

AGREEMENT

BETWEEN THE

BOARD OF EDUCATION

Waukegan Unit School District #60
LAKE COUNTY, ILLINOIS
AND THE



WAUKEGAN PROFESSIONAL SUPPORT STAFF

LAKE COUNTY FEDERATION OF TEACHERS
LOCAL 504, IFT-AFT/AFL-CIO

FOR THE SCHOOL YEARS

2017 – 2022

Contract Extension

The agreements below, made by and between the Board of Education of Community Unit School District No. 60, Waukegan, Lake County, Illinois, and the Waukegan Professional Support Staff, a Council of the Lake County Federation of Teachers, Local 504, IFT-AFT/AFL-CIO, encompass the terms of a two-year contract extension, with all terms and conditions of the 2017-2020 Collective Bargaining Agreement “rolling over” into the 2020-2022 extension, or remaining in full force and effect for the 2020-2022 school years. Union ratification and Board of Education approval having both occurred, these changes are incorporated into the new 2017-2022 Agreement and have been distributed to the parties for inclusion into the new 2017-2022 Agreement.

ARTICLE IX

FRINGE BENEFITS

A. Medical, Hospitalization and Dental Insurance - Group A and B Employees

1. Medical, Hospitalization and Dental

Medical, hospital and dental insurance is provided for all full-time Employees (thirty (30) hours or more) by the Board of Education.

Single Coverage

For the purpose of this article the term premium is defined as the cost of the insurance coverage as approved by the Board of Education.

The single premium for dental insurance shall be paid by the Board of Education.

The single premium for medical/hospitalization insurance shall be paid by the Board of Education, except that the Employee will contribute annually in the amount of zero point three two percent (0.32%) of their annual base salary for the duration of the Agreement. For example, an employee who in 2020-2021 is at the Specialist/Step 10 cell with a base salary of forty eight thousand four hundred ninety two dollars and twenty six cents (\$48,492.26) would contribute one hundred and fifty five dollars and eighteen cents (\$155.18) in 2020-2021 towards his/her single premium ($48,492.26 \times 0.0032 = 155.18$).

Single Plus Child(ren), Single Plus Spouse or Single Plus Full Family

Furthermore regarding medical/hospitalization insurance, Employees who wish to have their dependents insured shall pay a portion of the dependent Premium Cost through payroll deductions according to the following parameters, and as further illustrated in the charts below; those Employees who enroll in dependent medical/hospitalization insurance will have the single portion of their dependent coverage paid for by the Board at one hundred percent (100%).

In calendar year 2017, Employees will pay towards the cost of the dependent care Premium Cost the Employee Contribution amount as set forth below under the heading "2017 Employee Contribution".

In calendar year 2018, Employees will pay towards the cost of the dependent care Premium Cost the 2017 Employee Contribution, plus thirty five percent (35%) of the increase to the new 2018 Premium Cost, which will yield a new 2018 Employee Contribution amount. In the event, there is no increase to the Premium Cost, the Employee will pay last year's Employee Contribution.

In calendar year 2019, Employees will pay towards the cost of the dependent care Premium Cost the 2018 Employee Contribution, plus thirty five percent (35%) of the increase to the new 2019 Premium Cost, which will yield a new 2019 Employee Contribution amount. In the event, there is no increase to the Premium Cost, the Employee will pay last year's Employee Contribution.

In calendar year 2020, Employees will pay towards the cost of the dependent care Premium Cost the 2019 Employee Contribution, plus thirty five percent (35%) of the increase to the new 2020 Premium Cost, which will yield a new 2020 Employee Contribution amount. In the event, there is no increase to the Premium Cost, the Employee will pay last year's Employee Contribution.

In calendar year 2021, Employees will pay towards the cost of the dependent care Premium Cost the 2020 Employee Contribution, plus thirty five percent (35%) of the increase to the new 2021 Premium Cost, which will yield a new 2021 Employee Contribution amount. In the event, there is no increase to the Premium Cost, the Employee will pay last year's Employee Contribution.

In calendar year 2022, Employees will pay towards the cost of the dependent care Premium Cost the 2021 Employee Contribution, plus thirty five percent (35%) of the increase to the new 2022 Premium Cost, which will yield a new 2022 Employee Contribution amount. In the event, there is no increase to the Premium Cost, the Employee will pay last year's Employee Contribution.

As an example, and assuming an eight percent (8%) increase per year to the Premium Cost in calendar years 2018, 2019 and 2020, an individual who takes HMO Full Family with a total 2017 premium cost of \$14,533.56 will pay annually an Employee Contribution of \$8,361.84 in 2017; will pay annually an Employee Contribution of \$8,768.78 in 2018 ($14,533.56 \times 1.08 = 15,696.24$, then $15,696.24 - 14,533.56 = 1,162.68$, then $1,162.68 \times 0.35 = 406.94$, then $8,361.84 + 406.94 = 8,768.78$); will pay annually and Employee Contribution of \$9,208.27 in 2019; will pay annually an Employee Contribution of \$9,682.93 in 2020.

WPSS	2020 Employee Contribution	2020 Employer Contribution	2020 Premium Cost
PPO- Spouse Only	\$6,495.37	\$12,386.03	\$18,881.40
PPO- Children Only	\$4,942.48	\$13,176.92	\$18,119.40
PPO- Full Family	\$10,513.66	\$17,506.58	\$28,020.24
HMO- Spouse Only	\$3,304.75	\$13,383.89	\$16,688.64
HMO- Children Only	\$3,908.56	\$11,814.92	\$15,723.48
HMO- Full Family	\$8,581.63	\$15,431.33	\$24,012.96
BlueAdv- Spouse Only	\$3,023.07	\$12,497.37	\$15,520.44
Blue Adv- Children Only	\$3,518.87	\$11,104.09	\$14,622.96
Blue Adv- Full Family	\$7,992.34	\$14,329.78	\$22,322.12
HDP- Spouse Only	\$4,554.77	\$11,898.31	\$16,453.08
HDP- Children Only	\$4,087.66	\$11,701.34	\$15,789.00
HDP Full Family	\$10,182.08	\$14,234.68	\$24,416.76

	2021		2022	
	2021 Premium Cost	2021 Employee Contribution	2022 Premium Cost	2022 Employee Contribution
PPO-Spouse Only	Unknown	For all categories, 2020 Employee Contribution, plus 35% of the increase over the 2020 Premium Cost	Unknown	For all categories, 2021 Employee Contribution, plus 35% of the increase over the 2021 Premium Cost
PPO-Children Only	Unknown		Unknown	
PPO-Full Family	Unknown		Unknown	
HMO-Spouse Only	Unknown	For all categories, 2020 Employee Contribution, plus 35% of the increase over the 2020 Premium Cost	Unknown	For all categories, 2021 Employee Contribution, plus 35% of the increase over the 2021 Premium Cost
HMO-Children Only	Unknown		Unknown	
HMO-Full Family	Unknown		Unknown	
BlueAdv-Spouse Only	Unknown	For all categories, 2020 Employee Contribution, plus 35% of the increase over the 2020 Premium Cost	Unknown	For all categories, 2021 Employee Contribution, plus 35% of the increase over the 2021 Premium Cost
BlueAdv-Children Only	Unknown		Unknown	
BlueAdv-Full Family	Unknown		Unknown	
HDP-Spouse Only	Unknown	For all categories, 2020 Employee Contribution, plus 35% of the increase over the 2020 Premium Cost	Unknown	For all categories, 2021 Employee Contribution, plus 35% of the increase over the 2021 Premium Cost
HDP-Children Only	Unknown		Unknown	
HDP-Full Family	Unknown		Unknown	

Any Employee on approved unpaid leave of absence or any retired Employee up to the age of sixty-five (65) who is receiving an IMRF pension may maintain insurance benefits by making timely payment of all premiums decided by their employment status, which may be due to the Business Office.

2. Insurance Plan Board

The Union shall have one (1) seat on the Insurance Plan Board. The Insurance Plan Board shall review the insurance program. The primary purpose of the Insurance Plan Board is to oversee the insurance program. The Insurance Plan Board will review and consider information concerning carriers, investment income, claims paid, insurance reserves, stop loss limits, individual claim appeals, and other matters integral to the District's insurance program and its operations. The Insurance Plan Board will make advisory recommendations on the foregoing matters to the Board of Education. In no case will the Insurance Plan Board infringe on or otherwise violate the terms of this agreement or the rights of the Union to negotiate, under the Illinois Educational Labor Relations Act, mandatory subjects of bargaining, including but not limited to all matters related to insurance benefits.

3. Insurance Changes

Insurance benefits shall not diminish during the life of this Agreement.

4. Insurance While On Leave

Waukegan Professional Support Staff on an unpaid leave of absence may, at their own option and upon payment of the appropriate premium, continue to be covered under Board sponsored group insurance plans.

5. Pro-Rata Benefits

Employees beginning an approved leave of absence, Employees hired during the school term, and Employees whose employment terminates by mutual agreement of the Waukegan Professional Support Staff and the Board, or whose employment terminates by order of the Board, shall receive pro-rata compensation and benefits based upon the actual period of employment. All computations shall be based on the number of days the individual employee would work in a full year. All Board paid insurance benefits shall be based on a calendar year beginning the first day of the school term. Any employees whose benefits must be computed pro-rata shall have such done by dividing the actual number of work days by the number of days the individual employee would work in a full year and multiplying the result by the annual benefit involved. In the case of insurance premiums, the final result shall be rounded to the nearest month. In the case of vacation time, the final result shall be rounded to the nearest day. (For example: An employee works 103 days of a normal 210day work year. The insurance benefit is calculated as $103 \text{ days} / 210 \text{ days} \times 12 \text{ months} = 5.89$ months. This rounds off to six [6] months of insurance coverage.)

6. Notification to Employees of Premium Reversion

In any instance where Board payment of personal insurance premiums is to revert to Employee payment (during leaves, retirement, mid-year new hires, mid-year resignations, etc.), the Board shall so notify the affected Employee in writing at least thirty (30) days prior thereto, unless there are fewer than thirty (30) days to premium reversion in which case the Board shall notify the Employee immediately. Such notification shall be by certified mail.

7. New Employees

All insurance coverage for new Employees and Employees returning from an unpaid leave of absence who allowed insurance coverage to cease shall be effective on the first day of employment. If the first day of employment is other than the first day of the school term, Board paid premiums shall be as described in Paragraph 5, above.

APPENDIX V

2020-2021 Salaries

Step	I	IA	SP	CT
2020-21				
1	12.35	12.75	37905.47	42251.10
2	12.70	13.14	38959.58	43337.05
3	13.05	13.48	40075.35	44670.70
4	13.36	13.80	40984.93	45545.20
5	13.66	14.10	41906.93	46570.18
6	13.96	14.42	42849.32	47618.89
7	14.40	14.98	43810.91	49191.40
8	15.08	15.64	45464.90	50666.63
9	15.83	16.31	47012.52	52075.11
10	16.51	17.03	48492.26	53281.08
11	17.14	17.70	49758.20	54789.11
12	17.91	18.45	51340.89	56363.88
13	18.69	19.24	52995.98	58006.53
14	19.50	20.11	54720.09	59480.63
15	20.25	20.82	56267.72	61357.46
16	21.20	21.73	58238.47	63503.55
17	22.26	22.84	60492.01	65479.94
18	23.27	23.79	62566.82	67626.01
19	24.35	24.92	64820.39	69703.10
20	25.39	25.99	67001.53	71815.25
21	26.45	27.02	69218.90	73891.19
22	27.49	28.04	71400.05	76037.27
23	28.59	29.12	73652.49	78182.23

1. Employees shall move one step higher each year upon working or being on paid leave for at least one hundred eighteen (118) days if a ten (10)/eleven (11) month employee, or at least one hundred thirty (130) days if a twelve (12) month employee, including paid holidays, unless specifically stated otherwise for employees on certain types of Leaves of Absences.
2. Employees with fifteen (15) or more years of service in the District shall receive an additional one thousand dollars (\$1,000) annually.
3. Employees with twelve (12) or more but not fifteen (15) years of service in the District shall receive an additional five hundred dollars (\$500) annually.
4. Employees with eight (8) or more but not twelve (12) years of service in the District shall receive an additional two hundred fifty dollars (\$250) annually.
5. The Years of Service Stipend referred to above shall be paid annually on the last payday in December.

6. Elementary and Middle School Head Secretaries shall receive an annual stipend of two hundred and fifty (\$250) dollars, paid in June, if a full year of work in such position is completed.
7. Entry to the Computer Technician (CT) lane shall require job designation as a Computer Technician as well as A+ certification.
8. Waukegan Professional Support Staff who reach the end of the salary schedule in any year of this agreement shall have a wage increase equal to the regular schedule adjustment for that year of the agreement.

APPENDIX VI

2021-2022 Salaries

Step	I	IA	SP	CT
2021-22				
1	12.48	12.87	38284.53	42673.61
2	12.82	13.27	39349.17	43770.42
3	13.18	13.62	40476.10	45117.41
4	13.50	13.93	41394.78	46000.65
5	13.79	14.24	42326.00	47035.88
6	14.10	14.57	43277.81	48095.08
7	14.55	15.13	44249.02	49683.32
8	15.23	15.80	45919.55	51173.30
9	15.98	16.47	47482.65	52595.86
10	16.68	17.20	48977.18	53813.89
11	17.31	17.87	50255.78	55337.00
12	18.09	18.64	51854.29	56927.52
13	18.87	19.43	53525.94	58586.60
14	19.70	20.31	55267.29	60075.43
15	20.45	21.02	56830.39	61971.03
16	21.41	21.94	58820.85	64138.58
17	22.48	23.06	61096.93	66134.74
18	23.50	24.02	63192.49	68302.27
19	24.59	25.17	65468.59	70400.13
20	25.65	26.25	67671.55	72533.40
21	26.72	27.29	69911.08	74630.10
22	27.77	28.32	72114.05	76797.65
23	28.88	29.41	74389.02	78964.05

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8. Waukegan Professional Support Staff who reach the end of the salary schedule in any year of this agreement shall have a wage increase equal to the regular schedule adjustment for that year of the agreement.

IN WITNESS THEREOF, the parties have executed this Agreement by their duly authorized representatives.

FOR THE BOARD OF EDUCATION

FOR THE WAUKEGAN PROFESSIONAL
SUPPORT STAFF

COMMUNITY UNIT SCHOOL DISTRICT
NO. 60, LAKE COUNTY, ILLINOIS

LAKE COUNTY FEDERATION OF TEACHERS,
LOCAL NO. 504

B. V. Ewing
President

[Signature]
President

[Signature]
Secretary

[Signature]
Secretary

11/13/20
Date

9-24-20
Date