

**MINUTES OF THE PATERSON BOARD OF EDUCATION  
SPECIAL MEETING**

January 24, 2022 – 5:37 p.m.  
Remote - Zoom

Presiding: Comm. Nakima Redmon, Vice President

Present:

Ms. Eileen F. Shafer, Superintendent of Schools  
Ms. Susana Peron, Deputy Superintendent  
Khalifah Shabazz-Charles, Esq., General Counsel  
Boris Zaydel, Esq., Board Counsel

Comm. Vincent Arrington  
Comm. Emanuel Capers  
Comm. Oshin Castillo-Cruz  
Comm. Jonathan Hodges

Comm. Manuel Martinez  
Comm. Kenneth Simmons, President  
Comm. Corey Teague

Absent:

Comm. Dania Martinez

Comm. Redmon read the Open Public Meetings Act:

The New Jersey Open Public Meetings Act was enacted to insure the right of the public to have advance notice of, and to attend the meetings of the Paterson Public School District, as well as other public bodies at which any business affecting the interest of the public is discussed or acted upon.

In accordance with the provisions of this law, the Paterson Public School District has caused adequate and electronic notice of this meeting:

**Special Meeting  
January 24, 2022 at 5:30 p.m.  
Remote - Zoom  
90 Delaware Avenue  
Paterson, New Jersey**

to be published by having the date, time and place posted in the office of the City Clerk of the City of Paterson, at the entrance of the Paterson Public School offices, on the district's website, and by sending notice of the meeting to the Arab Voice, El Diario, the Italian Voice, the North Jersey Herald & News, and The Record.

Comm. Redmon: Next on our agenda is the Discussion of Health Benefits and Prescription Options. I'll turn it over to CBIZ at this moment.

**DISCUSSION OF HEALTH BENEFITS AND PRESCRIPTION OPTIONS**

Mr. Richard Mathews: Thank you, Comm. Redmon. Welcome, Paterson Public Schools. Tonight, we have CBIZ, Mr. Jeff Booker and Ms. Suzanne Wood. They have met with Mr. Rojas and the business team going back to November of 2021 to give us

some alternates regarding our medical and prescription benefits. They have gone into the marketplace and tonight they are going to provide you an illustration on what their findings are and some recommendations on how we can move forward with a renewal for medical benefits and prescription. Mr. Booker, do you want to take it away?

Mr. Jeff Booker: Thank you, Mr. Matthews. We certainly appreciate the time of the administration leading up to this meeting and for the attendance of the members of the Board. I am Jeff Booker, Vice President of CBIZ Benefits and Insurance Services. We are your benefits consultant and broker for the last few years and are pleased to be assisting you this evening in a review of our review. I'd like to introduce the members of my team. With us we have Suzanne Wood, Senior Account Executive, who manages the day-to-day team. We also have my colleague, Vice President Nichelle Santos, from CBIZ as well. Then we have our underwriter and actuary Nick Bobek who many of you have worked with and met from the administration. We also have two members of our pharmacy team, Mike Zucarelli, who is our national pharmacy benefit practice lead, and his colleague, Kyle Knoke is also on from CBIZ as well. What we are going to do this evening is review our analysis of the market as it pertains to your current benefit program. As we do that, we will talk about some options that you have going forward. With that in mind, I'm going to turn it over to Suzanne and Nick to walk through the various exhibits and we will go from there. The presentation is fairly comprehensive and many of the questions that may pop up as we are going through it may be answered at another point in the conversation. Keep that in mind as we go forward. We look forward to reviewing our findings with you this evening. Suzanne, I'll give you the floor.

Ms. Suzanne Wood: Good evening, everyone. How are we today? I want to make sure that everyone can see my screen. Are you able to see the presentation? I will apologize for the voice and for the coughing. I am fighting pneumonia. I'm going to keep my comments to a minimum and have my team help me out a little bit as I get through this presentation. The second page of the presentation is just a brief summary of the current benefits offered at Paterson Public Schools at this moment in time. Horizon's three-year contract is over effective 6/30/2022. As we had said, we went out to the market to explore a whole variety of different options in an effort to make sure you are being offered the most cost competitive options. We also took a look at the prescription, and Mike and Kyle are going to go through that, currently with CVS Caremark. I will point out that you are required to give 180 days' termination notice for prescription so we will need to talk through that. But I think our findings will illustrate that you are in the most competitive option available right now. Your dental and vision all renew on 1/1/23. Those plans we are not going to hit on in this presentation, but we will look at them a little bit later in the year. CBIZ is administering your COBRA and that is included in the services that we provide. Nick, did you want to jump in here? Or did you want me to do this?

Mr. Nick Bobek: On this next page, we're looking at some experience information from the Horizon plan and how it's been going so far. You can see Paterson's experience in the current column. 'IP' means inpatient, 'OP' means outpatient, 'PROF' means professional, and then total. This is telling us that Paterson's actual experience, in terms of claim utilization, 69.7% of your claims ran through an in-network type of provider. Compared to the Book of Business in the public sector, it was short about seven to eight points compared to the Public BOB. When we look and compare Paterson to the National BOB, you can see there's quite a disconnect. The reason we're bringing that up to you is because that's something we want to hit on. We want you to think about your options and ways that we can right-size the plan, become more aligned with normalcy, and make sure we're finding every opportunity to identify cost

drivers and save Paterson money. What we're saying here in this table is that Paterson's utilization is falling behind the norms and to an extent that it's significant enough to look at how we can steer your in-network activity and push away from out-of-network utilization. Some of the bullets below this table outline some of the reasons why in-network utilization at Paterson is behind. The way out-of-network providers are reimbursed, it's on a Geographic Fair Health basis, which means it's richer. There's a greater incentive for folks to go out-of-network because those providers are going to be paid at a higher level and thus less balance billing. Also, the out-of-network plan design is rich, and that's one of the reasons why the state program is moving away from the legacy plan designs that Paterson has in place today. We'll talk about that more, but those are the two key factors. The next yellow bullet, we want to give you an update about some of the recruitment efforts that Horizon is making and has actively made since you became a customer and always will. They're working to recruit more in-network providers. There's some fallout. Right now, they're working to recruit 18 providers that are being utilized by members. They've got active negotiations open with four others. There were 52 providers that declined to participate when they were approached about the in-network participation. 19 providers simply failed to respond. That's the quick update about Horizon's recruitment efforts. Suzanne, if you have any other details or commentary that you want to share, please let me know. The next few bullets are in gray, and they're all related. They're reconciling and they pertain to the 2020-21 plan year that just ended 6/30/21. The reason I bring that up is because Horizon guaranteed an in-network average discount of 63.5%. We want more steerage in-network and then what we need to capitalize on is the discount that Horizon is able to provide once those claims are funneled through an in-network provider. That's where the value of Horizon is in financial terms. However, Paterson's actual in-network discount was only 62.5%. That looks like not much of a disconnect, but the issue is the last bullet. Because you didn't meet this goal, Horizon actually owes you money back, 10% of your administrative fees for the year, which equates to about \$78,000. That's a problem because had you met or achieved the 63.5% discount that Horizon had promised, rather than 62.5%, the net outcome would've been \$1.2 million in claims savings. That's net on the \$78,000 reimbursement. There's a substantial amount of money out on the table and opportunity by steering providers in-network and then capitalizing on some of these discount guarantees. In summary, we found and have been finding perpetually throughout the last few years that Horizon is coming short in terms of in-network utilization and in the discounts that are related to that. That needs to be considered closely going ahead because there could be some financial opportunity.

Ms. Wood: Comm. Capers, did you have a question?

Comm. Capers: I do, but I'd rather wait until the presentation is over. I like it so far. Once you finish the presentation, I'll have my questions.

Ms. Wood: What you will see in the network utilization is where Horizon is falling very short is in the professional charges. The current is at 46.6% in-network, where the Book of Business is 62.1% and the National Book of Business is 87.5%. That is what is driving most of the out-of-network utilization, those doctors that are being utilized out-of-network.

Mr. Bobek: The next page is a financial summary of how the medical prescription drug program has been running. This is a 12-month snapshot with experience through Q-3 of 2021. It's a bit busy. What's happening here at the top is just some graphics in blue. Total cost of the program, month-over-month over this 12-month period, and then Paterson's budget amount, which is this flat red line. You can see that because you're

self-funded the cost each and every month is fluid. It's going to vary depending on what the claims are. Below the graph is a breakdown of the financial components. Starting on the left you have a column for the number of employees involved or the number of subs, meaning subscribers. You have your administrative costs, for Horizon to do their job and process the claims, and for CVS programs and cost of the carve-out program. We'll show you where the value is there in a little bit. Column C is a stop loss premium. Stop loss is the reinsurance that covers catastrophic loss. If there was, for instance, a \$1 million premature baby, stop loss would cover you at a certain level to protect the plan from total catastrophic loss. Columns D and E are tracking medical claims. At one point in time, we had some runout from the old Web TPA program so that's why we have a column there to respect that. 100% of the medical claims activity in the past 12 months has been funneling through Horizon. Column F is ESI claims. That's legacy. When Web TPA was in place with us a change was made to the CVS prescription drug program. That's column G. As you can see, those are your pharmacy prescription drug claims. Column H is the stop loss pooling, back to the premium that you paid for reinsurance coverage. This is the benefit of that. We've had large payment activity over the stop loss pooling point, which happens to be \$350,000. Column I are Rx rebates where we have another type of credit back to the plan through the carve-out prescription drug program through CVS. We'll talk about that more. They average about \$5 million a year. Column J is the total net cost, the sum total of all columns. This is before employee contributions. In the past year, \$100 million in total spend before the employee contribution piece. Column K is Paterson's budget. In the bottom right-hand corner, a surplus of \$2.9 million or almost 3%. That's how it's been going. The budget has been solvent, and claims have been running stable over the recent history. We think the plan is stable and if you wanted to change this, obviously it's up to you. But we do think that based on things that are happening with in-network utilization there's still some meat on the bone for some financial opportunity if you're interested. The next page is an underwriting calculation. It's a 31-step process where we're looking to predict the full outcome of your current plan year that started back at 7/1/21 and is going to run through June. We start with your claims experience for the past 12 months, the exhibit we just looked at, and we back out your large claiming activity in step two. We are trying to build an average cost for the general population and then eventually inflate that for normal health care trend. If you go to the ER today, those same services cost more than they did 24 months ago, just like the inflation we're seeing on automobiles. Line 3 backs out the A-4 surcharge that Horizon is administering. We will add that back in, but for now we are going to take large claimants and that surcharge out of the mix. Alternately what we are doing with lines 4, 5, 6 is some arithmetic to get to line 7, which is your average cost per employee per month for medical and Rx. Line 8, our program adjustments, are things that may have happened throughout the year. Whether it's a benefit design change, a program change, or an environmental factor, that's what this line is reserved for. Some of the adjustments that we are making to your claim pick on line 1 have to do with the Garden State Plan that was introduced effective 1/1/22. A portion of our experience period straddles 2020, which we know was impacted by the COVID pandemic. Certain types of services that were non-emergency and maybe elective-type care were suppressed because of the pandemic. There's an adjustment here in this line for that dynamic. Line 9 is the average rate of health care trend, just the inflation rate year over year. We are using some experience from the current plan year, the first three months. We are actually going to prorate that annual trend and that's line 10. Then we are going to apply that proration of inflationary trend to our average cost per employee, which was line 7. That's how we get to line 11. After line 11, we are going to look at adding back our large claimant activity. We are going to look at the lasers, and we can talk more about that later, some extremely high claimants. We are going to add those folks back in. Line 14 is our total outlook of claims activity for the next nine months, October

through July. Our experience period only ran through September. In line 15 we are going to add in the A-4 surcharge for that 9-month period of time. Line 16 is the experience that we saw for the current plan year from July through September, the first three months of the plan year. If we add up lines 14, 15 and 16, we have total annualized claims for the current plan year. Line 17 is where we start tracking the fees, the fixed cost elements of the program on an annualized basis. We have line 17, Horizon administration fees. Line 18, the performance guarantees. At the point this calculation was run, they were still to be determined, but we know that there's a \$78,000 credit so you can tack that onto the bottom line. Line 19 is the prescription drug carve-out program fees for employer's health. That's the coalition who negotiates pricing with CVS to make sure that you, Paterson, get the best deals available. We will talk more about that. Line 20 is the CBIZ consulting fees. Line 21 is the wellness incentive gift cards that are part of the program. Line 22 is health benefit waivers. Line 23, your stop loss premium annualized. Line 24, PCORI fee, which is a fee from Obama Care's ACA health care reform package. Line 25 is the Ebix enrollment platform fees and credits. We are not making an IBNR reserve adjustment in the event that there as a terminal liability. Line 27 is an annual estimate of the Rx rebate activity, \$5.4 million. Line 28 is our total outlook for the current plan year, \$104 million. That versus a budget of \$106 million would return a surplus of almost \$2.8 million or 2.5%. The past 12 months have been about 3% under budget. We see it going that way through June of this current plan year. What about the renewal? The next page kicks us off to the renewal and starts that progression. Suzanne, is there anything you want to add at this point, or anyone else? I just want to take a pause in case there is.

Ms. Wood: I'm good, Nick.

Mr. Bobek: Stop loss reinsurance will cap Paterson's liability for each and every member on the plan at \$350,000. There are two individuals who are lasers, meaning that their deductible level is not \$350,000. It's higher. One is at \$900,000 and the other at \$550,000. The second claimant at \$550,000 is conditional. We can talk more about that if you want. At a high level you purchase stop loss coverage to protect you against catastrophic losses like premature babies, large prescription drug utilizers, or any type of claimant that could totally destroy the financial viability of Paterson's health and welfare program. The total annual cost currently is \$4.5 million. We're starting with stop loss here, not just because it's significant and drives almost \$5 million of fixed cost spend, but because of its relationship to your catastrophic claims and claims in total. The problem is that we don't know what the renewal is going to be for this coming plan year. We won't know until April. For now, we're trying to give you a sense visually of what would happen if a conservative number was released and quoted by SunLife as your renewal. The trend increases are typically 15% to 20%. Here we're using 25% and we're going to carry that through to our renewal calculation. It's just an assumption for now until we know more and have a firm number for you. Page 7 looks a whole lot like page 5, except this model is for your renewal period. I've taken the first few line items and calibrated everything else to reflect 7/1/22 through 6/30/23. We start with the same 12 months through September and the same large claimant activity and adjustments on line 8. Annual trend is the same, but the problem is our experience period isn't adjacent to the renewal period. We have to use some proration on line 10 and we prorate that annual inflation rate. We add back in your large claimants on line 12. We take account for the lasers on line 13. Our total outlook for claims for the upcoming plan year based on data through September is line 14. If you go to the total column, it's \$105 million. Line 15 we add in the A-4 surcharge. Line 16 there's nothing that's already transpired, no water under the bridge to account for yet. Line 17 is the administrative fees. Line 18 would be a performance guarantee, if one was available. Line 19 is prescription drug. Line 23 highlights the fact that we're using a preliminary

place holder because we don't yet know what the stop-loss renewal is going to be. The same progression starts in line 24 with health care reform, your Ebix enrollment platform, IBNR reserve adjustment, and the Rx rebate estimate. Our outlook for the renewal period, assuming a 25% increase to your stop-loss reinsurance fees, is \$110 million. Compared to \$106 million, which is your current budget, it's an increase of \$3.3 million or 3%. We see a surplus in the current year. Going ahead if you wanted the plan to be financially solvent, meaning the budget amount to the solvent with the actual plan cost, we would recommend that increase to the budget of 3.1%. Are there any questions? Thank you for your patience while we worked through that. I want everyone to focus on line 28, the total annual projected cost for the upcoming renewal of \$110 million. This is the algebra. We're going to carry that through to a summary sheet and that's page 8. There's a column called renewal. If you go to the bottom, you'll find \$110 million. This sheet looks very complicated and busy, but we wanted to make sure there was full transparency on each and every line item. You can see how things are changing across alternative scenarios. We're showing you what it would mean financially or our projected estimate of the impact of introducing a different program or making some sort of change to your current arrangement, whether that's medical or prescription drug. I think everyone understands the renewal column. We took the breakdown and the way that things are arranged. It's a little bit different than page 7, but it captures all the same fees just broken out so that we can see at the top the fixed costs in lines 3-18, and then your claims at the bottom in lines 19-22. The first alternate next to Horizon is a scenario where you would replace them as the TPA with Aetna/Meritain. Practically everything is the same, except for lines 3, 4, and 5 and the fixed costs. They're a little bit different. It's a different carrier and company. They're charging different fees. From there down to line 17, everything else is the same. Line 18 is total fixed costs for that entire section. Line 19 is different and that has to do with the claim discounts. What we have been able to extrapolate is that by looking and repricing your claim activity and doing a provider access study is that there will be better in-network utilization with Aetna/Meritain. With that greater volume, the discounts would be richer. For that reason, the Aetna/Meritain scenario is coming in at just over a \$14 million savings compared to Horizon. Alternate 2 is the same concept, except with United Healthcare. You would replace Horizon with United Healthcare. Lines 3, 4, and 5 are slightly different. If you drop down to line 19, the claims are slightly different as well for in-network utilization in terms of volume. Once that volume occurs, the more generous discount you will see. Our outlook is that United Healthcare would furnish almost a \$10 million savings compared to Horizon as it sits today. Both the Aetna and the United Healthcare scenarios assume that you would retain CVS as the pharmacy benefit manager. That's why you can see on lines 20 and 21 it's the exact same number. There's nothing to change in that scenario. Alternate 3 assumes that you replace Horizon with Aetna/Meritain, but then Paterson takes it to the next level by introducing, managing, and standing up an onsite healthcare clinic. The fee from Aetna/Meritain on lines 3 and 4 are the same as it is in alternate 1. What's different about Alternate 3 materially is line 6, for setup fees. The description in that line says miscellaneous fee of credit. What's happening in Alternate 3, line 6 is a \$5.56 million fee. We can talk more about how that works and what the components of that fee are. For now, there's an additional fixed cost in this scenario and the tradeoff is line 19 and 20 where you should see additional claim savings from steerage to an onsite healthcare clinic. In total, lines 23, 24, and 25 we see that scenario based on the analysis and the response to the RFP as having an \$18.2 million advantage against your 'renew as is' scenario. Alternates 4 and 5 are based on the state plan. In Alternate 4 you would use the state plan for medical and prescription drug coverage. Alternate 5 is where you would use the state plan for medical coverage only and keep CVS on a carve-out basis. In line 2 is where we start with Alternate 4. You can see the premium that you would pay to the state and from there we have consulting fees, health benefit waivers, which

would be consistent, enrollment platform fees. Then you can see on lines 19 and 20 where there is some self-funded claims activity, but that has to do with the runout, a claim that was incurred in April, May, or June of 2022 but isn't processed by Horizon and paid by Paterson until after July 1, 2022. You can see in Alternate 4 the savings opportunities are quite significant, a differential of nearly \$27 million or 24%. We will show you on subsequent pages that there are some disconnects in terms of the plan design, what that would mean in terms of choice and member costs at the point of service. That's really where most of the savings is being grabbed. You're just trading off benefits for savings. Alternate 5, I think we all get the concept of the New Jersey State program. You would deploy that for the medical component only. The fixed costs for the most part are going to be identical, except you still pay CVS for their programs and services. In line 19, you have runout from Horizon incurred before 7/1 processed and paid after. Rx claims activity would be that self-funded carve-out program plus the rebates. It's a significant savings opportunity, but not as rich as medical and Rx together. Part of that is the fact that the medical plan design is much different, and it makes a material difference on the overall pricing. It's almost like comparing oranges and apples. Are there any questions or anything that the CBIZ team would like to add?

Mr. Booker: Nick, thank you for walking us through this. Commissioners and members of the administration, this is a significant amount of information, and we appreciate your patience, but it's important to go through it. We can pinpoint questions where there may be any. One of the things we want to stress is that moving to a state plan scenario would require a tweaking of the plan in some significant ways to go back into the state. The plan you have now is richer in many ways than what the state offers so that could create a conversation with labor. That's something to keep in mind. As we go through, we have some thoughts on the way forward. But let's get through the rest of the presentation and then I'm sure we will have plenty of time for questions at that point.

Mr. Bobek: Page 9 is summarizing some of the differences between the state plan and Paterson so that you can see where they're grabbing almost 25% of financial opportunity. One thing you need to consider is line item 1. We don't know what the state rates will be effective 1/1/23. They're subject to change. They always change, sometimes not as significantly as others. If you assume a 15% rate action effective 1/1/23, the impact will be an additional \$5 million. The other thing on line 2 that you should consider is the runout associated with the Horizon plan. Those are still a liability and obligation for Paterson to pay. Even if you switch to the state program there will still be runout claims in the pipeline that will come to fruition. The extent of that runout is estimated to be about \$12 million. Line 3 is not as significant, but some things you want to consider are the plan design deviations, copays, and coinsurance from the member point of service perspective. Line 4 is out-of-network reimbursement levels. The amount that's being paid to out-of-network providers is different at the state level than exists at Paterson. We'll show you the specialty limits on the next page, which are different. Line 5 is the reimbursement level, 90th of Fair Health compared to National. It's \$2.3 million for the reimbursement level to out-of-network providers in the state scenario versus Paterson. Lines 6-10 pertain to prescription drug coverage. Line 6 is plan design deviations. Line 7 is a patient advocacy program. We don't know if they exist in the state scenario, but it potentially could. If it does, potentially there is an element of member disruption that could come along with that, but with member disruption come financial savings opportunities in some cases. Line 8 is a standard control formulary. The standard control formulary would be different in the state scenario for the prescription drug program. Line 9 would be a voluntary maintenance choice program. Your current program does not include it and it would create savings if you were to implement that. Line 10 is 'dispense as written' so there would be a savings opportunity if Paterson would implement the 'dispense as written' program,

which potentially is in the state program. You can see essentially how multiple components drive the difference between what Paterson enjoys today and what is out there facilitated by the state. There's a rhyme and reason for the price points. There are no free lunches and it essentially has to do with the differences in the overall program.

Ms. Wood: The next page is a plan design comparison comparing New Jersey State options to the current three plans that Paterson offers that most closely matches the state offering. We're trying to illustrate some of the plan differences that exist today. The biggest difference is that currently Paterson offers 12 different plans. The state is limiting those plans to 3. That would be a change in membership. Some of the other differences you will see highlighted in yellow. As Nick indicated, the out-of-network reimbursement for physical therapy, chiropractic care, and acupuncture is limited. Under the state plan it is currently not limited. That is some of your highest utilizers and that is also some of your highest out-of-network utilizers we saw in the disruption information. The other big change is the prescription copays. They are different than the state copays. These plan design changes are accounted for in the financial information that Nick reviewed, but we wanted to give you a flavor for the different plan designs, so you are aware of these differences and call them to the attention of the union if in fact the state was a consideration. Are there any questions on those changes?

Mr. Booker: I would just again amplify for the group to basically point back to what Nick said. There are no free lunches. When you see the numbers between the state and the integrity with the Aetna option what has to be understood is that it's not an apples-to-apples comparison. They aren't the same plans and would certainly require us having a conversation with labor. I just want to point that out. We know that there will be questions, but many of them may be answered as we go through here.

Mr. Bobek: Page 11 is essentially the working papers and the analysis that was performed to evaluate the claims, how they're paid at Horizon today, and how they would be paid under an Aetna scenario. On page 8 we showed you that Aetna, all things included, the savings opportunity would be \$14 million. For United Healthcare we estimate a \$10 million savings. Part of that was the fixed fee, but a bulk of those savings opportunities come from the claims. We organized a full claim detail of the providers, what was changed, what was allowed, what was the discount on each and every one of those claims that occurred during calendar year 2020 under Horizon. We shared that information with Aetna, not how Horizon priced it, but the original provider charge. We asked them how they would discount this plan. They looked through thousands of lines of provider charges and Aetna responded to each of those lines. We found that 74.7% of all the provider billings were flowing through in-network providers, and that's on line 5. From Aetna's perspective, on line 15, 82.6% of all billed charges would be considered in-network. The reason that was a big deal is because if you go back to line 8 under Horizon, if those claims funneled through an in-network provider they would be discounted, on average, by about 59.1%. That's the reality of this experience in 2020. Aetna responded on line 18 and said that their average discount for in-network providers would be improved to 63.9%. When you match everything up, the difference between Aetna and Horizon in this experience is line 21. There was a \$15.7 million difference. However, you're going to see some runout from Horizon if you were to make a move to Aetna or United Healthcare effective 7/1/22. There's a maturity adjustment. Line 23 is the net claim savings that Aetna seems to be able to furnish as a result of funneling more claims activity through the in-network setting or type of provider and then applying a much more generous in-network discount rate to those claims.



This is just a backup to page 8, line 19. Are there any questions or anything else the team thinks I should mention?

Comm. Hodges: What is the in-network profile for physicians contrasted between Horizon and Aetna? That seems to be a major concern. Will that profile change substantially? How do you make that determination?

Mr. Bobek: We actually have a page on that, which is coming up. Is it okay if we move to that and address your question there? That's going to talk about the out-of-network steerage opportunities. It's going to show you where some of these providers who are out-of-network with Horizon what their status is with Aetna. Maybe you can get a sense through that lens. Suzanne, do you have any commentary that speaks directly to that question? The discussion of that and the visual of this would help in tandem.

Ms. Wood: We did look at the network utilization very closely in two ways. We looked at it from a financial perspective and a member perspective. Whenever you're talking about changing carriers, I will tell you that there will be disruption. There will be people whose providers participate within the Aetna network that do not participate within Horizon. There will be providers that participate with Horizon that do not participate with Aetna. The member overlap between the two is actually very good, but you will definitely see some of that disruption. This next page is a little bit of the differences for the highest claimed providers and the network status between the two. We did focus in on who is out-of-network for Horizon and how that savings would impact. But we do have more detailed information that we can furnish that provides the actual providers. That is not included in this presentation, but we can certainly follow up with a comparison of the top providers in more detail.

Comm. Hodges: My concern is that you've already announced that 49% of the professional services were in-network for Horizon. I'm trying to find out how that will substantially improve with the other options.

Ms. Wood: Are you talking about from a financial perspective?

Comm. Hodges: Yes. It's financial to us, but from the patient's point of view it's extremely important. That's who they're going to for medical care.

Ms. Wood: Sure. We definitely have to find the balance between the network needs of the member and the financial savings to Paterson. Page 12 does go over the top out-of-network providers for Horizon that are being used and their status within Aetna. It addresses the paid claims and the estimated savings because those providers are in-network. We tried to focus in on the top 35 providers that are falling out-of-network with Horizon. Some fall out-of-network with Aetna and some fall in-network with Aetna.

Mr. Booker: For Comm. Hodges' benefit, we can provide more detail as is needed and requested. The overall finding is when we're looking at existing claim activity for Paterson there are more of those existing claims that will be in-network with Aetna than were in-network with Horizon. It's a net gain. Yes, there will be some cases where it's the other way around, but the count of those that will now be in-network with Aetna is greater as far as an overall picture. Any time you look at making a carrier change, you are going to have some levels of disruption as far as what people currently used to doing. The overall picture is that there are more claims in-network than there would be by staying with Horizon. Keep in mind the way your program is written individuals can go out-of-network now. It's not like they will not be able to go where they have been going. The financial benefit for the district is that if more claims are being steered in the

network performance and the overall claim discount in-network is greater, that's where all the savings come from.

Mr. Bobek: We do have full details with the entire claim repricing, provider disruption analysis, and the ability to break it out by 30 to 50 different types of provider specialties so you can see where those changes are taking place. Again, you're going to have some fallouts here and gains in other places. For the most part, it comes out in a wash. I think we identified some specialty provider areas that there's a higher participation rate. I'm looking back at my files while we're talking to see if I can pull it up quickly. That's going to be the takeaway.

Comm. Arrington: Thank you for the presentation. It was very helpful. Like you said, a lot of questions were answered throughout the presentation. The numbers you showed with the savings if went to Aetna, does that cover the wash you talked about with the increase of out-of-network Horizon folks and the decrease in Aetna in-network?

Mr. Bobek: Yes. It's an aggregate. It covers both things. It shows where Aetna doesn't do as well, as well as where they do better against Horizon.

Comm. Arrington: That was very helpful. How long have we been on Horizon?

Ms. Wood: Three years.

Mr. Booker: It will be three years in June.

Comm. Arrington: When we went over to Horizon, did the out-of-network problem exist back then? Did doctors just decide to leave the Horizon network?

Mr. Booker: Generally, with the passage of time people go in and out-of-network. These things happen. Horizon made some projections and put some things forward based on what they thought was going to be the case. Now that we have two and a half plus years of actual data, what they indicated was likely to occur has not occurred and that has led to the falling short on some of the financials.

Comm. Arrington: Horizon gave us some sketchy projections. Theoretically, we won't be in the same position three years from now talking about Aetna with the same bad projections, right?

Mr. Booker: Our team's general standard operating procedure is to be conservative on our projections. What we showed in the previous slide as far as indicating a \$14.2 million savings in making a move to Aetna, we feel very confident in that number based on the current network structure that Aetna currently offers. We feel confident that our number is solid.

Comm. Arrington: I'm on Aetna with my private employer and CVS, and I haven't had any complaints about it.

Mr. Matthews: I just want to add one thing to what Jeff just said. We did meet with Horizon a year and a half ago and we complained about the network utilization. We had asked them what plans they were putting in place to increase this number. They made some promises and we said to them we didn't want to be in the same spot a year from now. We are now in the same spot. We did meet with Horizon and asked them what they were going to do to boost it up and nothing has changed.

Comm. Arrington: The moral of the story is that if we were to go to Aetna, they need to stabilize their in-network utilization and grow it.

Mr. Bobek: When everyone sat down to make those decisions between Horizon and Aetna, we were working with limited information from Web TPA, which was actually short. I don't want to go back through all the history, but we didn't have the claim detail files in order to completely vet it the way we have in three plus years. Every year we look at it. In the first round, we had limited data from Horizon, just a few months of information. In the next round, we had a mature sample of data. In this third round, we have seen the same consistent pattern with Aetna no matter how large their sampling of data was. We were a little bit handcuffed at the beginning knowing what Web TPA was doing, who their providers were, and then matching it up to the claim discounts. My point is that we have a high confidence level that Aetna's responses to the claim discounts are very credible and it's just a matter of where is the impact to the member. Does the member see an improvement to their experience along with the claims savings? Those two things combined is where you're making the decision. Going all the way back, I think it was a matter of working from the data set. Once we had the data and doing these price analyses time and again, three cycles, we saw a consistent pattern.

Ms. Wood: We do actually have some pharmacy information that we wanted to share with you. Is it okay to move off the medical and to the pharmacy?

Comm. Redmon: Comm. Capers, do you have any questions before we move on to pharmacy?

Comm. Capers: No, I got it. I'm just taking it all in.

Ms. Wood: At this time, I will introduce Mike Zucarelli and Kyle Knoke, who will talk through the pharmacy benefit.

Dr. Mike Zucarelli: Thank you. We appreciate the time today. Thank you for earmarking some time for pharmacy. We do understand that for many of our clients the big dollars are in medical and that tends to be the bulk of the discussion. Certainly, we'd be remiss not to bring up where we have been, where we are today, and where we might be going. I'm going to make this relatively brief, and we do have some backup information and we can certainly field some questions. I think we can really focus on this executive summary here and then I have one slide for each of these bullets to give you one level of detail below this to really exemplify why these bullets exist. For bullet #1, it's been two years since we met with you in person in the cafeteria to go through and vote on the change for CVS. When we look back on the exhibits that we presented at that time, we have actually beaten those projections. Our plan costs from 2018-19 from when we were with ESI are actually down nearly 10% in 2020-21. While pharmacy trend has been going up in the industry, Paterson has actually dropped. I think this is a really good validation of the decisions that you made several years ago and that the plan is performing better than we expected. Bullet #2 is really a brief summary of a lot of work that the CBIZ team in conjunction with the Paterson benefits team did. As we went through the most recent RFP, we certainly didn't want to sit on our hands and rest on our laurels of having done well. We wanted to look at the market and ensure that we were in a good spot. That recent marketing demonstrated that the current PBM arrangement that you have with CVS Health through the employers' health coalition remains the most aggressive contract for Paterson. Switching PBM's at this point would result in a cost to Paterson. Just to summarize those two bullets, the choices we have made in the past have been very fruitful and there are no big changes that we need to

make as far as vendor partners at this juncture. However, while we were looking through the data, we did identify some opportunities for Paterson to consider. Similar to the conversation that we just heard on medical a little bit ago, these do come with tradeoffs. Some may have some member disruption as far as noise, members figuring out what's going on, while others may actually have some financial impact to members and to the plan as well. I'm going to summarize them briefly here and I'll chat on them again in a couple slides. One has to do with formulary. This was a topic that we discussed several years ago when we did change thinking that we could change formulary at that time along with the vendor change. At that time, it was deemed that the vendor change was enough of a lift that we didn't want to mess with formulary. In essence, there are some formulary options that would result in higher rebate revenues for Paterson. If you think back to mixed slides on the financials on the line item for revenue of rebates coming in, we could effectively augment that revenue by about \$800,000 through a more restrictive formulary. Members would still have access to the drugs they need. We would not be taking that away from them, but it might require that a member uses a different brand of a particular drug. If they're using Eli Lilly brand insulin, they may have to use Novo Nordisk brand insulin. It's net cost neutral to the member, but it will result in some change to these numbers. Additionally, there are some programs with regards to alternate funding. At a very high level, effectively the plan would seek remuneration from pharmaceutical manufacturers to offset member costs. If you think back to the last football game you were watching and you think of the last ad for a drug, I'm sure all of us remember the line, "If you can't afford your medication, call 1-800-AstraZeneca." The gist is that these manufacturers will fund a significant portion of the members' cost share. In essence, we can raise the members' cost share so we can dip into those funds even more so. This would require some benefit changes. Right now, we have our flat copays. In this particular instance, if we were to charge those members a 30% cost share on their branded specialty medications, which is a very slim portion of the population, we're removing that cost from Paterson, putting it on the shoulders of the member, but then getting pharma to pay the members' portion. At the end of the day, the member is kept whole and Paterson saves money. It does take a little bit more work on the plan and member's perspective, but it is a way to capture \$1 million to Paterson. There are even more aggressive programs that exist out there. These would require a PBM change. As Suzanne mentioned at the outset of the call, the deadline to change for 7/1 has now passed. Effectively, this is not an option at this juncture, but it could be an option down the road. If we went with a smaller PBM, we could actually be more aggressive on our alternate fund bank and potentially capture more dollars to the tune of \$3.2 million. Lastly, separate from the things that we just talked about, in reviewing the data there are some areas where there's some utilization that I would say is questionable and potentially wasteful. Probably one of the more egregious examples that I saw in the data is when women are pregnant, they need to take their prenatal vitamins. Generally, prenatal vitamins are about \$4, \$10, or \$20. You can get them over the counter. They're very inexpensive. There are a couple of boutique products that exist out there that are \$4,000, 5,000, or \$6,000 a month that clinically provide no additional benefit to that member. These have been brought to market to take advantage of plans financially, to put it very bluntly. We do see utilization on these products in the data. Again, that's just one example. There are some other examples of some overuse of drugs brought to market to take advantage of payers like yourself. If we were to go after those drugs, there would be about \$1.5 million in savings. This would be another discussion with labor and Paterson to see if this is something we wanted to potentially pursue. Let me pause briefly there on the executive summary. I don't know if my colleagues have anything to chime in on or if there are some additional questions. Then I will jump into the detailed slides.

Mr. Booker: Mike, I would just add for the benefit of the group that the performance of the existing CVS program is actually better than the performance we projected when the program was put into place. We're down almost 10% from the previous program. Mike will have a couple of things to cover here that will help lay out in more detail information from the first slide, but I just want to make that clear. We're not recommending any change right now because you're in a very solid position.

Dr. Zucarelli: Thank you, Jeff. I'm not going to go through every figure on this slide. If there are questions, we can go through it in as much detail as you'd like, but I really want to draw your attention to the green shaded cell against the purple shaded cell. The purple shaded cell, the \$185.12, is what we projected you spend to be with CVS. The green shaded cell, after all is said and done, claims paid out, rebates back to the plans, \$158.49. This is the first bullet that I mentioned on the prior slide. We're performing markedly better than we had anticipated in the past. Off to the right in the gray and blue cells, those were the other options that were at your disposal as well. Those being going with a Benecard option, which was the insured option, as well as staying with ESI at that point. Those actually projected even higher. This is a big pat on the back to Paterson for initiating that change. To actually see that manifest itself in the way that it did is a huge success. If there are no other comments or questions on this slide, we can go to the next one. I don't want to belabor this and go through every figure here. I know it's an eye strain to even look at this on a Zoom screen, but the general gist here is that we did cast the net pretty wide here to look at the market on behalf of Paterson. We looked at additional coalition options. We looked at some small mid-market PBMs like Capital Rx, BMR, Magellan, and Citizens Rx. Those other coalitions include the St. Louis Business Health Coalition as well as Rx Benefits. At the end of the day, based on your utilization patterns the current contract that you're under, and that contract defines the discounts, fees, rebates, everything about how Paterson pays for these claims, the contract you're in today is the most aggressive. If there are no other comments or questions on this, we can jump to the next slide. While moving vendors is probably not something we'd be recommending as prudent to do at this point, we went high level on the items in the executive summary. There are some items that you may consider now. You may consider them at 7/1 or down the road in the future. I think we can lump those into three things. Moving to a restrictive formulary may exclude some drugs from the coverage. We'd still be covering the drugs that members need, but they may be required to use one brand versus another. That particular change can be put in at any time. Generally, it's put in on a quarterly basis with about 90 days heads up. We're too late for 4/1. You could potentially put that in for 7/1. You could even wait until 10/1 to put something like that in, but that option sits at your disposal should you want to do that. Alternate funding with CVS is another one that we recommend a three to four-month lead time for. If this is something that folks are excited about in this call, we can get that in for 7/1. It's something that takes a little bit more time, something that we need to get in front of labor and discuss what this means on a member basis. This is something that will be available in the future, and we can certainly go down that path if and when Paterson is ready. Lastly, the targeted drug exclusions get back to some of those high-cost, low-value medications that we'd effectively be removing from coverage. I realize it sounds like a very daunting thing, taking something from a member that they had once been taking. But I think if we had another call, went through some of these drugs, and pointed out both clinically and the availability of other products on the market, in many cases I suspect a lot of the members who are on these medications just simply don't know. I don't believe that they are out there trying to take advantage of the Paterson plan. They probably got written a prescription, filled it at the pharmacy, and just quite frankly didn't know better. There are several drugs on that list and a multitude of strategies that go at the same thing. I'm lumping it into one bullet for this particular presentation, which is targeted drug

exclusions. If we put them all in, you'll see the total savings there on the right, \$3.3 million. But you can pick and choose amongst these to put in the ones that would make the most sense to you. Let me pause there again. If there are any questions or comments, I'd be happy to field those.

Ms. Wood: I don't have anything to add. I would say to Paterson that we can do a deeper dive into some of these targeted areas where there's significant savings to see whether or not it would be something that you wanted to approach labor about. Because we would be changing or taking away something they already had I suspect that labor may need to approve those changes. Of course, that's up to you. We can do a deeper dive into some of these medications. As Mike said, the formulary change wouldn't mean that they couldn't have a medication. It just may mean that they might have to change manufacturers of a medication. The targeted drug exclusions are a little bit different in that we would be taking something away. As Mike said, there are quite a few things in the actual data that maybe warrant that change. We certainly can do a deeper dive into that if it is a consideration for Paterson.

Comm. Redmon: Do we have any comments or questions from any Commissioners at this point?

Comm. Castillo-Cruz: Just to make sure that I'm clear, we currently have CVS. They're still the stronger option as per your recommendation. In CVS the clients or employees would not have to make any changes to the company their medication comes from, correct? That is only if we change plans.

Ms. Wood: There would not be any changes if you stay with CVS unless you choose to adopt one of these changes, the formulary change, alternative funding change, or the targeted drug exclusion change. There would not be any changes unless you decide to adopt one of those.

Comm. Castillo-Cruz: Got it.

Mr. Booker: Comm. Castillo-Cruz, the district can decide to stay with CVS and just leave the existing plan design where it is. Then nothing changes. The other option is to stay with CVS and look at one or more of these options to enhance the savings you're already experiencing.

Dr. Zucarelli: Just to make it clear, leaving CVS for 7/1 is not an option at this point. With 180 days' notice you could leave it for 10/1, but that would not be something we would recommend to you. To answer your question, the plan would stay the same and members can still go to the same pharmacy as they did before.

Comm. Castillo-Cruz: What is the difference in the additional savings? I'm having a very hard time seeing it right now.

Dr. Zucarelli: What you're seeing on this slide right now?

Comm. Castillo-Cruz: Yes.

Dr. Zucarelli: Do you want me to walk through each of those in more examples? Or were you just questioning the dollar amounts?

Comm. Castillo-Cruz: I just wanted to make sure that I heard the same thing. I was multitasking there for a second. I just wanted to make sure that I captured the essence of what you were saying.

Dr. Zucarelli: You got them right on.

Comm. Capers: Can you walk through that and explain it a little more in-depth?

Dr. Zucarelli: I'd be more than happy to. Is there one in particular? Would you like me to go through each of them?

Comm. Capers: Just the first two.

Dr. Zucarelli: With formulary, there are drugs that exist that carry high rebates. We can really boil them down to just a few – the insulins, test strips, and some of the branded drugs for diabetes, and for asthma, a lot of the branded inhalers that exist out there. At the end of the day, it's a homogenous good. I don't care if you're using Accucheck test strips or One Touch Ultra test strips. They do the same thing and they cost the same amount of money, but the rebates that are associated with these are fairly high. Currently, Paterson members have access to any product. You may have half your membership using Accucheck test strips and the other half using One Touch. What CVS is saying is that if Paterson restricts everybody down to one product, we will offer you higher rebates. For the folks that are already on those products, it's a moot point. But for the member using One Touch and we're going to force them to Accucheck, those members would get a letter in the mail saying in three months this drug is no longer going to be covered by the plan. Here's the alternative. Please secure a new prescription or call us and we will help you secure a new prescription. The vast majority of the time, and I can say this for other union groups as well as some of our self-funded commercial clients that have very paternalistic organizations, it's less burdensome than it sounds. Most members get that switched over, they run along, and we don't hear from them. There may be some extenuating circumstances where a member needs a particular product and there are clinical avenues for the members to get those products. We're not leaving members completely out to dry. If a member absolutely needs an excluded product, they can still get it. To be clear, we're not removing coverage for any particular disease. We're not telling someone on insulin that they can't have it or somebody with asthma that they can't have their inhaler. We're telling them that they have to use a particular brand versus another. Does that help a little bit on the formulary piece?

Comm. Hodges: If they can still get the medication, will there be an additional cost to them?

Dr. Zucarelli: If they went through the exception process, in your case there wouldn't because it would be a brand copay. If a plan had a three-tier design where there was a non-preferred and a preferred brand copay, they would pay the non-preferred brand. For Paterson, since you have a brand copay and a generic copay, if they went through the exception process and got the excluded drug, they wouldn't pay anything additional. Good question.

Ms. Wood: I'm very involved with exceptions and member issues. The exceptions aren't necessarily routinely granted. There would have to be a specific reason for the exception in order to have that happen. I just want to set expectations there.

Comm. Hodges: Just be aware sometimes even though it's the same medication, because of the formulation and the process in which they're made, the effects on the patient can be slightly different. I'm a physician, so I know that to be a fact.

Dr. Zucarelli: You bring up an excellent point and those are those extenuating circumstances. If a physician with their patient believes that they will be put at undue harm, then that is when a physician could advocate to CVS on behalf of the patient. We could use the example of insulin. If this is a four-year-old type 1 diabetic child and we've had a tough time stabilizing their sugars, do I want to mess with moving their insulins around? No. That would be an extenuating circumstance that I can see being overridden. But if this is a 45-year-old patient who needs to move from one test strip meter to another, that might be a little bit harder to justify. I appreciate that perspective, doctor.

Comm. Redmon: Do we have any other questions or concerns by Commissioners?

Dr. Zucarelli: I hadn't touched on the alternate funding. I don't know who asked that question. Do you still want me to go over that?

Comm. Redmon: I was going to suggest that we supply all the information to the Commissioners because right now a couple of them can't see your presentation. I would like them to get the presentation so we can have a further discussion amongst the Board.

Comm. Capers: Are we voting on anything tonight?

Comm. Redmon: We're not.

Comm. Capers: I did have a question about alternate funding.

Comm. Redmon: I will return right back to you once I'm finished my statement. I wanted to make a suggestion that we forward all the information to all Commissioners so we will have a chance to review what you're presenting to us tonight. It is a lot to distinguish and devour. We can probably get our questions answered at the next meeting. Comm. Capers, you can continue with your questions.

Comm. Capers: I think he was going to go into the alternate funding solution.

Comm. Redmon: Do you still want him to present that at this moment?

Comm. Capers: Yes. I think he might answer my question with this presentation.

Comm. Redmon: No problem.

Dr. Zucarelli: I'll keep this brief. I agree with you. I think having this in front of folks would help. We're talking only about specialty medications and those that are branded. To put this in perspective, we're talking about a very small subset of the population, about 1% of the total membership using very high-cost specialty medications. Generally, these are injectable or biologic medications. Effectively, we would be moving the member cost share from \$5 today to 30%. For rough math, we'll use a \$10,000 drug. Today the member is paying \$5. If this goes live, they would essentially be paying \$3,000 for that medication. Before you gasp, because I would too if I got that bill when I filled my medication, the alternate funding program steps in and on behalf of the member goes out and secures funding from the manufacturer of that drug to cover the



member's cost. The member pays nothing. Their copay effectively drops from \$5 to \$0. But what we materially have to do with the plan is increase the cost to \$3,000 to then wipe it out with a coupon. It will require a plan design change, which I presume would have to go to labor because it would effectively be a benefit change, but this program would pick that up for the member. For the groups that we have seen this go in place for today, and many of them have been school district and public sector clients, it is very much a white glove VIP service for these members. Most of the members are actually very happy that they have an advocate that can go out and find this funding for them. In your case, moving someone from a \$5 copay to a \$0 may not sound like a big deal. But for some clients where their specialty copay is \$150, this is really meaningful to them. I'd caution sometimes saying it the way I'm about to say it. In essence, the members as well as the plan benefits from putting this in. While it does sound like it's more of an abrasive thing than it is, it actually works fairly cleanly and well. Hopefully that answers your question and thank you for that.

Comm. Redmon: Comm. Capers, does that clarify your question?

Comm. Capers: I'm just trying to wrap my head around that kind of thing.

Ms. Wood: I will share that the presentation was sent to Mr. Matthews earlier today. I certainly will be happy to send it out to the Commissioners. With your permission, I can certainly send it out directly.

Comm. Redmon: I would prefer that all Commissioners receive the presentation and then we can have our questions ready for the next time that we get together. Tonight, was a lot to get together and understand. I'm not sure if any other Commissioner feels the same way, but this was a lot of information.

Comm. Capers: That's fair. It is a lot of information and I'm taking it all in and listening to different perspectives. I hear so many other things about the state versus what we're in now and the alternate costs. I would like to see the presentation in hand so we can go from there. Then I can do follow-up questions.

Comm. Redmon: I will make sure that all Commissioners get that. This presentation actually stems from October. I think through the finance committee we asked for this presentation. Is that correct, Mr. Matthews?

Mr. Matthews: That is correct.

Comm. Redmon: I wanted to make sure that we were getting the information. This was brought to the committee, and we had asked that the full Board be presented with the information. We wanted to make sure that all Commissioners had a chance to have their questions written down so we can answer those questions with CBIZ and move forward. Are there any other questions with this presentation?

Comm. Castillo-Cruz: Are we done with the presentation? Or is there more?

Mr. Booker: There's more. We're almost done. With your permission, we can finish it up and answer any questions at that point.

Comm. Redmon: That's good.

Ms. Wood: The next few pages are just some key decisions that obviously need to be made. The first is which administrator you want to choose and whether or not you want

to modify the plans at all. Second, I think we concluded that CVS is the best fit, but do we want to make any changes to the pharmacy? The next couple of pages are on the timeline and making sure that we have enough time to implement any change that you choose to implement. The first page is through December 2021 when we started this entire process. Now we're into January. We're reviewing with the full Board. We obviously want to be aware of any union considerations. Do we need to introduce any of this to the union? If so, what is the important timing for those? I do think that it would be important to make a final decision for the medical administrator in February so that we can move forward. We can have finalist meetings, if you choose to do that, meaning meeting with the carriers themselves so that they can go over the details and answer any questions that you may have for any of the carriers that you're interested in having that conversation with, and final Board approval to move forward. Based on the timing that was on the website the Board meeting is on February 16. That could have changed, but that's what I found on the website. I was hoping to try and get a decision by then and either do the finalist meetings, if you feel they're necessary, or have the introduction to the union again if the Board feels it's necessary to do so. Then we would use March, April, and May to implement the coverages, announce the changes to the employees, and do the carrier changes with any SPD preparations and all those things. We definitely will need time to do all those things. I wanted to provide the proposed timeline so that we could begin to make some decisions on which direction we are going. That concludes our presentation for this evening. If there are any questions, we welcome them.

Comm. Arrington: Thank you for the presentation. You're such a trooper. I love the timeline. I love timelines. I work for UPS. Thank you, Ms. Wood and everybody else.

Mr. Booker: Thank you, Comm. Arrington. We appreciate that. We felt the timeline was helpful in providing a visual to the Board and the administration as to what the roadmap would look like. We can proceed at your direction. We will provide a copy of the proposal to whoever needs to see it and then we can walk forward from there. By way of summary, you can see we have spent considerable time doing due diligence and making sure that we scoured the market, looked under every rock, and looked for every scenario that we can to find dollars or an enhancement in program for you. We believe that we have done that and we believe that the options that are in front of you are superior to where you are now. We would certainly work with you and move forward in a fashion as you see fit. But we do believe that a move to Aetna would be a prudent move to allow you to maintain control of the plan design your employees are currently used to having and still be able to get \$14 million in savings. We believe that is a solid recommendation, but we certainly would await your decision on that.

Comm. Hodges: You have two versions of the Aetna plan there?

Mr. Booker: That's correct.

Comm. Hodges: What would be the impact on the patients of the second plan?

Mr. Booker: I imagine you're talking about the integrity program, which involves standing up a healthcare center for the use of the members, families, and dependents. It's an actual physical structure that would be a robust health center. As far as the impact, they would be able to use that center at their convenience. No one would be forced to use it, but it would be there for them to use. The center would be stood up. There would obviously be an expense for that. Then there would be steerage or shuffling of members to the new center where care would be delivered at a highly cost-effective rate or manner. That would then drive those savings. That's the difference

between the two. One is a standalone and the other would involve the construction of a health center.

Ms. Wood: There would need to be an advocate at Paterson to help guide that process along. Integrity would take the lead, but there would need to be an internal resource at Paterson to guide that process along to ensure success.

Comm. Redmon: If we did the brick and mortar, is Paterson Public Schools responsible for the staffing of this model?

Ms. Wood: Integrity would manage all the staffing. From a building perspective, Paterson would either have to have a space that the care can be rendered at or Integrity could help you lease a space that the care could be rendered at. Integrity would provide that guidance, manage the staffing, and do the payroll. But there would need to be leadership on the Paterson side to make sure that you're pleased with the progress, you agree with the funding, you're okay with all the finances, and even the staffing. As an example, you want to make sure that you're comfortable with the people that they're hiring. There needs to be a liaison on Paterson's side. Is that helpful, Comm. Redmon?

Comm. Redmon: Yes.

Comm. Hodges: At least 83% of our teaching staff does not live in Paterson. I'm a little concerned about what would be a central location for this site that they would have to go to for treatment. I can see where there would be some benefit. But if you're coming from different parts of the state, where would we centrally locate this site so that it would be an equal or reasonable resource for the patients? That might be a major concern.

Mr. Booker: That would be a concern. There's a two-step process here. I think there is some value in changing the paradigm on how healthcare is delivered. There are very real examples out there of how this kind of thing is a positive development. However, it does require a lift administratively and financially to stand up. Integrity works very well with Aetna and has in many other places in New Jersey. One thought to consider would be a move to Aetna and then perhaps revisit a conversation with Integrity down the road as a follow-up. That's one thing that could be considered as well.

Comm. Redmon: Ms. Wood, would you like to send the presentation to our Board Secretary, Cheryl Williams, and she'll make sure that all Commissioners get the information.

Ms. Wood: I would be happy to send it to Cheryl. I can do that this evening.

Comm. Redmon: I thank you for your presentation tonight.

Ms. Wood: Thank you very much for your time everyone.

Mr. Booker: Thank you, everyone. We appreciate your time.

## **REPORT OF THE SUPERINTENDENT OF SCHOOLS**

Ms. Shafer: Good evening everyone. I want to thank CBIZ for that presentation and also the Board. Last year you asked us to bring this to you earlier in the year so that you would have ample opportunity to learn about the different vendors out there so that we could make a decision. If we're going to continue with Horizon or if we're going to make a change, we have plenty of time to do that. I think the timeline that they put

together is one that we should adhere to because we will need that time if we are going to make a change. I would ask the Board and the community for a moment of silence for our high school senior from HARP Academy, Robert Cuadra. We lost Robert to gun violence this week. Please keep his family in your thoughts and prayers. Today, I'm happy to tell you that everyone was back to in-person instruction. I visited a couple of schools and once again the students and staff were happy to be back, and it was good to see them back. School No. 5 has been experiencing some water infiltration. It started back when we had Tropical Storm Ida and a group of students have been remote ever since. We thought we were going to be able to bring them back after the holiday break and then we had another storm last week and again we had water infiltration. School No. 5 is getting a new roof. Until we get that, we're going to have a problem with water. We have decided to use some classrooms at the Joseph A. Taub School. There are going to be 5 fifth-grade classes from School No. 5 going to the Joseph A. Taub building. The teachers are packing their things now and the students will be able to come a week from today. The other students that are out are second-graders. We don't have a problem on the third floor. We have a problem on the second floor. Because School No. 5 has different levels of roofing, it's the second floor that's having the problem. The second graders are going to move to the third floor. That's where the fifth graders were and that's why they need to go to the Taub building. We don't want to send the second graders with the middle school students. We're going to first work on moving the fifth-grade classes to Joseph A. Taub. Right after that, we'll move the second graders to the third floor. Then all of School No. 5 students and staff will be back to in-person. In the meantime, you're probably going to hear about School No. 5 that gets the continuous water infiltration depending on which way the wind is blowing and how severe the storms are. Right now, we are taking those classrooms that have been hit the hardest offline until we can get the new roof. Just a reminder, vaccinations and boosters are still available at St. Joseph's Medical Center and also the Department of Health. If parents need a ride to get their children to either site, they can contact us, and we'll make sure they get there as well as the McDonald's gift card. We're also continuing with our testing schedule. Non-vaccinated staff members must be tested now twice a week. Because we're in a very high positivity rate region in the State of New Jersey, those non-vaccinated have to get tested twice a week. We have testing going on throughout the district. Staff is able to get tested twice a week and they need to have a negative test to come back in. If they don't get the second result in time, they can use the receipt to show that they got tested and then get us the finding of that second test to their administrator. In addition to that, we're going to continue testing for our students. We're going to have 12 sites available for parents to bring their children to in the district, so they don't have to wait on long lines. This is going to happen all week from 3:00 to 5:00. If you click on the link, you can register your child, if you haven't done so already, and they would be able to get tested. The testing is not only for non-vaccinated folks. It's for anyone who wants to get tested who is an employee of the district, part-time or full-time, and also for any of our students. That concludes my report.

## **PUBLIC COMMENTS**

**It was moved by Comm. Simmons, seconded by Comm. Arrington that the Public Comments portion of the meeting be opened. On roll call all members voted in the affirmative. The motion carried.**

Ms. Rosie Grant: Good evening, Madam Vice President, Commissioners, Madam Superintendent, staff, and community. Paterson Education Fund joins you in expressing condolences to the family of Robert Cuadra. We will keep him in our thoughts and prayers. Thank you for that moment of silence. I had all my questions

answered in the course of the presentation. I just want to say one thing about language. There are a couple of places where staff was referred to in what I think is a dismissive manner. They don't know any better, so they take it. Or they get their medications and they run along. I just want to caution as we move forward that we hold our staff with respect and demand that of our vendors as well. Thank you so much for your time.

**It was moved by Comm. Simmons, seconded by Comm. M. Martinez that the Public Comments portion of the meeting be closed. On roll call all members voted in the affirmative. The motion carried.**

## **RESOLUTION FOR A VOTE:**

### **Resolution No. 1**

WHEREAS, The Superintendent recommends the appointment, salary adjustments, transfers, supports the Paterson: A Promising Tomorrow Strategic Plan 2019-2024 which amongst its strategies goals is Priority I- Effective Academic Programs-Goal 1 - Increase Student Achievement; and

WHEREAS, The Board of the Paterson Public School District has reviewed the recommendation of the Superintendent; and

WHEREAS, The Board of the Paterson Board of Education communicated expectations that such recommendations are made on a timely basis and include the proposed appointment, transfer, personnel in compliance with the contractual and/or statutory requirements.

NOW THEREFORE BE IT RESOLVED, The Board of the Paterson Board of Education accepts the personnel recommendations of the Superintendent adopted in the January 24, 2022 Board Meeting.

## **PERSONNEL**

**F.1** Motion to take action on personnel matters, as listed below; and appoint and submit to the County Superintendent applications for emergent hiring and the applicant's attestation that he/she has not been convicted of any disqualifying crime pursuant to the provisions of N.J.S.A. 18A:6-7.1 et. Seq., N.J.S.A. 18A:39-17 et. seq., or N.J.S.A. 18A:6-4.13 et. seq. for those employees listed below:

(All appointments are contingent upon receipt of proper teaching certification and all salary placements are pending receipt of college transcripts verifying degree status and letter stating years of service in other districts).

### **A. POSITION CONTROL ABOLISH/CREATE**

Action to transfer **PC# 3320** from HARP as Teacher Sped. BD to ATM Academy as Teacher Sped. Resource. PC budgeted at \$61,455. Action to also hire **Shaniqua Bacote** into **PC# 3320** as Teacher Sped. Resource at ATM Academy.  
**Account#** Breakage from 15.423.240.105.077

Action is requested to transfer **Sub PC# 10217** to student **F. T.-L., ID# 5252226**. Student attends School #16. Effective immediately/2021-2022 school year. Required by code: Section 504 of the Rehabilitation Act of 1973.

**B. SUSPENSIONS- N/A**

**C.RESIGNATION/ RETIREMENT**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., accepts the notices of retired/resigned/deceased **Non-Certificated** employees on the attached roster for the 2021-2022 school year. **(27) employees**

<b>Non Certificated Retirements/Resignations/Deceased</b>				
<b>Name</b>	<b>Location</b>	<b>Title</b>	<b>Term. Date</b>	<b>Reason</b>
Abreau, Amaris	871	P/T Secretary	11/19/2021	Termination
Abreu-Rodriguez, Indiana	311	Food Service Employee	10/15/2021	Resignation
Chowdhury, Shamsun	27	Cafeteria Monitor	11/9/2021	Abandon Position
Crespo, Pedro	41	District Security Officer	12/1/2021	Retirement
Delgado, Diana	8	Cafeteria Monitor	10/18/2021	Resignation
Demarest, Arlene	311	Food Service Employee	11/1/2021	Retirement
Estupinan, Arturo	680	Maintenance Worker Painter	11/1/2021	Retirement
Gomez, Olga	311	Food Service Employee	11/15/2021	Resignation
Higgs, Linda	12	Cafeteria Monitor	11/1/2021	Retirement
Hudson, Allen	10	Custodial Worker Chief B	10/11/2021	Deceased
Jacobs, Muaya	16	Lead Monitor	12/1/2021	Termination
Llupa, Ledio	28	District Security Officer	11/1/2021	Resignation
Lyons, Michael	680	Custodial Worker Chief C	11/1/2021	Retirement
Mann, Ericka	33	Instructional Aide	11/16/2021	Resignation
McNeil, Destiny	25	Cafeteria Monitor	10/20/2021	Resignation
Molina, Janeth	616	Accountant	12/6/2021	Resignation
Molla, Bledjan	27	District Security Officer	11/1/2021	Resignation
Moses, Marcus	53	Instructional Aide	11/18/2021	Abandon Position
Nunez De Hernandez, Fiordaliza	311	Food Service Employee	11/26/2021	Resignation
Pena Rodriguez, Angelina	312	Food Service Substitute	10/1/2021	Termination
Ramirez De Guillen, Norquis	312	Food Service Substitute	10/1/2021	Termination
Ramirez Santana, Engracia	312	Food Service Substitute	10/19/2021	Resignation
Rojas, Evelyn	312	Food Service Substitute	10/1/2021	Termination
Smith-Bress, Lakeisha	765	Home School Community Liaison	10/25/2021	Abandon Position
Washington, Angela	52	Instructional Aide	7/1/2021	Retirement

Wright, Celeste	26	Cafeteria Monitor	10/1/2021	Retirement
Wynn, Margo	25	Instructional Aide	11/1/2021	Retirement

### **C.RESIGNATION/ RETIREMENT (CONT.)**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., accepts the notices of retired/resigned/deceased **Certificated** employee on the attached roster for the 2021 2022 School Year. **(43) employees**

<b>Certificated Retirements/Resignations/Deceased</b>				
<b>Name</b>	<b>Title</b>	<b>Location</b>	<b>Term. Date</b>	<b>Reason</b>
Acevedo, Aylleen	655	Behavior Analyst	12/13/2021	Resignation
Adkins, Shakira	28	Teacher	10/18/2021	Resignation
Bautista, Johanna	36	Teacher	12/6/2021	Resignation
Bruce, Luana	68	Teacher Psychologist	12/1/2021	Retirement
Cano, Amanda	27	Teacher	10/11/2021	Resignation
Cardona, Maribel	2	Teacher	10/18/2021	Resignation
Cordero, Shantel	75	Teacher	10/11/2021	Resignation
Cunningham, Jennifer	16	Teacher	11/16/2021	Resignation
Eory, Dylan	6/APA	Teacher	10/11/2021	Resignation
Francisco, Elis	16	Teacher	11/22/2021	Resignation
Galano, Gisselle	16	Leave Replacement Teacher	12/1/2021	Conclusion of Contract
Harmond, Nicola	26	Teacher	10/25/2021	Resignation
Hester, Kadijah	2	Teacher	10/18/2021	Resignation
Hindie, Antoinette	25	Teacher	12/1/2021	Retirement
Lang, Dana	4	Teacher	11/30/2021	Resignation
Lemos, Stephen	8	Teacher	12/13/2021	Resignation
Malin, Theola	313	Teacher	12/14/2021	Resignation
Malone, Barbara	16	Teacher	10/20/2021	Resignation
Melendez Mandal, Dasia	316	Teacher	11/22/2021	Resignation
Mezle, Frank	62	Teacher	10/19/2021	Resignation
Murphy, Danielle	8	Teacher	10/26/2021	Resignation
Nunez, Elizabeth	653	Teacher Coord.	10/20/2021	Resignation
Ortega, Ana	5	Teacher	11/29/2021	Resignation
Pardillo, Patricia	2	Teacher	10/21/2021	Termination
Pearce, Tara	41	Teacher Nurse	10/8/2021	Resignation
Ram, Abigail	306	Teacher	11/23/2021	Resignation
Redding, Ashley	20	Teacher	11/23/2021	Resignation
Reiser, Jenna	15	Teacher	10/29/2021	Resignation
Rojas, Evelyn	312	Food Service Substitute	10/1/2021	Termination
Salti, Dana	9	Teacher	10/23/2021	Resignation
Sarria, Jillian	16	Leave Replacement Teacher	11/29/2021	Conclusion of Contract

Sauchelli, Mindy	28	Teacher	10/8/2021	Resignation
Scardigno, Amanda	13	Teacher	10/22/2021	Resignation
Schnorr, Kathleen	305	Teacher	11/1/2021	Retirement
Schroeder, Edward	12	Teacher	12/13/2021	Resignation
Sciarrino, Sydney	20	Teacher	10/12/2021	Resignation
Small, Devere	307	Teacher	12/4/2021	Resignation
Topalli, Rozetta	24	Teacher	12/13/2021	Resignation
Ursetti, Thomas	7	P/T Social Worker	10/12/2021	Resignation
Williams, Juanita	2	Teacher	10/13/2021	Deceased
Wilson, Judith	6/APA	Teacher	10/20/2021	Resignation
Wozniak, Laurie	36	Teacher	11/1/2021	Disability Retirement
Zeman, Stephanie	54	Teacher	11/3/2021	Resignation

#### **D. TERMINATIONS**

#### **E. NON-RENEWAL**

#### **F. LEAVES OF ABSENCE**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., approves the below **Certificated** employee listing of **Paid Leave** with the respective effective dates for the 2021 2022 school year. **(50) employees**

<b>Certificated paid</b>			
<b>EMPLOYEE NAME</b>	<b>LOCATION</b>	<b>TITLE</b>	<b>LEAVE TYPE &amp; DATE</b>
Adams, Philomena	655	Teacher	Paid Medical LV 9/1/2021-1/14/2022
Agudelo, Luz	51	Teacher	Medical Using Days 11/12/2021-1/12/2022
Ahmed, Sarin	307	Teacher	Unauthorized Medical Using Days 11/29/2021-No Return Date
Albanese-Benevento, Katherine	68	Teacher	Unauthorized Paid LV 10/20/2021-11/15/2021
Anshien Setless, Marilyn	28	Teacher	Unauthorized Paid LV 9/17-11/5/2021
Avino, James	77	Teacher	Unauthorized Paid LV 10/22/2021-11/15/2021
Breen-Lopez, Colleen	305	Teacher	Unauthorized Paid LV 10/6-10/29/2021
Celi, Daphine	15	Teacher	Unauthorized Medical Using Days 11/22/2021-On
Contuzzi, Anna	24	Teacher	Paid Medical LV 10/12/2021-1/28/2022
Cotton, Candice	307	Teacher	Paid Medical LV 11/29/2021-1/3/2022
Cruz, Aracelis	25	Teacher	Paid Med LV 10/7-10/27/2021
Deperi, Danielle	41	Teacher	Paid Medical LV 10/18-11/15/2021
Disipio, Michaela	75	Teacher	Paid Maternity LV 9/20-11/19/21 & Paid Med LV 11/22-12/17/2021
Draheim, Mary	24	Teacher	Paid Medical LV 11/12/2021-12/21/2021



Ellen			
Friedman, Melissa	9	Teacher	Paid Maternity LV 10/22/2021-1/4/2022
Gruppuso, Susan	10	Teacher Nurse	Medical Using Days 11/29/2021-12/31/2021
Gynegrowski, Angelica	26	Teacher	Unauthorized Paid LV 10/1-10/13/2021
Herbert, Jannelle	18	Teacher	Paid Medical LV 10/12-10/21/2021
Hindie, Antoinette	25	Teacher	Unauthorized Paid LV 10/20/2021-11/15/2021
Hoffman, Danielle	304	Teacher	Paid Medical LV 9/9-10/22/2021
Itez, Seray	655	Teacher	Unauthorized Paid LV 10/25/2021-11/18/2021
Justice, Mary	26	Teacher	Unauthorized Medical Using Days 11/18/2021-On
King, Stephanie	7	Teacher	Paid Maternity LV 11/22/2021-1/26/2022
Kotys, Milena	705	Teacher	Unauthorized Paid LV 9/27-10/29/2021
Koujak, Susan	55	Teacher	Unauthorized Medical Using Days 11/22/2021-On
Lydner, Kaara	50	Teacher Coordinator	Paid Medical LV 11/29/2021-1/2/2022
McCombs, Tonya	140	Teacher	Paid Medical LV 11/10/2021-12/5/2021
Mitchell, Tamika	655	Teacher	Paid Medical LV 10/19/2021-12/6/2021
Mola, Teresa	28	Teacher	Unauthorized Paid Med LV 11/17/2021-On
Nelson-Piccott, Latoya	26	Teacher	Medical Uding Days 11/16/2021-12/7/2021
Nigro, Nicole	41	Teacher	Paid Maternity LV 11/22/2021-1/31/2022
Niwash, Mohammad	309	Teacher	Medical Using Days 11/15/2021-12/23/2021
Ramirez, Jenesis	18	Teacher	Paid Medical LV 10/29/2021-11/12/2021
Reynolds, Karen	19	Teacher	Paid Medical LV 10/18/2021-11/18/2021
Rieder, Jason	650	Supervisor	Paid Medical LV 11/1/2021-12/2/2021
Rivers, Andre	25	Teacher	Unauthorized Medical Using Days 11/22/2021-2/22/2022
Rodriguez, Carlita	68	Vice Principal	Medical Using Days 11/22/2021-12/22/2021
Roman, William	51	Teacher	Medical Using Days 11/3-11/29/2021 & Unauthorized Med Using Days 11/30/2021
Romer, Lauren	5	Teacher	Paid Medical LV 10/5-10/30/2021
Rumley, Lori	28	Teacher	Paid Medical LV 10/22/2021-11/22/2021
Schwerin, Lauren	21	Teacher	Paid Medical LV 10/19-11/8/2021
Segovia, Marlon	316	Teacher	Paid Medical LV 11/24/2021-12/19/2021
Sifen, Victoria	30	Teacher	Paid Medical LV 11/29/2021-1/21/2022
Soriano, Delia	25	Teacher	Paid Medical LV 11/8/2021-12/10/2021
Spiliotopoulos, Patricia	53	Teacher	Paid Medical LV 11/8/2021-12/17/2021
Stewart, Dorianny	655	Teacher	Unauthorized Paid LV 11/24/2021-No Return Date
Tamayo, Marbel	63	Teacher	Unauthorized Paid LV 10/14-11/8/2021
Tronci, Veva	15	Teacher	Paid Medical LV 11/24/2021-2/27/2022

Vogel, Melissa	12	Teacher	Paid Medical LV 10/4-10/13/2021
Zimmer, Eileen	307	Teacher	Paid Medical LV 10/28/2021-12/13/2021

#### **F. LEAVES OF ABSENCE (CONT.)**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., approves the below **Certificated** employee listing of **Unpaid Leave** with the respective effective dates for the 2020-2021 school year. **(33) employees**

<b>Certificated Unpaid</b>			
<b>EMPLOYEE NAME</b>	<b>LOCATION</b>	<b>TITLE</b>	<b>LEAVE TYPE</b>
Aguayo, Valentina	21	Teacher	Unpaid Fam/Med LV 10/1-12/6/2021
Aramayo, Monica	316	Teacher	Unpaid Caregiver LV 10/8-10/22/2021
Assal, Victoria	24	Teacher	Unpaid Fam/Childcare LV 11/1/2021-3/15/2022
Attar, Rachel	18	Teacher	Unpaid Fam/Mat/Childcare LV 10/1-12/08/2021 (revised)
Bradshaw, Stephanie	12	Teacher	Unpaid Fam/Med LV 10/27/21-1/31/22 & Unpaid Med LV 2/1-2/10/2022
Calvay, Josephine	24	Teacher	Unpaid Fam/Mat/Childcare LV 10/18/2021-1/14/2022
Carafello, Christine	313	Teacher	Unpaid Fam/Med LV 9/1/2021-12/1/2021
Cruz, Aracelis	25	Teacher	Unpaid Fam/Med LV 10/28-12/31/2021
Cuellar, Stefanie	24	Teacher	Unpaid Fam/Childcare LV 10/18/2021-1/9/2022
Dailey, Kelly	9	Teacher	Unpaid Fam/Med LV 10/14/2021-11/12/2021 & Unauthorized Unpaid LV 11/16/2021-On
Duran, Yadira	36	Teacher	Unpaid Fam/Mat/Childcare LV 11/1/2021-05/06/2022
Feitar, Yasmein	36	Teacher	Paid Med LV 9/21/21-10/15/21 & Unpaid Med LV 10/18/21-12/6/2021
Grundman, Catherine	33	Teacher	Unpaid Fam/Mat/Childcare LV 10/7/2021-1/21/2022
Habib, Shahadiar	68	Teacher	Unpaid Fam/Caregiver LV 12/4/2021-2/27/2022 (Refund 12/1, 12/2 & 12/3/2021)
Itez, Seray	655	Teacher	Unauthorized Paid LV 10/25/2021-11/18/2021 & Unauthorized Unpaid LV 11/19/2021
Jackman, Mignon	21	Teacher	Unpaid Fam/Medical LV 10/18-11/5/2021 & Unpaid Fam/Med LV 11/16/2021-12/31/2021
Janvier, Jhonny	20	Teacher	Unauthorized Med Using Days 11/16-12/2/21 & Unauthorized Unpd LV 12/3/21 (Refund 12/1 & 12/2/21)
Jimenez, Miguel	3	Teacher	Unauthorized Unpaid LV 10/14-10/29/2021
Katat, Zizy	307	Teacher	Unpaid Fam/Med LV 11/12/2021-11/30/2021
Mizdol, Kaitlyn	705	Teacher	Unpaid Fam/Mat LV 10/8-12/1/2021 & Unpaid Fam/Mat/Childcare LV 12/1/2021-2/18/2022
Ortega, Ana	5	Teacher	Resignation 11/29/2021
Pine, Sandra	24	Teacher	Unpaid Fam/Med LV 10/27/2021-12/31/2021
Reardon, Kimberly	26	Teacher	Inermittient FMLA Caregiver LV 10/22/2021-4/29/2022
Redding, Ashley	20	Teacher	Resignation 11/23/2021

Romer, Lauren	5	Teacher	Unpaid Fam/Med LV 11/1/2021-1/3/2022
Shenton, Philip	30	Teacher	Unauthorized Unpaid LV 11/15/2021-No Return Date
Soriano, Delia	25	Teacher	Unpaid Fam/Caregiver LV 10/12-10/29/2021
Tamayo, Marbel	51	Teacher	Unpaid Fam/Med LV 11/9/2021-11/26/2021 & 11/29/2021-12/19/2021
Verile, Kevin	51	Teacher	Unauthorized Unpaid LV 11/8/2021
Williams, Kelly	5	Teacher	Unpaid Fam/Mat LV 11/13/2021-1/4/2022
Wirkmaa, Chirstopher	55	Teacher	Unpaid Caregiver LV 11/29/2021-2/19/2022
Wirkmaa, Christopher	55	Teacher	Unpaid Caregiver LV 11/29/2021-2/18/2022
Ybarra, Anntonette	1	Teacher	Unpd Fam/Mat LV 11/1/21-1/31/22 & Unpd Fam/Childcare LV 2/1/22-4/30/22 & Unpd Childcare LV 5/1-6/30/22

#### **F. LEAVES OF ABSENCE (CONT.)**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., approves the below **Non-Certificated** employee listing of **Paid Leave** with the respective effective dates for the 2021-2022 school year. **(44) employees**

<b>Noncertificated paid</b>			
<b>EMPLOYEE NAME</b>	<b>LOCATION</b>	<b>TITLE</b>	<b>LEAVE TYPE &amp; DATE</b>
Acevedo, Maria	33	Instructional Aide	Paid Medical LV 10/27/2021-12/7/2021
Amer, Nimeh	311	Food Service Manager	Unauthorized Paid LV 10/14/2021-11/15/2021
Armstrong, Ovid	6/APA	Instructional Aide	Unauthorized Paid Med LV 11/8/2021-No Return Date
Barrett, Peter	627	Truck Driver	Paid Medical LV 10/11/2021-12/3/2021
Batista, Elsa	30	Instructional Aide	Unauthorized Medical Using Days 11/19/2021-No Return Date
Baugh, Marvin	51	Personal Aide	Paid Med LV 11/1/2021-11/19/2021
Belfield, Alyssa	4	Personal Aide	Paid Med LV 10/12/21-10/26/21
Borak, Michelle	870	Supervisor	Paid Medical LV 9/29-11/9/2021
Brown, Rahmann	77	Instructional Aide	Unauthorized Paid LV 10/12-10/29/2021
Caballero, Alix	311	Food Service Employee	Medical Using Days 11/10/2021-12/13/2021
Collazo, Eva	311	Food Service Employee	Unauthorized Paid LV 10/12/2021-11/15/2021
Collins, Carzell	20	Instructional Aide	Paid Medical LV 9/3-10/29/2021
Davis, Ca'kia	30	Instructional Aide	Unauthorized Paid LV 10/13/2021-11/15/2021
Delgado, Maria	311	Food Service Employee	Paid Medical LV 9/1-11/8/2021
Delvalle-Enciso, Lourdes	21	Instructional Aide	Unauthorized Paid LV 10/21/2021-11/15/2021
Demarest, Arlene	311	Food Service Employee	Unauthorized Paid Medical LV 9/27-10/11/2021

Everett, Joyce	653	Program Advisor	Paid Medical LV 9/27-10/22/2021
Faradin, Lillian	690	Senior Employee Representative	Medical Using Days 11/11/2021-12/2/2021
Fashah, Gassan	680	Maintenance Worker Carpenter	Paid Medical LV 11/1/2021-12/31/2021
Foxworth, Jennifer	41	Home School Community Liaison	Unauthorized Paid LV 10/12-10/15/21
Gagliardi, Daniel	30	Personal Aide	Paid Medical LV 9/20/2021-12/23/2021
Gonzalez, Zoraida	68	School Secretary	Paid Medical LV 10/12/2021-1/11/2022
Huntington, Joyce	55	Registrar	Paid Medical LV 10/4/2021-1/3/2022
Jaeger, Leslie	306	Instructional Aide	Paid Personal LV 10/5/2021-11/15/2021
Liz-Morell, Petra	34	Principal	Medical Using Days 11/17/2021-12/24/2021
Lopez-Matias, Reyna	311	Food Service Employee	Medical Using Days 11/4/2021-12/15/2021
Lugo, Elizabeth	33	Personal Aide	Paid Med LV 10/29/2021-11/19/2021
Mahmoud, Hayfaa	9	Cafeteria Monitor	Paid Medical LV 10/5-11/9/2021
Makanay, Mohamed	680	Custodial Worker Chief C	Paid Medical LV 10/25/2021-12/6/2021
Mann, Ericka	33	Instructional Aide	Unauthorized Paid Medical LV 10/27/2021-On
Maynard, Cynthia	13	Cafeteria Monitor	Paid Medical LV 10/15-11/10/2021
Morris, Darlene	13	Coordinator	Medical Using Days 11/9/2021-12/19/2021
Munoz, Gisette	20	Cafeteria Monitor	Medical Using Days 12/2/2021-1/17/2022
Nealy, Nicole	19	Instructional Aide	Unauthorized Paid LV 10/12-10/29/2021
Obando, Diana	27	Personal Aide	Unauthorized Paid Medical LV 10/12/2021-10/21/2021
Ortiz, Rafael	24	Custodial Worker Chief C	Medical Using Days 11/18/2021-2/10/2022
Pinchom, Anna	68	Personal Aide	Unauthorized Paid Med LV 10/14/2021-10/25/2021
Rodriguez, Karen	311	Food Service Employee	Paid Leave Accumulated 10/18-10/22/2021
Tann, Ruby	970	Cafeteria Monitor	Unauthorized Unpaid LV 9/1/2021-11/22/2021 & Med Using Days 11/19/2021-12/6/2021
Tapia, Andrea	66	Instructional Aide	Unauthorized Paid Medical LV 10/18/2021-10/29/2021
Vargas, Nurys	12	Lead Monitor	Medical Using Days 11/19/2021-12/3/2021
Vasquez, Anthony	680	Custodial Worker Chief C	Medical Using Days 11/17/2021-1/10/2022
Whitaker, Trancy	311	Food Service Employee	Unauthorized Paid Medical LV 9/28-10/25/2021
Williams-Harris, Joann	765	Coordinator	Medical Using Days 11/17/2021-12/13/2021

#### **F. LEAVES OF ABSENCE (CONT.)**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., approves the below **Non-**

**Certificated** employee listing of **Unpaid Leave** with the respective effective dates for the 2021-2022 school year. **(30) employees**

<b>Non Certificated Unpaid</b>			
<b>EMPLOYEE NAME</b>	<b>LOCATION</b>	<b>TITLE</b>	<b>LEAVE TYPE</b>
Abdallah, Jalal	643	Field Support Technician	FMLA/Caregiver-Intermittent LV 7/12-11/19/2021
Barr, Bernice	52	Cafeteria Monitor	Unauthorized Unpaid LV 12/1/2021-No Return Date
Baugh, Marvin	51	Personal Aide	Paid Med LV 11/1/2021-11/19/2021 & Unpaid Fam/Med LV 11/22/2021-12/1/2021 & Unauthorized Unpaid LV 12/2/2021-On
Belfield, Alyssa	4	Personal Aide	Paid Med LV 10/12/21-10/26/21 & Unpaid Fam/Med LV 10/27/21-11/29/21 Unpaid Fam/Med LV 12/1/2021-1/10/2022
Bell, Carrie	4	School Secretary	Unauthorized Paid LV 11/8/2021-11/22/2021 & Unauthorized Unpaid LV 11/23/2021
Benitez, Dennisse	316	Cafeteria Monitor	Unauthorized Unpaid LV 10/20/2021-On
Brown, Lenora	7	Cafeteria Monitor	Unauthorized Paid LV 10/19/2021-11/3/2021 & Unauthorized Unpaid LV 11/4-11/15/2021
Chavieri, Carolina	311	Food Service Employee	Unpaid Medical LV 10/29-12/20/2021
Collins, Carzell	20	Instructional Aide	Unpaid Fam/Med LV 11/1/2021-11/30/2021 & Unauthorized Unpaid LV 12/1/2021-No Return Date
Colon, Febeslinda	30	School Secretary	Unpaid Fam/Med LV 11/15/2021-12/13/2021
Foxworth, Jennifer	980	Home School Community Liaison	Unauthorized Unpaid LV 10/18/2021-11/2/2021
Gregg, Janet	307	Instructional Aide	Unpaid Caregiver LV 11/1/2021-11/30/2021
Hammad, Hathil	313	Instructional Aide	Unpaid Fam/Mat/Childcare LV 10/18-12/3/2021
Harb, Monther	765	Coordinator	Unpaid Fam/Caregiver LV 11/29/2021-2/28/2022
Jacobs, Muaya	16	Lead Monitor	Unpaid Medical LV 10/1/2021-11/19/2021
Jacobs, Tonya	16	Personal Aide	Unpaid Fam/Med LV 10/15/2021-12/31/2021
Jones, Karen Renee	302	District Security Officer	Unpaid Fam/Med LV 10/12/2021-1/31/2022 & Unpaid Med LV 2/1-4/29/2022
Lugo, Elizabeth	33	Personal Aide	Unpaid Fam/Med LV 11/22/2021-12/9/2021
Maynard, Cynthia	13	Cafeteria Monitor	Paid Med LV 10/15-11/10/21 & Unpaid Fam/Med LV 11/11/21-1/24/2022
Mills, Jacqueline	309	Personal Aide	Unauthorized Unpaid LV 10/15/2021-On
Nunez De Hernandez, Fiordaliza	311	Food Service Employee	Resignation 11/26/2021
Owoeye, Abolade	307	Instructional Aide	Unauthorized Unpaid LV 10/8/2021-11/23/2021 & Unauthorized Unpaid LV 11/24/2021
Rizack, Shirell	77	School Secretary	Unpaid Fam/Med LV 11/1/2021-12/1/2021
Rosado, Nelida	311	Food Service Employee	Paid Med LV 9/7/21-10/31/2021 & Unpaid Fam/Med LV 11/1/2021-12/10/21

Smith, Jason	6/APA	Instructional Aide	Unpaid Fam/Med LV 10/6-10/27/2021
Taylor, Robin	311	Food Service Employee	Unauthorized Unpaid LV 11/16/2021-No Return Date
Tobdzic, Elizabeth	980	Home School Community Liaison	Unpaid Fam/Med LV 10/1/2021-1/3/2022
Washington, Angela	52	Instructional Aide	Unauthorized Unpaid LV 10/13/2021-On
Whitaker, Trancy	311	Food Service Employee	Unpaid Fam/Med LV 11/24/2021-1/25/2022
Williams, Patricia	36	Cafeteria Monitor	Unpaid Fam/Childcare LV 9/1-11/24/2021 & Unauthorized Unpaid LV 11/24/2021-No Return Date

#### **F. LEAVES OF ABSENCE (CONT.)**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., approves the below **Certificated** employee listing of **Return to Active Status** with the respective effective dates for the 2021-2022 school year. **(69) employees**

<b>Certificate Return to Work</b>				
<b>EMPLOYEE NAME</b>	<b>LOCATION</b>	<b>TITLE</b>	<b>LEAVE TYPE DATE</b>	<b>RETURN DATE</b>
Abuassi, Dalal	307	Teacher	Unpaid Fam/Caregiver LV 9/1/2021-11/22/2021	11/23/2021
Acosta, Karina	316	Teacher	Unpaid Fam/Childcare LV 9/1/2021-11/23/2021	11/24/2021
Albanese-Benevento, Katherine	68	Teacher	Unauthorized Paid LV 10/20/2021-11/12/2021	11/12/2021
Alejo, Shannon	68	Teacher	Unpaid Fam/Mat/Childcare LV 9/1/2021-11/23/2021	11/24/2021
Aramayo, Monica	316	Teacher	Unpaid Caregiver LV 10/8/2021-10/22/2021	10/25/2021
Bannon, Diane	5	Teacher	Unpaid Fam/Mat/Childcare LV 9/1/2021-11/23/2021	11/24/2021
Biddle, Allison	41	Teacher	Paid Medical LV 9/13-10/8/2021	10/12/2021
Breen-Lopez, Colleen	307	Teacher	Paid Medical LV 10/6/2021-10/22/2021	10/25/2021
Campos, Jessica	34	Teacher	Unauthorized Medical Using Days 11/12/2021-11/19/2021	11/2/2021
Caprio, Robin	302	Teacher Nurse	Paid Medical LV 11/1/2021-11/19/2021	11/22/2021
Carafello, Christine	313	Teacher	Unpaid Fam/Med LV 9/1/2021-12/1/2021	12/2/2021
Cohen, Ryan	52	Teacher	Paid Medical LV 9/28-10/11/2021	10/12/2021
Collins, Naiasia	316	Teacher	Unpaid Fam/Mat/Childcare LV 9/1/2021-11/23/2021	11/24/2021
Deperi, Danielle	41	Teacher	Paid Medical LV 10/18/2021-11/15/2021	11/16/2021
Edwards, Asha	6/APA	Teacher	Unpaid Fam/Mat/Childcare LV	11/1/2021

			9/1/2021-10/29/2021	
Feliz-Garcia, Norkin	316A	Teacher	Paid Medical LV 6/8-10/8/2021	10/12/2021
Garofalo, Jennifer	313	Teacher	Unpaid Fam/Mat LV 9/1/2021-11/19/2021	11/22/2021
Gethins, Maria	8	Teacher	Paid Medical LV 9/17-10/1/2021	10/4/2021
Greco, Kristen	24	Teacher	Unpaid Fam/Mat LV 9/1/2021-11/26/2021	11/29/2021
Gynegrowski, Angelica	26	Teacher	Unauthorized Paid LV 10/1-10/13/2021	10/14/2021
Hanna, Denise	307	Teacher	Unpaid Fam/Childcare LV 9/1/2021-11/26/2021	11/29/2021
Hegybeli, James	26	Teacher	Unauthorized Paid LV 9/9-9/27/2021	9/28/2021
Herbert, Jannelle	18	Teacher	Unpaid Fam/Med LV 10/22/2021-10/29/2021	11/1/2021
Hill, Jessica	2	Teacher	Unpaid Fam/Caregiver LV 9/1/2021-10/26/2021	10/27/2021
Hoffman, Danielle	307	Teacher	Paid Medical LV 9/9/2021-10/22/2021	10/25/2021
Jean-Jacques, Antoinette	28	Teacher	Unpaid Fam/Mat LV 9/1/2021-11/21/2021	11/22/2021
Jimenez, Miguel	3	Teacher	Unpaid Fam/Med LV 10/14/2021-10/29/2021	11/1/2021
Katat, Zizy	60	Teacher	Unpaid Fam/Med LV 11/12/2021-11/30/2021	12/1/2021
Kotys, Milena	705	Teacher	Paid Medical LV 9/27/2021-10/29/2021	11/1/2021
Landis, Jaime	30	Teacher	Paid Medical LV 10/15/2021-10/22/2021	10/25/2021
Lanteigne, Taylor	7	Teacher	Medical Using Days 11/17/2021-11/26/2021	11/29/2021
Manu, Justin	75	Teacher	Unpaid Fam/Childcare LV 9/1/2021-12/1/2021	12/2/2021
McGuire, Natalie	9	Teacher	Paid Medical LV 10/1-10/8/21	10/12/2021
Mickens, Lonnie	51	Teacher	Medical Using Days 10/14/2021-11/11/2021	11/12/2021
Mower, Veronica	307	Teacher	Unauthorized Paid Med LV 11/3/2021-11/15/2021	11/16/2021
Munem, Aziza	307	Teacher	Unpaid Fam/Childcare LV 9/1/2021-11/23/2021	11/24/2021
Murray, Maria	30	Teacher	Paid Medical LV 9/22-10/1/2021	10/4/2021
Nix, Nicole	68	Teacher	Unpaid Fam/Maternity LV 9/1/2021-10/27/2021	10/27/2021
Penaherrera, Herbert	307	Teacher	Unauthorized Paid Med LV 11/1/2021-11/14/2021	11/15/2021
Petrelli, Zaira	3	Teacher	Unpaid Fam/Childcare LV 9/1/2021-11/25/2021	11/29/2021
Piccolo, Carolyn	75	Teacher	Unauthorized paid LV 10/18/2021-11/3/2021	11/8/2021
Pride, Erin	52	Teacher	Unpaid Fam/Med LV 9/1/2021-	11/23/2021

			11/22/2021 (Stop Direct Deposit as per HR)	
Ramirez, Jenesis	18	Teacher	Paid Medical LV 10/29/2021-11/12/2021	11/15/2021
Ramos, Ofelia	650	Supervisor	Medical Using Days 11/8/2021-11/29/2021	11/30/2021
Reardon, Kimberly	26	Teacher	Unauthorized Paid Med LV 10/6/2021-10/20/2021	10/28/2021
Reid-Addison, Nadine	29	Teacher	Medical Using Days 9/1/2021-11/26/2021	11/29/2021
Reynolds, Karen	19	Teacher	Medical Using Days 10/18/2021-11/18/2021	11/19/2021
Rieder, Jason	650	Supervisor	Paid Medical LV 10/6/2021-10/31/2021	11/1/2021
Rieder, Jason	650	Supervisor	Medical Using Days 11/1/2021-12/2/2021	12/3/2021
Rodriguez, Steven	8	Principal	Paid Medical LV 8/16/2021-11/1/2021	11/1/2021
Romer, Lauren	5	Teacher	Paid Medical LV 11/16/2021-12/10/2021	11/16/2021
Rumley, Lori	28	Teacher	Paid Medical LV 10/22/2021-11/5/2021	11/8/2021
Sajnoska, Kristina	66	Teacher	Paid Medical LV 10/14/2021-10/28/2021	10/29/2021
Salazar, Boris	7	Teacher	Paid Medical LV 10/12/2021-10/19/2021	10/20/2021
Schwerin, Lauren	21	Teacher	Paid Medical LV 10/19/2021-11/5/2021	11/8/2021
Serafin, Magdalena	18	Teacher	Unauthorized Paid Medical LV 10/6/2021-10/15/2021	10/18/2021
Shenton, Philip	30	Teacher	Unauthorized Paid Med LV 11/15/2021	11/15/2021
Sherman, Kara	306	Teacher	Unpaid Fam/Childcare LV 9/1/2021-11/23/2021	11/24/2021
Silaghi, Patricia	16	Teacher	Paid Medical LV 12/2/2021-1/27/2022	12/2/2021
Soriano, Delia	25	Teacher	Unpaid Fam/Caregiver LV 10/12/2021-10/29/2021	11/1/2021
Trokan, Danielle	24	Teacher	Unpaid Fam/Maternity LV 9/1/2021-11/12/2021	11/15/2021
Trumbetti, Krystalle	68	Teacher	Unauthorized Paid Med LV 10/12/2021-10/19/2021	10/20/2021
Vanderveen, Glenn	28	Teacher	Paid Medical LV 10/4-10/12/2021	10/12/2021
Vaughan, Lolita	10	Principal	Medical Using Days 11/15/2021-12/2/2021	12/2/2021
Verile, Kevin	51	Teacher	Unpaid Fam/Med LV 11/8-11/19/2021 (Overpaid 5 days 11/15/21 PR-Worked 11/22-11/26/2021-5 days)	12/1/2021
Vogel, Melissa	12	Teacher	Paid Medical LV 10/4/2021-10/25/2021	10/25/2021
Vroegindewey, John	4	Teacher	Unauthorized Paid Medical LV	10/18/2021



			10/6/2021-10/15/2021	
Warlick, Stephanie	9	Teacher	Unauthorized Medical Using Days 10/27/2021-11/14/2021	11/15/2021
Yates, Leighton	9	Teacher	Unauthorized Paid Medical LV 9/29- 10/12/2021	10/12/2021

#### **F. LEAVES OF ABSENCE (CONT.)**

At the recommendation of the Assistant Superintendent for Human Resources/Labor Relations and Affirmative Action, Luis M. Rojas Jr., approves the below **Non-Certificated** employee listing of **Return to Active Status** with the respective effective dates for the 2021-2022 school year. **(43) employees**

<b>Noncertificate Return to Work</b>				
<b>EMPLOYEE NAME</b>	<b>LOCATION</b>	<b>TITLE</b>	<b>LEAVE TYPE DATE</b>	<b>RETURN DATE</b>
Abdallah, Jalal	643	Field Support Technician	Unpaid Intermittent FMLA/Caregiver LV 7/12/2021-11/19/2021	11/22/2021
Acevedo, Maria	33	Instructional Aide	Unauthorized Paid LV 10/4-10/12/2021	10/13/2021
Addison, Tesha	28	Instructional Aide	Unauthorized Paid LV 9/21-10/15/2021	10/19/2021
Amer, Nimeh	311	Food Service Manager	Unauthorized Paid LV 10/14/2021-11/15/2021	11/16/2021
Anglin, Boswell	77	Instructional Aide	Unauthorized Paid Med LV 11/1/2021-11/12/2021	11/15/2021
Armstrong, Ovid	6	Instructional Aide	Unauthorized Medical Using Days 11/8/2021-11/22/2021	11/23/2021
Avalos, Ana	311	Food Service Employee	Unauthorized Paid Med LV 11/1/2021-11/12/2021	11/15/2021
Baker, Nikki	41	Instructional Aide	Paid Medical LV 9/14-10/4/2021	10/6/2021
Bell, Carrie	4	Personal Aide	Paid LV 11/8/2021-11/17/2021 (Refund 11/23-11/30/2021-5 days deducted 11/30/21 PR)	11/18/2021
Brown, Lenora	7	Cafeteria Monitor	Unauthorized Paid Med LV 10/19/2021-11/1/2021	11/1/2021
Brown, Rahmann	77	Instructional Aide	Unauthorized Paid LV 10/12/2021-10/20/2021	10/21/2021
Brown, Steven	6/APA	Instructional Aide	Unauthorized Medical Using Days 11/8/2021-11/26/2021	11/29/2021
Buie, Jemarl	316	Instructional Aide	Paid Medical LV 10/15/2021-10/27/2021	10/28/2021
Collazo, Eva	311	Food Service Employee	Unauthorized Paid LV 10/12/2021-11/15/2021	11/16/2021
Colon, Febeslinda	30	School Secretary	Unauthorized Paid LV 9/27-10/4/2021	10/5/2021
Diaz, Sixta	34	Cafeteria Monitor	Unauthorized Medical Using Days 11/1/2021-11/26/2021	11/29/2021
Everett, Joyce	653	Program Advisor	Paid Medical LV 9/27/2021-	10/25/2021

			10/22/2021	
Foxworth, Jennifer	41	Home School Community Liaison	Unpaid Fam/Med LV 11/3/2021-11/26/2021	11/29/2021
Garcia, Esther	311	Food Service Manager	Unauthorized Paid LV 11/9/2021-11/19/2021	11/22/2021
Garcia, Ricardo	75	Personal Aide	Paid Medical LV 9/9-10/8/2021	10/12/2021
Hammad, Hathil	313	Instructional Aide	Unpaid Fam/Mat/Childcare LV 10/18/2021-11/22/2021	11/23/2021
Hibbert, Michelle	77	Personal Aide	Unauthorized Paid LV 10/13/2021-10/21/2021	10/22/2021
Jaeger, Leslie	307	Instructional Aide	Paid Personal LV 10/5/2021-11/18/2021-Removed from DD-dock 4 days	11/18/2021
Mahmoud, Hayfaa	9	Cafeteria Monitor	Medical Using Days 10/5/2021-11/9/2021	11/16/2021
Mansfield, Willa	75	Instructional Aide	Unauthorized Paid LV 10/19/2021-11/7/2021	11/8/2021
McPherson, Latoya	311	Food Service Employee	Paid Medical LV 9/27/2021-10/8/2021	10/28/2021
Millet, Migdalia	2	Instructional Aide	Paid Medical LV 10/14/2021-11/11/2021	11/15/2021
Mills, Jacqueline	309	Personal Aide	Unpaid Fam/Med LV 9/1-10/25/2021	10/25/2021
Morris, Durauin	680	Maint Worker Electrician	Unauthorized Paid Med LV 11/5/2021-11/15/2021	11/16/2021
Pallero, Fiordaliza	316	School Secretary	Unauthorized Paid Medical LV 10/5-10/12/2021	10/13/2021
Pareja, Gladys	18	Food Service Manager	Unpd Fam/Childcare LV 10/1-10/31/21 (Cancelled Unpd Fam/Childcare LV 11/1-12/31/21)-Cut check for 11/30/21 PR	11/1/2021
Pinchom, Anna	68	Personal Aide	Medical Using Days 10/14/2021-10/24/2021	10/25/2021
Ramos, Edgar	316	District Security Officer	Paid Medical LV 9/10-10/4/2021	10/4/2021
Restrepo-Mercado, Margy	311	Food Service Employee	Paid Medical LV 9/27/2021-10/1/2021	10/4/2021
Reyes, Julio	4	Custodial Worker Chief C	Unauthorized Paid LV 10/25/2021-11/9/2021	11/10/2021
Rizack, Shirell	650	School Secretary	Unpaid Fam/Med LV 11/1/2021-12/1/2021	12/3/2021
Rodriguez, Karen	311	Food Service Employee	Paid Accumulated LV Days 10/18/2021-10/22/2021	10/25/2021
Rodriguez, Margarita	311	Food Service Employee	Unauthorized Paid Medical LV 9/23-10/10/2021	10/12/2021
Stampone, Vera	27	Cafeteria Monitor	Unpaid LV w/benefits 9/1/2021-11/9/2021	11/12/2021
Waite, Chanelle	33	Instructional Aide	Unauthorized Paid LV 9/8-9/19/2021	9/20/2021
Warburton, Melissa	13	Personal Aide	Unauthorized Paid Medical LV	10/25/2021

			10/13/2021-10/25/2021	
Webber, Mary	51	Personal Aide	Unauthorized Paid Med LV 10/15/2021-11/7/2021	11/8/2021
Zuloaga, Fiorella	311	Food Service Employee	Paid Childcare LV 10/14/2021- 10/20/2021	10/25/2021

### **G. APPOINTMENT**

<b>Last Name</b>	<b>First Name</b>	<b>School/Location</b>	<b>Title</b>	<b>Salary</b>	<b>Reason</b>
Acevedo Arias	Jhancarlos	School# 1	District Security Officer	\$40,192.00	filling vacancy
Barahona	Ailin	School# 27	District Security Officer	\$44,687.00	filling vacancy
Bustios	Silvana	School#20	Instructional Aide Specal Ed Autism	\$33,301.00	filling vacancy
Capellan	Haydee	Central Registration	Part Time Secretary	\$17/hr	filling vacancy
Gardner	Andre	Security Department	District Security Officer	\$53,112.00	filling vacancy
Hernandez Navarro	Olga	Food Services	Food Service Sub	\$13/hr	filling vacancy
Hyland	Lashonda	JFK HS	District Security Officer	\$35,137.00	filling vacancy
Jefferson	Takeyia	Silk City Academy	District Security Officer	\$53,112.00	filling vacancy
Jimenez	Jorge	School# 8	District Security Officer	\$44,687.00	filling vacancy
Laurice	Kelli	655 Chief Sped.	Behavior Analyst	\$70,055	filling vacancy
Martinez	Jessica	JFK HS	District Security Officer	\$40,192.00	filling vacancy
Mayhew	Malika	EHS	Teacher Art	\$70,055.00	filling vacancy
Mayrent	Steven	School# 2	District Security Officer	\$40,192.00	filling vacancy
Nahrwold	Theresa	School #28	Teacher Special Ed SLLD	\$57,955.00	filling vacancy
Perez Garcia	Jeimy	Central Registration	Part Time Secretary	\$17/hr	filling vacancy
Salti	Dana	School #9	Teacher Bilingual/ESL	\$65,455	filling vacancy
Solier	Sergio	School # 16	Teacher Grade 5	\$57,455	filling vacancy
Ultimo	Salvator	PACE	PT Math Teacher	\$35/HR	filling vacancy

### **H. TRANSFERS**

<b>Last Name</b>	<b>First Name</b>	<b>School/Location</b>	<b>Title</b>	<b>Salary</b>	<b>Reason</b>
Abdulaziz	Ghadir	JFK HS	Teacher Guidance Counselor	no change	transfer
Fitzgerald	Jamie	School # 2	Behavior Analyst	no change	transfer
Lilley-Melvin	Antoinette	JAT Academy	IA Sped. LLD	no change	transfer
Mangalathil	Joshy	JFK HS	Teacher Math	no change	transfer
Ramirez-Vergas	Steffani	JAT Academy	IA Sped. SLLD	no change	transfer
Schroder	Martyne	MLK	Behavior Analyst	no change	transfer

### **I. RECALL FROM RIF**

### **J. LEAVE REPLACEMENT**

<b>Last Name</b>	<b>First Name</b>	<b>School/Location</b>	<b>Title</b>	<b>Salary</b>	<b>Reason</b>
Guzman	Marcie	School #1	Teacher Grade 2 Leave Replacement	\$61,455.00	leave replacement
Sarria	Jillian	Dale Ave	Leave Replacement Teacher Preschool	no change	class change and extension of LR assignment

### **K. DISTRICT/SCHOOL PROGRAM HIRING - N/A**

### **L. STIPENDS**

Approval requested to compensate teacher who has volunteered to teach a sixth period during their supervisory or preparation period to be paid as per negotiated contract for the School of Government and Public Administration at Eastside Educational Campus effective December 20, 2021 until June 30, 2022.

**Mr. Walden Alphonse (PC# 1906)**

**Account# 15.140.100.101.051**

Approval requested to compensate (9) teachers who have volunteered to teach a sixth period during their supervisory or preparation period to be paid as per negotiated contract for the School of Government and Public Administration at Eastside Educational Campus effective September 8, 2021 until June 30, 2022.

**Ms. Johana Aguilar (PC# 1447)**

**Mr. Darryl Jones (PC# 1416)**

**Ms. Kimberly Miller (PC# 2961)**

**Michelle Hamlett (PC# 2075)**

**Nana Agyeman (PC# 3262)**

**Cesar Lopez (PC# 691)**

**Eloy Huamanchumo (PC# 1320)**

**Monique Barrise (PC# 2083)**

**Laura Garcia (PC# 2971)**

**Account# 15.140.100.101.051**

Personnel transaction for afterschool I&RS Review Committee.

**Mrs. Meisles, Ms. Simone and Ms. Zisa**

**Account# 11.421.100.101.707.053.0000.00**

Not to exceed: \$6,000.00

To hire **Howard Baldwin, Stanley Harris, Monica Aramayo, Louisa Constantinou** and **Sandralis Rivera**. Before/after school programs to support learning and SEL.

5 teachers 3 hours per week for 25 weeks at \$35 per hour not to exceed (\$9,900.00)

**Account# 15.421.100.101.316.053.0000.000** Not to exceed: \$9,900.00

### **L. STIPENDS / CONT.**

Action to compensate the following staff that applied and attended the Accelerated Learning Professional Development sessions for English Language Arts.

1 hr x \$35 x 28 staff = \$980.00

	FIRST NAME	LAST NAME
1.	Damian	Campbell
2.	Jennifer	Haschak
3.	Carolyn	Hobbs
4.	Gillian	Leigh
5.	Rhonda	Sumter
6.	Sharon	Baldwin
7.	Sandra	Hernandez
8.	Sarah	Mostafa
9.	Amy	Reyes
10.	Kathryn	Vizcaino
11.	Tanya	White
12.	Lauren	Anton
13.	Natasha	Carcich
14.	Melaika	Dias
15.	Christina	Horta
16.	Linette	Lee
17.	Greta	Mills
18.	Yudelis	Nunez
19.	Nargis	Selimgir
20.	Laura	Osbeck
21.	Kallista	Ferguson
22.	Carla	Propersi
23.	Janice	Doerner
24.	Arielle	Testa
25.	Lindsey	Seaborn
26.	Tahmina	Chowdhury
27.	Mahzabeen	Chowdhury
28.	Marta	Shanahan

**Account#** 11.000.223.110.650.053

Staff members who fulfill the PEA Article 22:5-2 and volunteer to teach in the designated at risk area shall be provided with a Superintendent's Educational Grant Program honorarium of \$2,500.00 annually based on 10 months (September through June) of instruction in a Math classroom.

**Heather Pearson** (School # 9)

**Helene Prevosti** (School – DHA)

Said honorarium shall be paid no later than the last day of school in June 2022.

2 Teachers x \$2,500.00 = \$5,000.00

For FY 2021-2022

**Account#** 11.000.223.110.630.053.0000.000

Not to exceed: \$5,000.00

#### **L. STIPENDS /CONT.**

To compensate the following staff that applied and attended the Nearpod Professional Development session. 1 hr x \$35 per hour x 13 staff = \$455.00

	Last Name	First Name
1.	Carcich	Natasha

2.	Tineo	Rosamn
3.	Colli	Louis
4.	Dias	Melaika
5.	Anton	Lauren
6.	Callirgos	Mary
7.	Chavis-Ferrar	Lauren
8.	Hernandez	Sandra
9.	Haschak	Jennifer
10.	Benali	Somia
11.	Ali	Muhammad
12.	Browne	Jeanne
13.	Taylor	Christopher

**Account# 11.000.223.110.650.053**

Action to compensate the following staff that applied and attended the Accelerated Learning Professional Development sessions for Science.

1 hr x \$35 per hour x 24 staff = \$840.00

	<b>LAST NAME</b>	<b>FIRST NAME</b>
1.	Todhe	Meri
2.	Michel	Lori-Anne
3.	Davino	Karen
4.	Tellefsen	Susan
5.	Wells	Andrew
6.	Albanese	Jeanne
7.	Kelly	Ryan
8.	Gonzalez	Jonathan
9.	Edghill	Keith
10.	Callegar	Regina
11.	Renn	Michael
12.	McKie-Miller	Sharon
13.	Laurie	Rose
14.	Mills	Greta
15.	Genovese	Donna
16.	Latini	Kim
17.	Morah	Kanene
18.	Vaccaro	Heather
19.	Osback	Laura
20.	Ferguson	Kallista
21.	Doemer	Janice
22.	Testa	Arielle
23.	Seabord	Lindsay
24.	Pardo-Jose	Marisol

**Account# 11.000.223.110.650.053**

#### **L. STIPENDS /CONT.**

Action to compensate the following staff that applied and attended the Accelerated Learning Professional Development sessions for Math.

1 hr x \$35 per hour x 20 staff = \$700

	<b>Last Name</b>	<b>First Name</b>
1.	Darden	Samantha
2.	Ferraro	Ruth
3.	Genovese	Donna
4.	Mills	Greta
5.	Morillo	Betsaida
6.	Renn	Michael
7.	Rose	Laurie
8.	Stoball	Emma
9.	Pereira	Rosemarie
10.	Vazquez	Alina
11.	Blue-Gaskin	Yolanda
12.	Cole	Tonia
13.	Ferguson	Kallista
14.	Osback	Laura
15.	Testa	Arielle
16.	Williams	Sheree
17.	Ali	Muhammad
18.	Benali	Somia
19.	Carranza	Vilma
20.	Shanahan	Marta

**Account#** 11.000.223.110.650.053

Action to compensate the following Supervisors to prepare and present for the Accelerated Learning Professional Development session.

3hr prep x (4) 1 hour sessions presenting @ \$35 per hour = \$280 - **Maureen Bruins**

**Account#** 11.000.223.110.650.053.0000.000                      Not to exceed: \$280.00

Action to appoint the following teachers as substitutes to supervise Lunch Duty in the absence of the staff member appointed to supervise Lunch for the 2021-2022 school year.

**Gloria Hunt & Salvatore Alessio**

**Account#** 15.130.100.101.007.056.0000.000

Action to compensate the following Supervisors to prepare and present for the Accelerated Learning Professional Development session.

3 hr prep x (4) 1 hour sessions presenting @ \$40 per hour x 6 staff = \$280 per person

**Elizabeth Caccavella**

**Lakisha Kincherlow-Warren**

**Nellista Bess**

**Michael Kleeman**

**Kelly Charles**

**Shenita Davis**

**Account#** 11.000.223.110.650.053.0000.000

Not to exceed: \$1,680.00

## **M. AMENDMENTS**

Action is requested to amend **PTF 22-670** and adjust **Erika Correa-Caraballo's** mentor deduction from \$366.66 to \$550 total. Erica Correa-Caraballo was extended as a leave replacement and is eligible to complete the full 30 weeks of mentoring

Action is requested to amend **PTF# 22-617** to pay stipend for two teachers and two instructional assistant named below for up to 2 hour per day, as per their contractual hourly rate. These staff members will assist in the arrival and dismissal of students at the Anna Landoli Early Learning Center for the 2021-2022 school year. Esser II

**Melissa Jaiksoon** – Teacher      **Olivia Burke** – Instructional Assistant

**Kristina Sajnoska** – Teacher      **Dannay Pena** – Instructional Assistant

Account# 20.483.200.100.653.053.1703.001

Action to add **Carolyn Azzolini** to **PTF# 22-700**. Monitors are necessary to ensure a safe environment for the early bus arrivals (15) of 300 students and to assist the handicapped.

**Account#** 11.421.100.101.703.053.0000.000

#### **N. ATTENDANCE INCENTIVES**

#### **O. SICK/VACATION DAY PAY OUT**

#### **P. WITHHOLDING OF INCREMENTS**

#### **Q. HEALTH BENEFITS**

#### **R. MISCELLANEOUS**

Action to compensate **Julie Lorman** for mentoring services completed. Ms. Lorman mentored Ms. Megdouda Abada in the 20/21 and 21/22 SY. The amount to be paid to Ms. Lorman is \$1,000.

**Account #** 11.120.100.101.690.110

<b>Last Name</b>	<b>First Name</b>	<b>School/Location</b>	<b>Title</b>	<b>Salary</b>	<b>Reason</b>
Walton	Alicia	Payroll Dept	Director of Payroll	\$135,903 + Longevity	title and salary adjustment

#### **S. MISCELLANEOUS (FUNDING.)**

#### **T. ADDITIONAL RESPONSIBILITIES**

#### **U. Administrative Longevity**

#### **V. RESTORE INCREMENTS**

#### **W. NEGOTIATIONS**

#### **X. JOB DESCRIPTIONS**



## **Y. Grievance Settlements**

**It was moved by Comm. Simmons, seconded by Comm. M. Martinez that Resolution No. 1 be adopted. On roll call all members voted in the affirmative, except Comm. Hodges who abstained. The motion carried.**

### **Paterson Board of Education Standing Abstentions**

Comm. Arrington

- Self
- Family

Comm. Capers

- Self
- 4<sup>th</sup> and Inches
- Westside Park Group
- Insight
- Jersey Kids

Comm. Castillo-Cruz

- Self
- City of Paterson
- Transportation
- Downtown Special Improvement District
- Celebrate Paterson

Comm. Hodges

- Self
- City of Paterson

Comm. Dania Martinez

- Self
- City of Paterson
- Ilearn Schools
- Paterson Arts & Science Charter School

Comm. Manuel Martinez

- Self

Comm. Redmon

- Self
- Historic Preservation of the City of Paterson
- County of Passaic

Comm. Simmons

- Self
- Family

Comm. Teague

- Self
- YMCA

**MOTION TO GO INTO EXECUTIVE SESSION TO  
DISCUSS NEGOTIATIONS, PERSONNEL AND LEGAL MATTERS**

**It was moved by Comm. M. Martinez, seconded by Comm. Castillo-Cruz that the Board goes into executive session to discuss negotiations, personnel and legal matters. On roll call all members voted in the affirmative. The motion carried.**

The Board went into executive session at 7:34 p.m.

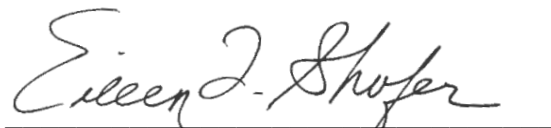
**It was moved by Comm. Hodges, seconded by Comm. Simmons that the Board reconvenes the meeting. On roll call all members voted in the affirmative. The motion carried.**

The Board reconvened the meeting at 9:03 p.m.

**ADJOURNMENT**

**It was moved by Comm. Hodges, seconded by Comm. Simmons that the meeting be adjourned. On roll call all members voted in the affirmative. The motion carried.**

The meeting was adjourned at 9:05 p.m.

A handwritten signature in cursive script, reading "Eileen F. Shafer", written in black ink. The signature is positioned above a horizontal line.

Ms. Eileen F. Shafer, M.Ed.  
Superintendent of Schools