining coinsurance balance.

Non-Participating Dentists Benefits

In the event these services are rendered by a non-participating dentist, we will pay to the member the lesser of 50% of the dentist's charge or 50% of the applicable allowance for the procedure as determined by us. The member is responsible for any difference between the amount paid by us and the fee charged by the dentist.

This does not constitute your health plan or insurance policy. It is only a general description for the purposes of this Request for Proposal, of the Anthem Blue Cross and Blue Shield Dental Amendatory Rider A. Refer to your Master Group Policy or Description of Benefits, on file with your employer, for a complete listing of benefits, maximums, exclusions and limitations.



Dental Amendatory Rider B Prosthodontics

The following prosthetic services are provided under Dental Amendatory Rider B:

- ◆ Dentures, full and partial
- ◆ Bridges, fixed and removable
- ◆ Addition of teeth to partial dentures to replace extracted teeth

The dental services listed above are subject to the following qualifications:

Anthem Blue Cross and Blue Shield will pay for standard procedures for prosthetic services as determined by us. For fixed bridges, we will pay for the replacement of missing teeth and for one tooth on either side or two teeth on one side of the replacement. We will not pay for a denture or bridge replacement which is provided less than five years following a placement or replacement which was covered under the contract. We also will not pay for crowns splinted together for any reason.

ACCESSING BENEFITS:

Participating Dentists Benefits

Anthem Blue Cross and Blue Shield will pay the lesser of 50% of the dentist's usual charge or 50% of the Usual, Customary and Reasonable Charge, as determined by us, for the dental services described in this Rider. Dentists who participate in our dental programs agree to accept our allowance as full payment and may not bill the member for any additional charges except for the remaining coinsurance balance.

Non-Participating Dentists Benefits

In the event these services are rendered by a non-participating dentist, we will pay to the member the lesser of 50% of the dentist's charge or 50% of the applicable allowance for the procedure as determined by us. The member is responsible for any difference between the amount paid by us and the fee charged by the dentist.

This does not constitute your health plan or insurance policy. It is only a general description for the purposes of this Request for Proposal, of the Anthem Blue Cross and Blue Shield Dental Amendatory Rider B. Refer to your Master Group Policy or Description of Benefits, on file with your employer, for a complete listing of benefits, maximums, exclusions and limitations.



Dental Amendatory Rider C Periodontics

Periodontal services consisting of:

- ◆ Gingival curettage
- ◆ Gingivectomy and gingivoplasty
- ◆ Osseous surgery, including flap entry and closure
- ◆ Mucogingivoplastic surgery
- ◆ Management of acute infection and oral lesions

The maximum benefit we will provide for periodontal services per person per year is **\$500.00**

ACCESSING BENEFITS:

Participating Dentists Benefits

Anthem Blue Cross and Blue Shield will pay the lesser of 50% of the dentist's usual charge or 50% of the Usual, Customary and Reasonable Charge, as determined by us, for the dental services described in this Rider. Dentists who participate in our dental programs agree to accept our allowance as full payment and may not bill the member for any additional charges except for the remaining coinsurance balance.

Non-Participating Dentists Benefits

In the event these services are rendered by a non-participating dentist, we will pay to the member the lesser of 50% of the dentist's charge or 50% of the applicable allowance for the procedure as determined by us. The member is responsible for any difference between the amount paid by us and the fee charged by the dentist.

This does not constitute your health plan or insurance policy. It is only a general description for the purposes of this Request for Proposal, of the Anthem Blue Cross and Blue Shield Dental Amendatory Rider C. Refer to your Master Group Policy or Description of Benefits, on file with your employer, for a complete listing of benefits, maximums, exclusions and limitations



Dental Amendatory Rider D Orthodontics

The following orthodontic services are provided:

Handicapping malocclusion for a member under age 19, consisting of the installation of orthodontic appliances and orthodontic treatments concerned with the reduction or elimination of an existing malocclusion through the correction of malposed teeth.

ACCESSING BENEFITS:

Participating Dentists Benefits

Anthem Blue Cross and Blue Shield will pay the lesser of 60% of the dentist's usual charge or 60% of the Usual, Customary and Reasonable Charge, as determined by us, for the dental services described in this Rider. Dentists who participate in our dental programs agree to accept our allowance as full payment and may not bill the member for any additional charges except for the remaining coinsurance.

Non-Participating Dentists Benefits

In the event these services are rendered by a non-participating dentist, we will pay to the member the lesser of 60% of the dentist's charge or 60% of the applicable allowance for the procedure as determined by us. The member is responsible for any difference between the amount paid by us and the fee charged by the dentist.

Maximum- \$1,000 per person per lifetime

This does not constitute your health plan or insurance policy. It is only a general description for the purposes of this Request for Proposal, of the Anthem Blue Cross and Blue Shield Dental Amendatory Rider D. Refer to your Master Group Policy or Description of Benefits, on file with your employer, for a complete listing of benefits, maximums, exclusions and limitations

APPENDIX C

(BLUECARE HEALTH PLAN DELETED)

PENSION CALCULATION

YEARS OF SERVICE AS OF 6/30/12	PERCENTAGE OF ACCRUED SICK TIME FACTORED INTO PENSION CALCULATION
0-1	.90
1-2	.90
2-3	.90
3-4	.90
4-5	.90
5-6	.90
6-7	.90
7-8	.90
8-9	.90
9-10	.90
10-11	.90
11-12	.91
12-13	.92
13-14	.93
14-15	.94
15-16	.95
16-17	.96
17-18	.97
18-19	.98
19-20	.99
20+	100

APPENDIX D

Definitions: Extra Duty - means police duty for which the Town of Vernon is reimbursed by another person, agency or organization. The terms "extra work", "extra police duty", "private duty", and outside work shall be synonymous.

Contractor - the person, agency or organization outside the Police Department seeking to hire the services of a Police Officer for private police duty.

PROCEDURE

A. Routine

1. Requests for Extra Duty will be directed to the Records Division during normal business hours.
2. The receiving party will provide all pertinent information on the Extra Duty form. Each officer requested will constitute a new job and require an Extra Duty form. Each new job will be assigned a job number, which will also be noted on the extra job form.
3. The Extra Duty form, with time and date of posting noted, will be posted on the bulletin board. Records will maintain a duplicate copy of each Extra Duty form.
4. There will be one Extra Duty list with no shift preferences noted and all Extra Duty jobs will be filled from this list in numerical order, by job number.
5. The rotating Extra Duty roster maintained by the police department will be used to assign officers who indicate interest in the job. Any eligible officer on the Extra Duty list can show interest in the job by signing the job posting, regardless of that Officer's duty schedule. It then becomes that Officer's responsibility to get any needed time

off to work the extra duty using vacation time, earned time, exchange time or a regular day off.

6. Any eligible officer who signs an Extra Duty job posting may cross his name off the job posting prior to the end of the 48-hour sign up period if he no longer wishes to be considered for the Extra duty job. This cross off must be witnessed and initialed by a supervisor.
7. Officers electing to work Extra Jobs are responsible for working that assignment. Officers may split the job with another officer, however, the initial officer is responsible for at least four (4) hours. There will be no swapping or trading of jobs. In the event a job exceeds the scheduled hours and a conflict occurs, the extension may necessitate a new job through the Contractor.
8. At the conclusion of the 48-hour sign up period, the Extra Duty job will be filled with the officer at the top of the list at that time who has shown interest in the job by signing the extra duty job posting slip. Officers who have not shown interest in the job will also be crossed off the list until the assigned officer is reached. Once the extra duty job is assigned, it can only be given up for one of the following reasons; employee is legitimately sick, death in family, ordered in to work during the extra duty job hours (not accepting department overtime in its place) or other legitimate emergency, possibly requiring documentation.
9. Should an eligible officer who has been assigned an Extra Duty job want to give up the job without any of the above listed conditions, he will suffer the penalty of his next three (3) extra duty job List slots being crossed off (lose their next three (3) turns). In the event this triggers an emergency fill, see procedure below.
10. Should an eligible officer wish to dispute the penalty invoked by the supervisor for giving an extra job under the conditions listed in paragraph 7, the eligible officer can appeal to the Union Executive Board with his documentation. The decision of the Union Executive Board is final, and not subject to the grievance procedure.
11. Upon completion of the Extra Duty job, officers will complete a Daily Report time card reflecting the job number, contractor's name, location and hours worked. The time card and extra duty form will be submitted to Payroll.

B. Emergency Fill

1. In the event a job request is received requiring the services of an officer within forty-eight (48) hours of the start of a job, the Shift Commander shall fill the job by calling any eligible officer from the Extra Duty list.
2. Emergency fill jobs will also be given a sequential job number. The officer who takes an emergency job will be documented in the private duty overtime book. Those Officers who were not contacted will not lose a turn in the overtime rotation.

C. Uniform

1. Officers on extra duty shall wear their regular duty uniforms, full duty belt and portable radio unless the nature of the assignment requires civilian attire.
2. Officers on routine traffic assignment will wear a traffic safety vest, orange reflective jacket or orange raincoat at all times. In lieu of normal duty hat, officers may wear an approved baseball style cap.

D. Police Vehicles

1. Subject to approval of the Chief of Police or his designee, a police department vehicle may be used in connection with Extra Duty as required by the nature of the assignment (i.e., hazardous night time traffic duty). The cost of the marked unit will be borne by the contractor at a rate established by the Town of Vernon.
2. Extra Duty assignment billed to a Town of Vernon department will not be billed for cruisers.

E. Arrests and Complaints

1. In the event that an officer working Extra Duty observes criminal activity or traffic violations, the following procedures will apply:
 - a. Traffic Violations
 - i. Officers on Extra Duty may issue infractions or summonses as appropriate.
 - b. Custodial Arrests

- i. Officers on Extra Duty shall make custodial arrests as necessary. Regular duty personnel, who will supplement the case report, will complete prisoner transport and booking process. The arresting officer will complete the arrest report and conduct necessary follow up investigation after completion of the Extra Duty assignment.

F. Conduct

1. As required by Departmental Rules and Regulations, officers on Extra Duty will report to the designated place at the time they are required to arrive for duty. Officers will not leave their post until completion of the Extra Duty job or relieved by Contractor, his agent, or relief officer.
2. Officers will notify Communications of the location and starting time of an Extra Job via radio, unless disclosure of this information is inappropriate due to the nature of the assignment, in which case said notification will be made in person or by phone. Officers will notify Communications via radio at the completion of the job.
3. No officer shall be excused from his regular tour of duty to accept Extra Duty nor report for regular duty late due to an Extra Duty assignment unless time off had been previously approved.
4. It shall be the duty of the Patrol Shift Commander on duty to notify the Chief and the Extra Duty Officer in writing of the failure of any officer to report for an Extra Duty assignment.

G. Supervision

1. Officers on Extra assignment will be under the direct supervision of the Patrol Sergeant and/or Commander on duty at the time.

Welcome to your Blue View Vision plan!

You have many choices when it comes to using your benefits. As a Blue View Vision plan member, you have access to one of the nation's largest vision networks. You may choose from many private practice doctors, local optical stores, and national retail stores including LensCrafters®, Target Optical®, and most Pearle Vision® locations. You may also use your in-network benefits to order eyewear online at Glasses.com and ContactsDirect.com. To locate a participating network eye care doctor or location, log in at anthem.com, or from the home page menu under Care, select **Find a Doctor**. You may also call member services for assistance at 1-866-723-0515.

Out-of-Network – If you choose to, you may instead receive covered benefits outside of the Blue View Vision network. Just pay in full at the time of service, obtain an itemized receipt, and file a claim for reimbursement up to your maximum out-of-network allowance.

YOUR BLUE VIEW VISION PLAN BENEFITS	IN-NETWORK	OUT-OF-NETWORK	FREQUENCY
Eyeglass Frames			
One pair of eyeglass frames	\$130 Allowance, then 20% off any remaining balance	Reimbursed Up To \$64	Once every other calendar year
Eyeglass Lenses (instead of contact lenses)			
One pair of standard plastic prescription lenses			
<ul style="list-style-type: none"> Single vision lenses Bifocal lenses Trifocal lenses 	\$10 Copay \$10 Copay \$10 Copay	Reimbursed Up To \$36 Reimbursed Up To \$54 Reimbursed Up To \$69	Once every calendar year
Eyeglass Lens Enhancements			
<i>When obtaining covered eyewear from a Blue View Vision provider, you may choose to add any of the following lens enhancements at no extra cost</i>			
<ul style="list-style-type: none"> Transitions Lenses (for a child under age 19) Standard polycarbonate (for a child under age 19) Factory Scratch Coating 	\$0 Copay \$0 Copay \$0 Copay	No allowance when obtained out-of-network	Same as covered eyeglass lenses
Contact Lenses (instead of eyeglass lenses)			
<i>Contact lens allowance will only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases in the same benefit period, nor can any unused amount be carried over to the following benefit period.</i>			
<ul style="list-style-type: none"> Elective conventional (non-disposable) OR Elective disposable OR Non-elective (medically necessary) 	\$130 Allowance, then 15% off any remaining balance \$130 Allowance (no additional discount) Covered in full	Reimbursed Up To \$105 Reimbursed Up To \$105 Reimbursed Up To \$210	Once every calendar year

This is a primary vision plan with benefits intended to cover only corrective eyewear. If you need medical treatment for your eyes, visit a participating eye care doctor from your medical network. Benefits are payable only for expenses incurred while the group and insured person's coverage is in force. This information is intended to be a brief outline of coverage. All terms and conditions of coverage, including benefits and exclusions, are contained in the member's policy, which shall control in the event of a conflict with this overview. This benefit overview is only one piece of your entire enrollment package.

EXCLUSIONS & LIMITATIONS (not a comprehensive list – please refer to the member Certificate of Coverage for a complete list)

Combined Offers. Not to be combined with any offer, coupon, or in-store advertisement.

Excess Amounts. Amounts in excess of covered vision expense.

Sunglasses. Plano sunglasses and accompanying frames.

Safety Glasses. Safety glasses and accompanying frames.

Not Specifically Listed. Services not specifically listed in this plan as covered services.

Lost or Broken Lenses or Frames. Any lost or broken lenses or frames are not eligible for replacement unless the insured person has reached his or her normal service interval as indicated in the plan design.

Non-Prescription Lenses. Any non-prescription lenses, eyeglasses or contacts. Plano lenses or lenses that have no refractive power.

Orthoptics. Orthoptics or vision training and any associated supplemental testing

APPENDIX F

OPTIONAL SAVINGS AVAILABLE FROM BLUE VIEW VISION IN-NETWORK PROVIDERS ONLY		In-Network Member Cost (after any applicable copay)
Eyeglass lens upgrades When obtaining eyewear from a Blue View Vision provider, you may choose to upgrade your new eyeglass lenses at a discounted cost. Eyeglass lens copayment applies.	<ul style="list-style-type: none"> Transitions lenses (Adults) 	\$75
	<ul style="list-style-type: none"> Standard Polycarbonate (Adults) 	\$40
	<ul style="list-style-type: none"> Tint (Solid and Gradient) 	\$15
	<ul style="list-style-type: none"> UV Coating 	\$15
	<ul style="list-style-type: none"> Progressive Lenses¹ <ul style="list-style-type: none"> Standard 	\$65
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> Premium Tier 1 	\$85
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> Premium Tier 2 	\$95
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> Premium Tier 3 	\$110
	<ul style="list-style-type: none"> Anti-Reflective Coating² <ul style="list-style-type: none"> Standard 	\$45
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> Premium Tier 1 	\$57
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> Premium Tier 2 	\$68
	<ul style="list-style-type: none"> Other Add-ons 	20% off retail price
Additional Pairs of Eyeglasses Anytime from any Blue View Vision network provider	<ul style="list-style-type: none"> Complete Pair 	40% off retail price
	<ul style="list-style-type: none"> Eyeglass materials purchased separately 	20% off retail price
Eyewear Accessories	Items such as non-prescription sunglasses, lens cleaning supplies, contact lens solutions, eyeglass cases, etc.	20% off retail
Conventional Contact Lenses (non-disposable type)	<ul style="list-style-type: none"> Discount applies to materials only 	15% off retail price

¹ Please ask your provider for his/her recommendation as well as the available progressive brands by tier.

² Please ask your provider for his/her recommendation as well as the available anti-reflective brands by tier.

Cannot be combined with any other offer. Discounts are subject to change without notice. Discounts are not covered benefits under your vision plan and will not be listed in your certificate of coverage. Discounts will be offered from in-network providers except where State law prevents discounting of products and services that are not covered benefits under this plan. Discounts on frames will not apply if the manufacturer has imposed a no discount on sales at retail and independent provider locations.

Some of our in-network providers include:



LENSCRAFTERS



Online stores:

GLASSES

contactsdirect

1800contacts

LENSCRAFTERS



OPTICAL

Ray-Ban

glasses.com

contactsdirect.com

1800contacts.com

lenscrafters.com

targetoptical.com

ray-ban.com/insurance

ADDITIONAL SAVINGS AVAILABLE THROUGH ANTHEM'S SPECIAL OFFERS PROGRAM

Savings on items like additional eyewear after your benefits have been used, non-prescription sunglasses, hearing aids and even LASIK laser vision correction surgery are available through a variety of vendors. Just log in at anthem.com, select discounts, then Vision, Hearing & Dental.

* Discounts cannot be used in conjunction with your covered benefits.

OUT-OF-NETWORK

If you choose to receive covered services or purchase covered eyewear from an out-of-network provider, network discounts will not apply and you will be responsible for payment of services and/or eyewear materials at the time of service. Please complete an out-of-network claim form and submit it along with your itemized receipt to the fax number, email address, or mailing address below. To download a claim form, log in at anthem.com, or from the home page menu under Support select Forms, click Change State to choose your state, and then scroll down to Claims and select the Blue View Vision Out-of-Network Claim Form. You may instead call member services at 1-866-723-0515 to request a claim form.

TO FAX: 866-293-7373
TO EMAIL: oonclaims@eyewearspecialoffers.com
TO MAIL: Blue View Vision
Attn: OON Claims
P.O. Box 8504
Mason, OH 45040-7111

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

Get Help in Your Language

Curious to know what all this says? We would be too. Here's the English version:

You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

Spanish

Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY/TDD: 711)

Albanian

Keni të drejtën të merrni falas ndihmë dhe informacion në gjuhën tuaj. Për ndihmë, telefononi numrin e shërbimeve për anëtarët, të shënuar në kartën tuaj ID. (TTY/TDD: 711)

Arabic

بحق لك الحصول على هذه المعلومات والمساعدة بلغتك مجاناً. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة. (TTY/TDD: 711)

Chinese

您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。(TTY/TDD: 711)

French

Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY/TDD: 711)

Greek

Έχετε το δικαίωμα να λάβετε αυτές τις πληροφορίες και αυτήν τη βοήθεια στη γλώσσα σας δωρεάν. Καλέστε τον αριθμό του Τμήματος Υπηρεσιών Μέλους (Member Services) που αναγράφεται στην ταυτότητά σας (ID card) για βοήθεια. (TTY/TDD: 711)

Haitian

Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY/TDD: 711)

Hindi

आपके पास यह जानकारी और मदद अपनी भाषा में मुफ्त में प्राप्त करने का अधिकार है। मदद के लिए अपने ID कार्ड पर सदस्य सेवाएँ नंबर पर कॉल करें। (TTY/TDD: 711)

Italian

Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiami il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY/TDD: 711)

Korean

귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY/TDD: 711)

Polish

Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY/TDD: 711)

Portuguese-Europe

Tem o direito de receber gratuitamente estas informações e ajuda no seu idioma. Ligue para o número dos Serviços para Membros indicado no seu cartão de identificação para obter ajuda. (TTY/TDD: 711)

Russian

Вы имеете право получить данную информацию и помощь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY/TDD: 711)

Tagalog

May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY/TDD: 711)

Vietnamese

Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY/TDD: 711)

It's important we treat you fairly

That's why we follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TDD: 1-800-537-7697) or online at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

PHYSICIAN'S CERTIFICATION

I, _____ have examined
(Physician)

_____ on _____ in accordance with the
(Employee) (Date)

physical examination schedule (Appendix A) attached to the collective bargaining agreement between the Town of Vernon and the Vernon Police Association. I certify that where correctable conditions exist, said conditions are being corrected; and where risk factors that predispose to heart and/or lung disease are found, a plan for reducing or eliminating these factors has been established.

In addition, I have examined the employee's position description and have determined that the employee is medically able to perform the duties of the position.

Signature of Physician

APPENDIX G - WAGES

7/1/2022

POLICE OFFICER HIGH SCHOOL

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

STEP/LEVEL	HOURLY RATE	DAILY RATE	PERIOD SALARY	ANNUAL SALARY
0	31.757	254.056	1270.28	66,054.56
1	34.6342	277.074	1385.37	72,039.24
2	37.5838	300.67	1503.35	78,174.20
3	40.6784	325.428	1627.14	84,611.28
4	41.8873	335.098	1675.49	87,125.48

POLICE OFFICER ASSOCIATES

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	32.5186	260.148	1300.74	67,638.48
1	35.5287	284.23	1421.15	73,899.80
2	38.4783	307.826	1539.13	80,034.76
3	41.718	333.744	1668.72	86,773.44
4	42.9271	343.416	1717.08	89,288.16

POLICE OFFICER BACHELOR

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	33.0385	264.308	1321.54	68,720.08
1	36.0727	288.582	1442.91	75,031.32
2	39.1068	312.854	1564.27	81,342.04
3	42.2859	338.288	1691.44	87,954.88
4	43.5679	348.544	1742.72	90,621.44

LIEUTENANT HS-BACH

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	50.9174	407.34	2036.7	105,908.40
2	52.2232	417.786	2088.93	108,624.36
3	52.9728	423.782	2118.91	110,183.32

SERGEANT HS - BACH

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	46.2754	370.204	1851.02	96,253.04
2	47.4723	379.778	1898.89	98,742.28
3	48.1612	385.29	1926.45	100,175.40

7/1/2023

POLICE OFFICER HIGH SCHOOL

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	32.7097	261.678	1308.39	68,036.28
1	35.6732	285.386	1426.93	74,200.36
2	38.7113	309.69	1548.45	80,519.40
3	41.8988	335.19	1675.95	87,149.40
4	43.1439	345.152	1725.76	89,739.52

POLICE OFFICER ASSOCIATES

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	33.4942	267.954	1339.77	69,668.04
1	36.5946	292.756	1463.78	76,116.56
2	39.6326	317.06	1585.3	82,435.60
3	42.9695	343.756	1718.78	89,376.56
4	44.2149	353.72	1768.6	91,967.20

POLICE OFFICER BACHELOR

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	34.0297	272.238	1361.19	70,781.88
1	37.1549	297.24	1486.2	77,282.40
2	40.28	322.24	1611.2	83,782.40
3	43.5545	348.436	1742.18	90,593.36
4	44.8749	359	1795	93,340.00

LIEUTENANT HS-BACH

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	52.4449	419.56	2097.8	109,085.60
2	53.7899	430.32	2151.6	111,883.20
3	54.562	436.496	2182.48	113,488.96

SERGEANT HS - BACH

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	47.6637	381.31	1906.55	99,140.60
2	48.8965	391.172	1955.86	101,704.72
3	49.606	396.848	1984.24	103,180.48

10/11/2023

POLICE OFFICER HIGH SCHOOL

\$3,000 added to top step annual salary. Annual salary based on 40 hrs and is not a guarantee.

0	32.7097	261.678	1308.39	68,036.28
1	35.6732	285.386	1426.93	74,200.36
2	38.7113	309.69	1548.45	80,519.40
3	41.8988	335.19	1675.95	87,149.40
4	44.5862	356.69	1783.45	92,739.40

POLICE OFFICER ASSOCIATES

\$3,000 added to top step annual salary. Annual salary based on 40 hrs and is not a guarantee.

0	33.4942	267.954	1339.77	69,668.04
1	36.5946	292.756	1463.78	76,116.56
2	39.6326	317.06	1585.3	82,435.60
3	42.9695	343.756	1718.78	89,376.56
4	45.6571	365.256	1826.28	94,966.56

POLICE OFFICER BACHELOR

\$3,000 added to top step annual salary. Annual salary based on 40 hrs and is not a guarantee.

0	34.0297	272.238	1361.19	70,781.88
1	37.1549	297.24	1486.2	77,282.40
2	40.28	322.24	1611.2	83,782.40
3	43.5545	348.436	1742.18	90,593.36
4	46.3174	370.54	1852.7	96,340.40

LIEUTENANT HS-BACH

\$3,000 added to annual salary. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	53.8874	431.1	2155.5	112,086.00
2	55.2323	441.858	2209.29	114,883.08
3	56.0043	448.034	2240.17	116,488.84

SERGEANT HS - BACH

\$3,000 added to annual salary. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	49.1061	392.848	1964.24	102,140.48
2	50.3388	402.71	2013.55	104,704.60
3	51.0484	408.388	2041.94	106,180.88

7/1/2024

POLICE OFFICER HIGH SCHOOL

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	33.691	269.528	1347.64	70,077.28
1	36.7434	293.948	1469.74	76,426.48
2	39.8726	318.98	1594.9	82,934.80
3	43.1558	345.246	1726.23	89,763.96
4	45.9238	367.39	1836.95	95,521.40

POLICE OFFICER ASSOCIATES

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	34.499	275.992	1379.96	71,757.92
1	37.6924	301.54	1507.7	78,400.40
2	40.8216	326.572	1632.86	84,908.72
3	44.2586	354.068	1770.34	92,057.68
4	47.0268	376.214	1881.07	97,815.64

POLICE OFFICER BACHELOR

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	35.0506	280.404	1402.02	72,905.04
1	38.2695	306.156	1530.78	79,600.56
2	41.4884	331.908	1659.54	86,296.08
3	44.8611	358.888	1794.44	93,310.88
4	47.7069	381.656	1908.28	99,230.56

LIEUTENANT HS-BACH

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	55.504	444.032	2220.16	115,448.32
2	56.8893	455.114	2275.57	118,329.64
3	57.6844	461.476	2307.38	119,983.76

SERGEANT HS - BACH

Change was made by 3.0000% Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	50.5793	404.634	2023.17	105,204.84
2	51.849	414.792	2073.96	107,845.92
3	52.5799	420.64	2103.2	109,366.40

8/1/2024

POLICE OFFICER HIGH SCHOOL

2 bottoms steps eliminated per TA. Annual salary based on 40 hrs and is not a guarantee.

0	39.8727	318.982	1594.91	82,935.32
1	43.1558	345.246	1726.23	89,763.96
2	45.9238	367.39	1836.95	95,521.40

POLICE OFFICER ASSOCIATES

2 bottoms steps eliminated per TA. Annual salary based on 40 hrs and is not a guarantee.

0	40.8216	326.572	1632.86	84,908.72
1	44.2586	354.068	1770.34	92,057.68
2	47.0268	376.214	1881.07	97,815.64

POLICE OFFICER BACHELOR

2 bottoms steps eliminated per TA. Annual salary based on 40 hrs and is not a guarantee.

0	41.4884	331.908	1659.54	86,296.08
1	44.8611	358.888	1794.44	93,310.88
2	47.7069	381.656	1908.28	99,230.56

7/1/2025

POLICE OFFICER HIGH SCHOOL

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	41.0689	328.552	1642.76	85,423.52
1	44.4505	355.604	1778.02	92,457.04
2	47.3015	378.412	1892.06	98,387.12

POLICE OFFICER ASSOCIATES

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	42.0462	336.37	1681.85	87,456.20
1	45.5864	364.692	1823.46	94,819.92
2	48.4376	387.5	1937.5	100,750.00

POLICE OFFICER BACHELOR

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	42.7331	341.864	1709.32	88,884.64
---	---------	---------	---------	-----------

1	46.2069	369.656	1848.28	96,110.56
2	49.1381	393.104	1965.52	102,207.04

LIEUTENANT HS-BACH

Change was made by 3.0000% Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	57.1691	457.352	2286.76	118,911.52
2	58.596	468.768	2343.84	121,879.68
3	59.4149	475.32	2376.6	123,583.20

SERGEANT HS - BACH

Change was made by 3.0000%. Annual salary based on 40 hrs and is not a guarantee.

0	0	0	0	-
1	52.0967	416.774	2083.87	108,361.24
2	53.4045	427.236	2136.18	111,081.36
3	54.1573	433.258	2166.29	112,647.08