

AGREEMENT

BETWEEN

THE CITY OF HARTFORD, CONNECTICUT

AND

HARTFORD MUNICIPAL EMPLOYEES ASSOCIATIONS

JULY 1, 2021 – JUNE 30, 2023

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PREAMBLE

The following Agreement between the City of Hartford, Connecticut, hereinafter referred to as the City, and the Hartford Municipal Employees Association, hereinafter referred to as the Association, is recorded in written form to meet the requirements as set forth in Section 7-470 (c) in the Municipal Employee Relations Act of the General Statutes of the State of Connecticut. This Agreement is designed to provide for an equitable procedure for the resolution of differences in accordance with the grievance procedure specified herein, in order to promote a cooperative relationship between the Association and the City.

ARTICLE I RIGHTS AND RECOGNITION

Section 1.1 RECOGNITION

The City recognizes the Hartford Municipal Employees Association as the sole and exclusive bargaining agent pursuant to the certification issued by the Connecticut State Board of Labor Relations on March 14, 1980 (ME 5863), November 16, 1981 (ME 6705), January 11,1982 (ME 6561), May 6, 1982 (ME 7089), May 6, 1982 (ME 7090), March 28, 1984 (ME 8344), January 20, 1984 (ME 8350), February 29, 1988 (ME 10,605), October 16, 1987 (ME 10,827), May 28, 1993 (ME 15,408), September 13, 1993 (ME 15,029), November 19, 1993 (ME 15,873), November 19, 1993 (ME 15,915), July 13, 1994 (ME 15,916), July 13, 1994 (ME 15,917), May 17, 1994 (ME 16,247), December 27, 1994 (ME 16,745), February 14, 1995 (ME 16,888) and those classes listed in Appendix A which were mutually agreed to by the Association and the City through amendment to the Agreement for the purposes of collective bargaining under the provisions of Public Act 159. The Association recognizes the Mayor and/or his or her designated representative(s) as the sole and exclusive representative(s) of the City, for the purposes of collective bargaining, on matters of wages, hours and other conditions of employment under the Municipal Employee Relations Act.

Section 1.2 ASSOCIATION SECURITY

All employees in the bargaining unit who are Association members on the effective date of this Agreement shall remain members to the extent of paying dues uniformly required of all members for the duration of this Agreement unless and until he or she opts out as hereinafter provided.

The City shall provide notice to the Association President of any new hire, and said President, or a designee, shall have opportunity to meet with the member to discuss Association membership. New employees who authorize same in writing shall have membership dues deducted from their pay by the City, per Section 1.3 below, unless and until he or she opts out as herein after provided.

Any member of the Association may opt out of membership and membership dues, effective thirty (30) days after receipt by the City of written notice via certified U.S. mail to the Director of Human Resources and Labor Relations at the City and also to the Association President.

On a monthly basis, the Human Resources Department will provide the Association President with a listing of all employees entering or leaving the bargaining unit.

The Association agrees to indemnify and hold harmless the City from any loss or damages arising from the operation of this Section.

Section 1.3 CHECK-OFF

The City agrees to deduct from the pay of all employees in accordance with Section 1.2, such Association membership dues, initiation and service fees as may be uniformly assessed by the Association. Neither any bargaining unit member nor the Association shall have any claim against the City for errors in the processing of deductions unless a claim of error is made in writing to the City within sixty (60) calendar days after the date such deductions were or should have been made. The obligation of the City for funds actually deducted under this Section terminates upon delivery of the deductions so made to the person authorized to receive such amounts from the City.

The Association agrees to indemnify and hold harmless the City for any loss or damages arising from the operation of this Section.

Section 1.4 DEDUCTION PERIOD

Deductions for union dues shall be made and remitted to the Association, together with a list of names of employees from whose wages such deductions have been made.

Section 1.5 MANAGEMENT RIGHTS

Except as specifically abridged or modified by any provision of this Agreement, the City, acting through its departments and agencies, will continue to have, whether exercised or not, all of the rights, powers and authority heretofore existing, including but not limited to the following: determine the standards of services to be offered by its departments and agencies; determine the standards of selection for employment; direct its employees; take disciplinary action; relieve its employees from duty because of lack of work or for other legitimate reasons; issue rules and regulations; maintain the efficiency of governmental operations; determine the methods, means and personnel by which the City's operations are to be conducted; determine the content of job classifications; establish and revise or discontinue policies, programs and procedures to meet changing conditions and to better serve the needs of the public; exercise complete control and discretion over its organization and the technology of performing its work; and fulfill all of its legal responsibilities. The above rights, responsibilities and prerogatives are inherent in the Court of Common Council and the Mayor by virtue of statutory and charter provisions and cannot be subject to any grievance or arbitration proceedings except as specifically provided for in this Agreement.

Section 1.6 PRIOR RIGHTS, BENEFITS AND PRIVILEGES

Nothing in this Agreement shall be construed as abridging any right, benefit, or privilege that bargaining unit members have enjoyed heretofore, provided such right, benefit or privilege is not superseded by the terms of this Agreement.

Section 1.7 NO STRIKE: NO LOCK-OUT

The Association agrees that it will not call or support any strike, work stoppage, or work slowdown. The City agrees that it will not lock out any bargaining unit member at any time.

Section 1.8 NO DISCRIMINATION

The provisions of the Agreement shall be applied equally to all bargaining unit members without discrimination because of race, religion, color, creed, age, sex, marital status, national origin, political affiliation, union membership, residence, physical or mental disability or sexual orientation. However, the City retains all defenses to discrimination claims based on physical or mental disability provided by federal and state statutes, regulations and judicial decisions.

Section 1.9 EXCLUSIONS

Part-time, seasonal and temporary employees are excluded from this Agreement; provided, however, that part-time employees in classifications listed in Appendix A are included in the Agreement only to the extent that such employees will be paid in accordance with Appendix A of this Agreement on an hourly basis and provided further that effective July 1, 1992 those part-time employees who worked at least 1040 hours (for a regular 40 hour per week position) in the previous fiscal year will be credited with ten (10) half days of vacation and five (5) half days of holiday pay. Said part-time employees shall have the right to grieve any violation of this Section under the grievance procedures in the contract.

Section 1.10 SUPERVISORY RESPONSIBILITIES

The City and the Association recognize that the positions occupied by the members of the Hartford Municipal Employees Association, are and have always been essentially management positions. The Association agrees that the designation of these positions within a bargaining unit has not altered the responsibilities of bargaining unit members to advocate management's functions. The responsibilities shall be apparent both in Association member's supervision and direction of subordinate employees and in their attention to the City's mission of serving the residents of Hartford. The Association is obligated to ensure that its members, as part of management, actively support the efforts of the City administration to maintain essential City services and to work to minimize the critical hardships that may otherwise befall the City's residents.

Section 1.11 COPIES OF THE AGREEMENT

As soon as practicable after the signing of this Agreement, the City shall provide the Association with copies of the Agreement to distribute to each bargaining unit member and fifty (50) additional copies to the Association President. The City shall supply a copy of this Agreement to each new hire in the bargaining unit during the term of this Agreement. Enough copies to cover the foregoing distribution plus two hundred and fifty (250) copies for the City shall be printed in booklet form by a union printer and the cost thereof shared equally by the parties. In either event, payment shall be due from the Association within thirty (30) days of receipt of a bill from the City for the Association's share of the cost. The Association shall be entitled to verification of said cost.

ARTICLE II GRIEVANCE PROCEDURE

Section 2.1

Any grievance or dispute which may arise between the parties concerning the application, meaning or interpretation of this Agreement, unless specifically excluded by this Agreement, shall be settled in the following manner:

Step 1. The aggrieved employee, who may be represented by a representative of the Association, shall present the facts to his or her immediate supervisor within ten (10) working days of the date on which the grievance or dispute arose. The supervisor shall render his or her decision to the employee and the Association representative within ten (10) working days from the day the grievance was presented.

Step 2. If the grievance is not resolved in Step 1, the employee or Association representative shall reduce the grievance to writing and present it within ten (10) working days to the department head. It shall include:

- 1. A statement of the grievance and the facts involved; and
- 2. The alleged violation of the specific provision of this Agreement; and
- 3. The remedy requested.

The department head or his or her designee shall arrange a meeting with all parties concerned present, to review the facts and shall notify the employee and the Association representative of his or her decision in writing within ten (10) working days from the day the grievance was submitted to him or her.

Step 3. If the grievance is not resolved in Step 2, the employee or the Association representative shall present it to the Director of Human Resources and Labor Relations or his or her designee within ten (10) working days after the decision of the department head is received. If requested by the employee or the Association, or if he or she so determines, the Director of Human Resources and Labor Relations or his or her designee shall meet informally with the interested parties no later than ten (10) working days after the receipt of the grievance, and, in any case, shall render his or her decision in writing within fifteen (15) working days of receipt of the grievance.

Step 4. If the Association is not satisfied with the decision rendered in Step 3, it shall notify the Director of Human Resources and Labor Relations in writing within ten (10) working days after receipt of the decision that it intends to submit the grievance to arbitration; and shall simultaneously file notice of appeal with the State Board of Mediation and Arbitration, which shall act on such request in accordance with its rules and procedures. Said board shall be limited to the expressed terms of the contract and shall not have the power to modify, amend or delete any terms or provisions of the Agreement or render a decision contrary to law. The decision of the Board shall be final and binding. Failure of either party to insist upon compliance with any provision of this Agreement at any given time or times under any given set or sets of

circumstances shall not operate to waive or modify such provisions, or in any manner whatsoever to render it unenforceable, as to any other time or times or as to any other occurrence or occurrences, whether the circumstances are, or are not, the same.

Nothing in this Article is intended to prohibit the City from processing a grievance through the grievance procedure up to and including arbitration. Any such grievance shall be submitted first to the Association President. If not satisfactorily resolved within two (2) weeks of its submission, the City may submit the grievance to the State Board of Mediation and Arbitration.

The Association or the City may bring one (1) case per year to the American Arbitration Association rather than to the State Board of Mediation and Arbitration. The charges of the American Arbitration Association, including the arbitrator, shall be shared equally between the Association and the City. Upon mutual agreement, additional cases may be brought to the American Arbitration Association.

It is agreed that if the City fails to respond to the Association within the above prescribed time schedules for any step in the grievance process, the Association shall be permitted to automatically move onto the next grievance step; provided, however, that this provision will not apply to a given step when the time limits have been mutually waived by the Union and the City at that step in the procedure.

Section 2.2

In order to avoid the necessity of processing at one time numerous grievances originating with the same event, the Association may file a single grievance at the appropriate step. When this occurs, all other grievances, on the same event shall be held in abeyance, and the Association grievance shall be processed as a precedent.

When such grievance is resolved, the parties shall, within four (4) weeks of the date the precedent grievance is resolved, review the other grievances that were held in abeyance in an effort to resolve them.

If any grievance cannot be settled on the basis of the precedent grievance, it shall be processed in accordance with the grievance procedure, and once more in accordance with the time limitations established in this Agreement and as if initiated in a timely fashion.

Section 2.3

The City shall notify the Association within five (5) working days following the filing of a grievance at Step 2 or Step 3 by any bargaining unit member when the submitted written grievance does not carry the signature of an Association official.

Section 2.4

Grievances involving discharge, suspension or demotion shall be processed at Step 3 of the grievance procedure and may be submitted thereafter to arbitration in accordance with the provision of Step 4 of the grievance procedure. No employee may be reprimanded, suspended, demoted or discharged except for just cause.

An employee serving a probationary period as the result of a promotion will not have access to the grievance procedure in the case of demotion during the term of the probationary period.

An employee serving an initial probationary period as a City employee will not have access to the grievance procedure in the case of suspension, demotion or termination during the term of the probationary period.

Section 2.5 EXAMINATION AND APPOINTMENTS

It is understood and agreed that no entry level or promotional examination (including medical examination), eligibility list, certification list or any other activity related to the hiring, promotion and/or appointment of employees as authorized by the City of Hartford Personnel Rules and Regulations in effect on December 27, 1993 and as conducted by designated members of the Human Resources Department or by department heads or their designees will be subject to the provisions of this Article.

It is also understood that the provisions of this Section do not constitute a waiver of either parties' rights under the Municipal Employee Relations Act.

ARTICLE III PERSONNEL, PAY AND BENEFITS

Section 3.1 LAWS, ORDINANCES AND THE PERSONNEL RULES

The City and the Association shall recognize and adhere to all provisions of the Federal, State and City laws and ordinances which are in effect on the date this Agreement is ratified by the Association and which are not otherwise specifically superseded by the terms of this Agreement.

Further, the City and the Association shall recognize and adhere to all provisions of the City of Hartford Personnel Rules and Regulations in effect as of December 27, 1993 which apply to collective bargaining matters and which apply to bargaining unit members and which are not otherwise superseded by the terms of this Agreement.

No change in the City of Hartford Personnel Rules and Regulations in effect on December 27, 1993, which constitute a major or substantial change in conditions of employment (as defined by the State Board of Labor Relations), shall apply to members of this bargaining unit without prior negotiations, if requested by the Association.

A copy of the City of Hartford Personnel Rules and Regulations shall be given to all officers and area representatives of the Association upon request. The January preceding the contract expiration date, a copy of the current City of Hartford Rules and Regulations will be provided to the Association President. The Association President will receive a copy of any

proposed change in the City of Hartford Personnel Rules and Regulations prior to the public hearing on any such proposed change.

Section 3.2 CLASSIFICATIONS AND PAY RATES

The pay rates and pay ranges for job classifications in the bargaining unit shall be as described in Appendix A.

All bargaining unit members shall be paid on a bi-weekly schedule. All payroll deductions will also be made on a bi-weekly basis.

Effective no later than the first pay period in January 2016, the City shall require direct deposit and electronic notification of all pay-related checks.

General Wage Increases:

Effective and retroactive to July 4, 2021, the salary rates in effect on July 3, 2021 shall be increased by three percent (3%).

Effective July 1, 2022, the salary rates in effect on June 30, 2022 shall remain unchanged through June 30, 2023.

All salaries shall be rounded to the nearest penny (.01).

Growth (Step) Increments:

Effective and retroactive to July 1, 2021 and through June 30, 2023, bargaining unit members will be eligible for regular growth (step) increments.

If a successor Agreement has not been negotiated or arbitrated by the end of the contract term, regular growth (step) eligibility will be frozen for all bargaining unit members at the step they are at as of the end of the contract term until such time as a successor agreement is reached or an interest arbitration award is rendered otherwise providing for such eligibility.

Retirement Payment:

A bargaining unit member who retires on or after June 9, 2008 as a HMEA bargaining unit member, shall receive a one-time lump sum payment of twelve hundred dollars (\$1,200) provided the following conditions are met:

- 1. The bargaining unit member must have been on the active City payroll as a bargaining unit member as of July 1, 2007; and
- 2. The bargaining unit member must have been on the active City payroll as of June 9, 2008; and
- 3. The bargaining unit member's last day worked must have been on or after May 27, 2008.

For purposes of the \$1,200 lump sum payment, a bargaining unit member is considered to be on the "active City payroll" until the first regular pay period after the bargaining unit member's last day worked.

Section 3.3 LONGEVITY PAYMENT

Longevity payments to all full-time bargaining unit members (excluding temporary, seasonal, part-time and per diem employees) shall be based on the following scale:

		Total Annual
Aggregate Years of Service		Longevity Payment
Six (6) years but less than ten (10) years		\$125
Ten (10) years but less than fifteen (15) years		\$175
Fifteen (15) years but less than twenty (20) years	50	\$250
Twenty (20) years or more		\$350

Time spent in the armed forces of the United States (i.e., Army, Navy, Air Force, Marine Corps and the Coast Guard) while on leave from the City, shall be included in determining the number of aggregate years of service.

The date used to determine eligibility for longevity payment shall be July 1 of each and every year; provided, however, that the annual earned longevity payment shall be due and payable in one (1) lump sum payment on December 1 of each and every year only to those bargaining unit members who are in active service on said December 1 and to those bargaining unit members who are retired or laid off in the period between the determination of their eligibility on July 1 and the date of payment on December 1.

Said longevity payments shall not affect the annual increment to which a bargaining unit member is entitled but are compensation for continued and faithful service to the City.

Any employee who becomes a bargaining unit member after June 9, 2008 shall not be eligible to receive longevity payments.

Effective July 1, 2010, and each fiscal year thereafter, bargaining unit members eligible for longevity payment on July 1 with a gross salary on July 1 greater than or equal to sixty thousand dollars (\$60,000), shall not be eligible to receive any longevity payment as outlined in said Section.

Section 3.4 INSURANCE

Bargaining unit members who are eligible or who become eligible for insurance coverage shall be provided the following coverage:

1. <u>Medical Insurance</u> – The City shall continue to provide and pay the cost of medical benefits for each eligible bargaining unit member and his or her eligible dependents as detailed in Appendix B and Appendix B-1, Medical Benefits at a Glance or an alternative plan, as provided below.

With the exception of those bargaining unit members participating in the PPO/HMO buy up described below, the medical plan offering shall be a High Deductible Health Plan (HDHP) with a Health Savings Account as described below and outlined in Appendix B-1:

Component	In Network	Out of Network	
Dedcutible	\$2,000/\$4,000	\$4,000/\$8,000	
Co-Insurance	90%	70%	
OOP Max	\$3,000/\$6,000	Federal OOP Max	
RX (Deductible)	\$5/\$20/\$40	\$5/\$20/\$40	
	2x Mail Order	2x Mail Order	
-	Mandatory Mail Order Under	Mandatory Mail Order Under	
1150	State Maintenance Drug	State Maintenance Drug	
Bí.	Network	Network	
Health Savings Account	50%	50% In-Network Deductible	
(HSA) Employer Funding			

The City will continue to provide the same Non-Standard Benefit Coverage under the above-referenced HDHP/HSA Plan as was provided to this bargaining unit under the collective bargaining agreement during the fiscal year starting July 1, 2017 and ending June 30, 2018.

The employer health savings account (HSA) contribution will be paid in equal installments on a quarterly basis.

The City may move to the CVS Caremark Standard Control formulary without any further obligation to negotiate with the Union.

Commencing July 1, 2019, a PPO and HMO true buy-up option, the details of such plan are described in Appendix B, shall be available for current members as of March 26, 2019 (implementation of the Arbitration Award in Case No. 2018-A-393) only:

- a. The employee contribution will make up the difference between the cost to the City of the HDHP (including employer contribution to the HSA) and the PPO or HMO, as they may change each plan year.
- b. The experience of those who elect the PPO or HMO may be rated separately from those who remain in the HDHP, at the option of the City.
- c. Option to buy-up sunsets on June 30, 2022.

Notwithstanding anything in the contract that may be to the contrary, the City will not contribute to the Health Savings Account (HSA) of any retiring employee who is eligible to purchase retiree health insurance through the City by virtue of other provisions of this Agreement (Pre-June 9, 2008 employees only).

2. <u>Full Dental Plan</u> - The City will provide and pay the cost of covering each eligible bargaining unit member and his or her eligible dependents with the full service dental

plan, including Riders A, B, C, and D, or an alternative plan as provided below, and as described in greater detail in Appendix C, Dental Benefits at a glance.

Bargaining unit members shall contribute the same percentage toward the total cost of the dental plan benefits as they contribute for medical insurance as set forth in Section 3.4, Employee Contributions.

Dental benefits cannot be provided separately and in order to enroll in the City's dental plan, the bargaining unit member and his or her eligible dependents must be enrolled in one (1) of the City's medical insurance plans.

Except as indicated in Appendix C to the contrary, for purposes of medical and dental insurance coverage, an eligible dependent child shall receive coverage until: (1) the child marries or attains the age of twenty-five (25), or (2) as required under the Federal PPACA (Patient Protection and Affordable Care Act) law, whichever provides greater eligibility.

- 3. **Duplicate Coverage Prohibition**. The above insurance coverage will be provided to each full-time bargaining unit member and his or her eligible dependents; provided, however, that when the spouse or civil union partner of a bargaining unit member is also an employee of the City or Board of Education, insurance coverage will be provided under a single plan. The bargaining unit member may elect the insurance coverage provided in this Agreement or the insurance coverage provided to his or her spouse or civil union partner, but in no case will duplicate insurance coverage be provided.
- 4. <u>Alternate Insurance Payment Provision</u>. A bargaining unit member who is covered under alternate medical insurance through another employer (e.g. spouse) may waive his or her basic medical insurance benefits provided by the City for a minimum period of one (1) year. Bargaining unit members with 2-Person or Family coverage who opt not to accept medical insurance under one of the City's medical plans shall be compensated on a fiscal year basis as outlined in the Alternate Insurance Payment Schedule below. Such payment (subject to regular payroll deductions) shall be paid at the end of the fiscal year during which the bargaining unit member was not covered by the City's medical insurance. Except as indicated below, any bargaining unit member choosing this option shall only be able to opt in or out during the City's open enrollment period.

Alternate Insurance Payment Schedule:

Single No Payment 2-Person \$2,500 Family \$2,500

Any bargaining unit member who subsequently becomes ineligible under some alternate medical insurance coverage during the one (1) year period shall be entitled to re-enroll under the City's medical insurance provisions provided that the City's Benefits Administrator is notified in writing, by the bargaining unit member. No proof of insurability shall be required.

If a bargaining unit member re-enrolls in one (1) of the City's medical insurance plans before the expiration of the one (1) year period, he or she shall receive a pro-rated amount for any full month that he or she has not received medical insurance from the City; provided, however, that a minimum participation of six (6) full months in the Alternate Insurance Payment

program is required.

Any bargaining unit member choosing not to accept medical insurance under one (1) of the City's medical insurance plans shall be required to sign a waiver of City insurance and submit proof of alternate medical insurance coverage to the City's Benefits Administrator.

The Alternate Insurance Payment Provision is not applicable to bargaining unit members whose lawful spouse or civil union partner is also an employee of the City or Board of Education.

Any bargaining unit member who waives his or her medical insurance coverage under the Alternate Insurance Payment Provision shall not be eligible for dental insurance coverage as outlined in Subsection 2, above.

5. Employee Contributions.

For purposes of calculation of the employee contribution rate, as described below, "allocation rate" is defined as the allocation rate determined by the City's insurance carrier plus the City's contribution to the Health Savings Account (HSA).

The allocation rate as determined by the City's insurance carrier shall be based on the claims experience of the City, including active and retired employees.

Effective July 1, 2021, each full-time bargaining unit member shall continue to contribute, via payroll deduction, twenty-one percent (21%) of the allocation rate then in effect, as determined by the City's insurance carrier towards the cost of medical insurance coverage provided for single, 2-person or family coverage.

Healthy Hartford Program. The City shall implement the Healthy Hartford Program as described in greater detail in Schedules 1 and 2 below to assist with early medial detection and provide education about chronic condition care. Bargaining unit members and eligible dependents shall have until June 30, 2020 to become compliant with all age appropriate health and dental assessments and screenings described in Schedules 1 and 2 below. Effective July 1, 2020, bargaining unit members and their covered dependents will need to be in compliance with the Healthy Hartford Program requirements, and non-compliance by the bargaining unit member or any covered dependent moving forward will result in an additional one hundred dollars (\$100.00) per month supplemental charge to their employee health insurance contributions, which will remain in effect until the month following the employee coming into compliance.

Schedule 1 – Healthy Hartford Program Requirements							
Preventative Service	Birth – Age 5	Age 6-17	Age 18-24	Age 25-29	Age 30-39	Age 40-49	Age 50+
Preventative Visit	Every	Every 2	Every 3	Every 3	Every 3	Every 2	Every Year
(6)	Үеаг	Years	Years	Years	Years	Years	
Cholesterol	N/A	N/A	N/A	Every 5	Every 3	Every 2	Every Year
Screening				Years	Years	Years	
Vision Exam	N/A	N/A	Every 2				
			Years	Years	Years	Years	Years
Dental Cleanings	N/A	2 Per Year					

Colorectal Cancer Screening	N/A	N/A	N/A	N/A	N/A	N/A	Annual FIT/FOBT or Colonoscopy every 10 years
Women's Health — Cervical Cancer Screening (Pap Smear) and Clinical Breast Exam	N/A	N/A	Every 3 years starting at age 21	Every 3 Years	Every 3 Years	Every 3 Years	Every 3 Years
Breast Cancer Screening (Mammogram)	N/A	N/A	N/A	N/A	One screening between the Ages of 35 & 39	As recommended by Physician	As recommended by Physician

As is currently the case under the City's medical plan, any medical decisions will continue to be made by you and your physician. Participants enrolled in the Healthy Hartford Program will have available and agree to participate in disease education and counseling programs for the disease states listed in the description of the Healthy Hartford Prevention Program.

Schedule 2 – Healthy Hartford Program

The chronic conditions managed under the Healthy Hartford Program (HHP Program) are: Diabetes, Asthma, Chronic Obstructive Pulmonary Disorder (COPD), Coronary Artery Disease (CAD) and Heart Failure. If you are identified with one of these conditions, you must complete your educational requirement by taking a survey, reading a fact sheet about your condition(s), or speaking to a nurse before the end of your compliance period to be compliant with the HHP Program.

When these conditions have other diseases associated with them, such as hypertension (high blood pressure) and hyperlipidemia (high cholesterol) these conditions will be included in the educational requirement.

If a nurse should call you, you are required to accept the call to remain compliant with the Program.

Payroll deductions for health insurance premium contributions shall be made pursuant to the provision of Section 125 of the Internal Revenue Code.

6. <u>Group Life Insurance</u>. The City will pay the cost of group life insurance for all bargaining unit members enrolled in such plan or who thereafter enroll in such plan according to present terms, which terms include longevity pay, if applicable, in determining the amount of insurance for which each bargaining unit member is eligible.

Each full-time active bargaining unit member shall receive Group Life and Accidental Death and Dismemberment insurance at one and one-half times (1.5x) the bargaining unit member's current salary up to a maximum of fifty thousand dollars (\$50,000). Effective June 9, 2008, each full-time active bargaining unit member shall receive Group Life and Accidental Death and Dismemberment insurance at one and one-half times (1.5x) the bargaining unit member's current salary up to a maximum of seventy-five thousand dollars (\$75,000).

A bargaining unit member shall have the right to change the beneficiary designation for

the Group Life Insurance benefits without penalty at any time.

- 7. <u>Effective Date of Coverage</u>. All insurance coverage shall become effective as follows:
 - a. For a full-time bargaining unit member employed in the first twenty (20) days of the month, insurance coverage will become effective on the first of the month following one (1) complete month of service.
 - b. For a full-time bargaining unit member employed after the 20th of the month, insurance coverage will become effective on the first of the month following two (2) complete months of service.
- 8. <u>Survivor's Insurance</u>. The City will continue to allow eligible survivors of an active bargaining unit member or retiree to purchase group medical and dental insurance coverage under the plan(s) provided for active bargaining unit members by pension deduction if available, otherwise by check, at the rates payable for employees who are included in the City's group plan. This benefit shall apply only to a surviving spouse and/or those eligible dependent children who were covered by the City's group insurance at the time of the bargaining unit member's or retiree's death and shall be available until the spouse dies, remarries, or attains age sixty-five (65). In the case of dependent children, this benefit shall be available until: (1) the child marries or attains the age of twenty-five (25) or (2) as required under the Connecticut State Law, whichever provides greater eligibility.

9. Insurance Benefits for Retirees.

Retirements Prior to July 1, 2007.

Full-time bargaining unit members who retire prior to July 1, 2007 shall be eligible for medical and dental insurance coverage to the extent provided for in the collective bargaining agreement controlling as of the date of his or her retirement.

Retirements On or After July 1, 2007.

- a. Members of the bargaining unit before June 9, 2008. Full-time employees who were members of the bargaining unit before June 9, 2008 and who retire on or after July 1, 2007 shall be eligible for medical and dental insurance coverage to the extent provided below:
 - (i) For bargaining unit members who are in the Municipal Employees Retirement Fund and who have at least twenty-five (25) years of service and are at least fifty-five (55) years of age at the time of retirement, or who have twenty (20) or more years of service regardless of age if the bargaining unit member's initial date of hire is before July 1, 2003, the City shall provide the retiree with the option to purchase, through pension deduction, the medical and dental package in effect at their date of retirement, including any dependent insurance coverage. Effective for any retirements that occur on or after April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA-279), said retiree health and dental

coverage shall be the same health and dental coverage that is offered to active employees as that coverage may change from time to time through negotiations.

If the retiree elects to purchase medical and dental coverage, the retiree shall pay one hundred percent (100%) of the cost of the medical and dental insurance package at the group rate in effect at that time for single, 2-person or family coverage, and the City shall contribute fifty dollars (\$50.00) per month toward the cost of such insurance until said retiree reaches age sixty-two (62). Thereafter, beginning the first of the month following the retiree's sixty-second birthday, the City shall pay the full cost of City medical insurance coverage (but not dental insurance) until the retiree reaches age sixty-five (65).

Bargaining unit members who are in the Municipal Employees Retirement Fund and who are at least fifty-five (55) years of age and have at least twenty-five (25) years of service at the time of retirement, or who have twenty (20) or more years of service regardless of age if the bargaining unit member's initial date of hire is before July 1, 2003, and who wish to withdraw from the City medical and dental insurance coverage available to them under this subparagraph (i), may re-enroll at any time thereafter up to age sixty-four (64) years and six (6) months in the City medical and dental insurance plan available at the date of re-enrollment provided the retiree submits evidence of insurability for themselves and any qualified dependent(s) and are found insurable by the insurance carriers.

Such retirees who re-enroll prior to age sixty-two (62) shall be required to pay one hundred percent (100%) of the cost of the medical and dental insurance package at the group rate in effect at that time for single, 2-person or family coverage from the date of re-enrollment to age sixty-two (62). At age sixty-two (62), the cost of the medical insurance plan (but not dental) will be paid by the City as provided above.

- (ii) Bargaining unit members who do not meet the requirements referenced above in subparagraph (i), shall not be eligible for the fifty dollars (\$50.00) monthly payment as defined in subparagraph (i), above. However, such bargaining unit members shall be eligible to purchase retiree medical and dental insurance coverage at one hundred percent (100%) of the cost of the medical and dental insurance package at the group rate in effect at that time for single, 2-person or family coverage.
- (iii) Retirees will only be eligible for the City's dental plan if the retiree and his or her eligible dependents are enrolled in one (1) of the City's medical insurance plans.

Notwithstanding anything herein to the contrary, bargaining unit members who retire on or after March 26, 2019 (implementation of the arbitration award in Case No. 2018-MBA-393) shall not be allowed to purchase or otherwise remain on the City's health insurance plan once the retiree or his or her eligible spouse reaches age sixty-five (65), except as provided under federal law. Any eligible dependents shall continue to receive health insurance as provided under state and federal mandates.

- b. Members of the bargaining unit on or after June 9, 2008. Bargaining unit members hired into the bargaining unit on or after June 9, 2008 shall not be eligible to receive or purchase any retiree medical or dental insurance coverage as provided in Section 3.4.
- c. Retiree Group Life Insurance. Group Life Insurance for eligible retirees who have retired on or after July 1, 1988 and prior to June 9, 2008 will be nine thousand dollars (\$9,000). Group Life Insurance for eligible bargaining unit members who retire on or after June 9, 2008 will be twelve thousand dollars (\$12,000).

A retiree shall have the right to change the beneficiary designation for the Group Life Insurance benefits without penalty at any time.

- 10. <u>Alternative Medical and Dental Insurance Plans</u>. The City reserves the right to substitute alternative medical and dental insurance plans; provided, however, that any substitute plan will offer essentially the same level of benefits and services and provided further that it is not the City's intent to substitute a plan or plans which restrict the bargaining unit member's right to choose his or her provider of medical services.
- 11. <u>Day Care Physical Examinations</u>. When Day Care bargaining unit members are required to undergo a mandatory physical examination as required for State Certification, such mandatory physical examination will be provided as follows:
 - a. When practicable, the physical examination shall be scheduled and conducted during the bargaining unit member's regular work day; and
 - b. The maximum amount of paid City time allotted for the bargaining unit member's physical examination shall be two (2) hours; and
 - c. Such physical examinations may be provided through the City's occupational health provider or a medical provider of the bargaining unit member's own choosing. However, if such medical provider is outside of the City's insurance carrier network, the bargaining unit member shall be responsible for paying the full cost of the physical examination.
- 12. <u>Long-Term Disability</u>. Effective July 1, 1992, the City shall make available the same Long-Term Disability Plan currently applicable to non-bargaining unit employees, provided participating bargaining unit members: (a) pay the full cost of such coverage by payroll deduction, and (b) meet any individual and collective eligibility requirements imposed by the carrier.
- 13. <u>Health, Maintenance Organizations (HMO) Option</u>. The City and the Association agree that qualified HMOs may be offered to bargaining unit members and retirees on an individual option basis as such plans become available as an alternative to the medical insurance coverage set forth in Subsection 1. above or other substituted plan coverage that the City may choose. Bargaining unit members shall contribute toward the cost of any HMO

coverage at the same level as for other medical insurance plans as set forth in Subsection 5. above. In addition, a bargaining unit member who enrolls in such a plan will pay, by payroll deduction, any and all costs for the selected HMO which are in excess of the allocation rates for the medical insurance coverage set forth in Subsection 1. above or such other substituted plan coverage that the City may choose. It is understood that present federal law requires the option be made available on an annual basis to all bargaining unit members.

- 14. <u>Dependent Care and Flexible Spending Accounts (FSA)</u>. As soon as practicable after June 9, 2008, the City shall make available a pre-tax flexible medical spending account and a pre-tax dependent care account at no cost to the bargaining unit member.
- 15. Re-enrollment. The City shall have the right to hold a required re-enrollment for all bargaining unit members and their eligible dependents. At this time, all 2-person and family plan members shall be required to enroll in their choice of the available City medical and dental benefit plans and provide the appropriate documentation confirming eligibility pursuant to the Hartford Police Union Re-enrollment Memorandum of Understanding (see Appendix D). Any bargaining unit member who does not participate in the re-enrollment may not be eligible for continuation of medical and/or dental benefits for his or her eligible dependents until such time as the member re-enrolls. The City shall have the right to conduct a required re-enrollment not more than once every five (5) years.

Section 3.5 PENSION BENEFITS

The normal retirement benefits for bargaining unit members shall be the same as those for non-unit employees as described in Chapter XVII, Section 3(b) of the City Charter in effect as of June 30, 1979 except as follows:

Effective July 1, 1979, an employee may elect early retirement under the Municipal Employees Retirement Fund and will receive pension benefits reduced by two percent (2%) for each whole year of early retirement.

Effective July 1, 1983, a member of the bargaining unit with twenty-five (25) years of continuous service who is at least fifty-five (55) years of age may elect an early retirement in accordance with Chapter XVII of the City Charter and will receive an unreduced pension benefit. This provision applies only to employees who are in active service with the City immediately prior to the employee's retirement date.

Effective July 1, 1983, the City will credit to the employee's contributions to the pension fund three percent (3%) interest on such contributions in the fund on June 30, 1982 and each July 1st thereafter contributions and any interest paid as of the previous calendar year on June 30th will be credited with three percent (3%) interest. Once credited, the interest and the contributions are payable to the employee upon separation from City employment except that no such payment will be made to an employee granted a pension in accordance with Chapter XVII, Section 3 of the City Charter.

Effective July 1, 1987, an employee may purchase up to four (4) years of Military Service time for service in the Armed Forces of the United States for the periods of service, any of which occurred during the periods set forth in Section 27-103 of the General Statutes of the

State of Connecticut, at the rate payable at the time of entry into City Service, with interest at the rate of seven percent (7%) per annum payable on or before January 1, 1988 for those employed at the time this provision takes effect or within one (1) year of the start of employment for those hired after July 1, 1987.

The period of such service for which the employee receives credit shall be counted for the purpose of computing the amount of his or her retirement allowance provided that such employee shall have completed ten (10) years of continuous service or fifteen (15) years of active aggregate service with the City or shall be retired prior thereto, due to a disability incurred in the course of his or her employment.

Effective January 1, 1988, an employee with at least twenty-five (25) years of service and at least fifty-five (55) years of age, or an employee with at least ten (10) years of service and at least sixty (60) years of age will be eligible for a pension based on two percent (2%) of the employee's final average pay per whole year of service.

Effective January 1, 1988, an employee who is at least fifty-five (55) years of age and has at least ten (10) years of City service will be eligible to receive a pension based on the above formula reduced by four percent (4%) for each year the employee retires short of age sixty (60) with prorations for fractions of a year. Said reduction formula shall apply for the duration of the pension benefit.

Effective January 1, 1988, the employee contribution rate to the pension fund shall be four percent (4%) on the Social Security covered portion of earnings and seven percent (7%) on the excess.

Effective January 1, 1988, an employee's maximum pension under this Agreement is seventy percent (70%) of the gross final average pay.

Effective January 1, 1988, an employee who retires after July 1, 1986 pursuant to the City Charter, Chapter XVII, Section 3(c) Mandatory Retirement or 3(e) Retirement for Disability, or is forced to retire for medical reasons, shall receive a pension calculated on two percent (2%) of the employee's final average pay per whole year of service.

Effective July 1, 1992:

- (a) For purposes of the City Charter, Chapter XVII, Section 3, final average pay shall be based on the highest two (2) of the last five (5) years earnings.
- (b) The employee contribution rate to the pension fund shall be five percent (5%) on the Social Security covered portion of earnings and eight percent (8%) on the excess.
- (c) There shall be no minimum age requirement for a normal (unreduced) pension after twenty-five (25) years of City service.
- (d) Upon IRS approval the City will implement a Section 414 (h)(2) plan for pension contributions.

The provisions of (a) and (c) above shall also apply to employees laid off on or after the date of signing of this Agreement but prior to July 1, 1992, provided they actually retire on or after July 1, 1992.

Effective December 1, 1998:

- a. Current bargaining unit members actively employed, or on leave because of a workers' compensation injury, as of December 1, 1998, shall be eligible for normal retirement upon the completion of at least twenty (20) years of full-time continuous service regardless of his or her age. The normal retirement allowance for such bargaining unit members shall be based upon two and one-half percent (2.5%) of the employee's final average pay for each whole year of service to a maximum of seventy percent (70%) of final average pay. Final average pay is defined as the highest two (2) of the last (5) years of his or her gross earnings.
- b. Current bargaining unit members hired into the bargaining unit before December 1, 1998 with at least ten (10) years of service and at least sixty (60) years of age will be eligible for a pension based on two and one-half percent (2.5%) of the employee's final average pay for each whole year of service. Current bargaining unit members hired into the bargaining unit before December 1, 1998 who are at least fifty-five (55) years of age and have at least ten (10) years of service will be eligible to receive a pension based on the above formula reduced by four percent (4%) for each year the employee retires short of age sixty (60) with prorations for fractions of a year. Said reduction shall apply for the duration of the pension benefit.
- c. Effective the first payroll period following the execution of the 1994-2001 Agreement, the contribution rate for all bargaining unit members to the pension fund shall be six percent (6%) on the Social Security covered portion of earnings and nine percent (9%) on the excess.
- Current bargaining unit members as of December 1, 1998, who are eligible for d. retirement benefits as set forth in subsections a. and b. above may, upon retirement and prior to any sick pay formula reduction, use a portion of their accumulated sick leave to purchase up to four (4) years of additional pension service time for the purpose of computing the amount of his or her retirement allowance. Additional pension service time in whole years may be purchased from accumulated sick leave at the rate of twenty (20) days of accumulated sick leave for each whole year of pension service time. The additional retirement allowance will be calculated in accordance with subsection a. above, provided however, that bargaining unit members eligible for the sick leave "exchange" shall not exceed a maximum benefit of eighty percent (80%) of final average pay with this exchange of sick leave. Only through the use of sick leave exchange may an eligible employee's maximum benefit be increased beyond the seventy percent (70%) maximum level. Such additional purchased service time shall not be used for establishing eligibility for retirement benefits as set forth in subsections a. and b. above. Any accumulated sick leave remaining after the exchange shall be subject to the provisions of Article V, Section 5.3. Employees who exchange accumulative sick leave for additional pension service time shall pay any and all Federal and State taxes resulting from such exchange as if such exchange were made pursuant to Article V, Section 5.3 of this Agreement.

The ability to increase the maximum retirement benefit up to eighty percent (80%) through the use of sick leave exchange only applies to current bargaining unit members as of December 1, 1998 who retire on or before June 30, 2000.

- e. Current bargaining unit members hired into the bargaining unit prior to December 1, 1998 and who retire on or after December 1, 1998 pursuant to the City Charter, Chapter XVII, Section 3(c), Mandatory Retirement, or 3(e) Retirement for Disability or are forced to retire for medical reasons shall receive a pension calculated on two and one-half percent (2.5%) of the employee's final average pay per whole year of service.
- f. Any employee hired into the bargaining unit after December 1, 1998, or who separated from City service prior to this date, shall have the pension formula and benefit levels in effect on July 1, 1994, as set forth above.

All bargaining unit members who were active employees on January 1, 2004, and whose initial date of hire with the City is before July 1, 2003 ("Pre-2003 HMEA bargaining unit members"), shall contribute eleven and eight-tenths percent (11.8%).

Pre-2003 HMEA bargaining unit members, upon retirement, shall have his or her pension benefit calculated at the rate of two and three-quarters percent (2.75%) per each whole year of service. Bargaining unit members who were on the City payroll only as a result of receiving his or her vacation and/or sick leave cash outs, and were not physically performing work for the City as of January 1, 2004, are excluded from this provision. Any service credit obtained through the sick exchange program will be calculated at the rate of two and one-half percent (2.5%) per year. Employees rehired by the City, and whose period of absence is subsequently bridged by the City Council for pension purposes, shall be deemed to be employed by the City for purposes of this paragraph if the aggregate months of City service bring the employee's seniority date to June 30, 2003 or earlier. See paragraph I. of Appendix F for an illustration of this paragraph's provisions.

City employees hired before July 1, 2003, including employees of the Library or Board of Education, who have a current benefit calculation rate other than two and three-quarter percent (2.75%) and are promoted, transferred, or otherwise placed into a HMEA job classification and elect the Pre-2003 HMEA bargaining unit pension benefits shall contribute the same employee rate of contribution as Pre-2003 HMEA bargaining unit members as it may change through negotiations or arbitration, including any applicable interest, retroactive to January 1, 2004. All payment arrangements must be made with the Pension Administration Unit.

Bargaining unit members hired on or after July 1, 2003 ("Post-2003 HMEA bargaining unit members"), shall have a pension benefit in accordance with the provisions of subsection f. above, except that the minimum requirements for a normal, unreduced retirement benefit shall be age fifty-five (55) and twenty-five (25) years of City service, and as more fully set forth in paragraph II of Appendix F. Post-2003 HMEA bargaining unit members shall contribute to the pension fund nine percent (9%) on the social security covered portion of their earnings and twelve percent (12%) on the excess total earnings.

For all bargaining unit members whose initial date of hire with the City is on or after April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA-279) ("Post-2017 HMEA bargaining unit members"), their pension benefits shall be as follows:

- a. Normal Retirement. Post-2017 HMEA bargaining unit members shall be eligible for a normal retirement allowance upon attaining age fifty-five (55) and completing twenty-five (25) years of continuous full-time City service or upon attaining age sixty-two (62) and completing at least five (5) years of continuous service. The normal retirement allowance shall be based on one and three-quarters percent (1.75%) of final average pay for each whole year of service. A Post-2017 HMEA bargaining unit member that (i) has completed at least twenty-five (25) years of continuous full-time City service, (ii) has separated from City service; and (iii) has elected to leave his or her contributions in the fund shall be eligible for a normal retirement allowance upon attaining age fifty-five (55). Post-2017 HMEA bargaining unit members shall retain the current calculation of final average pay; however, HMEA bargaining unit members hired after March 26, 2019 (implementation of the arbitration award in Case No. 2018-MBA-393) shall be calculated on base wages only.
- b. Early Retirement. Post-2017 HMEA bargaining unit members shall be eligible for an early retirement allowance upon attaining age fifty-five (55) and completing five (5) years of full-time continuous service.

Early retirement allowance shall be calculated in the same manner as the Post-2017 HMEA bargaining unit member's normal retirement allowance and then reduced by four percent (4%) for each year the bargaining unit member retires short of age sixty-two (62), with prorations for fractions of a year. Said reduction shall apply for the duration of the pension benefit.

- c. Maximum Pension Allowance. Post-2017 HMEA bargaining unit members shall be eligible for a maximum pension allowance of seventy percent (70%) of final average pay.
- d. Post-2017 HMEA Bargaining Unit Members' Contributions. Post-2017 HMEA bargaining unit members shall contribute to the pension fund nine and one-half percent (9.5%) on the social security covered portion of earnings and twelve and one-half percent (12.5%) on the excess earnings.

Vesting. Post-2017 HMEA bargaining unit members shall vest upon completion of five (5) years of continuous City service.

Military Service. Post 2017 HMEA bargaining unit members shall be allowed to purchase up to a maximum of four (4) years of military service time as defined in Connecticut General Statute Section 27-103 at the rate payable at the time of entry into City service with interest at the rate of seven percent (7%) per annum, payable within one (1) year of date of hire.

Sick Leave Exchange Credit. Post 2017 HMEA bargaining unit members are not eligible for sick leave exchange credit.

Effective April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA-279), any employee promoted or demoted into the HMEA bargaining unit must work in the HMEA classification for a minimum of two (2) years before separation from City service or retirement in order to be eligible for the Pre-2003 or Post-2003 pension benefits.

If the employee does not work a minimum of two (2) years in the HMEA classification before separation or retirement, the employee will be eligible for the Post-2017 pension benefits as described above and in the Municipal Code.

Effective September 10, 2003 and in accordance with Section 2A-28(d) of the Municipal Code, a bargaining unit member's rights to and/or interests in any normal or early retirement allowance shall vest upon completion of five (5) years of continuous City service, regardless of age.

Payroll deductions for pension contributions shall be made pursuant to the provision of Section 414 of the Internal Revenue Code.

The normal retirement allowance or early retirement allowance, including any such allowance that includes sick exchange credit pursuant to City Code Sec. 2A-8(a)(3), for all bargaining unit members who retire on or after June 29, 2009, shall not exceed seventy-five percent (75%) of final average pay.

Notwithstanding anything to the contrary set forth in this Section, no bargaining unit member shall be entitled to receive a pension benefit in excess of the amount which is permitted under Section 415 of the Internal Revenue Code of the United States, as from time to time amended.

The City and the Union acknowledge that the City desires to re-codify the provisions of Chapter XVII of the City's Charter to delineate the terms and conditions of all of the pension benefits applicable to current employees of all employee groups in the City within the context of the Charter and, in so doing, to use, to the greatest extent possible, standardized language to describe the various benefits which apply to all such groups. The City and the Union shall diligently work with each other in good faith to assist the City in those efforts, it being understood, however, that any such efforts will not result in any substantive change in the type, level or amount of benefits which are provided to bargaining unit members under this Agreement. The City and the Union each agree to provide any comments it may have regarding any recommended provision(s) of the proposed recodification within thirty (30) days of submission of such recommended provision(s), to the City, and the Pension Commission or their designee.

It is not the intention of the City or HMEA to change any of the pension rights or benefits of bargaining unit members that existed before the effective date of the July 1, 2007 through June 30, 2011 Collective Bargaining Agreement between the City and HMEA.

Bargaining unit members who retire on or after April 24, 2017 (issuance of the

interest arbitration award in Case No. 2014-MBA-279) will receive any accrued vacation leave and any sick leave remaining after mandatory sick exchange in accordance with Sec. 2A-8(a)(3) of the Municipal Code, to which the bargaining unit member may be entitled, as a lump sum payment. Any vacation time lump sum payment shall not be used to increase the bargaining unit member's years of creditable service and any vacation and/or sick time lump sum payment shall not be included or utilized in any manner in determining or calculating the bargaining unit member's final average pay period, final average pay, and retirement allowance. The effective date of retirement shall be the day immediately following the bargaining unit member's last day of work. This Paragraph shall not apply to any bargaining unit member who is currently on vacation run-out as of April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA-279).

Section 3.6 RESIDENCY

There shall be no residency requirement for bargaining unit members for the duration of this Agreement.

Section 3.7 SHIFT DIFFERENTIAL

Bargaining unit members who are permanently assigned to a shift other than the regular day shift will receive a shift differential of five percent (5%) for the second shift and seven percent (7%) for the third shift. For the purposes of this Section, any shift which begins on or after 5:00 p.m. (3:00 p.m. for the Custodial Series) will be considered the second shift and any shift which begins on or after 12:00 midnight and ends on or before 9:00 a.m. will be considered the third shift.

Bargaining unit members in the job classification of Public Safety Communications Supervisor shall receive a shift differential of five percent (5%) for the second shift and seven percent (7%) for the third shift.

ARTICLE IV HOURS OF WORK, OVERTIME AND FLEXIBLE SCHEDULE

Section 4.1 HOURS OF WORK

Except as provided for below and in Section 4.2, all bargaining unit members shall work forty (40) hours per week, Monday through Friday. The standard work day for employees working a forty (40) hour work week shall start at 8:00 a.m. and end at 5:00 p.m. with one (1) hour for lunch.

The shifts that may be worked by bargaining unit members who hold classifications in the Emergency Services and Telecommunications Department shall be as follows:

Floor Supervisors: 6:30 a.m. – 2:30 p.m.

2:30 p.m. – 10:30 p.m. 10:30 p.m. – 6:30 a.m. 10:00 a.m. – 6:00 p.m. 6:00 p.m. – 2 a.m. 6:00 p.m. – 2:00 a.m.

Administrative Staff: 8:00 a.m. - 5:00 p.m.

9:00 a.m. – 6 p.m.

Notwithstanding the above, the City shall maintain its management right to determine whether to have each of the shifts. Additionally, a regular work schedule may include multiple shifts (e.g., a bargaining unit member whose regular work schedule is as a relief supervisor, he or she may work 6:30 a.m. to 2:30 p.m. on three (3) days and 2:30 p.m. to 10:30 p.m. on two (2) days).

A bargaining unit member may request, for good and sufficient reasons, a variance in his or her standard work schedule. Such shift exception may be on a permanent basis or for a fixed period of time, and can be used to change the start and/or end times of the standard work day or length of the standard lunch break as defined above. In order for a bargaining unit member to receive a shift exception, he or she must submit a written request to his or her department head and the Director of Human Resources and Labor Relations, and such request must be approved in writing by the department head, Director of Human Resources and Labor Relations and the Association.

Section 4.2 FLEXIBLE SCHEDULE

The standard work hours may be flexed by an eligible bargaining unit member under either one or both of the following conditions:

- 1. By occasionally flexing his or her standard work week schedule through the use of accumulated hours worked in excess of the standard work day or work week hours, provided that:
 - a. The accrual of such hours was within thirty (30) calendar days prior to the use of such hours per subsection b. below. No more than fifty (50) hours may be accumulated within any thirty (30) day period herein referenced.
 - b. The accrual and use of such hours is approved in advance by the bargaining unit member's immediate supervisor. Approval of the accrual and/or use of excess accumulated hours shall not be unreasonably denied. However, in consideration of overtime compensation included in certain HMEA pay grades, use may be denied when a bargaining unit member has two (2) or fewer accumulated work hours available for use per subparagraph (1)(a) above. It is anticipated and

expected that a bargaining unit member will, when necessary, continue to work beyond his or her regular work day in the performance of work duties without the expectation of hour-for-hour time off under this flexible work week provision.

- 2. By occasionally flexing the start and/or end times of his or her standard work day, provided that:
 - a. The bargaining unit member works the required eight (8) hour work day, unless otherwise flexed under subparagraph (1) above; and
 - b. In the case of emergency services requiring immediate replacement in the Police or Fire departments, the bargaining unit member notifies his or her immediate supervisor of the change to his or her standard work day schedule at least one (1) hour in advance of such change; and
 - c. For employees other than as described in subparagraph (2)(b) above, when the bargaining unit member is seeking to flex his or her standard start time by more than one (1) hour past his or her standard start time, he or she makes every effort possible to notify his or her immediate supervisor of such change prior to the standard start time of the bargaining unit member, but no later than two (2) hours after the standard start time for the member; and
 - d. The bargaining unit member has no previously scheduled meetings, events or pre-established deadlines that require his or her attendance during the flexed time; and
 - e. Such alterations do not establish a pattern or permanent shift exception; and
 - f. The notice required under subparagraphs (2)(b) and (2)(c) above may be satisfied by leaving a voicemail with or sending an email to the immediate supervisor by the deadline therein established and as in accordance with any established call-in procedures within the respective departments.

The occasional flexing of the bargaining unit member's standard work day under the provisions set forth in subparagraph (2) above does not require prior approval.

Notwithstanding the above, a bargaining unit member shall not work through his or her standard lunch break in order to alter or flex any standard work hours unless approved in advance by the bargaining unit member's immediate supervisor. Any alteration to the bargaining unit member's standard lunch break that is intended to be permanent or recurring for a certain period of time must be approved as a shift exception in accordance with Section 4.1 above.

For purposes of this Section, eligible bargaining unit members shall be defined as full-time bargaining unit members in a job classification that receives five percent (5%) in lieu of overtime.

Section 4.3 OVERTIME PAY

A bargaining unit member shall be compensated for overtime only when the overtime work is properly authorized by the Department Head or Appointing Authority.

1. Overtime Pay – General.

- a. Bargaining unit members employed in the classifications listed in this Sub-Paragraph shall be paid overtime pay for hours worked above forty (40) in a work week. Such overtime pay shall be computed on the basis of one and one-half (1½) the bargaining unit member's regularly hourly rate of pay, except that such bargaining unit members shall receive double time for all work performed on City-recognized holiday.
 - Administrative Clerk, Class Code 0071
 - Supervising Account Clerk, Class Code 0303
 - Supervising Cashier, Class Code 0332
 - Radio Technician II, Class Code 4346
 - Supervisor of Collections, Class Code 0304
 - Benefits Assistant, Class Code 0069
 - Supervisor of Records, Class Code 0305
 - School Crossing Guard Supervisor, Class Code 5095
 - Sidewalk Repair Section Leader, Class Code 4080
 - Supervisor Recreation Specialist (Part-Time)
- b. Except as provided otherwise in this Section, bargaining unit members employed in the classification series listed in this Sub-Paragraph shall be paid an additional five percent (5%) of the base rate of the classification on a continuing basis as additional compensation in lieu of overtime pay.
 - Professional Series
 - Data Processing Series
 - Engineering Series (Assistant Traffic Engineer, Civil Engineer IV & Architect III)
 - Recreation and Related Series
 - Nursing and Medical Series
 - Chief of Buildings and Trades, Class Code 5272
- c. Except as provided otherwise in this Section, bargaining unit members employed in the classifications series listed in this Sub-Paragraph shall be paid an additional five percent (5%) of the base rate of the classification on a continuing basis as additional compensation in lieu of premium overtime pay and shall receive straight time for all hours worked above forty (40) hours in a work week, except that such bargaining unit members shall receive double time for all work performed on Cityrecognized holiday.

- Inspectional Series
- Custodial Series
- Equipment Operations Series (except those classifications listed in the Sub-Paragraphs below)
- Skilled Trades Series (except those classifications listed in the Sub-Paragraphs below)
- d. Bargaining unit members who are employed in the classifications listed in this Sub- Paragraph are considered to be "Principal Supervisors" and shall be paid five percent (5%) in lieu of overtime and receive their straight time hourly rate of pay for all work performed beyond the normal work day or work week under the following conditions: (1) snow, ice and/or severe weather operations; (2) flood operation (when pumping only); (3) when supervising a full-staff operation on a holiday; or (4) on a weekend following a holiday or a weekend following a severe snow or other severe weather condition.
 - Public Works Assistant Superintendent, Class Code 4086
 - Superintendent of Solid Waste & Recycling, Class Code 4033**
 - Assistant Superintendent of Parks, Class Code 6065*
 - Superintendent of Streets, Class Code 4085**
 - Assistant Superintendent of Streets, Class Code 4084*
 - Public Works Superintendent, Class Code 4087
 - Survey Supervisor, Class Code 2013
 - Superintendent of Parks, Class Code 6080**
 - Senior Project Manager, Class Code 2029
 - Superintendent of City Buildings, Class Code 4245
 - Equipment Superintendent, Class Code 4170**

Effective April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA- 279), bargaining unit members employed in the above classifications of this Sub-Paragraph and who work in the Department of Public Works will be compensated on the basis of one and one-half (1½) the bargaining unit member's regularly hourly rate of pay for all work performed beyond the normal work day or work week for snow, ice and/or severe weather operations.

- e. Notwithstanding the above, bargaining unit members employed in the classifications listed in this Sub-Paragraph are paid five percent (5%) in lieu of overtime and shall receive their straight time hourly rate of pay for any work performed beyond the normal work day or work week.
 - Assistant Building Maintenance Supervisor, Class Code 4243

^{*}Classification to be eliminated through attrition and replaced with Public Works Assistant Superintendent.

^{**}Classification to be eliminated through attrition and replaced with Public Works Superintendent.

- Auto Mechanic Section Leader, Class Code 4151
- Building Maintenance Section Leader, Class Code 1015
- Park Services Section Leader, Class Code 6022
- DPW Supervisor, Class Code 4008
- Sign Shop Section Leader, Class 4348
- Street Maintenance Section Leader, Class Code 4083
- Supply Room Section Leader, Class Code 4012
- Engineering Inspection Supervisor, Class 2021
- Public Works Section Leader, Class Code, Class Code 4014*

Effective April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA- 279), bargaining unit members employed in the above classifications of this Sub- Paragraph and who work in the Department of Public Works will be compensated on the basis of one and one-half (1½) the bargaining unit member's regularly hourly rate of pay for all work performed beyond the normal work day or work week for snow, ice and/or severe weather operations.

- f. Bargaining unit members employed in the classifications listed in this Sub-Paragraph are paid five percent (5%) in lieu of overtime and shall be eligible to receive time and one-half (1½) overtime payment for hours worked when recalled to work outside of their regular work hours for snow, ice and/or severe weather operations and for performing any of these duties only: (1) flood operations (when pumping only), (2) snow and/or ice removal operations or (3) any tree work resulting from any storms.
 - Administrative Assistant, Class Code 0529
 - Civil Engineer III, Class Code 2007
 - Engineering Inspection Supervisor, Class Code 2012
 - Survey Supervisor, Class Code 2013
 - Principal Engineering Technician, Class Code 2004
 - City Forester, Class Code 0521
 - Automotive Mechanic Section Leader, Class Code 4151
 - Project Leader, Class 0322
 - Street Maintenance Section Leader, Class Code 4083
 - Public Works Section Leader Class Code 4014*
 - DPW Supervisor, Class Code 4008
 - Sign Shop Section Leader, Class 4348
 - Park Services Section Leader, Class Code 6022

g. Bargaining unit members who are assigned to snow and ice removal operations and who are called in for work outside of their regularly scheduled working hours shall be paid a minimum of three (3) hours at the applicable overtime rate as set forth in the above paragraphs.

^{*}Classification to be eliminated through attrition and replaced with DPW Supervisor.

^{*}Classification to be eliminated through attrition and replaced with DPW Supervisor.

h. This Section supersedes all overtime references contained in the City of Hartford's Personnel Rules & Regulations dated December 27, 1993 and any Memoranda dated before the approval date of the 2013-2017 contract.

2. Overtime in the Emergency Services & Telecommunications Department ("ES&T").

Any time a shift is not fully staffed by a Public Safety Communication Supervisor who is assigned full-time to directly supervise the dispatchers in ES&T on a 24-7 basis ("HMEA Floor Supervisors"), the shift shall be offered as an overtime opportunity as follows:

- a. The HMEA Floor Supervisors shall sign up for overtime opportunities by Tuesday of the week preceding the commencement of the shift for the overtime opportunity. Sign-up sheets will be made available by the preceding Saturday. Failure to sign up for a shift shall constitute a refusal of the overtime opportunity.
- b. Those HMEA Floor Supervisors who have signed up for a shift shall have the first opportunity to accept that particular full-shift overtime opportunity.
- c. If none of the HMEA Floor Supervisors accept the full-shift overtime opportunity, the opportunity shall then be offered to the Public Safety Communication Supervisor(s) who are not Floor Supervisors ("HMEA Non-Floor Supervisors").
- d. If an overtime opportunity remains unfilled, the overtime opportunity shall be divided in to two (2) half shifts (generally four-hours in duration) and offered to the HMEA Floor Supervisors who signed up for the overtime opportunity, and thereafter to the HMEA Non-Floor Supervisors.
- e. If the overtime opportunity has not been filled per the preceding subparagraphs, the full or half-shift, overtime opportunity will be offered to the remaining HMEA ES&T Managerial Staff ("HMEA ES&T Managers") (e.g., Project Manager, Senior Project Manager, etc.).
- f. Separate overtime lists shall be maintained for the HMEA Floor Supervisors, the HMEA Non-Floor Supervisors, and the HMEA ES&T Managers, which shall be used for the distribution of the overtime opportunities.
- g. Notice of an overtime opportunity will be provided to eligible HMEA members by both telephone and email at the number and email address provided by the member for this purpose. It shall be the responsibility of the HMEA member to notify of any changes. Notice of an overtime opportunity will be provided to HMEA members no less than twenty-four (24) hours before the beginning of the overtime opportunity, unless the opportunity is discovered within twenty-five (25) hours of the commencement of the shift, in which case notice shall be provided as soon as possible. HMEA members shall be given at least one (1) hour from the time of

notification to respond to the overtime opportunity unless the opportunity arises within twenty-five (25) hours of the commencement of the overtime shift.

- h. "Refusal" of an overtime opportunity shall be defined as follows:
 - i. Rejection of the overtime opportunity;
 - ii. Failing to respond to within one (1) hour of the notification of overtime opportunity; and/or
 - iii. Accepting and then cancelling or not showing up for the overtime opportunity.

When a HMEA member refuses an overtime opportunity, his or her name shall go to the bottom of that particular list.

- i. HMEA members must maintain a Communications Supervisor Certification in order to be eligible for overtime opportunities.
- j. Overtime takes precedence over an open shift. HMEA members may not swap shifts to make themselves available for a more favorable overtime opportunity or preference for the open shift.
- k. HMEA members who work a floor overtime shift shall be paid straight time for all hours worked above forty (40) hours in a week. If a HMEA member works an overtime floor shift on a City-recognized holiday, the HMEA member shall, in addition to holiday pay, have the option of being paid straight time for all hours worked or banking the hours to be used by the end of the fiscal year. Any accumulated but unused banked holidays will be forfeited at the end of the fiscal year. Requests to use banked holiday hours shall not be unreasonably denied.

3. Overtime for Reproduction/Graphic Manager.

- a. Bargaining unit member(s) employed in the Reproduction/Graphic Manager classification, which receives five percent (5%) in lieu of overtime pay, will be eligible for straight time overtime for the hours worked above forty-two (42) hours per week.
- b. Overtime eligibility will require prior approval of the overtime hours by the Appointing Authority; and
- c. The pre-approved overtime hours will be for seasonal work only such as during budget and/or tax season and will be limited to a maximum of twenty (20) hours per week; and
 - d. Any compensated hours will not be eligible to be used as flex time.

4. Overtime for Inspector II Classification.

a. Effective April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA-279), bargaining unit members employed in the classification of Inspector

II who are called back to work outside of their regular work hours ("call-out") shall receive three (3) hours of overtime pay or overtime pay for the actual numbers of hours worked, whichever is greater, and provided such hours are not annexed consecutively to one end or the other of the bargaining unit member's work day. Such overtime pay rate shall be computed on the basis of one and one-half (1½) times the bargaining unit member's regular hourly rate of pay. Portal to portal travel shall be compensable under this Section. Any consecutive call-outs resulting in an absence from home for three (3) or less consecutive hours shall not generate a new three (3) hour minimum.

b. Bargaining unit members employed in the classification of Inspector II who are required to work on a City-recognized holiday shall be paid at the rate of two (2) times their regular hourly rate of pay, in addition to holiday pay.

ARTICLE V HOLIDAYS AND LEAVE

Section 5.1 HOLIDAYS

The following holidays shall be recognized and observed as paid holidays for all fulltime bargaining unit members:

New Year's Day
Martin Luther King Day
Lincoln's Birthday
Washington's Birthday
Good Friday
Memorial Day

Independence Day Labor Day Columbus Day Veterans Day Thanksgiving Day Christmas Day

Whenever the holidays listed above fall on a Sunday, the following Monday shall be observed as the holiday; and whenever the holidays listed above fall on a Saturday, the preceding Friday shall be observed as the holiday.

If Lincoln's Birthday and Washington's Birthday are combined in a single holiday for all other employees of the City (excluding the Board of Education and emergency services) such consolidation shall apply to members of this bargaining unit as well.

HMEA bargaining unit members who work as a Floor Supervisor in the Emergency Services & Telecommunications Department who are required to work on a City-recognized holiday as a part of his or her regular work schedule shall, in addition to holiday pay, have the option of being paid straight time for all hours worked or banking the hours to be used by the end of the Fiscal Year. Requests to use banked holiday hours shall not be unreasonably denied.

Section 5.2 VACATION

Each permanent full-time bargaining unit member shall earn and accumulate

vacation leave with pay during and after his or her probationary period in accordance with this Section.

Vacation leave shall be earned over a twelve (12) month period (July 1st through June 30th) and credited to the bargaining unit member on July 1st of the fiscal year following the bargaining unit member's appointment and on July 1st of each subsequent year of creditable service.

New employees who have served less than twelve (12) continuous months of City service shall earn vacation leave in accordance with the schedule provided below. New employees shall not be able to use vacation leave until they have completed six (6) months of continuous City service.

Length of Service In Months	Vacation Leave Accumulation In Days
1	1 1/4
2	2 1/2
3	3 3/4
4	5
5	6 1/4
6	7 1/2
7	8 3/4
8	10
9	11 1/4
10	12 ½
11	13 3/4
12	15

Each permanent full-time bargaining unit member appointed as a City employee on or before July 1st and who serves continuously with the City until the following June 30th shall earn three (3) weeks' paid vacation (1.25 days per month).

Bargaining unit members who have completed five (5) years of full-time employment as a City employee on July 1st and served continuously with the City for the previous twelve (12) months shall earn four (4) weeks paid vacation annually (1.66 days per month).

Bargaining unit members who have completed fifteen (15) years of full-time employment as a City employee on July 1st and served continuously with the City for the previous twelve (12) months shall earn five (5) weeks paid vacation annually (2.08 days per month).

For the purpose of computing vacation leave, the calendar month shall be used, except that a bargaining unit member appointed as a City employee during the first fifteen (15) days of any month shall be considered as having been appointed on the 1st day of that month, and those appointed after the 15th day of any month shall be considered as having been appointed on the 1st day of the succeeding month.

Vacation leave may be carried over from one (1) fiscal year to the next to a maximum accumulation of no more than eight (8) weeks. Any bargaining unit member with more than eight (8) weeks of accrued vacation leave on June 30th of each fiscal year shall forfeit any vacation days in excess of eight (8) weeks. Notwithstanding any language in this Section to the contrary, those bargaining unit members who had in excess of eight (8) weeks of accrued and unused vacation leave on June 30, 2021 will be allowed to carry over up to a maximum of five (5) additional days of the contractual allowable amount into Fiscal Year 2021-2022. Any hours forfeited on June 30, 2021 up to a maximum of forty (40) hours will be restored to the bargaining unit member upon approval of the Agreement and must be used by June 30, 2022. Any additional vacation leave days above the contractual eight (8) week maximum will not be paid out to the bargaining unit members upon separation.

Use of vacation leave shall be granted by mutual agreement between the bargaining unit member and the department head or designee; provided, however, that no department head or designee shall withhold the vacation leave of any bargaining unit member in excess of eighteen (18) months.

In computing vacation leave, legal holidays as established in Section 5.1 are not to be considered as part of vacation allowance.

In the event of the death of a bargaining unit member, his or her spouse and/or minor children shall receive the accrued vacation pay earned by the bargaining unit member. Where the bargaining unit member has no minor children and has notified the Human Resources Department that a valid certificate of domestic partnership is on file with the City of Hartford Town Clerk, the domestic or civil union partner shall receive the accrued vacation pay earned by the bargaining unit member. In the event the bargaining unit member has neither a spouse, minor children, nor a domestic or civil union partner, the accrued vacation pay shall be paid to the estate of the deceased bargaining unit member.

Bargaining unit members who are separated from the City and who have accrued vacation leave to their credit at the time of separation shall be paid the salary equivalent of the accrued vacation leave. The maximum pay-out of vacation upon separation will be the salary equivalent of accrued vacation leave up to a maximum of twelve (12) weeks regardless of the number of hours credited or earned at the time of separation. Vacation leave accrued during the fiscal year in which the bargaining unit member is separated will only be paid if the bargaining unit member is in good standing at the time of separation. Any vacation leave lump sum payment shall not be used to increase the bargaining unit member's years of creditable service and any vacation lump sum payment shall not be included or

utilized in any manner in determining or calculating the bargaining unit member's final average pay period, final average pay, and retirement allowance. The effective date of separation shall be the day immediately following the bargaining unit member's last day of work.

Section 5.3 SICK LEAVE

1. <u>Sick Leave Accumulation</u>. Each permanent full-time bargaining unit member shall earn sick leave with pay during and after his or her probationary period according to the following schedule:

Length of Service in Months	Sick Leave Accumulation in Days
1	11/4
2	2½
3	33/4
4	5
5	6 1/4
6	7 1/2
7	8 3/4
8	10
9	11 1/4
10	12 ½
11	133/4
12	15

Bargaining unit members appointed on or before July 1st and who serve continuously until the following June 30th shall earn three (3) weeks of paid sick leave in accordance with the above schedule. Sick leave is to be used only for the purposes contained in this Section. Any unauthorized use of sick leave shall be cause for disciplinary action.

Effective March 26, 2019 (implementation of the arbitration award in Case No. 2018-MBA-393), bargaining unit members shall accumulate any unused portion of sick leave, including that accumulated in the prior fiscal years, to a maximum of one-hundred and twenty (120) days. Bargaining unit members who have more than one hundred twenty (120) days of accumulated sick leave as of March 26, 2019 (implementation of the arbitration award) may keep their current sick leave balance but may not accrue additional leave until or unless their balance decreases below the one hundred and twenty (120) day maximum and thereafter may not accumulate in excess of the one hundred twenty (120) day maximum.

- 2. <u>Sick Leave Donations</u>. A bargaining unit member who has accumulated at least fifteen (15) days of sick leave may donate a portion of his or her accumulated sick leave to another bargaining unit member, who through serious and protracted illness of the member or his or her immediate family has used up all of his or her accumulated sick leave and vacation leave. The Mayor, or his or her designee, and the Director of Human Resources and Labor Relations shall authorize the donation and transfer of such sick leave provided the following conditions are met:
 - a. The donating bargaining unit member shall have a minimum sick leave

accumulation of fifteen (15) days.

- b. No more than five (5) days of sick leave for every thirty (30) days of sick leave accumulated by the donating bargaining unit member to a total donation of thirty (30) days shall be permitted between any two (2) bargaining unit members.
- c. Sick leave, donated by one bargaining unit member to another, when used, shall be paid at the hourly rate of the donor or donee, whichever is less.
- d. No more than twenty (20) days of donated sick leave may be allowed to accumulate in any donee's name at any given time, provided if such donated sick leave should be reduced below twenty (20) days, additional donations may be made to restore the level of accumulated sick leave to twenty (20) days.
- 3. Advance of Sick Leave. Sick leave advance may be granted by the department head with approval of the Director of Human Resources and Labor Relations. In requesting an advance of sick leave, the department head shall submit the following information to the Director of Human Resources and Labor Relations: the length of City service of the bargaining unit member; the sick leave record of the bargaining unit member; and a medical certificate which shall include the prognosis and the probable date when the bargaining unit member will return to work.
 - a. No advance of sick leave may be authorized unless the bargaining unit member exhausts all accrued leave. In no case shall advance sick leave exceed twenty (20) days at full pay.
 - b. Any advanced sick leave shall be repaid by a charge against such sick leave as the bargaining unit member may subsequently accrue. No repayment of advanced sick leave shall be required until the bargaining unit member has first accrued five (5) days of sick leave following the bargaining unit member's return to duty.
- 4. **Special Rules**. No refund of vacation leave shall be allowed due to illness incurred while on vacation leave. Holidays and regular days off shall not be counted in computing sick leave taken.
 - 5. <u>Use of Sick Leave</u>. Sick leave may be used for the following purposes:
 - a. Personal illness, maternity leave, physical incapacity, or noncompensable bodily injury or disease.
 - b. Enforced quarantine in accordance with community health regulations.
 - c. For a reasonable period of time as defined by the Director of Human Resources and Labor Relations only for illness or physical incapacity in the bargaining unit member's immediate family or others domiciled in the same household prior to illness for whom the bargaining unit member is responsible and the primary care giver. Immediate family is defined for purposes of this provision

to be father, mother, sister, brother, wife, husband, domestic or civil union partner or children related either by blood, marriage or adoption to the bargaining unit member.

- d. To meet medical and dental appointments of emergency nature and Health Department referrals. In addition, sick leave may also be granted for a limited time for normal medical and dental appointments when a bargaining unit member has made reasonable efforts to secure appointments outside of normal working hours provided that the department head is notified in advance of the day on which the absence occurs.
- e. Death of relatives or friends, marriage in the immediate family, celebration of religious holidays and christenings, graduations and similar ceremonies, provided prior notification to the department head is submitted in writing giving full particulars in advance, subject to approval. A maximum of three (3) days a year under this provision shall be granted except that it may be increased in situations upon approval by the Director of Human Resources and Labor Relations.
- f. Natural fathers who are primary care givers shall be allowed to use accumulated sick leave for a maximum of ten (10) calendar days, upon the birth of a child. If accumulated sick leave is exhausted prior to the ten (10) calendar days, the balance of the leave will be without pay, unless such time is extended by the Appointing Authority with the approval of the Director of Human Resources and Labor Relations.

Natural fathers wishing to take such leave must provide a copy of the birth certificate as proof of paternity. Leave will not be granted without the above documentation being provided prior to the start of leave.

- g. Domestic or civil union partners who are primary care givers shall be allowed to use accumulated sick leave for a maximum of ten (10) calendar days upon the birth of a child. If accumulated sick leave is exhausted prior to the ten (10) calendar days, the balance of the sick leave shall be without pay. In no case will a domestic or civil union partner be eligible for both maternity and primary care leave. Domestic or civil union partners wishing to take such leave must provide a copy of the birth certificate and a copy of the domestic partnership or civil union certificate to the City of Hartford, Town Clerk, pursuant to Section 2-63 of the Municipal Code, as proof of the relationship to the birth of the child.
- h. Bargaining unit members who are adoptive parents or the domestic or civil union partner of the adoptive parent shall be allowed to use accumulated sick leave for thirty (30) calendar days for adjustment in family living conditions.

If accumulated sick leave is exhausted prior to the thirty (30) calendar days, the balance of the adoption leave will be without pay. Only the person primarily responsible for the child will be entitled to this leave.

Bargaining unit members wishing to take an adoption leave must present

copies of legal adoption papers as proof of such adoption. In the case of a domestic or civil union partner, proof of a valid domestic partnership or civil union certificate must also be filed with the City of Hartford, Town Clerk, pursuant to Section 2-63 of the Municipal Code. Adoption leave will not be granted without this documentation.

i. In accordance with the schedule below, bargaining unit members may use a certain number of sick days per fiscal year for any purpose not otherwise provided above subject to the same notification requirements as in Paragraph e. above. Any personal days taken shall be deducted from the bargaining unit member's sick leave accrual balance.

Aggregate Years of Service

Less than eight (8) years Eight (8) years but less than fifteen (15) years Fifteen (15) years or more Total Number of
Personal Days
Up to three (3) days
Up to five (5) days

Up to seven (7) days

For purposes of this provision, time spent in the armed forces of the United States (i.e., Army, Navy, Air Force, Marine Corps and the Coast Guard) while on approved leave from the City, shall be included in determining the number of aggregate years of service.

- 6. <u>Proof of Illness or Other Uses of Sick Leave</u>. Departments may require proof of illness or other uses of sick leave as provided in this Section. In the judgment of the department head or designee, proof of sick leave may include a doctor's certificate or other reasonable verification available to the bargaining unit member.
 - a. For absences of less than three (3) work days, proof of sick leave will not normally be required unless, in the judgment of the department head or designee, there is a question of authorized usage.
 - b. For absences of three (3) consecutive work days or more, a doctor's certificate will normally be required.
 - c. For absences exceeding five (5) work days, a doctor's certificate indicating the probable duration of the disability may be required, and additional certificates may be required for extended illnesses.
- 7. Compliance with Sick Leave Requirements. Sick leave provided above shall be granted only if the requirements of these provisions are complied with and the initial report of illness by the bargaining unit member is made to his or her department head or designee within two (2) hours of his or her regularly scheduled start time on each day of absence. Nothing in this Subsection shall preclude the payment of sick leave to a bargaining unit member who cannot comply with the provisions of this Subsection due to extenuating circumstances (see Subsection 6 above).

- 8. **Payment of Sick Leave.** For all full-time bargaining unit members, the City will make payment for accumulated sick leave as follows:
 - a. Full payment of accumulated sick leave in case of death;
 - b. For bargaining unit members with ten (10) years of more of completed service as of July 1, 2019: Fifty percent (50%) payment of accumulated sick leave at time of retirement.
 - c. For bargaining unit members with less than ten (10) years of completed service as of July 1, 2019: thirty-five percent (35%) payment of accumulated sick leave at time of retirement.
 - d. Notwithstanding anything herein to the contrary, for any bargaining unit member hired after March 26, 2019 (implementation of the arbitration award in Case No. 2018-MBA-393), the City will make no payment of accumulated and unused sick leave upon any separation, including retirement.

Section 5.4 COMPENSATION FOR INJURIES AND DISEASE

Each bargaining unit member shall be compensated for any injury or occupational disease under the provisions of the Workers' Compensation Act of Connecticut.

Effective May 1, 1999, bargaining unit members shall be covered under the City's Managed Care Program, as approved by the State Workers' Compensation Commission.

The bargaining unit member is responsible for paying the bargaining unit member share of his or her medical and dental premiums and any other applicable payroll deductions while out on Workers' Compensation leave.

Section 5.5 MILITARY LEAVE

Military leave and benefits shall be provided in the following manner to each fulltime employee who is a member of the uniformed services and who is called to active duty or who volunteers for duty.

If the employee's military pay is less than his or her base salary, the employee shall receive the difference between his or her base salary and his or her military salary for up to a total of one (1) year during the employee's employment with the City. Any existing health insurance coverage provided by the City shall continue for up to a total of one (1) year while such employee is on an approved military leave and the employee's contribution for such health insurance coverage shall continue as if the employee were not on military leave. The employee will receive pension credit for military leave of up to one (1) year and the employee's pension contribution shall continue to be withdrawn in the same manner as if the employee where not on military leave. For military leave beyond one (1) year, an employee may choose to receive pension credit for such leave. In order to receive such pension credit, the employee must pay into the pension fund, under the terms proscribed by the pension commission, such amounts as are equivalent to those which the employee would have

contributed in the form of employee contributions had the employee not been on military leave for the period of unpaid military leave beyond one (1) year. If the employee elects not to repay the missed employee pension contributions while on unpaid military leave, the employee will not receive pension credit for his or her qualified military service beyond the one (1) year period.

Section 5.6 FAMILY AND MEDICAL LEAVE

An employee who is an "eligible employee" as defined under the Federal Family and Medical Leave Act ("FMLA"), 29 U.S.C. § et seq., shall be granted up to twelve (12) weeks of unpaid leave during a twelve (12) month period in accordance with the applicable provisions of the FMLA. Any accumulated paid leave time must be substituted for unpaid FMLA leave and exhausted first, and said paid leave shall be included in, and shall not be in addition to, the aforementioned twelve (12) weeks of allowable leave as permitted by the Act. The twelve (12) month period shall be measured from the twelve (12) months commencing on the date the employee first takes FMLA leave. A medical certificate as provided in the FMLA shall be required for FMLA leave situations. Employees on FMLA leave shall have the continuity of their employment preserved for seniority purposes. Employees on FMLA leave shall have their health insurance coverage maintained during such leave on the same terms as if they had continued to work, including that employees shall pay any required premium contributions toward the cost of such insurance. If the employee fails to return to work under circumstances described by the FMLA, the employee shall be liable for the retroactive premium payments in accordance with the FMLA.

ARTICLE VI GENERAL PROVISIONS

Section 6.1 ASSOCIATION ACTIVITIES

Not more than three (3) Association representatives shall be granted leave from duty with full pay for all meetings between the City and the Association for the purpose of processing grievances at Step 3 or 4 when such meetings take place at any time during which such members are scheduled to be on duty.

The term Association representative as used in this Article includes the Association President.

Grievance meetings may be held during work time. The employee and Association representative attending grievance hearings during regular work hours shall be entitled to be absent from their regular positions with pay while actually attending such grievance hearings with thirty (30) minutes of preparation time.

An Association representative may utilize up to two (2) hours on City time with pay for the purpose of investigating and, if necessary, preparing a grievance for submission at Step 1 of the grievance procedure.

A written list of Association area representatives and other officers and representatives shall be furnished to the City immediately after their designation and the Association shall notify the City of any changes.

The internal business of the Association shall be conducted during the non-duty hours of the bargaining unit members involved.

Association officials may attend meetings during working hours without loss of pay when such meetings are requested or approved by the Director of Human Resources and Labor Relations.

Section 6.2 CLASSIFICATION PLAN

- 1. The Plan. The City maintains a classification plan for the classification of positions in the bargaining unit. For the purposes of this Agreement, the classification plan shall be the one in effect on the effective date of this Agreement, except as modified by agreement of the City and the Association. The classification plan consists of class specifications, class relationship material and other related materials.
- 2. **Modifications to the Plan**. When the City creates new class specifications or makes other than minor changes in existing class specifications for the purpose of normal maintenance of the classification plan, the City and the Association shall negotiate appropriate pay rates and pay ranges.
- 3. Acting Assignments. Bargaining unit members assigned to a higher class for greater than a one (1) week period shall receive an increase in pay to the next full growth step. Assignment to a higher class means that a bargaining unit member has been assigned to a class with a higher pay rate either because of the absence of an employee who is classified in the higher class or because operating requirements present the need for such duties to be performed for a period of time. If such assignment continues past a seven (7) day calendar week, the employee shall receive the correct growth steps for the acting position and shall continue to receive pay increases in accordance with the pay plan for the acting position.

An acting assignment to a higher classification may be made in accordance with the City of Hartford Personnel Rules and Regulations in effect on December 27, 1993. Such an acting assignment may be made for up to a ninety (90)-day period, at which time it will be reviewed and may be extended for a maximum of one (1) additional ninety (90)-day period.

4. Request for Change in Classification. Requests for changes in classification, salary increases or title changes will be responded to in writing within six (6) months of the date of receipt by the Human Resources Department unless the time limit is extended by mutual agreement. No response will be made to such a request if the position has been studied within one (1) year of the date of request.

Any differences, disputes or controversy concerning the classification of individual positions in the bargaining unit shall be resolved through the grievance procedure at the

third step; provided, however, that grievances involving requests for reclassification from one existing classification in the bargaining unit to another existing classification in the bargaining unit may be submitted thereafter to arbitration.

Section 6.3 SENIORITY LIST

The City shall prepare a list of bargaining unit members, showing their seniority in length of service with the City and mailing addresses, and send it to the Association President within sixty (60) days of the signing of this Agreement, and on or about July 1 of each year thereafter for the duration of this Agreement. The Association shall provide the City with a copy of its mailing list on or about July 1 of each year.

The Association President, Executive Vice President, and thirteen (13) Area Representatives shall receive super-seniority rights in the event of lay-off. The Association will supply a list of the above named office holders to the City in February of each year. If the City adds, subtracts or changes work locations, the number of Area Representatives may be changed accordingly.

Section 6.4 BULLETIN BOARDS

The City will furnish and maintain five (5) bulletin boards in convenient places to be used by the Association. The Association agrees that material posted will not contain propaganda against or attacks upon the City, any department or agency, or any official thereof. All material posted shall be in good taste.

Section 6.5 MILEAGE

The mileage allowance for authorized use of personal automobiles for City business will be the rate as established by the Internal Revenue Service.

Section 6.6 MEAL ALLOWANCE

Effective the lst of the month which falls at least fifteen (15) days after June 9, 2008, bargaining unit members engaged in the supervision of employees engaged in snow and ice removal activities on an overtime basis shall receive a meal allowance on the following basis:

- a. If a bargaining unit member works more than one (1) hour before his or her regular shift, he or she shall receive a meal allowance of five dollars (\$5.00). He or she shall also receive an additional meal allowance of five dollars (\$5.00) for each additional period of four (4) hours before his or her regular shift, but in no event shall he or she receive two (2) meal allowances for the first two (2) periods if he or she works less than eight (8) hours overtime.
- b. If a bargaining unit member works more than two (2) hours beyond his or her regular shift, he or she shall receive a meal allowance of five dollars (\$5.00). He or she shall also receive an additional meal allowance of five dollars (\$5.00) for each additional period of four (4) hours after his or her regular shift, but in no

event shall he or she receive two (2) meal allowances for the first two (2) periods if he or she works less than eight (8) hours overtime.

Section 6.7 PROBATIONARY PERIOD

There shall be a probationary period of at least three (3) months not to exceed six (6) months for those appointed from a reemployment list following a layoff.

Bargaining unit members whose reporting relationship is changed as a result of reorganization or other City action but whose job duties remain substantially unchanged shall not be required to serve a new probationary period as a result thereof.

Section 6.8 SAFETY SHOES

Bargaining unit members whose direct-report subordinates are provided with safety shoes by the City will be provided with one (1) pair of safety shoes in each fiscal year. Such eligible bargaining unit members shall have the option to purchase their safety shoes at a vendor of their choice and shall be reimbursed by the City provided the following conditions are met:

- a. The safety shoes shall comply with ANSI Z41-1991, the "American National Standard for Personal Protection Protective Footware" and shall have the required "ANSI Z41.1" marking in the shoe; and
- b. The maximum reimbursable amount per fiscal year per eligible bargaining unit member shall be eighty dollars (\$80.00), inclusive of state sales tax; and
- c. Proof of purchase in the form of an original receipt shall be provided to the City by the eligible bargaining unit member prior to reimbursement; and
- d. Reimbursement shall be made by the City to the bargaining unit member within sixty (60) days following submission of proof of purchase to the City.

Section 6.9 PERFORMANCE EVALUATION

Each bargaining unit member shall be evaluated annually, on the anniversary date of his or her hire date or date of promotion (if applicable), pursuant to the performance evaluation form in Appendix E of this Agreement. The failure to complete the performance evaluation shall not preclude the bargaining unit member from receiving step increases to which the bargaining unit member is entitled on his or her anniversary date or his or her date of promotion, if applicable. The bargaining unit member may submit a response to the performance evaluation in writing. This response shall be retained with the bargaining unit member's performance evaluation.

Section 6.10 TUITION REIMBURSEMENT

In accordance with the Department of Human Resources' Tuition Reimbursement

Program and provided funds are available, a bargaining unit member must receive a Grade C or better in order to be eligible for the City's tuition reimbursement program. If the eligible course is pass or fail only, this requirement shall not apply.

ARTICLE VII LAYOFF PROCEDURES

Section 7.1 ORDER OF LAYOFF

When a layoff is necessary in a particular classification, layoff of permanent bargaining unit members within a department shall be made in inverse order of length of full-time continuous service with the City. Such layoffs shall be made by classification within a department as determined by the department head involved. No probationary or permanent bargaining unit member shall be laid off from any position while any temporary employee is still employed in the same class in the department. In case of ties, the individual with the least seniority in the class shall be the first laid off. In the event of a layoff, officers of the Association shall have super-seniority in accordance with Section 6.3 above.

The provisions of this Section shall not apply when layoffs result from a termination of state or federal funds or from a change in eligibility for employment under such state or federal employment programs. In such cases, funding source of the position shall be used as the sole criterion for layoff.

Eligibility for recall will commence upon reinstatement of such State or Federal funds.

Section 7.2 NOTICE OF LAYOFF

A department head shall give written notice to the Director of Human Resources and Labor Relations, the President of the Hartford Municipal Employees Association, and to the bargaining unit member concerned at his or her last known address, of any proposed layoff, at least three (3) weeks before the effective date of the layoff.

Section 7.3 RECALL FROM LAYOFF

On recall after layoff, the last bargaining unit member in the class laid off from the department involved shall be the first person recalled to the class within the department from which the bargaining unit member was laid off. No new person shall be hired into that class within the department until all affected full-time and probationary former bargaining unit members have been recalled. Former bargaining unit members on the recall list shall have recall rights for one (1) year from the date of layoff and only to the class within the department from which the former bargaining unit member was laid off; provided that the person is physically able to perform the duties of the job; and provided further that the person returns to the job within three (3) weeks after the City sends a notice of recall to the person at his or her last known address.

A bargaining unit member recalled to his or her position following a layoff will not be required to complete a new probationary period provided the bargaining unit member successfully completed the probationary period for the position held at the time of layoff.

If the vacancy to be filled is federally funded and former bargaining unit members on the recall list do not meet the federal eligibility criteria of the position to be filled, the City may fill the position in any manner consistent with the City of Hartford Personnel Rules and Regulations in effect on December 27, 1993.

ARTICLE VIII COVENANTS

Section 8.1 SAVING CLAUSE

If any section, sentence, clause or phrase of this Agreement shall be held for any reason to be inoperative, void, or invalid, the validity of the remaining portions of this Agreement shall not be affected thereby, it being the intention of the parties in adopting this Agreement that no portion thereof, or provision herein shall become inoperative or fail by reason of the invalidity of any other portion or provision.

Section 8.2 EFFECTIVE DATES

The effective date of salary increases and other changes that affect the computation of weekly earnings shall be the date specified if Sunday, or the Sunday beginning the pay period that immediately follows the date specified.

Section 8.3 DURATION

Unless otherwise expressly provided herein, this Agreement shall be in effect upon the approval of both parties, and shall continue in effect thereafter unless amended, modified or terminated in accordance with this Section through June 30, 2023. Either party wishing to amend, modify or terminate this Agreement must so advise the other party in writing no later than one hundred and fifty (150) days prior to the expiration of this Agreement and begin negotiations no later than one hundred and twenty (120) days prior to the expiration of this Agreement.

Section 8.4 ENTIRE AGREEMENT

The foregoing constitutes an entire agreement between the parties and no oral statement shall supersede any of its provisions. It is understood and agreed that all matters subject to collective bargaining between the parties have been covered herein and that it may not be reopened for change in its terms or addition of new subject matter except by mutual agreement.

IN WITNESS WHEREOF, the parties herto have caused to be signed and sealed this

Agreement and like copy on the dates indicated below.

Ву:	Luke Bronin, Mayor	EMPI By:	J. Sean Antoine, HMEA President
Date:	2-7-23	Date:	2.6.2023
	As to form and legality		
	By: Howard Rikin Corporation Counsel		

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CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
0071	ADMINISTRATIVE CLERK (old CC: 0005)		7/3/2021	1521.64	1597.71	1673.80	1749.88	1825.96					N/A
6900	BENEFITS ASSISTANT	3%	7/4/2021-	1567.29	1645.65	1724.02	1802.38	1880.75					
0303	SUPERVISING ACCOUNT CLERK		6/30/2023	ē				4					
0332	SUPERVISING CASHIER												
0304	SUPERVISOR OF COLLECTIONS									_			
0305	SUPERVISOR OF RECORDS									_	_	_	
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				BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	9ТН	етн	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
1013	NIGHT CLEANING SUPERVISOR	0	7/3/2021	1471.16		1544.71		1618.28	1691.82	1765.40			1838.94
		3%	7/4/2021-	1515.29		1591.05		1666.82	1742.58	1818.35			1894.11
			6/30/2023									W	
1014	BUILDING CUSTODIAL SUPERVISOR		7/3/2021	1690.29		1774.79		1859.30	1943.82	2028.35			2112.84
		3%	7/4/2021- 6/30/2023	1741,00		1828.05		1915.10	2002.15	2089.20			2176.25
1015	BUILDING MAINTENANCE SECTION LEADER		7/3/2021	1772.80		1861.43		1950.05	2038.70	2127.33			2215.99
		3%	7/4/2021- 6/30/2023	1825.98		1917.28		2008.58	2089.88	2191.18			2282.48

DATA	DATA PROCESSING SERIES												
				BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	5TH	eTH	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
0122	DATA PROCESSING OPERATION SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	1718.62 1770.18	1804.54 1858.69	1890.48 1947.20	1976.41	2062.34	2148.26 2212.73	2234.19			2320.13
0127	POLICE DATA PROCESSING SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	2302.76 2371.84	C)	2417.89		2533.04 2609.02	2648.17 2727.62	2763.32	2878.45 2964.80	2993.59 3083.39	3108.74 3201.98
0123	DATA PROCESSING SUPERVISOR SENIOR SYSTEMS ANALYST	3%	7/3/2021 7/4/2021- 6/30/2023	2537.28 2613.40		2664.13		2791.01	2917.87	3044.73	3171.59 3266.75	3298.45	3425.32 3528.09
0321	SYSTEMS PROGRAMMER	3%	7/3/2021 7/4/2021- 6/30/2023	2667.78		2801.17 2885.20		2934.54 3022.59	3067.95 3159.98	3297.37	3334.71 3434.76	3468.11	3601.49 3709.54
0322	PROJECT LEADER SENIOR SYSTEMS PROGRAMMER	3%	7/3/2021 7/4/2021- 6/30/2023	2797.05		2936.90	70	3076.75 3169.06	3216.61 3313.10	3356.46 3457.15	3496.31 3601.20	3636.16 3745.25	3776.01 3889.30
0531	DATA ADMINISTRATOR (OId CC: 0536)	3%	7/3/2021 7/4/2021- 6/30/2023	2855.51		2998.29 3088.24		3235.30	3283.86 3382.36	3426.62 3529.42	3569.40 3676.48	3712.16	3854.93 3970.59
0124 0533 0534	ASSISTANT DATA PROCESSING MANAGER DATABASE ADMINISTRATOR TECHNICAL SUPPORT MANAGER	3%	7/3/2021 7/4/2021- 6/30/2023	3086.36	50	3240.67 3337.90		3395.00 3496.85	3549.31 3655.79	3703.63	3857.95 3973.69	4012.26	4166.59 4291.58
0327	HELP DESK SUPPORT TECHNICIAN	3%	7/3/2021 7/4/2021- 6/30/2023	1923.08 1980.77		2019.23		2115.38 2178.85	2211.54 2277.89	2307.69	2403.85 2475.96	2500.00 2575.00	N/A N/A

בואפונ	ENGINEERING SERIES												
				BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	STH	етн	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU 1
2004	PRINCIPAL ENGINEERING TECHNICIAN	%8	7/3/2021 7/4/2021- 6/30/2023	1914.96		2010.70		2106.44	2202.19	2297.94			2393.70 2465.51
0521	CITY FORESTER	3%	7/3/2021 7/4/2021- 6/30/2023	2327.68		2444.06		2560,44	2676.85	2793.21 2877.01	2909.61 2996.89	3025.99 3116.76	3142.37 3236.64
2007 2012 2013	CIVIL ENGINEER III ENGINEERING INSPECTION SUPERVISOR SURVEY SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	2420.94 2493.57		2541.99		2663.04 2742.93	2784.09	2905.14 2992.28	3026.18 3116.96	3147.23	3268.27 3366.32
2008	CIVIL ENGINEER IV	3%	7/3/2021 7/4/2021- 6/30/2023	2797.05 2880.96		2936.90 3025.01		3076.75	3216.61	3356.46 3457.15	3601.20	3636.16 3745.25	3776.01 3889.30
2043	ARCHITECT III	%8	7/3/2021 7/4/2021- 6/30/2023	2934.93 3022.98	31	3081.68 3174.13		3325.28	3375.17 3476.43	3521.91 3627.58	3668.67 3778.73		3815.40 3929.87

EQUIPMENT OPERATION SERIES

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				BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	5TH	етн	2%
CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU
4035	ASSISTANT SANITATION SUPERVISOR	3%	7/3/2021	1788.16 1841.80		1877.56 1933.89		1966.98 2025.98	2056.38 2118.07	2145.78			2235.21
4088	DPW SUPERVISOR	3%	6/30/2023 7/3/2021 7/4/2021-	1995.12		2094.87		2194.66	2294.43 2363.22	2394.19	2494.19 2568.71	2593.70 2671.46	2693.41
4086	PUBLIC WORKS ASSISTANT SUPERINTENDENT (old CC: 4084, 6065)	3%	6/30/2023 7/3/2021 7/4/2021- 6/30/2023	2575.04 2652.29		2703.79		2832.54 2917.52		3090.04	3218.79 3315.36	3347.55 3447.98	3476.31 3580.59

		5.1		BASE	1ST	ZND	3RD	4TH	STH	етн	7TH	2%
CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
4087	DPW SUPERINTENDENT (Per 1/24/11 MOA) TRAFFIC ENGINEERING SERVICES MANAGER	3%	7/3/2021 7/4/2021-	2946.47 3034.86	3063.76 3155.67	3209.64 3305.93	3355.52 3456.19	3501.45 3606.49	3647.32	3830.40 3945.31	3977.70 4097.03	4125.31 4249.07
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INSPE	INSPECTIONAL SERIES		¥	APPENDIX A	ΧA								
A				BASE	112	1ST	1 1/2	ZND	3RD	4TH	9ТН	етн е	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
5263	SOLID WASTE & RECYCLING INSPECTOR	3%	7/3/2021 7/4/2021- 6/30/2023	1898.35 1955.30		1993.26	35	2088.18	2183.10	2278.00			2372.94 2444.13
5262	SEALER OF WEIGHTS & MEASURE	3%	7/3/2021 7/4/2021- 6/30/2023	1954.98		2052.72		2150.47	2248.22	2345.97			2443.73 2517.04
4240	REHABILITATION SPECIALIST	3%	7/3/2021 7/4/2021- 6/30/2023	2051.62		2154.20		2256.78	2359.36	2461.93			2564.51 2641,46
4239	REHABILITATION SPECIALIST II	3%	7/3/2021 7/4/2021- 6/30/2023	2156.26 2220.95		2264.08		2371.87	2479.69	2587.51			2695.32
5256	INSPECTOR TRAINEE (New as of 3/23/17)	3%	7/3/2021 7/4/2021- 6/30/2023	1930.00		2026.50							
5255	INSPECTOR II (old CC: 5222, 5232, 5242, 5252) Per 2022 MOA, salary schedule adjusted)	3%	7/3/2021 7/4/2021 2/27/2022- 6/30/2023	2264.00 2331.92 2681.71		2377.20 2448.52 2815.80	Fig	2490.41 2565.11 2949.88	2603.60 2681.71 3083.97	2716.79 2798.30 3218.05	es	77 - 275	2829.99 2914.90 3352.14

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				BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	5TH	ETH	2%
CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR		YEAR	YEAR	YEAR	YEAR	YEAR IN LIEU'	IN LIEU1
3075	PEDIATRIC CLINIC NURSING SUPERVISOR	%68	7/3/2021	2091.61		2196.19	:01 C-	2300.78	2405.37	2509.93	2614.52	2719.10	2823.68
		2	6/30/2023										
3514	EPIDEMIOLOGIST		7/3/2021	2734.88		2871.61		3008.36	3145.12	3281.84		3555.34	3692.07
3071 3081	PUBLIC HEALTH NURSING SUPERVISOR NURSE PRACTITIONER	3%	7/4/2021- 6/30/2023	2816.93	E	2957.78		3098.62	3239.47		3521.16	3662.01	3802.86

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NURSI	VURSING AND MEDICAL SERIES (PART-TIME)												
				BASE	1/2	1ST	1 1/2	ZND	3RD	4TH	5TH	етн	%9
CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR IN LIEU1
308P	NURSE PRACTITIONER (Part-Time)	3%	7/3/2021 7/4/2021- 6/30/2023	34.1860 35.2116		35.8951 36.9723		37.6045 38.7328	39,3140 40,4934	41.0230	42.7323	44.4418	46.1509

Job class receives add'l 5% step IN LIEU of overtime compensation

ばつとし	TROPESSIONAL SERIES												
			*1	BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	5TH	6ТН	2%
CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR YEAR IN	YEAR	IN LIEU
5005	GOSKADADIS CANDOCAL IOCADO SOCIA		77372024	1455 77	1528 57	1628 67 1601 36 1674 14	1674 14	1746 03					δ/N

			+1	BASE	1/2	1ST	1 1/2	2ND	3RD	4TH	5TH	6TH	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR		YEAR	IN LIEU
5095	SCHOOL CROSSING GUARD SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	1455.77 1499.44	1528.57	1601.35	1674.14	1746.93		197			N N N
3425	NUTRITION CENTER SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	1556.09 1602.77	1633.89	1711.70	1789.50	1923.32	1945.12	2022.91			2100.72
8000	PROPERTY MANAGER	3%	7/3/2021 7/4/2021- 6/30/2023	1686.57 1737.17	1770.90	1910.89	1939.57 1997.75	2023.90	2108.24	2192,55			2276.88
3420 3638 3621	NUTRITIONIST II SENIOR DAY CARE TEACHER SOCIAL WORKER II	3%	7/3/2021 7/4/2021- 6/30/2023	1718.62	1858.69	1890.48	1976.41	2062.34	2148.26	2234.19	++=		2320.13
0529	ADMINISTRATIVE ASSISTANT (old CC: 0517)	3%	7/3/2021 7/4/2021- 6/30/2023	1751.21 1803.75	1838.77	1926.34	2013,89	2101.45	2189.01	2276.59			2364.14 2435.06

Į į	TACTESSIONAL SERIES												
	38			BASE	1/2	1ST	1 1/2	2 ND	3RD	4TH	STH	етн	%5
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	IN LIEU1						
3421	NUTRITIONIST III SOCIAL WORKER III	%	7/3/2021 7/4/2021- 6/30/2023	1873.10 1929.29	1966.76 2025.75	2060.41	2154.06	2247.72 2315.15	2341.39	2435.02			2528.70 2604.54
0357	TAX INVESTIGATING SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	1890.95 1947.68	1985.49	2080.04	2174.60	2337.22	2363.69	2458.23 2531.98			2552.78 2629.37
3625	SENIOR FIELD REPRESENTATIVE	3%	7/3/2021 7/4/2021- 6/30/2023	1906.35 1963.54	2001.68	2096.99 2159.89	2192.31	2287.62	2382.95	2478.27			2573.57 2650.78
3628	FISCAL OFFICER PRINCIPAL FIELD REPRESENTATIVE	3%	7/3/2021 7/4/2021- 6/30/2023	1986.36 2045.95	2085.69	2185.00 2250.55	2284.31 2352.84	2383.64 2455.14	2482.96 2557.44	2582.27 2659.74			2681.60 2762.03
0540	INVESTMENT ANALYST (old CC: 0537)	3%	7/3/2021 7/4/2021- 6/30/2023	2005.44		2105.73 2168.88		2205.99	2306.25	2406.52	2506.82	2607.09	2707.33 2788.56
3516	HOUSING CODE ENFORCEMENT SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	2074.39	2178.12	2281.84	2385.55	2489.27 2563.94	2593.00 2670.78	2696.71			2800.43
0520	SENIOR ADMINISTRATIVE ASSISTANT ASSISTANT TOWN CLERK	3%	7/3/2021 7/4/2021- 6/30/2023	2081.16	2185.23 2250.77	2289.27 2357.95	2393.34 2465.13	2497.40 2572.31	2601,46	2705.51			2809.57 2893.85
5091 0605 0309	COMMUNITY RELATIONS SPECIALIST DRUG PROJECT SUPERVISOR SENIOR ACCOUNTANT	3%	7/3/2021 7/4/2021- 6/30/2023	2091.61	2196.19	2369.80	2405.37	2585.23	2614.52	2719.10		H	2823.68
0038	REPRODUCTION/GRAPHIC MANAGER	3%	7/3/2021 7/4/2021- 6/30/2023	2091.61 2154.36		2196.19 2262.08		2300.78 2369.80	2405.37	2509.93	2614.52 2692.95	2719.10	2823.68 2908.39

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PROFE	PROFESSIONAL SERIES			AI I ENDIA A	MAN		1						
				BASE	1/2	1ST	1 1/2	2 ND	3RD	4TH	5TH	етн е	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
5094	PUBLIC SAFETY COMMUNICATIONS SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	2134.41 2198.44	2241.14	2347.86	2454.56	2561.28	2668.01 2748.05	2774.74		FE.	2967.89
0515 2023 2019 0212	GENERAL ASSISTANT PROGRAM SUPERVISOR PROJECT SUPERVISOR SENIOR BUYER	3%	7/3/2021 7/4/2021- 6/30/2023	2190.74		2300.27		2409.80	2519.35 2594.93	2628.88 2707.75	2738.42	2933.40	2957.49 3046.22
0532 3608 3513 0530 3643 0129 0129 0314 0523 2018 3610 0509	BENEFITS COORDINATOR CASE WORK SUPERVISOR CHIEF ENVIRONMENTAL HEALTH SANITARIAN CIVIL PREPAREDNESS OPERATIONS MANAGER COORD OF PGMS FOR PERSONS W/DISABILITIES DEPUTY PURCHASING AGENT EMPLOYEE & TRAINING SUPERVISOR PAYROLL SUPERVISOR PRINCIPAL ACCOUNTANT PRINCIPAL ADMINISTRATIVE ANALYST (old CC: 0500) PRINCIPAL PROGRAM MANAGER PUBLIC HEALTH PROGRAM MANAGER SUPERVISOR OF ADMINISTRATIVE SERVICES VITAL RECORDS REGISTRAR	% e	7/3/2021 7/4/2021- 6/30/2023	2302.76	<u>,</u> 2	2417.89 2490.43	E2 g)	2533.04	2648.17	2763.32	2878.45	2993.59 3083.39	3108.74 3201.98

PROFESSIONAL SERIES

				2040	2,5	107	24.5		200	TIEV.	DEG	DES) (4)
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	3% IN LIEU1
3520 3613 0361	CHIEF HOUSING CODE ENFORCEMENT COORDINATOR OF SERVICES TO THE AGING DEPUTY TAX COLLECTOR	3%	7/3/2021 7/4/2021- 6/30/2023	2420.94		2541.99 2618.25		2663.04 2742.93	2784.09 2867.61	2905.14 2992.28	3026.18 3116.96	3147.23 3241.64	3268.27 3366.32
3650 0009 0343 0506	EARLY LEARNING CENTER COORDINATOR (old CC: 3641, 3642) HOUSING ADMINISTRATOR SENIOR ASSESSMENT TECHNICIAN SUPERVISOR OF LICENSES AND PERMITS												
2025	PROJECT MANAGER GRANTS SPECIALIST	3%	7/3/2021 7/4/2021- 6/30/2023	2518.80 2594.36		2644.75 2724.08		2770.68 2853.80	2896.62	3022.56 3113.23	3148.51 3242.95	3274,45 3372.67	3400.38 3502.39
0381 0350 0610 2030	AUDITOR EMPLOYEE & TRAINING MANAGER HEALTH DIRECTOR'S ASSISTANT TRANSPORTATION COORDINATOR	3%	7/3/2021 7/4/2021- 6/30/2023	2537.28		2664.13		2791.01	2917.87	3044,73	3266.75	3298.45 3397.42	3425,32 3528,09
0551	DEPUTY DEVELOPMENT DIRECTOR	3%	7/3/2021 7/4/2021- 6/30/2023	2610.54		2741.06		2871.57 2957.75	3002.12 3092.19	3132.64 3226.63	3263.17 3361.08	3393.70 3495.52	3524.22 3629.96

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CODE	CLASS	NCR NCR	DAIE	KAIE	TEAK	TEAK	TEAR	IEAR	TCAR	TEAR	TEAR		YY.
0339 0514 0028 2022 3609 0351 0535 2020 2020	CHIEF ASSESSMENT TECHNICIAN CHIEF MANAGEMENT ANALYST CHIEF OF ZONING ADMINISTRATION CHIEF STAFF PLANNER DIRECTOR OF CASE WORK EMPLOYEE & TRAINING COORDINATOR MANAGEMENT SERVICES OFFICER PUBLIC INFORMATION OFFICER REAL ESTATE OFFICER SENIOR PROJECT MANAGER	%6	7/3/2021 7/4/2021- 6/30/2023	2747.81		2885.20		3022.59	3159,98	3297.37	3334,71 3434,76	346	3572.15
5272 5275 0316 0370 0039 0210 0221 0359	CHIEF OF BUILDING & TRADES INSPECTION CHIEF OF INSPECTIONAL SERVICES CONTROLLER FINANCIAL SYSTEMS MANAGER HOUSING SERVICE MANAGER PREAUDIT/ACCOUNTS PAYABLE SUPERVISOR PURCHASING AGENT SUPERVISING PAYROLL MANAGER ACCOUNTING SUPERVISOR	ee .	7/3/2021 7/4/2021- 6/30/2023	2797 05 2880.96		2936.90 3025.01		3076.75 3169.06	3216.61 3313.10	3356.46	3496.31 3601.20	3636.16 3745.25	.16
3615 3342 2033	DEPUTY DIRECTOR OF SOCIAL SERVICES DIRECTOR OF LABORATORIES REAL ESTATE SERVICES MANAGER	3%	7/3/2021 7/4/2021- 6/30/2023	2943.54 3031.85		3090.72 3183.44		3237.89	3385.08 3486.63	3532.24 3638.22	3679.41 3789.81	3826.59 3941.41	65 4

% INCR DATE MIN MAX	7/3/2021 81425,04 122136,93 7/4/2021- 83867,79 125801.04 6/30/2023
	PROCUREMENT MANAGER TAX COLLECTOR

0376 0365

Note: Rates for Procurement Manager. & Tax Collector are <u>Annual</u> Rates

PROFE	PROFESSIONAL SERIES (PART-TIME)												
8		00141 /6	DATE	BASE	1/2 VEAD	1ST VEAD	1 1/2 VEAB	2ND VEAD	3RD VEAD	4TH .	STH	6TH 5%	5% IN 1 IE111
2002	CODE CLASS	% INCh	UAIE	YA I	- XX	IEAN	17.5	250	1527	15.55	L AN	15.45	N FIED
605P	DRUG PROJECT SUPERVISOR (Part-Time)		7/3/2021	26.1451	27,4524	28.7598		31.3741	32.6815	33,9888			35.2960
		%	7/4/2021-6/30/2023	26.9295	28.2760	29.6225	30.9689	32.3154	33.6619	35.0084			36.3549
052P	PRINCIPAL ADMINISTRATIVE ANALYST (Part-Time)		7/3/2021	28.7845		30.2236		31.6630	33.1021	34,5415	35,9806	37.4199	38.8593
		3%	7/4/2021- 6/30/2023	29.6480		31.1304		32.6128	34.0953	35.5776		38.5424	40.0248
225P	PROJECT MANAGER (Part-Time)		7/3/2021	31.4850		33.0594		34.6335	36.2078	37.7820	39.3564	40.9306	42.5048
224P	GRANT SPECIALIST (Part-Time)	3%	7/4/2021- 6/30/2023	32.4295		34.0510		35.6725	37.2939	38.9154	40.5369	42,1584	43.7799

				BACE	413	1CT	4 475	UNC	200	ATU	STU	ЕТП	20%
CODE	CLASS	% INCR	DATE	RATE	YEAR	IN LIEU1							
6103	ROVING YOUTH LEADER	%8	7/3/2021 7/4/2021- 6/30/2023	1556.09	1633.89	1711,70	1789.50 1843.19	1867.32	1945.12 2003.46	2022.91			2100.72
6116	ASSISTANT COMMUNITY RECREATION COUNSELOR	3%	7/3/2021 7/4/2021- 6/30/2023	1800.45 1854.46	1890.49	1980.51	2070.52	2160.55	2250.57 2318.08	2340.61			2430.63 2503.52
6112	RECREATION SUPERVISOR AQUATICS	3%	7/3/2021 7/4/2021- 6/30/2023	1890.95 1947.68	1985.49 2045.06	2080.04	2239.83	2269.14	2363.69	2458.23			2552.78 2629.37
6115	COMMUNITY RECREATION COUNSELOR	3%	7/3/2021 7/4/2021- 6/30/2023	2091.61	2196.19		2300.78 2369.80	2405.37	2509.93 2585.23	2614.52 2692.95	2719.10		2823.68 2908.39
6141	ASSISTANT SUPERINTENDENT OF RECREATION	3%	7/3/2021 7/4/2021- 6/30/2023	2302.76		2490,43		2533.04	2648.17	2763.32 2846.21	2878.45 2964.80	2993.59 3083.39	3108.74 3201.98
6142	SUPERINTENDENT OF RECREATION	3%	7/3/2021 7/4/2021- 6/30/2023	2612.38 2690.75		2743.00 2825.29	55	2873.64	3004.24 3094.36	3134.86 3228.90	3265.49	3396.10 3497.98	3526.72 3632.51
0209	CHIEF OF PARKS OPERATION	3%	7/3/2021 7/4/2021- 6/30/2023	2671.46 2751.60		2805.04 2889.18		2938.62 3026.76	3072.20	3205.78 3301.92	3339.35 3439.50	3472.93 3577.08	3606.50 3714.66

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RECRE	RECREATION AND RELATED SERIES (PART-TIME)												
				BASE	1/2	1ST	11/2	ZND	3RD	4TH	5TH	етн	2%
CODE	CODE CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR YEAR IN LIEU'	IN LIEU1
610P	SUPERVISOR RECREATION SPECIALIST (Part-Time)		7/3/2021	19.7068		20.6964		21.6753	22.6650	23.6439			A/Z
		3%	7/4/2021- 6/30/2023	20.2980	e	21.3129		22.3278	23.3427	24.3576			N/A
616P	ASSISTANT COMMUNITY RECREATION		7/3/2021	22.5056	23.6311	24.7564	25.8815 27.0069	27.0069					30.3829
	COUNSELOR (Part-Time)	3%	7/4/2021- 6/30/2023	23.1808	24.3398	25.4989	26.6579	27.8169	28.9760	30.1350			31.2940

SKILLE	SKILLED TRADES SERIES		Č	ALLENDIAA	۲ ۲								
				BASE	1/2	1ST	11/2	2ND	3RD	4ТН	5TH	етн	2%
CODE	CLASS	% INCR	DATE	RATE	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR	IN LIEU1
1016	BUILDING SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	1690.29		1828.05		1859.30	1943.82	2028.34		S	2112.84
4352	ELECTRO-MECHANICAL SUPERVISOR ASSISTANT BUILDING MAINTENANCE SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	1971.31		2069.87		2233.50	2335.02	2365,56			2464.13
4365	MASTER MECHANIC	3%	7/3/2021 7/4/2021- 6/30/2023	2072.85		2176.51		2280.15	2383.79	2487,45	2591.08	2694.73	2798.36 2882.30
4346	RADIO TECHNICIAN II	3%	7/3/2021 7/4/2021- 6/30/2023	2072.85		2176.51		2280.15 2348.54	2383.79	2487,45			N N N N
4244	BUILDING MAINTENANCE SUPERVISOR	3%	7/3/2021 7/4/2021- 6/30/2023	2174.12		2282.83		2391.54	2500.25	2608.95	2717.65	2826.36	2935.08 3023.11
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APPENDIX B

Effective as of April 24, 2017 (Issuance of the Interest Arbitration Award in Case No. 2014-MBA-279) City of Hartford HMEA, Open Access Plus #671-330

Medical Benefits at a Glance

II	In Network <i>You pay:</i>	Out-of-Network You pay:
Office Visit Copayment	\$25	Deductible & Coinsurance
Hospital Copayment	\$200	Deductible & Coinsurance
Emergency Room Copayment – waived if admitted	\$150	\$150
Outpatient Surgery Copayment	\$100	Deductible & Coinsurance
Annual Deductible (individual/2-member family/3+ member family)	Not applicable	\$250/\$500/\$500
Coinsurance Non-participating providers		20% after deductible up to
Coinsurance Maximum (individual/2-member family/3+ member family)		\$1,250/\$2,500/\$2,500
Lifetime Maximum	Unlimited	Unlimited
Human Organ Transplant lifetime maximum	\$1,000,000	\$1,000,000

PREVENTIVE CARE

Well child care*- birth to	No charge	Deductible &
35 months 3 years to 17		Coinsurance
Periodic, routine health examinations*	No charge	
Routine eye exams – one exam every calendar year	\$25Copayment	
Routine OB/GYN visits – one exam per year	No charge	·
Mammography	No charge	
1 baseline age 35 – 39 years 1 screening per year age 40+ Additional exams when medically		'
Hearing screening – one exam every calendar year	\$25 Copayment	

MEDICAL CARE

\$25Copayment	Deductible &
\$25Copayment	Coinsurance
\$25Copayment	
\$25Copayment	
No charge	•
No charge	
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\$25Copayment	
No charge	
	\$25Copayment \$25Copayment \$25Copayment

HOSPITAL CARE – Prior authorization required

Semi-private room	\$200Copayment	Deductible &
Maternity and newborn care	\$200Copayment	Coinsurance
Skilled nursing facility – up to 120 days per calendar year	\$200Copayment	
Rehabilitative services – up to 60 days per person per calendar	\$200Copayment	
Private duty nursing - outside hospital/covered as out of	Not Covered	
network - maximum per year \$15,000		
Outpatient surgery – in a hospital or surgi-center	\$100 Copayment	

APPENDIX B

Effective as of April 24, 2017 (Issuance of the Interest Arbitration Award in Case No. 2014-MBA-279)
City of Hartford HMEA
Open Access Plus #671-330
Medical Benefits at a Glance

EMERGENCY CARE

Walk-in centers	\$25 Copayment	Deductible
		&
Emergency care – copayment waived if admitted	\$150 Copayment	\$150
Urgent Care	\$30 Copayment	Not Covered
Ambulance – Land and air are subject to state wide rate schedule	No charge	No charge

OTHER HEALTH CARE - Prior authorization may be required

Outpatient rehabilitative services		Deductible &
50 visit maximum for PT, OT, ST and Chiro. per year-excess covered as out of network PT and OT ST	No charge \$20 Copay	Coinsurance
and Chiro Prosthetic devices	No charge	
Durable medical equipment (including surgical stockings &	No charge	
Ostomy supplies (\$1,000 per member per calendar year maximum)	No charge	
Orthoptic training	No charge	
Wigs (covered with a diagnosis of cancer)	No charge	

MENTAL HEALTH/SUBSTANCE ABUSE CARE

Inpatient	\$200 Copayment	Deductible &
Outpatient/office visits (prior authorization after the 40 th visit)	\$25Copayment	Coinsurance

* Schedule of health examinations:

1 exam per month from birth through 6 months

1 exam every 2 months from 6 months through 11 months

1 exam every 3 months from 12 months through 23 months

1 exam every 6 months from 24 months through 35 months

1 exam annually from 3 through 17 years

1 exam every 3 years from 18 through 29 years

1 exam every 2 years from

30 through 49 years 1

exam annually from 50

vears and older

Note: In situations where the member is responsible for obtaining the necessary precertification or prior authorization and fails to do so, benefits may be reduced or denied.

This does not constitute your health plan or insurance policy. It is only a general description of the plan. The following are examples of services NOT covered by your Century Preferred Health Plan. Please refer to your Certificate/Evidence of Coverage/Summary Booklet for more details: Cosmetic surgeries and services; custodial care; genetic testing; hearing aids; services and supplies related to, as well as the performance of, sex change operations; travel expenses; vision therapy; services rendered prior to your contract effective date or rendered after your contract termination date; and workers' compensation.

Your Personal Prescription Benefit Program Plan Option 8

Welcome to your new prescription benefit administered by CVS/caremark. Your prescription benefit is designed to bring you quality pharmacy care that will help you save money.

The information below is a brief summary of your prescription benefits as well as some frequently asked questions about the CVS/caremark prescription benefit program. CVS/caremark and City of Hartford are confident you will find value with your new prescription benefit program.

	CVS/caremark Retail Pharmacy Network	CVS Caremark Mail Service Pharmacy
	For short-term medications (Up to a 30-day supply)	For long-term medications (Up to a 90-day supply)
Where	The CVS/caremark Retail Network includes more than 67,000 participating pharmacles nationwide, including independent pharmacles, chain pharmacles, and 7,400 CVS/pharmacy locations. To locate a CVS/caremark participating retail network pharmacy in your area, simply click on "Find a Pharmacy" at www.caremark.com or call a Customer Care representative toil-free at 1-877-461-0101.	Simply mail your original prescription and the mail service order form to CVS/caremark. Your medication will be sent directly to your home, office or a location of your choice.
Generic Medications Ask your doctor or other prescriber if there is a generic available, as these generally cost less.	\$5 for a generic prescription 20% for out of network pharmacles	\$10 for a generic prescription
Preferred Brand-Name Medications If a generic is not available or appropriate, ask your doctor or healthcare provider to prescribe from your plan's preferred drug list.	\$25 for a preferred brand-name prescription 20% for out of network pharmacles	\$50 for a preferred brand-name prescription
Non-Preferred Brand-Name Medications You will pay the most for medications not on your plan's preferred drug list.	\$35 for a non-preferred brand name prescription 20% for out of network pharmacies	\$70 for a non-preferred brand-name prescription
Refill Limit	None	None
Maximum Out-of-Pocket	\$3,300 Individual / \$6,600 family	No.
Web Services	Register at www.caremark.com to access tools that can be benefit. To register, have your Prescription Card ready.	Elp you save money and manage your prescription
Customer Care	Visit www.caremark.com or call toll-free at 1-877-461-010	

Please Note: When a generic is available, but the pharmacy dispenses the branchante medication for any reason when than to determine or other trial to determine or other trial to determine the properties of the branchante medication and the generic plus the brand-name drug by asking your prescriber to contact customer care and request prior authorization.

Cupayment, copay or coinsurance means the amount a planiparticipant is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle you private health information.

CVS/caremark*

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Mandatory 90-day Supply for Maintenance Medications. Effective April 24, 2017 (issuance of the interest arbitration award in Case No. 2014-MBA-279), all bargaining unit members and their dependents shall be required to get maintenance prescriptions as 90-day fills. The first 30-day fill of that maintenance medication may be made at any participating pharmacy. After that, two (2) choices will be available: Receive maintenance medication through the Caremark mail-order pharmacy, or fill the prescription at a pharmacy that participates in the State's Maintenance Drug Network as that network changes from time-to-time. A list of the current participating pharmacies and current maintenance medications are found on State Comptroller's website at www.osc.ct.gov.

APPENDIX B-1

SUMMARY OF BENEFITS



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

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

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

Employer Contribution

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

Plan Highlights	In-Network	Out-of-Network
Lifetime Maximum	Unlimited	Unlimited
Plan Coinsurance	Your plan pays 90%	Your plan pays 70%
Maximum Reimbursable Charge	Not Applicable	250%
Contract Year Deductible	Individual: \$2,000 Family: \$4,000	Individual: \$4,000 Family: \$8,000

The amount you pay for all covered expenses counts towards both your in-network and out-of-network deductibles.

Plan deductible always applies before any copay or coinsurance.

All eligible family members contribute towards the family plan deductible. Once the family deductible has been met, the plan will pay each eligible family member's covered expenses based on the coinsurance level specified by the plan.

This plan includes a combined Medical/Pharmacy plan deductible.

Note: Services where plan deductible applies are noted with a caret (^)

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Plan Highlights	In-Network	Out-of-Network
	Individual: \$3,000	Individual: \$6,550
contract Year Out-of-Pocket Maximum	Individual - In a Family: \$3,000 Family:	Individual - In a Family: \$6,550
	86,000	Family: \$13,100

I he amount you pay for all covered expenses counts towards both your in-network and out-of-network out-of-pocket maximums.

Plan deductible contributes towards your out-of-pocket maximum.

All copays and benefit deductibles contribute towards your out-of-pocket maximum.

Mental Health and Substance Use Disorder covered expenses contribute towards your out-of-pocket maximum.

After each eligible family member meets his or her individual out-of-pocket maximum, the plan will pay 100% of their covered expenses. Or, after the family out-ofpocket maximum has been met, the plan will pay 100% of each eligible family member's covered expenses.

This plan includes a combined Medical/Pharmacy out-of-pocket maximum.

Benefit	In-Network	Out-of-Network
Physician Services - Office Visits		
Physician Office Visit – Primary Care Physician (PCP)/Specialist	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
NOTE: Obstetrician and Gynecologist (OB/GYN) visits are subject to either the PCP or Specialist cost share depending on how the provider contracts with Cigna (i.e as PCP or as Specialist).	ne PCP or Specialist cost share depending on I	how the provider contracts with Cigna (i.e
Surgery Performed in Physician's Office	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Allergy Treatment/Injections Performed in Physician's Office	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Allergy Serum	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Dispensed by the physician in the office		
Cigna Telehealth Connection Services	After the plan deductible is met, your plan pays 90%	Not Covered

Includes charges for the delivery of medical and health-related consultations via secure telecommunications technologies, telephones and internet only when

delivered by contracted medical telehealth providers (see details on myCigna.com)

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Benefit	In-Network	Out-of-Network
Preventive Care		
Preventive Care	Plan pays 100%	After the plan deductible is met, your plan pays 70%
Includes coverage of additional services, such as urinalysis, EKG, and other laboratory tests, supplementing the standard Preventive Care benefit when billed as part of office visit.	er laboratory tests, supplementing the standa	rd Preventive Care benefit when billed
Immunizations	Plan pays 100%	After the plan deductible is met, your plan pays 70%
Mammogram, PAP, and PSA Tests	Plan pays 100%	Plan pays based on Place of Service.
Coverage includes the associated Preventive Outpatient Professional Services. Diagnostic-related services are covered at the same level of benefits as other x-ray and lab services, based on Place of Service.	ices. her x-ray and lab services, based on Place o	Service.
Inpatient		
Inpatient Hospital Facility Services	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Semi-Private Room: In-Network: Limited to the semi-private negotiated rate / Out-of-Network: Limited to semi-private rate Private Room: In-Network: Limited to the semi-private negotiated rate / Out-of-Network: Limited to semi-private rate Special Care Units (intensive Care Unit (ICU), Critical Care Unit (CCU)): In-Network: Limited to the negotiated rate / Out-of-Network: Limited to ICU/CCU daily room rate	tiated rate / Out-of-Network: Limited to semi-private rate rate / Out-of-Network: Limited to semi-private rate (CCU)): In-Network: Limited to the negotiated rate / Out	ate Out-of-Network: Limited to ICU/CCU daily
Inpatient Hospital Physician's Visit/Consultation	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Inpatient Professional Services For services performed by Surgeons, Radiologists, Pathologists and Anesthesiologists	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%

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Benefit	In-Network	Out-of-Network	
Outpatient			
Outpatient Facility Services	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%	
Outpatient Professional Services For services performed by Surgeons, Radiologists, Pathologists and Anesthesiologists	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%	
Short-Term Rehabilitation - PCP	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%	
Short-Term Rehabilitation - Specialist	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%	
Contract Year Maximums:			

Pulmonary Rehabilitation & Cognitive Therapy - Unlimited days

Physical Therapy, Speech Therapy, Occupational Therapy and Chiropractic Care – 100 days Limits are not applicable to mental health conditions for Physical, Speech and Occupational Therapies.

Note: Therapy days, provided as part of an approved Home Health Care plan, accumulate to the applicable outpatient short term rehab therapy maximum.

	After the plan deductible is met, your	After the plan deductible is met,
	plan pays 90%	your plan pays 70%
Control in the control of the contro	After the plan deductible is met, your	After the plan deductible is met,
cal clac Nel abilitation - Operialist	plan pays 90%	vour plan pays 70%

Contract Year Maximum:

Cardiac Rehabilitation - 36 days

Note: Therapy days, provided as part of an approved Home Health Care plan, accumulate to the applicable outpatient short term rehab therapy maximum.

Other Health Care Facilities/Services

Home Health Care	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Unlimited days maximum per Contract Year		
Home Health Aide - 80 days per Contract Year		
Outpatient Private Duty Nursing	After the plan deductible is met, your	After the plan deductible is met,
\$15,000 maximum per Contract Year	plan pays 90%	your plan pays 70%
Skilled Nursing Facility, Rehabilitation Hospital, Sub-Acute Facilities	After the plan deductible is met, your	After the plan deductible is met,
120 days maximum per Contract Year	plan pays 90%	your plan pays 70%
Durable Medical Equipment	After the plan deductible is met, your	After the plan deductible is met,
Unlimited maximum per Contract Year	plan pays 90%	your plan pays 70%

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Benefit	In-Network	Out-of-Network
Breast Feeding Equipment and Supplies Limited to the rental of one breast pump per birth as ordered or prescribed by a physician Includes related supplies	Your plan pays 100%	After the plan deductible is met, your plan pays 70%
External Prosthetic Appliances (EPA)	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Unlimited maximum per Contract Year Routine Foot Disorders	Not Covered	Not Covered
Note: Services associated with foot care for diabetes and peripheral vascular disease are covered when approved as medically necessary.	ar disease are covered when approved as m	nedically necessary.
Foot Orthotics	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Excludes surgical shoes or boots Once per Member per Contract Year		
Routine Eye Care	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
One exam and refraction every Contract Year		
Eyeglasses for Accidental Injury	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
One pair per lifetime	40	
Routine Hearing Exams	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
One exam per Contract Year		
Acupuncture Unlimited days maximum per Contract Year Coverage for medical diagnosis only	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Hearing Aid	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, your plan pays 70%
Includes testing and fitting of hearing aid devices at Physician Office Visit cost share.	st share.	
Wigs One per Contract Year	After the plan deductible is met, your plan pays 90%	After the plan deductible is met, vour plan pays 70%

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		APPEN	APPENDIX B-1		
	Benefit		In-Network	Out-of-Network	twork
Medical Sp	Medical Specialty Drugs				
Inpatient				-	
This benefit appli	This benefit applies to the cost of the Infusion Therapy drugs		After the plan deductible is met, your	After the plan d	After the plan deductible is met,
administered in a related Facility or	administered in an inpatient Facility. This benefit does not cover trie related Facility or Professional charges.		pian pays so %	your pian pays 70.76	900
Outpatient Facility Services	ity Services				
This benefit appli	This benefit applies to the cost of the Infusion Therapy drugs administered		After the plan deductible is met, your	After the plan d	After the plan deductible is met,
in an Outpatient I	in an Outpatient Facility. This benefit does not cover the related Facility or		plan pays 90%	your plan pays 70%	40%
Professional charges.	rges.				
Physician's Office	93				
This benefit ap	This benefit applies to the cost of targeted Infusion Therapy drugs		After the plan deductible is met, your	After the plan d	After the plan deductible is met,
administered in	administered in the Physician's Office. This benefit does not cover the		plan pays 90%	your plan pays 70%	%0 2
related Office Vis	related Office Visit or Professional charges.				
Home					
This benefit appli	This benefit applies to the cost of targeted Infusion Therapy drugs		After the plan deductible is met, your	After the plan d	After the plan deductible is met,
administered in the	administered in the patient's home. This benefit does not cover the related		plan pays 90%	your plan pays 70%	20%
Professional charges.	rges.				40
Place of Se	Place of Service - your plan pays based on where you receive services	ed on where ye	ou receive services		
Note: Services	Note: Services where plan deductible applies are noted with a caret (^).	ted with a caret (^).			
			Emergency Room/ Urgent Care	ent Care	
	Physician's Office	Independent Lab			Outpatient Facility

Medical Sp	Medical Specialty Drugs							
Inpatient This benefit appli administered in a	Inpatient This benefit applies to the cost of the Intachinistered in an Inpatient Facility. The related Facility or Professional charges.	Inpatient This benefit applies to the cost of the Infusion Therapy drugs administered in an Inpatient Facility. This benefit does not cover the related Facility or Professional charges.	drugs not cover the	After the plan d plan pays 90%	After the plan deductible is met, your plan pays 90%		After the plan deductible is met, your plan pays 70%	met,
Outpatient Facility Services This benefit applies to the cos in an Outpatient Facility. This Professional charges.	lity Services les to the cost of th Facility. This benef rges.	Outpatient Facility Services This benefit applies to the cost of the Infusion Therapy drugs administered in an Outpatient Facility. This benefit does not cover the related Facility or Professional charges.	Outpatient Facility Services This benefit applies to the cost of the Infusion Therapy drugs administered n an Outpatient Facility. This benefit does not cover the related Facility or Professional charges.		After the plan deductible is met, your plan pays 90%		After the plan deductible is met, your plan pays 70%	met,
Physician's Office This benefit applicadministered in the related Office Visit	Physician's Office This benefit applies to the cost of targ administered in the Physician's Office. Trelated Office Visit or Professional charges.	of targeted Infus ffice. This benefit harges.	Physician's Office This benefit applies to the cost of targeted Infusion Therapy drugs administered in the Physician's Office. This benefit does not cover the related Office Visit or Professional charges.		After the plan deductible is met, your plan pays 90%		After the plan deductible is met, your plan pays 70%	met,
Home This benefit applies to administered in the pa Professional charges.	ies to the cost of ta he patient's home. rges.	Home This benefit applies to the cost of targeted Infusion Therapy drugs administered in the patient's home. This benefit does not cover the Professional charges.	rapy drugs ot cover the related		After the plan deductible is met, your plan pays 90%		After the plan deductible is met, your plan pays 70%	met,
Place of Se	rvice - your	olan pays bas	Place of Service - your plan pays based on where you receive services	you receive	services			
Note: Services	where plan deduct	Note: Services where plan deductible applies are noted with a	oted with a caret (^)	.(
ğ	Physicial	Physician's Office	Independent Lab	dent Lab	Emergency Room/ Urgent Care Facility	m/ Urgent Care lity	Outpatient Facility	t Facility
Benefit	in-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Laboratory	Covered same as plan's Physician's Office Services	Covered same as plan's Physician's Office Services	Plan pays 90%	Plan pays 70%	Covered same as plan's Emergency Room/Urgent Care Services	Covered same as plan's Emergency Room/Urgent Care Services	Plan pays 90%	Plan pays 70%
Radiology	Plan pays 90%	Plan pays 70%	Not Applicable	Not Applicable	Covered same as Covered same as plan's Emergency plan's Emergency Room/Urgent Room/Urgent Care Services	Covered same as plan's Emergency Room/Urgent Care Services	Plan pays 90%	Plan pays 70%

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Note: Services where plan deductible applies are noted	where plan dedu	Note: Services where plan deductible applies are noted with a	oted with a caret (^).	(·)				
Ronefit	Physici	Physician's Office	Indeper	dependent Lab	Emergency Roc Fac	Emergency Room/ Urgent Care Facility	Outpatier	Outpatient Facility
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Advanced Radiology Imaging	Covered same as plan's Physician's Office Services	Covered same as plan's Physician's Office Services	Not Applicable	Not Applicable	Covered same as plan's Emergency Room/Urgent Care Services	Covered same as plan's Emergency Room/Urgent Care Services	Covered same as plan's Outpatient Facility Services	Covered same as plan's Outpatient Facility Services
Advanced Radic Note: All lab and	ology Imaging (AR I x-ray services, in	Advanced Radiology Imaging (ARI) includes MRI, MRA, CAT Scan, PET Scan, etc. Note: All lab and x-ray services, including ARI, provided at Inpatient Hospital are covered under Inpatient Hospital benefit	A, CAT Scan, PET d at Inpatient Hosp), PET Scan, etc.	der Inpatient Hospil	al benefit		
i	Emergenc	Emergency Room / Urgent Care Facility	re Facility	Outpatient Pro	Outpatient Professional Services		*Ambulance	
Benefit	In-Network	ork Out-of	Out-of-Network	In-Network	Out-of-Network		In-Network O	Out-of-Network
Emergency Care	Plan pays 90% ^	<	Plar	Plan pays 90% ^		Plan pays 90% ^	v %0i	
Urgent Care	Plan pays 90% ^	V	Plar	Plan pays 90% ^			Not Applicable*	* 0
*Ambulance ser	vices used as non	*Ambulance services used as non-emergency transportation (e.g.,	tation (e.g., transp	portation from hosp	transportation from hospital back home) generally are not covered	erally are not cover	L.,	
		Inpatient Hospital and Other	and Other Health	Health Care Facilities		Outpatie	Outpatient Services	
Benefit	The Control of the Co	In-Network		Out-of-Network	A-ni	in-Network	Out-of	Out-of-Network
Hospice	Plan pa	Plan pays 90% ^	Plan pays 70% ^	V %02	Plan pays 90% ^	v %	Plan pays 70% ^	٧
Bereavement Counseling	Plan pă	Plan pays 90% ^	Plan pays 70% ^	v %02	Plan pays 90% ^	v %	Plan pays 70% ^	٧
Note: Services	provided as part of	Note: Services provided as part of Hospice Care Program	am					
Note: Services v	vnere pian deduct	Note: Services where plan deductible applies are noted with a caret (**)	with a caret (*).					
Benefit	Visit to Confirm Pregnancy	Pregnancy	Global Ma (All Subsequent Postnatal Visits Delivery	Global Maternity Fee (All Subsequent Prenatal Visits, Postnatal Visits and Physician's Delivery Charges)	Office Visits in Addition to Global Maternity Fee (Performed by OB/GYN or Specialist)	ddition to Global Performed by Specialist)	Delivery - Facility (Inpatient Hospital, Birthing Center)	- Facility spital, Birthing Center)
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Maternity	Covered same as plan's Physician's Office Services	s Covered same as s plan's Physician's Office Services	Plan pays 90%	Plan pays 70%	Covered same as plan's Physician's Office Services	Covered same as plan's Physician's Office Services	Covered same as plan's Inpatient Hospital benefit	Covered same as plan's Inpatient Hospital benefit
Mator Comione	to pop acta orodu	Note: Services where also deductible seplies are noted with a caret (A)	with a caret (A)					and and and

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	Physicia	Physician's Office	Inpatien	Inpatient Facility	Outpatie	Outpatient Facility	Inpatient P	Inpatient Professional Services	Outpatient Professional Services	itient Il Services
Benefit	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Abortion (Elective and non-elective procedures)	Plan pays 90% ^		Plan pays 90% ^	Plan pays 70% ^	Pian pays 90% ^	Plan pays 70% ^	Covered same as plan's inpatient Professional Services	Covered same as plan's Inpatient Professional Services	Covered same as plan's Outpatient Professional Services	Covered same as plan's Outpatient Professional Services
Family Planning - Men's Services Includes surgica	Family Covered Covered Planning - Plan's plan's plan's Men's Physician's Physician's Services Office Office Services Services Includes surgical services, such as vasectomy		Plan pays 90% ^	Plan pays 70% ^	Plan pays 90% ^	Plan pays 70% ^	Covered same as plan's Inpatient Professional Services	Covered same as plan's inpatient Professional Services	nt	Covered same as plan's Outpatient Professional Services
Family Planning - Women's Services	Family same as Plan pays plan's P Women's 100% Physician's 1 Services Services surgical services such as tubal ligation	Covered same as plants Physician's Office Services	Plan pays 100%	Plan pays 70% ^	Plan pays 100%	Plan pays 70% ^	Plan pays 100%	Covered same as plan's Inpatient Professional Services	Plan pays 100%	Covered same as plan's Outpatient Professional Services
Contraceptive d	Contraceptive devices as ordered or prescribed by a physician. Covered Covered Same as same as plan's plan's Physician's Physician's Office Services Services	ed or prescribe Covered same as plan's Physician's Office Services	d by a physiciar	lan '0%	Plan pays 90% ^	Plan pays 70% ^	Covered same as plan's Inpatient Professional Services	Covered same as plan's Inpatient Professional Services	Covered same as plan's Outpatient Professional Services	Covered same as plan's Outpatient Professional Services
Infertility covere etc. Unlimited m TMJ, Surgical and Non- Surgical	Infertility covered services: lab and radiology test, counseling, surgited. Covered Covered Covered Same as same as plan's plan's Physician's Physician's Physician's Office Office Services Services	and radiology te time Covered same as plan's Physician's Office Services	est, counseling,		cal treatment, includes artificial insemination, in-vitro fertilization, GIFT, Covered Same as same as plan's pla	rtificial insemina Plan pays 70% ^	ation, in-vitro fer Covered same as plan's Inpatient Professional Services	tilization, GIFT, Covered same as plan's Inpatient Professional Services	ZIFT, Covered same as plan's Outpatient Professional Services	Covered same as plan's Outpatient Professional Services

13	Physicia	Physician's Office	Inpatient F	nt Facility	Outpatie	Outpatient Facility	Inpatient F Ser	npatient Professional Services	Outpatient Professional Services	atient al Services
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
	Covered	Covered					Covered	Covered	Covered	Covered
	same as	same as	,				same as	same as	same as	same as
Bariatric	plan's	plan's	Plan pays	Plan pays	Plan pays	Plan pays	plan's	plan's	plan's	plan's
Surgery	Physician's	Physician's	\% 06	√%0∠	v%06	V%0Z	Inpatient	Inpatient	Outpatient	Outpatient
	Office	Office					Professional	Professional	Professional	Profession
	Services	Services					Services	Services	Services	al Services
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Surgeon Charges Lifetime Maximum: Unlimited

Treatment of clinically severe obesity, as defined by the body mass index (BMI) is

covered. The following are excluded:

medical and surgical services to alter appearances or physical changes that are the result of any surgery performed for the management of obesity or clinically severe (morbid) obesity.

Note: Services where plan deductible applies are noted with a caret (^).

	Inpatient Hospital Facility	lity		Inpatient Professional Services	Services	
Benefit	Cigna LifeSOURCE Transplant Network ® Facility In-Network	Non-Lifesource Facility In-Network	Out-of-Network	Cigna LifeSOURCE Transplant Network ® Facility In-Network	Non-Lifesource Facility In-Network	Out-of-Network
Organ Transplants	Plan pays 100% ^	Plan pays 90% ^	Plan pays 70% ^	Plan pays 100% ^	Covered same as plan's Inpatient Professional Services	Covered same as plan's Inpatient Professional
Travel Maximun	n - Cigna LifeSOURCE Tr	Travel Maximum - Cigna LifeSOURCE Transplant Network® Facility: In-Network: \$15,000 maximum per Transplant	ty: In-Network: \$15,000 n	naximum per Transplant		

Note: Services where plan deductible applies are noted with a caret (^)

430000	dul	atient	Outpatient - PI	Outpatient - Physician's Office	Outpatient - A	Outpatient - All Other Services
Denem	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Mental Health	Plan pays 90% ^	Plan pays 70% ^	Plan pays 90% ^	Plan pays 70% ^	Plan pays 90% ^	Plan pays 70% ^

Donofit	Inpatient	tient	Outpatient - Ph	Outpatient - Physician's Office	Outpatient - All	Outpatient - All Other Services
Dellelli	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Substance Use Disorder	Plan pays 90% ^	Plan pays 70% ^	Plan pays 90% ^	Plan pays 70% ^	Plan pays 90% ^	Plan pays 70% ^
Makes On the second second	Market Commence and and the state of the second contract of	IMI donne a dain hadan an				

Note: Services where plan deductible applies are noted with a caret (*).

Notes:

Unlimited maximum per Contract Year

Services are paid at 100% after you reach your out-of-pocket maximum.

Inpatient includes Acute Inpatient and Residential Treatment.

Outpatient - Physician's Office - includes Individual, family and group therapy, psychotherapy, medication management, etc.

Outpatient - All Other Services - includes Partial Hospitalization, Intensive Outpatient Services, Applied Behavior Analysis (ABA Therapy) and Behavioral

Telehealth Consultation, etc.

Detox is covered under medical.

Mental Health and Substance Use Disorder Services

Mental Health/Substance Use Disorder Utilization Review, Case Management and Programs

Cigna Total Behavioral Health - Inpatient and Outpatient Management

Inpatient utilization review and case management

Outpatient utilization review and case management

Partial Hospitalization

Intensive outpatient programs

Changing Lives by Integrating Mind and Body Program

ifestyle Management Programs: Stress Management, Tobacco Cessation and Weight Management.

Pharmacy

Pharmacy benefits not provided by Cigna

Additional Information

Case Management

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

ncluded Comprehensive Oncology Program Care Management outreach Case Management Vision Therapy

Covered

Orthoptic Training eVisits

information they need to respond to non-urgent conditions. Individuals pay a predetermined copay or coinsurance based on their benefit plan design. After the eVisit is completed, a claim is automatically submitted to Cigna for reimbursement. Relay Health provides an online consultation service, or "eVisit," with doctors. The eVisit guides patients through an interactive interview that delivers to doctors the

Additional Information

ncluded

Health Advisor - A

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

Health Assessments

Health and Wellness Coaching

Gaps in Care Coaching

Treatment Decision Support

Educate and Refer

Maximum Reimbursable Charge

service in a geographic area. In some cases, the Medicare based fee schedule will not be used and the maximum reimbursable charge for covered services is based of a fee schedule (250%) developed by Cigna that is based on a methodology similar to one used by Medicare to determine the allowable fee for the same or similar on the lesser of the health care professional's normal charge for a similar service or a percentile (80th) of charges made by health care professionals of such service The allowable covered expense for non-network services is based on the lesser of the health care professional's normal charge for a similar service or a percentage Reimbursable Charge, then data in the database for similar services may be used. Out-of-network services are subject to a Contract Year deductible and maximum or supply in the geographic area where it is received. If sufficient charge data is unavailable in the database for that geographic area to determine the Maximum reimbursable charge limitations.

Out-of-Network Emergency Services Charges

following: (i) the median amount negotiated with In-Network providers for the Emergency Service, excluding any In-Network copay or coinsurance; (ii) the Maximum The allowable amount used to determine the Plan's benefit payment for covered Emergency Services rendered in an Out-of-Network Hospital, or by an Out-of-Network provider in an In-Network Hospital, is the amount agreed to by the Out-of-Network provider and Cigna, or if no amount is agreed to, the greater of the Emergency Services are covered at the In-Network cost-sharing level if services are received from a non-participating (Out-of-Network) provider.

Reimbursable Charge; or (iii) the amount payable under the Medicare program, not to exceed the provider's billed charges.

The member is responsible for applicable In-Network cost-sharing amounts (any deductible, copay or coinsurance). The member is also responsible for all charges that may be made in excess of the allowable amount. If the Out-of-Network provider bills you for an amount higher than the amount you owe as indicated on the Explanation of Benefits (EOB), contact Cigna Customer Service at the phone number on your ID card.

Medicare Coordination

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

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

Multiple Surgical Reduction

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

Additional Information

Pre-Certification - Continued Stay Review - PHS Inpatient - required for all inpatient admissions In-

Network: Coordinated by your physician

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

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

Benefits are denied for any additional days not certified by Cigna Healthcare.

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

Holistic health support for the following chronic health conditions:

Coronary Artery Disease

Angina

Heart Disease

Your Health First - 200

Acute Myocardial Infarction Congestive Heart Failure Individuals with one or more of the chronic conditions, identified on the right, may

be eligible to receive the following type of support:

Condition Management

Health & Wellness issues Risk factor management Medication adherence Lifestyle issues

reatment decision support Pre/post-admission

Gaps in care

Metabolic Syndrome/Weight Complications **Diabetes Type 2** Diabetes Type 1 Bipolar Disorder ow Back Pain Osteoarthritis Depression Bronchitis) Anxiety

Chronic Obstructive Pulmonary Disease (Emphysema and Chronic

Peripheral Arterial Disease

Asthma

Definitions

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

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

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

Out-of-Pocket Maximum - Specific limits for the total amount you will pay out of your own pocket before your plan coinsurance percentage no longer applies. Once Place of Service - Your plan pays based on where you receive services. For example, for hospital stays, your coverage is paid at the inpatient level. you meet these maximums, your plan then pays 100 percent of the "Maximum Reimbursable Charges" or negotiated fees for covered services.

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

Iransition of Care - Provides in-network health coverage to new customers when the customer's doctor is not part of the Cigna network and there are approved Professional Services - Services performed by Surgeons, Assistant Surgeons, Hospital Based Physicians, Radiologists, Pathologists and Anesthesiologists clinical reasons why the customer should continue to see the same doctor.

Exclusions

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

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

- Care for health conditions that are required by state or local law to be treated in a public facility.
- Care required by state or federal law to be supplied by a public school system or school district.
- Care for military service disabilities treatable through governmental services if you are legally entitled to such treatment and facilities are reasonably
- Treatment of an Injury or Sickness which is due to war, declared, or undeclared, riot or insurrection.
- Charges which you are not obligated to pay or for which you are not billed or for which you would not have been billed except that they were covered under this proportion to the amount of the copayment, deductible, and/or coinsurance amounts waived, forgiven or reduced, regardless of whether the provider represents that you remain responsible for any amounts that your plan does not cover. In the exercise of that discretion, Cigna shall have the right to require you to provide not limited to, charges of a non-Participating Provider who has agreed to charge you or charged you at an in-network benefits level or some other benefits level consent, then Cigna in its sole discretion shall have the right to deny the payment of benefits in connection with the Covered Expense, or reduce the benefits in proof sufficient to Cigna that you have made your required cost share payment(s) prior to the payment of any benefits by Cigna. This exclusion includes, but is copayment, deductible, and/or coinsurance amount(s) you are required to pay for a Covered Expense (as shown on The Schedule) without Cigna's express plan. For example, if Cigna determines that a provider or pharmacy is or has waived, reduced, or forgiven any portion of its charges and/or any portion of not otherwise applicable to the services received.
- Charges arising out of or relating to any violation of a healthcare-related state or federal law or which themselves are a violation of a healthcare-related state or
 - Assistance in the activities of daily living, including but not limited to eating, bathing, dressing or other Custodial Services or self-care activities, homemaker services and services primarily for rest, domiciliary or convalescent care.
- For or in connection with experimental, investigational or unproven services.
- Experimental, investigational and unproven services are medical, surgical, diagnostic, psychiatric, substance use disorder or other health care technologies, supplies, treatments, procedures, drug or Biologic therapies or devices that are determined by the utilization review Physician to be:
 - Not approved by the U.S. Food and Drug Administration (FDA) or other appropriate regulatory agency to be lawfully marketed; O
- Not demonstrated, through existing peer-reviewed, evidence-based, scientific literature to be safe and effective for treating or diagnosing the condition or Sickness for which its use is proposed;
- The subject of review or approval by an Institutional Review Board for the proposed use except as provided in the "Clinical Trials" sections of this plan; or The subject of an ongoing phase I, II or III clinical trial, except for routine patient care costs related to qualified clinical trials as provided in the "Clinical 0 0
- In determining whether drug or Biologic therapies are experimental, investigational and unproven, the utilization review Physician may review, without limitation, U.S. Food and Drug Administration-approved labeling, the standard medical reference compendia and peer-reviewed, evidence-based scientific
- The following services are excluded from coverage regardless of clinical indications: acupressure; dance therapy, movement therapy; applied kinesiology; Cosmetic surgery and therapies. Cosmetic surgery or therapy is defined as surgery or therapy performed to improve or alter appearance or self-esteem.
 - rolfing; prolotherapy; and extracorporeal shock wave lithotripsy (ESWL) for musculoskeletal and orthopedic conditions.
- Dental treatment of the teeth, gums or structures directly supporting the teeth, including dental X-rays, examinations, repairs, orthodontics, periodontics, casts, splints and services for dental malocclusion, for any condition. Charges made for services or supplies provided for or in connection with an accidental

Exclusions

made by a Physician for any of the following Surgical Procedures are covered: excision of unerupted impacted wisdom tooth, including removal of njury to teeth are covered provided a continuous course of dental treatment is started within six months of an accident. Additionally, charges alveolar bone and sectioning of tooth; removal of residual root (when performed by a Dentist other than the one who extracted the tooth)

- For medical and surgical services intended primarily for the treatment or control of obesity. However, treatment of clinically severe obesity, as defined by the body mass index (BMI) classifications of the National Heart, Lung and Blood Institute guideline is covered if the services are demonstrated, through peer- reviewed medical literature and scientifically based guidelines, to be safe and effective for treatment of the condition.
- Unless otherwise covered in this plan, for reports, evaluations, physical examinations, or hospitalization not required for health reasons including, but not limited to, employment, insurance or government licenses, and court-ordered, forensic or custodial evaluations.
- Court-ordered treatment or hospitalization, unless such treatment is prescribed by a Physician and listed as covered in this plan.
- Medical and Hospital care and costs for the infant child of a Dependent, unless this infant child is otherwise eligible under this plan.
- training and rehabilitation services, behavioral training, neurofeedback, hypnosis, sleep therapy, return to work services, work hardening programs Non-medical counseling and/or ancillary services including, but not limited to, Custodial Services, educational services, vocational counseling, and driver safety courses.
- Therapy or treatment intended primarily to improve or maintain general physical condition or for the purpose of enhancing job, school, athletic or recreational performance, including but not limited to routine, long term, or maintenance care which is provided after the resolution of the acute medical problem and when significant therapeutic improvement is not expected.
- Consumable medical supplies other than ostomy supplies and urinary catheters. Excluded supplies include, but are not limited to bandages and other disposable medical supplies, skin preparations and test strips, except as specified in the "Home Health Services" or "Breast Reconstruction and Breast Prostheses" sections of this plan.
- Private Hospital rooms and/or private duty nursing except as provided under the Home Health Services provision.
- Personal or comfort items such as personal care kits provided on admission to a Hospital, television, telephone, newborn infant photographs, complimentary meals, birth announcements, and other articles which are not for the specific treatment of an Injury or Sickness.
 - Artificial aids including, but not limited to, elastic stockings, garter belts, corsets and dentures.
- Aids or devices that assist with non-verbal communications, including but not limited to communication boards, prerecorded speech devices, laptop computers, desktop computers, Personal Digital Assistants (PDAs), Braille typewriters, visual alert systems for the deaf and memory books.
- Eyeglass lenses and frames and contact lenses (except for the first pair of contact lenses for treatment of keratoconus or post cataract surgery and for an accidental injury to eyes) including Lasik surgery.
- Eye exercises and surgical treatment for the correction of a refractive error, including radial keratotomy.
- All non-injectable prescription drugs, unless Physician administration or oversight is required, injectable prescription drugs to the extent they do not require Physician supervision and are typically considered self-administered drugs, non-prescription drugs, and investigational and experimental drugs, except as provided in this plan.
 - Routine foot care, including the paring and removing of corns and calluses or trimming of nails. However, services associated with foot care for diabetes and peripheral vascular disease are covered when Medically Necessary.
 - Membership costs or fees associated with health clubs, weight loss programs and smoking cessation programs.
- Genetic screening or pre-implantations genetic screening. General population-based genetic screening is a testing method performed in the absence of any symptoms or any significant, proven risk factors for genetically linked inheritable disease.
- Dental implants for any condition.
- Fees associated with the collection or donation of blood or blood products, except for autologous donation in anticipation of scheduled services where in the utilization review Physician's opinion the likelihood of excess blood loss is such that transfusion is an expected adjunct to surgery
 - Blood administration for the purpose of general improvement in physical condition.

Exclusion

- Cost of biologicals that are immunizations or medications to protect against occupational hazards and risks.
 - Cosmetics, dietary supplements and health and beauty aids.
- All nutritional supplements and formulae except for infant formula needed for the treatment of inborn errors of metabolism.
- Medical treatment for a person age 65 or older, who is covered under this plan as a retiree, or their Dependent, when payment is denied by the Medicare plan because treatment was received from a non-Participating Provider.
 - Medical treatment when payment is denied by a Primary Plan because treatment was received from a non-Participating Provider.
- For or in connection with an Injury or Sickness arising out of, or in the course of, any employment for wage or profit
- Charges for the delivery of medical and health-related services via telecommunications technologies, including telephone and internet, unless provided as specifically described under the benefit section.
- Massage therapy.

These are only the highlights

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

Insurance Company, Connecticut General Life Insurance Company, Cigna Behavioral Health, Inc., Tel-Drug, Inc., Tel-Drug of Pennsylvania, L.L.C. and HMO or service company subsidiaries of Cigna Health Corporation. "Cigna Home Delivery Pharmacy" refers to Tel-Drug, Inc. and Tel-Drug of All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Pennsylvania, L.L.C. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

EHB State: CT

Your Personal Prescription Benefit Program

Option 39 - HSA Plan

Welcome to your new prescription benefit administered by CVS Caremark, Your prescription benefit is designed to bring you quality pharmacy care that will help you save money.

The information below is a brief summary of your prescription benefits as well as some frequently asked questions about the CVS Caremark prescription benefit program. CVS Caremark and City of Hartford are confident you will find value with your new prescription benefit program.

		Maintenance Medications
	CVS Caremark Retail Pharmacy Network For short-term medications (Up to a 30-day supply)	For long-term medications (Up to a 90-day supply) (Mandatory Mail or State of CT Maintenance Drug Network* after first 30-day fill at retail)
Where	The CVS Caremark Retail Network includes more than 68,000 participating pharmacies nationwide, including independent pharmacies, chain pharmacies, and 9,600 CVS Pharmacy locations. To locate a CVS Caremark participating retail network pharmacy in your area, simply click on "Find a Pharmacy" at www.caremark.com or call a Customer Care representative toll-free at 1-877-461-0101	You have the convenience of getting your long-term medications through CVS Caremark Mail Service Pharmacy or dispensed at one of our 9,600 CVS Pharmacy locations as well as a retail pharmacy that participates in the State of Connecticut Maintenance Drug Network. When you use CVS Caremark Mail Service Pharmacy, your medications can be sent directly to your home or office.
Generic Medications Ask your doctor or other prescriber if there is a generic available, as these generally costless.	\$5 for a generic prescription	\$10 for a generic prescription
Preferred Brand-Name Medications If a generic is not available or appropriate, ask your doctor or healthcare provider to prescribe from your plan's preferred drug list.	\$20 for a preferred brand-name prescription	\$40 for a preferred brand-name prescription
Non-Preferred Brand-Name Medications You will pay the most for medications not on your plan's preferred drug list.	\$40 for a non-preferred brand-name prescription	\$80 for a non-preferred brand-name prescription
Refill Limit	One	None
Annual Deductible	\$2,000 individual / \$4,000 family (combined with medical	al)
Maximum Out-of-Pocket	\$3,000 individual / \$6,000 family (combined with medical	
Web Services	Register at www.caremark.com to access tools that can benefit. To register, have your Prescription Card ready.	help you save money and manage your prescription
Customer Care	Visit www.caremark.com or call toll-free at 1-877-461-01	01.

Copayment, copay or coinsurance means the amount a plan participant is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information

CVS/caremark

NUBAAG

Frequently Asked Questions

ABOUTTHECVSCAREMARKRETAILNETWORK

Do I only have to use a CVS Pharmacy?

For maintenance medications (long-term), you are allowed one 30-day fill only at any participating retail pharmacy. After the first 30-day fill, you must fill your prescription through the CVS Caremark Mail Service Pharmacy, CVS Pharmacy or other pharmacies that participate in the State of Connecticut Maintenance Drug Network. A full list of pharmacies in the maintenance drug network can be found on the Comptroller's website at www.osc.ct.gov.

ABOUT MAIL SERVICE and the STATE OF CONNECTICUT MAINTENANCE DRUG NETWORK

Where can I fill maintenance prescriptions?

The choice is yours. You can order 90-day supplies of maintenance medications at:

Mail Service: Register for mail service by phone (FastStartH toll free at 1-800-875-0867 from 8am - 8:30pm Mon - Friday) or log on to and sign in or register, if necessary. Have your Prescription Card number, the names of your medicines, your doctor's information and your payment information ready. We handle the rest.

CVS Pharmacy - Visit your local CVS Pharmacy. If you are currently using CVS Pharmacy to fill your maintenance medications, you can continue to do so. Your CVS pharmacist can dispense your 90-day supply of a maintenance medication for one copay.

State of Connecticut Maintenance Drug Network - Filly our maintenance medications at a participating State of Connecticut Maintenance Drug Network Pharmacy. If your pharmacy is participating in the State of Connecticut Maintenance Drug network, you can use the pharmacy to dispense your 90-day supply of a maintenance medication.

How long does it take for my prescriptions to arrive by mail?

Please allow 7-10 days for delivery from the time the order is placed. You can check your refill status on-line or by calling toll-free at 1-877-461-0101. Please note: Mail order packaging accommodates all temperature sensitive drugs.

How should I ask my doctor or other prescriber to write my prescription in order to receive the maximum benefit for my maintenance medication?

Remind your doctor or other prescriber to write a "90-day supply plus refills," when clinically appropriate, for maintenance medications. CVS Caremark must fill your prescription for the exact quantity of medication that your doctor or healthcare provider prescribes, up to your plan design limit. When you need to take your maintenance medication right away, ask your doctor or other prescriber for two prescriptions:

- •The first for up to a 30-day supply
- •The second for up to a 90-day supply, with refills when clinically appropriate

Have the short-term supply filled immediately at any CVS Caremark participating retail pharmacy. Then you have the choice to fill your maintenance medication using Mail Service Pharmacy, CVS Pharmacy, or a pharmacy participating in the State of Connecticut Maintenance Drug Network.

ABOUT THE CVS CAREMARK DRUGLIST

What is a drug list?

It is a list of preferred prescription medications that have been chosen because of their clinical effectiveness and safety. This list is typically updated every three months. The drug list promotes the use of preferred brand-name medications and generic medications whenever possible. Generic medications are therapeutically equivalent to brand-name medications and must be approved by the U.S Food and Drug Administration (FDA) for safety and effectiveness. Generally, generic medications cost less than brand-name medications. You can get a drug list by either visiting www.caremark.com or by calling Customer Care toll-free at 1-877-461-0101.

Where can I get a drug list brochure?

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You can get a drug list brochure by visiting Caremark.com or by calling a Customer Care Representative toll-free at 1-877-461-0101. To save money, have your doctor or other prescriber choose a generic or preferred brand-name medication from the CVS Caremark Drug List, if appropriate. You may want to take the list with you when you visit your doctor or other prescriber.

DARKEN BOLDEN, NY WEST STATES



City of Hartford HMEA Dental Benefits at a Glance

Full Dental Plan Riders A. B. C & D

The Full Dental Plan is designed to cover diagnostic, preventive and restorative procedures necessary for adequate dental health.

Covered services include:

- Oral Examinations
- Periapical and bitewing x-rays
- Topical fluoride applications for those under age 19
- Prophylaxis, including cleaning, scaling and polishing
- Repair of dentures
- ♦ Palliative emergency treatment
- Routine fillings consisting of silver amalgam and tooth color materials; including stainless steel crowns (primary teeth)*
- ♦ Simple extractions**
- ♦ Endodontics including pulpotomy, direct pulp capping and root canal therapy (excluding restoration)
- * Payment for an inlay, onlay or crown will equal the amount payable for a three-surface amalgam filling when the member is not covered by the Dental Amendatory Rider A.
- ** Payment for a surgical extraction or a hemisection with root removal will equal the amount payable for a simple extraction when the member is not covered by Dental Amendatory Rider A.

ACCESSING BENEFITS:

Participating Dentists Benefits.

When receiving care from one of over 1,800 Participating Dentists, the member simply presents an identification card showing dental coverage. The dentist bills us directly for all covered services.

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

Non-Participating Dentists Benefits.

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

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

City of Hartford HMEA Dental Benefits at a Glance

Dental Amendatory Rider A Additional Basic Benefits

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

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

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

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

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

Participating Dentists Benefits

Anthem Blue Cross and Blue Shield will pay the lesser of 50% of the dentist's usual charge nted together for any reason.

ACCESSING BENEFITS:

or 50% percent of the Usual, Customary and Reasonable Charge, as determined by us, for the dental services described in this Rider. Dentists who participate in our dental programs agree to accept our allowance as full payment and may not bill the member for any additional charges except for the remaining coinsurance balance.

Non-Participating Dentists Benefits

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

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

City of Hartford HMEA Dental Benefits at a Glance

Dental Amendatory Rider B
Prosthodontics

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

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

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

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

ACCESSING BENEFITS:

Participating Dentists Benefits

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

Non-Participating Dentists Benefits

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

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

City of Hartford HMEA Dental Benefits at a Glance

Dental Amendatory Rider C Periodontics

Periodontal services consisting of:

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

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

ACCESSING BENEFITS:

Participating Dentists Benefits

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

Non-Participating Dentists Benefits

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

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

City of Hartford HMEA Dental Benefits at a Glance

Dental Amendatory Rider D Orthodontics

The following orthodontic services are provided:

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

The maximum amount for orthodontic services is \$600.00 per member per lifetime.

ACCESSING BENEFITS:

Participating Dentists Benefits

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

Non-Participating Dentists Benefits

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

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

APPENDIX D

Hartford Police Union Re-Enrollment Memorandum of Understanding

Whereas, the City of Firstford initiated a re-envolument process in order for Hartford Police Union members to continue dependent coverage;

Whereas, the City and the Eartford Police Union (the Union) acknowledged this was a mandatory subject of bargaining that required negotiation between the parties.

Whereas, the parties have successfully negotiated a procedure under which Union members may be required to re-enroll for dependent medical/dental coverage.

NOW THERBFORE, the parties mutually agree as follows:

- The City may send to members the revised notice, a copy of which is attached hereto as lixhibit A.
- Whonever a Union member's dependent is rejected for coverage, said member shall be entitled to a right of appeal of that rejection pursuant to the following process:
 - a. First, the member will be given a reasonable opportunity to provide documentation or information necessary to substantiate the dependent's eligibility.
 - b. If the member fails to produce such documentation or information, the member will be given a notice of intention to either discontinue or deny coverage for the dependent. Said notice will provide a right to a hearing, upon reasonable notice, before a hearing officer selected by the City.
 - c. For members who elect to have such a hearing, existing coverage for the affected dependent will not be discontinued unless an adverse deciaion to the member is issued by the hearing officer.

However, if the member appealing the rejection of coverage fails to attend the scheduled hearing, the hearing officer may render a decision based solely on the information available to the hearing officer.

- d. The Union member will have the right to appeal the decision by the hearing officer selected by the City through the grievance procedure contained in the Union Collective Bargaining Agreement.
- This process does not abrogate a member's rights under the Councetiout General Statutes.

For the City Date

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APPENDIX E CITY OF HARTFORD/HMEA MANAGEMENT AND SUPERVISORY PERFORMANCE EVALUATION FORM

DIVISION:

EMPLOYEE NAME:

DEPARTMENT:			
DEPARTMENT RESPON	SIBILITY		
	18		
in the space labeled "Standa At the end of the each reviev	/unit in the space labeled "Object rds," list the step/actions necessa	tives." These are the factors that you will in accomplishing the goal as listed, tual Results" and "Hindrances to Achievin	• 18
Objectives	Standards	Actual Results	Hindrances to Achieving Results
		55	
Fig.			
122	ļ		37

APPENDIX E CITY OF HARTFORD/HMEA MANAGEMENT AND SUPERVISORY PERFORMANCE EVALUATION EMPLOYEE NAME EMP. NO. DEPARTMENT TITLE DATE APPOINTED TO TITLE DIVISION TYPE OF EVALUATION PERIOD COVERED BY THIS EVALUATION ☐ Promotion Exit Other __ to _ Annual Please use the following information to evaluate the performance of each employee. Box 1 = **Superior Performance** Box 2 = **Above Standard Performance** Standard Performance Box 3 = Box 4 = **Below Standard Performance** INSTRUCTIONS: In terms of factors listed, please utilize the information provided to appraise the performance of each employee. For each set of items, select the group of words which best describes the performance of the employee. The employee's overall performance should be considered rather than evaluating on the basis of an isolated incident. Avoid allowing one factor of the employee's performance which may be good to influence another factor which should be improved upon, or one factor which is weak to influence another factor which is good. Please provide supporting evidence in high and low rating. KNOWLEDGE OF JOB Sometimes handi-Requires help Consider extent of employee's Exceptional Knows what to do knowledge/Information knowledge of current job. Does and how to do it with capped by gaps in even on routine employee know what to do & why? minimal supervision knowledge/Information Evidence/Example to support rating: QUALITY OF WORK Consider ability to produce work Does complete and Work is usually Moderate amount Errors/omissions which is of high quality - neat & accurate job in all acceptable. Very few of work requires serlous and thorough, regardless of volume. aspects errors/omissions re-doing frequent Evidence/Example to support rating: QUANTITY OF WORK Consider amount of work produced Amount of work Consistently turns Turns out good Amount of work under normal conditions and extent out very large volume volume of work completed sometimes s adequate to which employee meets expected of work below average deadlines Evidence/Example to support rating: RELATIONS WITH PUBLIC Occasionally Consider whether employee is Always courteous Usually effective Ineffective or courteous, sensitive to feelings and and sensitive to the in relations with the inconsiderate in tactless or Interest of public in general public public uncooperative dealing with the

Evidence/Example to support rating:

public

APPENDIX E - CITY OF HARTFORD/HMEA MANAGEMENT AND SUPERVISORY PERFORMANCE EVALUATION EVALUATION OF MANAGEMENT AND SUPERVISORY ABILITIES

EVALUATION OF	(Where Appl		VISORY ABILIT	IES
INSTRUCTIONS: Consider employee's ability	to obtain desired output and o	juality of work, and to react	department's objectives by	
use of supervisory techniques. Rate the employe	e's overall perforamene in eac	h area listed below.		
PLANNING AND ASSIGNING WE Consider how effectively employee plans and assigns work so that it can be performed quickly and efficiently Evidence/Example to support rating:	ORK Clearly defines & assigns work to obtain maximum results. Timely, thorough follow-up	Occasionally experiences difficulty & requires assistance to meet deadlines	Generally effective in planning, assigning and follow-up	Lacks ability to plan and assign work
DELEGATING AUTHORITY AND How well does employee effectively work through others delegating authority & responsibility to subordinates to perform significant dutles? Evidence/Example to support rating:	RESPONSIBILITY Makes maximum use of employees' capabilities in delegating authority & responsibility	Generally entrusts authority and responsibility	Delegates responsibility but sometimes withholds necessary authority	Runs one-person show
STAFF DEVELOPMENT Consider employee's ability & willingness to develop or increase skills of subordinates. Does employee train them for present dutles? For increased responsibilities? Systematically evaluate and counsel them? Evidence/Example to support rating:	Provides maximum opportunities to subordinates to enhance their skills	Encourages & helps subordinates to improve performance in current job and develop potential	Takes only limited interest in the training and development of subordinates	Makes poor use of subordinates. Provides no help to their development
INTERPRETATION AND APPLICATION OF APPLICATION AND APPLICATION OF A	TION OF POLICY Always understands and applies property	Usually under- stands and applies policy property	Sometimes does not understand or apply policy properly	Does not understand or apply policy properly
LEADERSHIP Consider how successful employee is in guiding and motivating people to work together toward common objectives Evidence/Example to support rating:	Consistently obtains above average performances from subordinates	Generally motivates staff to satisfactory performance	Does not consistently obtain satisfactory and timely performance from subordinates	Lacks ability to motivate subordinates to timely and satisfactory performance

APPENDIX E - CITY OF HARTFORD/HMEA MANAGEMENT AND SUPERVISORY PERFORMANCE EVALUATION EVALUATION OF MANAGEMENT AND SUPERVISORY ABILITIES

71 (11)	(Where App	icable)		
INSTRUCTIONS: Consider employee's abilit	y to obtain desired output and o	quality of work, and to rea	ch department's objectives by	
use of supervisory techniques. Rate the employ	yee's overall perforamene in eac	th area listed below.		
COORDINATION/TEAM WORK				
Consider whether employee coordinates work effectively with that of other operational units in organization Evidence/Example to support rating:	Team worker. Always coordinates with other units of departments	Usually coordi- nates work well with that of other operations	Sometimes places importance of own work goals above organization	Never coordinate with other operations
JUDGMENT				
Consider ability to make decisions and to use resources to best advantage. Does employee know when to seek advice? Evidence/Example to support rating:	Anticipates problems & Indepen- dently takes appro- priate action	Generally knows what should be done and how to go about it	Has some difficulty in making necessary & sound judgment	Make frequent errors in judgment
ADAPTABILITY		- · · · · · · · · · · · · · · · · · · ·		
Consider the speed with which employee learns and amount of training needed to teach new skills Evidence/Example to support rating:	Immediately grasps new instructions/ideas & applies them to work	Receptive to new instructions/ideas & applies them quite quickly	Has some difficulty grasping new instructions/ideas without follow-up	Very slow grasping new instructions/ ideas even with constant supervision
RELIABILITY				
Consider ability of employee to get work out, especially under pressure and to follow through to completion Evidence/Example to support rating:	Handles even difficult problems with little or no supervision	Fulfils commit- ments with normal supervision	Occasionally fails to complete assign- ments. Needs direction	Cannot be relied upon to carry out assignments without constant prodding
20				
ATTENDANCE. Are employee's absences indicate the number of times absent in ra what action has been taken.		1	ployee excessively late? If late in rating period and w	
EVALUATION CHECKLIST		give that greater consid	leration in evaluating the	
It. SUMMARY RATING In arriving at a summary rating do not me factors are of the greatest importance in factors in arriving at a summary rating. U performance of the employee in order to	performing the duties of the se your ratings of the listed	e position. Give greater factors as a guide, but	consideration to these	
Outstanding Satisf	actory	Needs Improvement		Below Standard
III. if Summary Rating is Outstanding, Ne Be specific, provide dates & details w factors as well (attach add'l sheets if r	herever possible. In addi			e other

APPENDIX F Illustration of Pension Provision

- I. Example Pre-2003 HMEA Bargaining Unit Member A Board of Education (Board) employee hired on May 29, 2001 subsequently gets promoted, transferred or otherwise placed into HMEA on August 1, 2004. It would not matter what the former benefit calculation rate for pension was at that time (2.0%, 2.25%, 2.5%, etc.). Since the employee was employed by the Board prior to July 1, 2003, the employee is entitled to have his or her pension benefit calculated at the rate of two and three-quarters percent (2.75%) per each whole year of service, provided, the employee pays the contribution differential as required in Article III, Section 3.5 of this Agreement. If the employee does not pay the contribution differential, the employee's pension benefit will be calculated as set forth in paragraph II below regardless of the employee's hire date. If the employee referenced above had been hired by the Board on July 15, 2003 and then transferred to the HMEA bargaining unit on August 1, 2004, the employee's pension benefits would be calculated as set forth in paragraph II. below.
- II. <u>Illustration Post -2003 HMEA Bargaining Unit Member</u> All new bargaining unit members hired, promoted or demoted into HMEA who are considered Post-2003 HMEA bargaining unit members, have a pension benefit in accordance with the provisions of Article III, Section 3.5 Subsection f. as follows:
 - a. A benefit calculation rate of two percent (2%) per each whole year of service.
 - b. A minimum age of fifty-five (55) with twenty-five (25) years of City service for a normal, unreduced retirement.
 - c. A maximum allowable purchase of four (4) years of military service time as defined in Section 27-103 of the Connecticut General Statutes at the rate payable at the time of entry into City service with interest at the rate of seven percent (7%) per annum, payable within one (1) year of date of hire.
 - d. Vesting upon completion of five (5) years of continuous City service.
 - e. An employee contribution rate to the pension fund as enumerated in Article III, Section 3.5, Subsection f.
 - f. There shall be no sick leave exchange.
 - g. A maximum pension allowance of seventy percent (70%). The maximum pension allowance has been amended for employees retiring on or after June 29, 2009.
 - h. Normal retirement is at age sixty (60) with at least five (5) whole years of continuous City service.

Note: The above illustration does not apply to those new bargaining unit members hired, promoted or demoted into HMEA who are considered Post-2017 HMEA bargaining unit members, and those individuals should refer to the provisions of Article III, Section 3.5, Subsection F page 22.