

**AGREEMENT**

**between**

**EDUCATION ASSOCIATION OF CANTON**

**and**

**CANTON BOARD OF EDUCATION**

**July 1, 2024 through June 30, 2027**

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**AGREEMENT**  
**between**  
**EDUCATION ASSOCIATION OF CANTON**  
**and the**  
**CANTON BOARD OF EDUCATION**

**ARTICLE I**  
**RECOGNITION**

This Agreement is made pursuant to section 10-153b et seq. of the Connecticut General Statutes between the Canton Board of Education (the "Board") and the Education Association of Canton (the "Association") affiliated with the Connecticut Education Association and National Education Association, which association the Board recognizes as the exclusive negotiation representative for all certified professional personnel, including teachers employed under Durational Shortage Area Permits (DSAP's), other than substitutes and members of the Administrators' Association of Canton, Inc. (AAC) for the duration of the contract.

Unless otherwise indicated, the term "teacher" when used hereinafter shall refer to all employees covered by this agreement.

All lawful rights, powers and authorities of the Board shall continue to remain exclusively vested in the Board.

The Board and the Association agree to negotiate in accordance with state law, 10-153 a-n, as amended.

No assignment of interest or responsibility contained herein will be made by the Association to any other teacher representative organization until termination of this contract.

The Board agrees not to negotiate at any time with any teacher organization other than the Association in regard to changes in salaries or other conditions of employment to become effective during the term of this Agreement.

The Board shall notify the Association in writing of all new hires within seven (7) calendar days of hire.

## **ARTICLE II SALARIES**

### **A. Salary Schedules**

1. Salary schedules shall be those set forth in Tables I, II, and III for the term therein indicated.
  
2. Degree Definition
  - a. Bachelor Scale - A baccalaureate degree earned at an accredited college or University.
  
  - b. Master's Scale - A master's degree earned at an accredited college or university, or the completion of thirty (30) graduate level credits beyond the baccalaureate degree at an accredited college or university, or thirty (30) hours in a program approved by the Superintendent of Schools in Canton.
  
  - c. Sixth Year Scale - A "sixth year certificate" from an accredited college or university, or thirty (30) hours of graduate level courses beyond the qualifications for the master's status or a second master's degree in a discipline other than the discipline in which the initial master's degree was earned; provided, however, in each case, that the further study shall contribute to the performance of the teacher's assignment, as judged by the Superintendent of Schools.
  
  - d. Credits and courses shall mean graduate level hours, credits and courses as certified by the accredited college or university.
  
3. Degree Advancement
  - a. Any teacher anticipating to advance on the salary schedule due to a degree change or increase in credits earned must submit in writing to the Superintendent of Schools that he/she anticipates an advancement on the salary schedule by December 15<sup>th</sup> of the year prior in order for the change to become effective in the following contract year.
  
  - b. Any teacher seeking advancement to a higher salary schedule must submit an official transcript and degree, or photocopies of same to the Superintendent of Schools no later than September 1 (October 1 for summer school credits) of the year for which the advancement is required. These documents will become part of the teacher's file records.

- c. If a teacher who receives, prior to September 1 (October 1 for summer school credits) of a given year, sufficient academic credit to warrant advancement to a higher salary schedule fails to submit an official transcript and degree or photocopies of same to the Superintendent as set forth above, such teacher may submit an official transcript and degree or photocopies of same to the Superintendent no later than February 1 of the following year. A teacher who submits the specified documents by February 1 will advance for the remainder of the year.

4. Initial Step Placement

2024-25		2025-26		2026-27	
Year	Step	Year	Step	Year	Step
0-1	3	0	3		
2	4	1-2	4	0-1	4
3-4	5	3	5	2-3	5
5-7	6	4-5	6	4	6
8	7	6-8	7	5-6	7
9-10	8	9	8	7-9	8
11-13	9	10-11	9	10	9
14	10	12-14	10	11-12	10
15	11	15	11	13-15	11
16-17	12	16	12	16	12
18-19	13	17-18	13	17	13
20+	14	19+	14	18-19	14
				20+	15

Notes: If years of full time classroom experience are in a position not covered by state certification laws (private school) - years of experience will be multiplied by a .75 factor.

If the last full time teaching experience was 5-10 years ago - years of experience will be multiplied by a .667 factor (if over 10 years - a .5 factor).

Realizing there will be situations in which exceptional placements will have to be made, the Superintendent has the prerogative to make said placement; however he/she will do so only after discussing the reasons with the President of the EAC or his/her designee.

5. Part-time Teacher Pay Formula

Part-time professional personnel hired for fractional positions shall be paid at standard percentage rates, e.g.:

4/5 position – 80% of appropriate full-time annual salary

3/5 position – 60% of appropriate full-time annual salary

Such teachers shall be given preparation time and duty assignments on a pro-rata basis.

B. Extracurricular Activities

1. Teacher participation in extracurricular activities shall be voluntary.
2. Remuneration for such activities shall be listed in Table IV.
3. All extra duty vacancies which the Board decides to fill shall be posted in every school for ten (10) school days prior to filling such vacancy. In the event that an emergency vacancy in coaching or extra-duty assignment occurs in mid-season, after notification of the EAC President, the vacancy shall be posted in every school for three (3) days prior to filling such vacancy. Nothing contained herein shall be construed to prohibit the Board from also seeking outside applicants.
4. When qualifications among outside applicants and applicants from within the bargaining unit are relatively equal, preference for the position shall be given to members of the bargaining unit.
5. It is understood and agreed by and between the undersigned parties that the listing of the number of positions/activity set forth on Table IV shall not be construed to be a staffing requirement. The Board of Education retains the right to establish only such positions as it deems necessary.
6. In the event that a teacher, appointed to a position, petitions administration to split the stipend with another teacher, the EAC and the Superintendent must mutually agree to this arrangement.
- 7.a. Coaches' salaries shall be paid at the end of the particular season, on a fixed date, as set forth in a payment schedules mutually agreed by the Superintendent and the EAC President/Designee. Salaries shall not be withheld for failure to return equipment.

- 7.b. Athletic coaches employed under this agreement are required to participate in an evening informational session with players and their parent/guardian at the beginning of each sport season that they are employed as a coach.

Coaches will be paid the appropriate stipend, as reflected in Tables V, VI and VII. Reimbursement for services performed shall be submitted to the Athletic Director. Stipends for Fall sports shall be paid no later than December 1, Winter Sports no later than March 1 and Spring sports no later than the 26<sup>th</sup> pay period.

C. Extended Employment

If and when the Canton Board of Education or its duly authorized representatives should request the services of teaching personnel in their normal capacities during vacation, holidays or other periods not normally considered a part of the regular teaching year, as herein defined; such services shall be termed "extended employment." A teacher shall be compensated for such employment at a per diem rate of 1/186<sup>th</sup> of his/her annual base salary for the current academic year of employment or at flat rate of 1/10<sup>th</sup> of his/her annual base salary for the working days of a calendar month.

Whenever a teacher is requested to engage in instructional work which takes place outside of the regularly contracted day(s), such as designing new courses and curricular units and conducting summer tutorial programs and summer training programs, and including work related to the Canton Academy program, the teacher shall be compensated at the rate of \$39.45 per hour in 2024-25, \$40.44 per hour in 2025-26 and \$41.45 per hour in 2026-27.

Whenever a teacher is requested to engage in non-instructional work, such as seventh grade orientation day and evening detention, the teacher shall be compensated the rate of \$36.73 per hour in 2024-25, \$37.65 per hour in 2025-26 and \$38.59 per hour in 2026-27.

Curriculum work shall be posted in all Canton schools a minimum of two (2) weeks prior to hiring.

D. Cafeteria Duty

The principals of the middle and high schools shall appoint from among qualified volunteers necessary personnel for middle and high school cafeteria duty. Those serving such duty shall not have teacher preparation time and shall take lunch period during such cafeteria duty. Remuneration listed in Table IV shall be shared equitably by the number of teachers performing cafeteria duty on a pro-rata basis.



E. Tuition Reimbursement

The Board agrees to establish an account to be funded in the amount of \$80,000 for each of the contract years to be used for tuition reimbursement for courses taken at an approved institution.

Reimbursement shall be made on the following basis:

1. The Board will reimburse teachers for up to sixty percent (60%) of the cost of undergraduate or graduate courses in subject areas: (a) to which the teacher seeking reimbursement is assigned; (b) which will lead to certification in an additional area in which the Board may have need of certified personnel; (c) or which, in the sole judgment of the Board or its designee, will make a meaningful contribution to more effective performance of the duties to which the teacher is assigned.
2. Any teacher desirous of reimbursement shall make application for approval in writing to the Superintendent prior to course enrollment. Eligibility for reimbursement is contingent upon the Superintendent's approval of the course, which may be rejected only with good cause, and subject further to the limitations set forth above in subsection 1 of this article and successful completion of the course.

Nothing contained herein shall require the Board to make expenditure for reimbursement in excess of the total amount set forth above and, accordingly, entitlement to reimbursement shall be submitted by June 1.

F. Professional Development Reimbursement

The Board agrees to establish the professional development reimbursement procedures for the teachers in the Canton schools. All conferences or other professional activities shall be approved by the principal to be eligible for reimbursement. The total amount agreed to shall be determined by the Board each contractual year.

G. Inter-School Travel

All members of EAC with responsibilities for or in more than one school shall be reimbursed for the use of their automobile at the current IRS rates.

Such payment shall be made monthly upon submission of a mileage report to the Business Office.

**ARTICLE III  
FRINGE BENEFITS**

A. Insurance Programs

All “employees,” as identified in Article I who are .5 FTE or more shall be eligible for the insurance programs as set forth below:

1. High Deductible Health Plan/Health Savings Account

The Board will offer the High Deductible Health Plan/Health Savings Account (“HSA Plan”) described below for all teachers.

The HSA plan shall include the following components:

	In-Network	Out-of-Network
Annual Deductible (individual/aggregate family)	\$2,000/4,000	
Co-insurance	N/A	20% after deductible up to co-insurance maximum
Co-insurance Maximum (individual/aggregate family)	N/A	\$3,000/\$6,000
Cost Share Maximum (individual/aggregate family)	\$5,000/10,000	
Lifetime Maximum	Unlimited	Unlimited
Preventive Care	Deductible not applicable	20% co-insurance after deductible, subject to co- insurance limits
Prescription Drug Coverage	Treated as any other medical expense	

Prescription Drug Coverage will be provided through the prescription drug program that replaced the Managed Public Sector 4 Program, effective July 1, 2022. Following exhaustion of the deductible, prescription drugs shall be subject to post-deductible co-payments of \$10/25/40 (retail), and a two times co-payment for mail order.

The Board will fund fifty percent (50%) of the applicable HSA deductible amount. One-half of the Board’s contribution toward the deductible will be deposited into the HSA accounts in July and the remaining one-half will be deposited into the HSA accounts in January.

The parties acknowledge that the Board’s contribution toward the funding of the deductible plan is not an element of the underlying insurance plan, but rather relates to the manner in which the deductible shall be funded for actively employed teachers.

The Board shall have no obligation to fund any portion of the deductible for retirees or other individuals upon their separation from employment.

Wellness Incentive: The health insurance plan set forth in this Article shall include a wellness incentive program, designed to provide early diagnosis and appropriate information to patients so that they and their health care professionals can determine appropriate, timely courses of treatment as needed. The wellness program will include age-based preventive physical examinations and age-based preventive screenings. If a teacher and the teacher's spouse (as applicable) fulfill all applicable requirements of the wellness program for a plan year, the Board will contribute an additional amount, as set forth below, into the teacher's HSA for the following year.

Individual coverage:	\$100
Family coverage:	\$200

Health Reimbursement Account: A Health Reimbursement Account ("HRA") shall be made available for any teacher who is precluded from participating in a Health Savings Account ("HSA") because the teacher receives Medicare and/or veterans' benefits. The annual maximum reimbursement by the Board for teachers participating in the HRA shall not exceed the dollar amount of the Board's annual HSA contribution for teachers enrolled in the HSA.

2. Dental Plan - Full service dental coverage for initial and routine oral exams and prophylactics, x-rays, denture relining and repair, routine fillings, simple extractions, and endodontics within coverage limits. Dental Rider A (Caps and Crowns) will be made available, at Board expense for teacher only, dependents entirely at teacher expense.
3. Long Term Disability - After a 180-day exclusion, 60% of base salary up to a maximum of \$3,000.00 per month.
4. Group Life Insurance - For employees hired prior to July 1, 2012 the following provisions shall apply: Death benefit shall be 200% of basic-annual salary to a maximum benefit of \$200,000. Accidental Death and Dismemberment (AD&D) benefit of 400% of basic annual earnings to a maximum of \$200,000.

For employees hired on or after July 1, 2012, the Board will provide term life insurance in the amount of \$50,000, with double indemnity for accidental death and dismemberment.

B. Cost Sharing

The Board of Education and the employees will share in the cost of insurance, based upon the fully insured rate, for coverages set forth in Article III A. (1-2) as follows.

	<b>2024-25</b>	<b>2025-26</b>	<b>2026-27</b>
<b>HSA Plan</b>	<b>23.5%</b>	<b>24.5%</b>	<b>25.5%</b>
<b>Dental</b>	<b>26.0%</b>	<b>26.0%</b>	<b>26.0%</b>

C. Section 125

The Board of Education shall offer a “full flex” Section 125 pre-tax premium-conversion account to all teachers for the purpose of allowing teachers to meet their insurance premium contribution and to cover medical expenses (traditional and limited use) and dependent care. The parties shall select a third party administrator by mutual agreement.

D. Change of Insurance Carriers

The Board shall have the right to change insurance carriers, plans and/or to self-insure in whole or in part in order to provide the insurance set forth above, provided that there shall be no reduction or diminution in the above coverage and no increase in expense to bargaining unit members and provided further that changes which require second opinions, pre-admission screening or like requirement shall not be construed to be changes in coverage.<sup>1</sup>

The president of the Association shall be notified in writing within thirty (30) days of all intention to change carriers, plans and/or to self-insure, and shall have a reasonable opportunity to review the proposed changes. Should the Association and the Board disagree that the changes proposed will provide coverages at least equal to the coverages described above at no additional cost to staff members, the disagreement(s) shall be subject to impartial arbitration as set forth in Article V of this Agreement, preferably before any arbitrator with experience and expertise in insurance matters. Should either party so elect, such arbitration shall be expedited under the Rules of the American Arbitration Association for expedited arbitration.

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<sup>1</sup> The only diminution in administration will be in second opinions, pre-admission screening or like requirements.

**ARTICLE IV  
CONDITIONS OF EMPLOYMENT**

A. Leave Policy

1. Sick Leave

Each teacher shall be entitled to fifteen (15) days leave with pay each year for personal illness with the right to accumulate unused days from year to year for a total of one hundred eighty-six (186) days.

**Applicable only to teachers hired prior to July 1, 1999:** Each teacher retiring from teaching under the Connecticut Teachers' Retirement Act having accumulated fifteen (15) years of service in the district shall be paid for forty-five percent (45%) of his/her accumulated sick leave based upon his/her average base pay over the highest three (3) years of service. Payment shall be made during July of the fiscal year after termination of employment, provided notice in writing of intent to terminate is given prior to February 1, otherwise payment shall be made during the next succeeding July.

2. Personal and Emergency Absences

Each teacher shall be allowed a maximum of five (5) personal days per year for:

- a. religious holidays;
- b. serious illness of the spouse, parent or child of the teacher or a member of the teacher's household (or another relative of the teacher, upon approval of the Superintendent) or childrearing leave;
- c. up to five (5) days in the event of the death of a spouse, parent or child, and up to two (2) days in the event of the death of another relative of the teacher (unless otherwise approved by the Superintendent).
- d. legal matters beyond the employee's control;
- e. one (1) personal day without reason; and
- f. other reasons of a personal or emergency nature, communicated to the Superintendent, which make absence from school unavoidable and necessary.

The teacher shall notify the Superintendent in writing for the impending personal absence stating the reason for such leave. This leave will not be used

preceding or following a school holiday unless the Superintendent in his/her sole discretion approves. Additional paid personal absence may be granted upon approval of the Superintendent of Schools, at his/her sole discretion, following written request with statement of reasons. Denial of such additional leave shall be grievable only to Level Three of the grievance procedure set forth in Article V of this Agreement. Teachers will make reasonable efforts to schedule appointments, including medical and dental, during non-school hours.

3. Sabbatical Leave

Sabbatical leaves of one-half (1/2) or one (1) full year may be granted at the discretion of the Board to certified personnel upon recommendation by the Superintendent for purposes of approved study, travel or planned program of professional activity subject to the following conditions:

- a. Sabbatical leaves may be granted only to those who have completed seven (7) years' service in Canton, and who have a master's degree or thirty (30) hours above a bachelor's degree.
- b. Requests for sabbatical leave must be received by the Superintendent no later than January 1 of the school year preceding the school year in which the sabbatical leave is requested. The Board will render final action on such applications and inform applicants of its decision before March 1. Applications will include an outline of the purpose, the program, the activities (itinerary), and the interim and final report which will constitute the sabbatical leave program.
- c. A teacher on sabbatical leave will be paid fifty percent (50%) of his/her annual contract rate of the contract year preceding the sabbatical leave. Insurance programs shall be continued and all normal deductions shall be made.
- d. The teacher shall agree to return to employment in Canton for one (1) year for each semester of leave granted to him/her. If the teacher does not return, he/she must repay the full amount of reimbursement granted him/her; if he/she returns for only one (1) year to Canton, he/she must repay one-half (1/2) of the full amount of reimbursement granted him/her. No leave shall be granted unless the applicant agrees in writing to comply with this requirement.
- e. Not more than one (1) staff member will be granted sabbatical leave in each year.

- f. Any subsequent changes in the planned program must be approved by the Superintendent of Schools.
- g. The applicant will attempt to secure financial grant-in-aid as a possible means of reducing the cost of the program to the community. It shall be understood that the total amount of compensation received from all sources shall not exceed the recipient's placement on the Canton salary schedule for the year of the sabbatical leave. Any monies in excess of the recipient's Canton salary shall be deducted from the one-half (1/2) of the full salary.
- h. The Board reserves the right to reject any and all requests for sabbatical leaves of absence. Decisions of the Board regarding requests for sabbatical leaves of absence are not subject to the grievance procedure in Article V.

4. Childrearing Leave

Upon request, any tenured teacher who is expecting a child or who has received acceptance to adopt a child shall be granted a long-term leave of absence for childrearing purposes. The "ordinary" request for childrearing leave shall be made at least thirty (30) days prior to its commencement. However, in extraordinary situations the thirty (30) days' notice shall be relaxed.

Such leave shall be for a maximum of eighteen (18) months and shall be unpaid with no accrual of benefits. Personal leave days may be applied to any FMLA-covered portion of the leave. Teachers may continue to participate in the Board's medical and dental insurance plans at their own expense, except to the extent paid continued coverage is required by law. Leaves commencing through January 31 of any year shall terminate at the beginning of the following school year or at the end of the second marking period of the following year. Leaves commencing February 1 through August of any year shall terminate at the end of the second marking period of the following school year or the beginning of the second following school year. If the Superintendent determines that termination of the leave at the end of the second marking period would negatively impact the educational program of the students directly involved, the leave shall terminate at the beginning of the school year indicated above. Teachers who have been granted childrearing leave would be given priority in filling a vacancy in their area of certification.

5. Other Leaves of Absence

Other leaves of absence may be granted at the discretion of the Superintendent. Teachers who have been granted leave due to health care reasons would be given priority in filling a vacancy in their area of certification upon return.

6. Seniority Accrual

Seniority shall not accrue for leave time under 3, 4 and 5 above.

7. Family and Medical Leave

Teachers who are eligible will be granted unpaid family and medical leaves of absence in accordance with applicable state and federal law.

8. Jury Duty Leave

- a. A teacher required to perform jury duty shall be granted a leave of absence for the duration of said jury duty. During the period of jury duty a teacher shall suffer no loss of pay, but in no event shall total compensation, including jury duty pay, exceed the teacher's regular salary.
- b. Leave for jury duty shall not be deducted from sick or personal leave.

B. Work Year

The salaries set forth in this Agreement shall be based on a work year consisting of 186 days (including 182 instructional days), except for new personnel who may be required to attend additional orientation sessions. One non-instructional workday prior to the start of school shall be designated for teacher-directed preparation. For each day over the agreed number of days, teachers shall be paid as set forth in Article II, Section C.

1.

C. Workday

1. Except as otherwise provided, the K-12 teachers' workdays shall be a total of seven (7) hours and twenty (20) minutes including thirty-five (35) minutes of unassigned time, which shall be determined by the administration and shall be for activities related to teaching and pupil needs
2. Teachers shall not ordinarily be required to remain more than a total of five (5) hours per month after their normal workday for meetings each week, provided that teachers shall not be required to remain more than two (2) hours in any



given week. In any week with evening conferences or Open House/Curriculum Night, there shall be no after-school meeting in the respective school.

3. Teachers shall have an uninterrupted, duty-free lunch period of one-half (1/2) hour.
4. Non-teaching duty assignments for all eligible teachers at the High School shall be changed each semester. Duty assignments at the Middle School will not rotate.
5. President of the Association shall be duty-free.
6. Teachers at the elementary level will not be assigned to lunch duty.
7. Evening Parent-Teacher Conferences

Teachers shall be required to attend up to three (3) evening parent-teacher conferences each year if such conferences are scheduled by the Board.

D. Promotions

All teachers shall be given adequate opportunity to make application for positions other than classroom teacher. If in the determination of the Superintendent the qualifications are substantially equal, preference shall be given to qualified teachers currently employed by the Board.

E. Dues Deduction

1. Deductions

The Board agrees to deduct from each teacher who voluntarily authorizes such deductions in writing an amount equal to the Association membership dues by means of payroll deductions. Beginning in October and ending in June, the total amount of dues shall be deducted equally from each of the payrolls for which deductions are taken, regardless of the total number of annual pays elected.

2. Subsequent Employment

Those teachers whose employment commences after the start of the school year shall pay a prorated amount equal to the percentage of the remaining school year.

3. Forwarding of Monies

The Board agrees to forward to the Association each month a check for the amount of money deducted during that month. The Board shall include with such check a list of teachers for whom such deductions were made.

4. Lists

By the start of the school year, the business office will provide the Association with a list of all new teachers hired by that date. The Association shall submit to the business office a list of all teachers and the amount of dues to be deducted for each teacher prior to the first deduction of the September payroll of each year. The Board shall notify the Association in writing of all new hires within seven (7) calendar days of hire. This shall include notification of long-term substitutes expected to be in the same assignment for more than sixty (60) consecutive days.

5. Reference to the Association

The singular reference to the "Association" herein shall be interpreted as referring to the Education Association of Canton, the Connecticut Education Association, and the National Education Association.

6. Save Harmless

The Association shall hold the Board harmless against any and all claims, demands, liabilities, lawsuits, attorney's fees or other costs which may arise out of or by reason of, actions taken against the Board as a result of the enforcement or administration of this section.

F. Preparation Periods

All secondary teachers shall, in addition to their lunch period, have at least one (1) preparation period per day, during which they shall not be assigned to any other duties. All elementary teachers shall, in addition to their lunch period, have a minimum of two and one-half (2.5) hours of preparation periods per five (5) days week, during which they shall not be assigned to any other duties.

All preparation periods shall be on a weekly schedule, with prior notice to the teacher. Teachers who are asked and agree to serve substitution duties during their preparation period shall be compensated at the rate of \$43.20 per hour.

G. Department Heads

Department heads shall be assigned:

1. three (3) teaching periods per day;
2. other periods for department responsibilities;
3. no homeroom responsibilities;
4. no duty roster assignment.

H. Grade Leader

Payment is set forth in Table IV.

I. Class Load

1. The normal schedule for full-time subject area secondary school teachers shall be five (5) subject area classes per day as follows:
  - a. The normal workload for a high school teacher shall be five (5) class periods, one (1) duty period and one (1) preparation period. The normal workload for a middle school teacher shall be five (5) class periods, one (1) Team meeting or duty period, one (1) Advisory Meeting (non-instructional), and one (1) preparation period.
  - b. When it is necessary to fill a sixth (6<sup>th</sup>) period class teaching position, a qualified teacher shall be appointed under the following conditions:
    - i. The sixth period shall be in lieu of that teacher's scheduled duty period;
    - ii. An effort will be made to minimize the number of different courses, preparations, and levels of instruction, as well as the number of students assigned;
    - iii. An effort will be made to minimize the number of times a given teacher shall be assigned to a sixth period.
    - iv. Prior to assigning a sixth period, the administration will first seek volunteers. No teacher will be involuntarily assigned to teach a sixth period when a qualified volunteer is available.

- v. Assignment of a teacher to a sixth period shall not be used to reduce a three-fifths (3/5) or more position.
- vi. The teacher assigned a sixth period shall be compensated for such period at 20% of his/her base annual pay.
- vii. No other consideration, agreements, or incentive shall be offered to the teacher who volunteers, nor shall any pressure be brought to bear upon any teacher to seek the position.

J. Professional Development

- 1. Release time will be provided to teachers for curriculum planning revision, conferences, and/or other professional development activities. Early dismissal days shall be scheduled at the discretion of the Board.
- 2. For each Mentee (per the TEAM Program), a Mentor Teacher shall be granted four (4) hours of release time in each school year to meet with the Mentee. In no event shall the total release time, regardless of the number of Mentees, exceed twelve (12) hours per school year. Compensation as set forth in Table IV.

K. Professional Growth

If specialized instruction for teachers is necessary to implement new content of existing programs, then such instruction shall be provided by or financed by the Board.

The Board shall provide continuing assistance to all staff members in the proper utilization of all materials available, and in the screening and use of all instructional materials.

To be included in all changes and additions are:

- 1. written statement of purpose and objectives;
- 2. listing of expected outcomes from such programs; and
- 3. functional means of evaluating all such programs.

All of the above will be carried out in cooperation with representatives of the teaching staff.

L. Teacher Facilities

1. There shall be space in each classroom in which teachers may safely store and lock instructional materials and supplies.
2. If space is available, a teacher workroom in each school containing adequate equipment and supplies to aid in the preparation of instructional materials shall be provided.
3. An appropriately furnished room in each school to be used as a faculty lounge (said room to be in addition to the aforementioned teacher workroom) shall be provided.
4. Each school shall contain well-lighted, well-supplied, and clean teachers' restrooms.

M. Pay Periods

A teacher shall have a choice of twenty-two (22) or twenty-six (26) equal pay periods. Payments shall be made biweekly on the same day as other employees. In the case of election of twenty-six (26) equal pay periods, a balloon payment will be made covering the twenty-second through twenty-sixth payments at the time of payment of the regular twenty-second check. The initial paycheck for the year will be issued the first Friday of the work year per current practice. Payment during the Christmas break shall be arranged by mutual agreement of the parties.

All teachers shall be paid by direct deposit.

Subject to all applicable laws, the last check of those people terminated, resigned, or retired will be held until work is completed.

N. Tax Shelter Annuities

The Board shall make available a Section 457 Plan of its choosing. The plan participants shall be responsible for any administrative fees associated with the plan. The Board agrees to forward all monies to companies per pay period and deposits will be made as often as investment companies allow.

O. Teaching Assignments and Transfers

1. All teachers shall be notified in writing of their assignments and schedules for the ensuing school year, including the schools to which they will be assigned, the grades and/or subjects they will teach and any special or unusual classes or

assignments they will have as soon as practical, but not later than June 15 or the last day of the teachers' work year, whichever is later.

2. In order to insure that pupils are taught by teachers working within their areas of competence teachers shall not be assigned except in accordance with the regulations of the Connecticut State Board of Education.
3. Teachers who desire a change in grade and/or subject assignment or who desire to transfer to another building shall file with the office of the Superintendent a written statement indicating their desires. Such statements shall include the grade and/or subjects to which the teacher wishes to be assigned and the school or schools to which he/she wishes to be transferred.
4. Teachers are assigned by the Superintendent of Schools. The Superintendent will be guided in these assignments by what, in the Superintendent's judgment, is best for students, considering the needs of the schools, the training and experience of the teacher and the preferences of the teacher. The preferences of the individual teacher will be considered but shall not be determinative. Any involuntary assignment or transfer shall be made only after a meeting between the teacher involved, a representative of the Association and the Superintendent, at which time the teacher shall be notified of the reasons for this assignment or transfer.
5. In arranging schedules for teachers who are assigned to more than one (1) school, an effort will be made to limit the amount of interschool travel. Such teachers shall be notified of any change in their schedule as soon as practicable. All necessary travel shall be compensated at the IRS mileage reimbursement rate. Driving time is not to be included in the one-half (1/2) hour duty-free lunchtime.
6. Teacher assignments or transfers shall not be made on the basis of age, race, creed, religion, nationality, sex, sexual orientation, gender identity or expression, marital status, or other protected category.
7. To the extent feasible, when transfers are required, volunteers shall be transferred first.
8. When involuntary transfers become necessary, length of service in the school system shall be considered in determining which teacher shall be transferred.

P. Forced Staff Reduction

1. Forced staff reduction occurs when the total number of full-time positions or fraction thereof established and budgeted by the Board of Education from funds

appropriated by the town or other source is less than the total number of full-time equivalent employees qualified and available in these positions.

2. Forced staff reduction can result in dismissal from employment or displacement from assignment. Conditions that may result in the elimination of positions thus occasioning forced staff reduction include:
  - a. decline in student enrollment;
  - b. change in curriculum or program;
  - c. severe financial conditions;
3. Teachers with temporary emergency permits will be dismissed from employment if their use would result in termination of employment of fully certified regularly contracted teachers.
  - a. Teachers employed under Durational Shortage Ares Permits (DSAP's) shall be considered for layoff before any certified staff member whose certification and experience qualifies him/her for the position held by the DSAP. Teachers holding DSAP's have no rights under this procedure.
4. Remaining teachers (non-tenured and tenured) shall be designated as to their certification/field/discipline/area (elementary, science, music, English, etc.) and level (K-8, 7-12, K-12, etc.).
5. Non-tenured teachers in a designated certification area and level that requires dismissal shall be dismissed before any tenured teacher. If there are more non-tenured teachers than are needed for dismissal, the factors to be considered shall be (a) performance and (b) length of service.
6. Tenured teachers (already designated as to certification area and level shall be placed in length of tenured-service bands of thirty (30) months (1 to 30, 31 to 60, 61 to 90, etc.). When forced staff reduction is necessary in a designated area and level among tenured teachers, the lowest tenured service band of thirty (30) months that contains tenured teachers will indicate those teachers from whom the forced staff reduction will be made.
7. When it is necessary to determine dismissal or displacement from assignment among tenured teachers in a length of tenured service band, the following factors shall be used as positive determiners:
  - a. specified unique abilities and/or competencies possessed to meet needs of remaining positions;

- b. amount, applicability, and recency of experience relative to needs of remaining positions;
  - c. amount, applicability, and recency of preparation relative to remaining positions;
  - d. highest degree status recognized for salary purposes by the Board of Education;
  - e. longest, total experience recognized for salary purposes by the Board of Education.
8. Any reductions from full to part-time positions within a certification group will be considered as a partial separation and subject to the criteria of separation.

Q. Recall Procedure

- 1. The name of any teacher whose services have been terminated because of the elimination of position or a reduction in professional staff shall be placed upon a reappointment list and remain on such list for two years provided such teacher does not refuse a reappointment.
- 2. Any teacher on the reappointment list shall receive a written offer of reappointment at least thirty (30) days prior to the date of reemployment. The teacher shall accept or reject the appointment in writing within ten (10) days. If he/she accepts the appointment, he/she shall receive a written contract at least fifteen (15) days prior to the effective date of reemployment, where possible.
- 3. Recall will be based on a reversal of the staff reduction criteria.
- 4. No new teacher shall be hired in an area of certification until all laid-off teachers from that area of certification have been recalled or declined the opening.
- 5. Teachers being recalled shall be placed on the list and given all earned benefits of all teachers whose length of seniority is the same as that of the returning teacher.



R. Just Cause

No teacher shall be disciplined, reprimanded, reduced in rank or compensation, denied an increment, suspended, or denied professional advantage without reasonable and just cause.

S. Personnel File

No material which is negative in nature originating after original employment shall be placed in a teacher's personnel file unless the teacher has been notified and has had an opportunity to sign, date, and review the material. A teacher may submit a written notation regarding any material in his/her file, and the same shall be attached to the file copy of the material in question. When the teacher is asked to sign material placed in his/her file, such signature shall be understood to indicate his/her awareness of the material, but in no instance shall said signature be interpreted to mean agreement with the content of the material. No anonymous complaint shall be placed in any teacher's file.

T. Other Conditions

1. Without defining or limiting the term, other "conditions of employment" shall be as set forth in Article IX, replaced by Section 4000, of the Canton Board of Education Policy Handbook. The Board agrees that no revision of said article shall be adopted by it during the term of this Agreement without prior discussion with the Association. If any such revision is deemed by the Association to significantly adversely affect any group of teachers, recourse may be had to the grievance procedure hereinafter provided.
2. On an annual basis, no later than June 15th each teacher and the Association shall receive an electronic copy of his/her payroll authorization/salary agreement.
3. Upon agreement between the Board of Education and the Association, this collective bargaining agreement will be provided electronically to each teacher no later than 30 days after the signing of the contract.

**ARTICLE V  
GRIEVANCE PROCEDURE**

A. Definitions

1. A “grievance” is a complaint by a teacher or group of teachers that, as to him, her, or them, there has been a violation, misinterpretation or misapplication of the provisions of this Agreement, or of the rules, regulations, administrative policies or directives of the Board, or that he, she, or they have been treated unfairly or in a manner inconsistent with established policy or practice.
2. An “aggrieved person” is the person or group of persons making the complaint.
3. A “party at interest” is any person or persons who might be required to take action or against whom action might be taken in order to resolve the complaint.
4. “Days,” when used in this article, shall, unless otherwise indicated, mean working school days.

B. Procedure

1. Informal Procedure

Any aggrieved person shall first discuss the matter with his/her principal or any other appropriate administrator, either directly or through the Association’s school representative, and make every effort to resolve the problem at this level.

2. Level One - School Principal

If the aggrieved person is not satisfied with the disposition of his/her grievance at the informal level, or if no decision is rendered within five (5) days, and in any event within (30) calendar days after occurrence, he/she may submit his/her grievance in writing as a formal grievance to the principal, who shall render a written decision within five (5) days to the aggrieved person and, if such person so desires, to the Association school representative.

3. Level Two - Superintendent of Schools

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at Level One or if no decision has been rendered within five (5) days after presentation of the grievance in writing, he/she may, directly or through the Association, file a written request for appeal within five (5) days after receipt of the decision at Level One, or, if no decision is given, within five (5) days after the decision was due.

- b. Within five (5) days after the receipt of the appeal, the Superintendent shall meet with the aggrieved (and representatives of the Association, if involved). A record shall be kept of the meeting by the Superintendent or his/her designee.
- c. The Superintendent shall render a written decision to the aggrieved person, with a copy to Association, if involved, within five (5) days after the meeting.

4. Level Three - Board of Education

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at Level Two or if no decision has been rendered within five (5) days after presentation of the grievance in writing, he/she may, through the Association, file a written request for appeal with the Board Chairperson within five (5) days after receipt of the decision at Level Two, or, if no decision is given, within five (5) days after the decision was due.
- b. Within fifteen (15) days after the receipt of the appeal, the Board, or a committee thereof shall meet with the aggrieved and representatives of the Association. A record shall be kept of the meeting by the Board secretary or his/her designee.
- c. The Board or Board Committee shall render a written decision to the aggrieved person, with a copy to the Association, within ten (10) days after the meeting.

5. Level Four - Impartial Arbitration

- a. If the aggrieved person is not satisfied with the disposition of his/her grievance at Level Three, or if no decision has been rendered within ten (10) days, the aggrieved may file a request for arbitration with the Association.
- b. The Association may submit the grievance to arbitration by written notice to the Superintendent, and by filing a request for arbitration with the American Arbitration Association pursuant to its rules. Such notice and request for arbitration shall be given within fifteen (15) days after receipt of written decision at Level Three or, if no decision is given, within fifteen (15) days after the decision was due.

- c. The arbitrator shall act in accordance with the AAA rules and shall be without power or authority to add to, delete from or modify this agreement or to make any decision which requires the commission of an act prohibited by law or which is in violation of the Agreement. Such decision shall be final and binding, except as otherwise provided by law.
- d. The expense of such arbitration shall be borne equally by the Board and the Association.

C. Miscellaneous

- 1. If in the judgment of the Association a grievance affects a group or class of teachers or involves a matter policy or precedent, the Association may submit such a grievance in writing, beginning at Level Two, or carry the grievance to the next level, even though the aggrieved person or persons do not wish to do so.
- 2. Decisions at all levels of the grievance procedure shall be in writing setting forth the decision and the reasons therefore.
- 3. All documents, communications and records dealing with the processing of a grievance shall be filed separately from the personnel files of the participants.
- 4. Both parties agree that these proceedings shall be kept as informal and confidential as may be appropriate at any level of procedure.
- 5. Nothing contained herein shall be construed as limiting the right of any teacher having a problem to discuss the matter informally and confidentially with any appropriate member of the administration or with any appropriate member of the Association.
- 6. When a grievance is submitted by an individual teacher without Association involvement at Levels One and Two, the principal and/or Superintendent shall notify the Association that the grievance exists stating the aggrieved person's name, date of filing and the nature of the grievance.
- 7. The number of days indicated at each level is a maximum and every effort should be made to complete the successive steps in less time if possible; provided, however, that the time limits indicated may be extended by mutual agreement of the parties at the level concerned, with a corresponding change in any related time limits, but in no event for a period to exceed ten (10) additional days at each step.

8. In the event a grievance is filed on or after June 1, every effort shall be made to resolve the same prior to the end of the school term or as soon thereafter as is practicable.
9. Failure at any level in the procedure to communicate the decision on a grievance within the specified time limits shall entitle the aggrieved person to proceed to the next step. Failure at any level in this procedure to appeal a grievance within the specified time limits shall be deemed to be acceptance of the decision rendered at that step.
10. No reprisals of any kind shall be taken by either party or by any member of the administration against any party at interest or any other member of the Association by reason of his/her participation in the grievance procedure.

#### **ARTICLE VI VIRTUAL LEARNING**

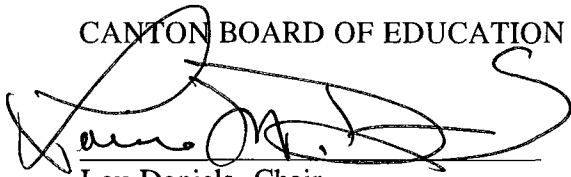
- A. The intent and purpose of virtual learning is to provide a vehicle for the cooperative offering, exploration of, and sharing of educational opportunities among districts, along with the opportunity for students to take courses not offered in our School District in an interactive format.
- B. It is not the purposed of virtual learning to reduce the total number of bargaining unit positions, members employed, or hours worked as a result of the implementation of a virtual learning environment. This does not preclude the use of virtual learning to provide an instructional program where limited enrollment precludes a course offering taught by a bargaining unit member in a regular classroom setting.
- C. All virtual learning classes must be taught or overseen by a certified teacher, who is qualified to teach the subject and level of the virtual learning course. The District will first seek volunteers for such assignments prior to assigning a teacher to teach a virtual learning course.
- D. The Board of Education shall post all positions involved with virtual learning (i.e., Virtual High School Site Coordinator) as per contract.
- E. The Board of Education shall provide teachers the necessary training to prepare them for virtual learning assignments. The Board shall provide the training as part of professional development for teachers so assigned. All technological equipment and support services shall be provided by the Board.

- F. Teachers and coordinators shall be provided with the necessary release time to confer and prepare for required responsibilities.
- G. In addition, the parties agree that if issues develop during the term of the contract not addressed herein, the parties agree to enter in mid-stream bargaining in accordance with the provision of C.G.S. 10-153 (e).
- H. The guidelines in this subsection are applicable to teachers and students participating in the Virtual High School (VHS) program.

**ARTICLE VII  
TERMS OF AGREEMENT**

The terms of this Agreement shall be for July 1, 2024 to June 30, 2027.

CANTON BOARD OF EDUCATION



Lou Daniels, Chair

11/15/2023  
Date

EDUCATION ASSOCIATION OF CANTON



Kristina Cimini, President

Nov. 14, 2023  
Date

**TABLE I – 2024-25 SALARY SCHEDULES**  
 (All Advance One Step, 2.58% GWI at Max Step Only)

Step	BA	MA	6 <sup>th</sup> Yr
3	48,854	54,148	56,518
4	50,227	55,720	58,348
5	51,661	57,385	60,318
6	53,198	59,059	62,855
7	54,062	60,711	65,228
8	55,597	63,876	69,267
9	57,262	67,828	73,588
10	59,117	72,055	78,269
11	62,637	77,457	84,094
12	66,611	82,296	88,920
13	74,663	87,499	94,111
14		98,857	105,796

Effective at the beginning of the 2024-25 contract year, teachers who are not at the maximum step shall advance one (1) step on the salary schedule. Step 2 shall be removed.

**TABLE II – 2025-26 SALARY SCHEDULES**  
 (All Advance One Step, 3.00% GWI at Max Step Only)

Step	Bachelor	Masters	Sixth Year
3	48,854	54,148	56,518
4	50,227	55,720	58,348
5	51,661	57,385	60,318
6	53,198	59,059	62,855
7	54,062	60,711	65,228
8	55,597	63,876	69,267
9	57,262	67,828	73,588
10	59,117	72,055	78,269
11	62,637	77,457	84,094
12	66,611	82,296	88,920
13	76,903	87,499	94,111
14		101,823	108,970

Effective at the beginning of the 2025-26 contract year, teachers who are not at the maximum step shall advance one (1) step on the salary schedule.



**TABLE III – 2026-27 SALARY SCHEDULES**  
 (All Advance One Step, 2.78% GWI at Max Step Only)

Step	Bachelor	Masters	Sixth Year
4	50,227	55,720	58,348
5	51,661	57,385	60,318
6	53,198	59,059	62,855
7	54,062	60,711	65,228
8	55,597	63,876	69,267
9	57,262	67,828	73,588
10	59,117	72,055	78,269
11	62,637	77,457	84,094
12	66,611	82,296	88,920
13	72,826	87,499	94,111
14	79,041	96,077	103,055
15		104,654	111,999

Effective at the beginning of the 2026-27 contract year, teachers who are not at the maximum step shall advance one (1) step on the salary schedule. Step 3 shall be removed and a new Step 14 shall be added to the salary schedule.

**TABLE IV - ACTIVITY SALARIES 2024-2027**  
(2.50% GWI per year)

	<b>Points</b>	<b>2024-25</b>	<b>2025-26</b>	<b>2026-27</b>
<b><u>Class Advisors</u></b>				
Senior	7	2,076	2,128	2,181
Junior	5	1,482	1,519	1,557
Sophomore	4	1,187	1,217	1,247
Freshman	4	1,187	1,217	1,247
<b><u>Clubs and Activities</u></b>				
Art Club	3	890	912	935
Art Club (CMS)	3	890	912	935
Be the Change Club	3	890	912	935
Canton Leo Club	5	1,482	1,519	1,557
CATA – Canton Adolescents Taking Action	5	1,482	1,519	1,557
Chemistry Club	3	890	912	935
CHS-TV	5	1,482	1,519	1,557
Connecticut Forum	3	890	912	935
Creative Writing	4	1,187	1,217	1,247
Cultural Arts Club (4-6)	4	1,187	1,217	1,247
Debate	4	1,187	1,217	1,247
Disc Golf (CHS)	3	890	912	935
Dungeons and Dragons Club (CHS)	2	592	607	622
Esteem "2.0"	5	1,482	1,519	1,557
FCCLA Club	3	890	912	935
Future Problem Solvers	3	890	912	935
GSA Club (CMS)	4	1,187	1,217	1,247
<b><u>Honor Societies</u></b>				
Mu Alpha Theta Club Advisor	4	1,187	1,217	1,247
National Art Honor Society	4	1,187	1,217	1,247
National Honor Society	6	1,778	1,822	1,868
Rho Kappa National Honor Society	4	1,187	1,217	1,247
Science National Honor Society	6	1,778	1,822	1,868
Spanish Honor Society	4	1,187	1,217	1,247
International Club (2)	3	890	912	935
International Club (CIS)	3	890	912	935
Kid-Lit – CIS	3	890	912	935
Literary Club (CHS)	3	890	912	935
Math Team 9-12	5	1,482	1,519	1,557
Math Team 7-8	3	890	912	935
Mock Trial	4	1,187	1,217	1,247
Model UN	4	1,187	1,217	1,247

**TABLE IV - ACTIVITY SALARIES 2024-2027**  
(continued)

	<b>Points</b>	<b>2024-25</b>	<b>2025-26</b>	<b>2026-27</b>
<u>Music/Drama</u>				
Chamber Singers 7-8	5	1,482	1,519	1,557
Chamber Singers (CIS)	5	1,482	1,519	1,557
Cherrybrook Singers	5	1,482	1,519	1,557
Drama Club (MS)	6	1,778	1,822	1,868
Drama Club (HS)	8	2,372	2,431	2,492
Jazz Band 9-12	10	2,965	3,039	3,115
Jazz Band 7-8	5	1,482	1,519	1,557
Jazz Combo Director (MS), 7-8	5	1,482	1,519	1,557
Jazz Ensemble CIS	5	1,482	1,519	1,557
Jazz Workshop Director (HS), 9-12	5	1,482	1,519	1,557
Musical Stage Prod. HS (split**)	30	8,895	9,117	9,345
Musical Stage Prod. MS (split**)	30	8,895	9,117	9,345
Music Teacher (HS), 9-12 Festivals	3	890	912	935
Music Teacher (MS), 7-8 Festivals	3	890	912	935
Music Teacher (HS/MS), 7-12 Festivals	3	890	912	935
Percussion Ensemble	5	1,482	1,519	1,557
Newspaper 9-12	6	1,778	1,822	1,868
Newspaper 7-8	4	1,187	1,217	1,247
Robotics Club (CHS)	3	890	912	935
Rotary Interact Club (CHS)	6	1,778	1,822	1,868
Search Club	3	890	912	935
SFS (Substance-Free Students)	4	1,187	1,217	1,247
Science Olympiad (CHS)	5	1,482	1,519	1,557
Science Club (CMS)	3	890	912	935
Science Club Advisor/Invention Convention	3	890	912	935
<u>Sports</u>				
Athletic Council	5	1,482	1,519	1,557
Intramurals (split **)	4	1,187	1,217	1,247
Unified Sports	1	296	303	311
Student Advisory Council CIS	7	2,076	2,128	2,181
Student Council 9-12	10	2,965	3,039	3,115
Student Council 7-8	7	2,076	2,128	2,181
Technology	4	1,187	1,217	1,247
Technology Club Advisor/Theater Manager	10	2,965	3,039	3,115
We Speak Club (4-6)	5	1,482	1,519	1,557
We Speak Club (7-8)	5	1,482	1,519	1,557
We Speak Club (9-12)	5	1,482	1,519	1,557
Yearbook 9-12	10	2,965	3,039	3,115
Yearbook 7-8	5	1,482	1,519	1,557
Yearbook CIS	5	1,482	1,519	1,557

**TABLE IV - ACTIVITY SALARIES 2024-2027**  
(continued)

	<b>Points</b>	<b>2024-25</b>	<b>2025-26</b>	<b>2026-27</b>
<b><u>Specialists and Supervisor Stipends</u></b>				
Department Chairs		6,852	7,023	7,199
Director of Guidance		6,852	7,023	7,199
Curriculum Facilitator - Math and Science (CBPS & CIS)		3,437	3,523	3,611
Curriculum Facilitator - World Language		3,437	3,523	3,611
Curriculum Facilitator - English		3,437	3,523	3,611
Professional Development Facilitator		3,766	3,860	3,957
Title IX Coordinator		3,766	3,860	3,957
<b><u>Other Positions</u></b>				
AP Coordinator	6	1,778	1,822	1,868
Audio Visual (CIS)	4	1,187	1,217	1,247
Cafeteria Duty (split **)	18	5,338	5,471	5,608
Esteem	10	2,965	3,039	3,115
PBIS Coach	5	1,482	1,519	1,557
Peer Counseling	5	1,482	1,519	1,557
Mentor Teacher (per Mentee)	1	296	303	311
Nature's Classroom Coordinator	3	890	912	935
Washington D. C. Overnight Trip Coordinator (CMS)	3	890	912	935
NGSS Administrator	2	592	607	622
Team/Grade Leaders	8	2,372	2,431	2,492
Test Coordinator – CBPS, CIS, CMS	3 per grade	890	912	935
Task Forces/Violence	3	890	912	935
Virtual High School Site Coordinator	6	1,778	1,822	1,868

\*\* Stipend to be split among participants:

- Middle School Intramurals - To be divided by the number of participants.
- Cafeteria Duty - To be divided by the number of participants.
- Musical Stage Productions (HS) & (MS)

**The following guidelines will be used to distribute the funds listed in the following stipends only:**

- High School Musical Stage Production: \*
  - Stage Director: 25%
  - Musical Director: 20%
  - Choreographer: 15%
  - Technical Director: 15%
  - Producer: 10%
  - Orchestra Director: 10%
  - Costume Director: 5%

\*Note: A person may assume more than one role depending upon the musical production

**TABLE V - 2024-25 COACHES' SALARY SCALE**  
(2.5% GWI per year)

Baseball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,453	3,771	4,176
MS	2,526	2,762	3,018	3,343
 Basketball (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	5,259	5,754	6,284	6,958
JV	3,944	4,313	4,715	5,218
Freshman	3,159	3,454	3,771	4,176
MS	2,630	2,875	3,144	3,480
 Cheerleading	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,208	2,415	2,640	2,923
MS	1,323	1,447	1,586	1,754
 E-Sports	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,208	2,415	2,640	2,923
 Field Hockey	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,453	3,771	4,176
MS	2,526	2,762	3,018	3,343
 Football	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity Head Coach	6,311	6,906	7,538	8,351
Assistant	3,944	4,313	4,715	5,219
 Golf (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,159	3,453	3,771	4,176
JV	2,367	2,588	2,829	3,134
MS	1,896	2,073	2,263	2,505
 Lacrosse (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,454	3,771	4,176

**TABLE V - 2024-25 COACHES' SALARIES**  
(continued)

Soccer (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,453	3,771	4,176
Freshman	1,896	2,073	2,263	2,505
MS	2,526	2,762	3,018	3,343
Softball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,453	3,771	4,176
MS	2,526	2,762	3,018	3,343
Tennis (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,159	3,453	3,771	4,176
JV	2,367	2,588	2,829	3,134
MS	1,896	2,073	2,263	2,505
Track & Field (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,159	3,454	3,771	4,176
JV	2,367	2,588	2,829	3,134
Track Indoor (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,454	3,771	4,176
Track Cross Country (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,159	3,453	3,771	4,176
JV	2,367	2,588	2,829	3,134
MS	1,896	2,073	2,263	2,505
Unified Sports	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,208	2,415	2,640	2,923
Volleyball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,208	4,603	5,026	5,567
JV	3,159	3,453	3,771	4,176
Wrestling	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	5,259	5,754	6,284	6,958
JV	3,944	4,313	4,715	5,218
MS	2,630	2,875	3,144	3,480

**TABLE VI - 2025-26 COACHES' SALARY SCALE**

Baseball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,539	3,865	4,280
MS	2,589	2,831	3,093	3,427
Basketball (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	5,390	5,898	6,441	7,132
JV	4,043	4,421	4,833	5,348
Freshman	3,238	3,540	3,865	4,280
MS	2,696	2,947	3,223	3,567
Cheerleading	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,263	2,475	2,706	2,996
MS	1,356	1,483	1,626	1,798
E-Sports	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,263	2,475	2,706	2,996
Field Hockey	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,539	3,865	4,280
MS	2,589	2,831	3,093	3,427
Football	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity Head Coach	6,469	7,079	7,726	8,560
Assistant	4,043	4,421	4,833	5,349
Golf (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,238	3,539	3,865	4,280
JV	2,426	2,653	2,900	3,212
MS	1,943	2,125	2,320	2,568
Lacrosse (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,540	3,865	4,280
Soccer (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,539	3,865	4,280
Freshman	1,943	2,125	2,320	2,568
MS	2,589	2,831	3,093	3,427

**TABLE VI - 2025-26 COACHES' SALARIES**  
(continued)

Softball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,539	3,865	4,280
MS	2,589	2,831	3,093	3,427
Tennis (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,238	3,539	3,865	4,280
JV	2,426	2,653	2,900	3,212
MS	1,943	2,125	2,320	2,568
Track & Field (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,238	3,540	3,865	4,280
JV	2,426	2,653	2,900	3,212
Track Indoor (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,540	3,865	4,280
Track Cross Country (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,238	3,539	3,865	4,280
JV	2,426	2,653	2,900	3,212
MS	1,943	2,125	2,320	2,568
Unified Sports	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,263	2,475	2,706	2,996
Volleyball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,313	4,718	5,152	5,706
JV	3,238	3,539	3,865	4,280
Wrestling	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	5,390	5,898	6,441	7,132
JV	4,043	4,421	4,833	5,348
MS	2,696	2,947	3,223	3,567



**TABLE VII - 2026-27 COACHES' SALARY SCALE**

Baseball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,627	3,962	4,387
MS	2,654	2,902	3,170	3,513
Basketball (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	5,525	6,045	6,602	7,310
JV	4,144	4,532	4,954	5,482
Freshman	3,319	3,629	3,962	4,387
MS	2,763	3,021	3,304	3,656
Cheerleading	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,320	2,537	2,774	3,071
MS	1,390	1,520	1,667	1,843
E-Sports	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,320	2,537	2,774	3,071
Field Hockey	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,627	3,962	4,387
MS	2,654	2,902	3,170	3,513
Football	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity Head Coach	6,631	7,256	7,919	8,774
Assistant	4,144	4,532	4,954	5,483
Golf (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,319	3,627	3,962	4,387
JV	2,487	2,719	2,973	3,292
MS	1,992	2,178	2,378	2,632
Lacrosse (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,629	3,962	4,387
Soccer (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,627	3,962	4,387
Freshman	1,992	2,178	2,378	2,632
MS	2,654	2,902	3,170	3,513

**TABLE VII - 2026-27 COACHES' SALARIES**  
(continued)

Softball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,627	3,962	4,387
MS	2,654	2,902	3,170	3,513
Tennis (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,319	3,627	3,962	4,387
JV	2,487	2,719	2,973	3,292
MS	1,992	2,178	2,378	2,632
Track & Field (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,319	3,629	3,962	4,387
JV	2,487	2,719	2,973	3,292
Track Indoor (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,629	3,962	4,387
Track Cross Country (B/G)	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	3,319	3,627	3,962	4,387
JV	2,487	2,719	2,973	3,292
MS	1,992	2,178	2,378	2,632
Unified Sports	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	2,320	2,537	2,774	3,071
Volleyball	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	4,421	4,836	5,281	5,849
JV	3,319	3,627	3,962	4,387
Wrestling	<u>Step 1</u>	<u>Step 2</u>	<u>Step 3</u>	<u>Step 4</u>
Varsity	5,525	6,045	6,602	7,310
JV	4,144	4,532	4,954	5,482
MS	2,763	3,021	3,304	3,656

Memorandum of Understanding  
Between  
Canton Board of Education  
And  
Education Association of Canton

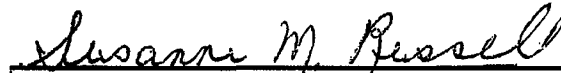
Athletic Director

This Memorandum of Understanding is by and between The Canton Board of Education (the "Board") and the Education Association of Canton (the "Association"), which is the exclusive bargaining agent of the teachers' unit. The parties hereto agree that effective July 1, 2015, the position Athletic Director shall be excluded from the bargaining unit.

CANTON BOARD OF EDUCATION

EDUCATION ASSOCIATION OF CANTON

  
\_\_\_\_\_  
Leslee B. Hill, Chair

  
\_\_\_\_\_  
Susanne M. Russell, President










12/17/14  
\_\_\_\_\_  
Date

12/17/14  
\_\_\_\_\_  
Date

APPENDIX A- Summary of Benefits Coverage for Medical Plan

# Choice Plus plan details, all in one place.

Use this benefit summary to learn more about this plan's benefits, ways you can get help managing costs and how you may get more out of this health plan.

Check out what's included in the plan	Choice Plus
 <p><b>Network coverage only</b> You can usually save money when you receive care for covered health care services from network providers.</p>	<input type="checkbox"/>
 <p><b>Network and out-of-network benefits</b> You may receive care and services from network and out-of-network providers and facilities — but staying in the network can help lower your costs.</p>	<input checked="" type="checkbox"/>
 <p><b>Primary care physician (PCP) required</b> With this plan, you need to select a PCP — the doctor who plays a key role in helping manage your care. Each enrolled person on your plan will need to choose a PCP.</p>	<input type="checkbox"/>
 <p><b>Referrals required</b> You'll need referrals from your PCP before seeing a specialist or getting certain health care services.</p>	<input type="checkbox"/>
 <p><b>Preventive care covered at 100%</b> There is no additional cost to you for seeing a network provider for preventive care.</p>	<input checked="" type="checkbox"/>
 <p><b>Pharmacy benefits</b> With this plan, you have coverage that helps pay for prescription drugs and medications.</p>	<input checked="" type="checkbox"/>
 <p><b>Tier 1 providers</b> Using Tier 1 providers may bring you the greatest value from your health care benefits. These PCPs and medical specialists meet national standard benchmarks for quality care and cost savings.</p>	<input type="checkbox"/>
 <p><b>Freestanding centers</b> You may pay less when you use certain freestanding centers — health care facilities that do not bill for services as part of a hospital, such as MRI or surgery centers.</p>	<input type="checkbox"/>
 <p><b>Health savings account (HSA)</b> With an HSA, you've got a personal bank account that lets you put money aside, tax-free. Use it to save and pay for qualified medical expenses.</p>	<input checked="" type="checkbox"/>

This Benefit Summary is to highlight your Benefits. Don't use this document to understand your exact coverage. If this Benefit Summary conflicts with the Summary Plan Description (SPD), Riders, and/or Amendments, those documents govern. Review your SPD for an exact description of the services and supplies that are and are not covered, those which are excluded or limited, and other terms and conditions of coverage.

# Here's a more in-depth look at how Choice Plus works.

## Medical Benefits

	In Network	Out-of-Network
<b>Annual Medical Deductible</b>		
Single Coverage	\$2,000	\$2,000
Family Coverage	\$4,000	\$4,000

Any amount you pay for Covered Health Care Services applied to the Network Annual Deductible will be applied to the Out-of-Network Annual Deductible. Any amount you pay for Covered Health Care Services applied to the Out-of-Network Annual Deductible will be applied to the Network Annual Deductible.

No one in the family is eligible for benefits until the family coverage deductible is met.

You're responsible for paying 100% of your medical expenses until you reach your deductible. For certain covered services, you may be required to pay a fixed dollar amount - your copay.

	In Network	Out-of-Network
<b>Annual Out-of-Pocket Limit</b>		
Single Coverage	\$5,000	\$5,000
Family	\$6,850	\$10,000

Any amount you pay for Covered Health Care Services applied to the Network Out-of-Pocket Limit will be applied to the Out-of-Network Out-of-Pocket Limit. Any amount you pay for Covered Health Care Services applied to the Out-of-Network Out-of-Pocket Limit will be applied to the Network Out-of-Pocket Limit.

If more than one person in a family is covered under the Policy, the single coverage out-of-pocket limit does not apply.

Once you've met your deductible, you start sharing costs with your plan - coinsurance. You continue paying a portion of the expense until you reach your out-of-pocket limit. From there, your plan pays 100% of allowed amounts for the rest of the plan year.

## What You Pay for Services

<b>Copays (\$) and Coinsurance (%) for Covered Health Care Services</b>	Network	Out-of-Network
<b>Preventive Care Services</b>		
Preventive Care Services	No copay	20%*
<p>Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services are based on your age, gender and other health factors. UnitedHealthcare also covers other routine services that may require a copay, co-insurance or deductible.</p>		
<b>Office Services - Sickness &amp; Injury</b>		
Primary Care Physician	No copay*	20%*
<p>Additional copays, deductible, or co-insurance may apply when you receive other services at your physician's office. For example, surgery and lab work.</p> <p>Telehealth is covered at the same cost share as in the office.</p>		
Specialist	No copay*	20%*
<p>Additional copays, deductible, or co-insurance may apply when you receive other services at your physician's office. For example, surgery and lab work.</p> <p>Telehealth is covered at the same cost share as in the office.</p>		

\* After the Annual Medical Deductible has been met.

† Prior Authorization Required. Refer to SPD.

## What You Pay for Services

### Copays (\$) and Coinsurance (%) for Covered Health Care Services

	Network	Out-of-Network
Urgent Care Center Services	No copay*	20%*
<i>Additional copays, deductible, or co-insurance may apply when you receive other services at the urgent care facility. For example, surgery and lab work.</i>		
Virtual Care Services	No copay*	Not covered
<i>Network Benefits are available only when services are delivered through a Designated Virtual Network Provider. You can find a Designated Virtual Visit Network Provider by contacting us at myuhc.com® or the telephone number on your ID card. Access to Virtual Visits and prescription services may not be available in all states or for all groups.</i>		
<b>Emergency Care</b>		
Ambulance Services - Emergency Ambulance	No copay*	No copay*
<i>Network Deductible applies to Out-of-Network benefits.</i>		
Ambulance Services - Non-Emergency Ambulance <sup>1</sup>	No copay*	No copay*
<i>Network Deductible applies to Out-of-Network benefits.</i>		
Dental Services - Accident Only	No copay*	No copay*
<i>Network Deductible applies to Out-of-Network benefits.</i>		
Emergency Health Care Services - Outpatient <sup>1</sup>	No copay*	No copay*
<i>Network Deductible applies to Out-of-Network benefits.</i>		
<b>Inpatient Care</b>		
Congenital Heart Disease (CHD) Surgeries <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
Habilitative Services - Inpatient <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
<i>Limit will be the same as, and combined with, those stated under Skilled Nursing Facility/Inpatient Rehabilitation Services.</i>		
Hospital - Inpatient Stay <sup>1</sup>	No copay*	20%*
Skilled Nursing Facility/Inpatient Rehabilitation Facility Services <sup>1</sup>	No copay*	20%*
<i>Limited to 120 days per year in a Skilled Nursing Facility.</i>		
<i>Limited to 60 days per year in an Inpatient Rehabilitation Facility.</i>		
<b>Outpatient Care</b>		
Habilitative Services - Outpatient	No copay*	20%*
<i>For outpatient therapies (physical therapy, occupational therapy, manipulative treatment, speech therapy, post-cochlear implant aural therapy, cognitive therapy), limits will be the same as, and combined with those stated under Rehabilitation Services - Outpatient Therapy and Manipulative Treatment.</i>		

\*After the Annual Medical Deductible has been met.

<sup>1</sup>Prior Authorization Required. Refer to SPD.

## What You Pay for Services

### Copays (\$) and Coinsurance (%) for Covered Health Care Services

	Network	Out-of-Network
Home Health Care <sup>1</sup>	No copay*	20%*
<i>Limited to 200 visits per year.</i>		
<i>Medical social services received from a Social Worker are limited to \$420 per year.</i>		
<i>Of the 200 visits per year, only 80 visits allowed for services from a home health aide.</i>		
<i>One visit equals up to four hours of skilled care services. This visit limit does not include any service which is billed only for the administration of intravenous infusion or dialysis.</i>		
Lab, X-Ray and Diagnostic - Outpatient - Lab Testing <sup>1</sup>	No copay*	20%*
<i>Limited to 18 Definitive Drug Tests per year.</i>		
<i>Limited to 18 Presumptive Drug Tests per year.</i>		
Lab, X-Ray and Diagnostic - Outpatient - X-Ray and other Diagnostic Testing <sup>1</sup>	No copay*	20%*
Major Diagnostic and Imaging - Outpatient	No copay*	20%*
Physician Fees for Surgical and Medical Services	No copay*	20%*
Rehabilitation Services - Outpatient Therapy and Manipulative Treatment	No copay*	20%*
<i>Limited to 20 visits of cognitive rehabilitation therapy per year.</i>		
<i>Limited to 50 combined visits of manipulative, occupational therapy, physical therapy &amp; speech therapy per year.</i>		
<i>Unlimited visits of cardiac rehabilitation therapy per year.</i>		
<i>Unlimited visits of post-cochlear implant aural therapy per year.</i>		
<i>Unlimited visits of pulmonary rehabilitation therapy per year.</i>		
<i>Services for the treatment of autism spectrum disorders and early intervention services do not apply to the visit limit.</i>		
Scopic Procedures - Outpatient Diagnostic and Therapeutic	No copay*	20%*
<i>Diagnostic/therapeutic scopic procedures include, but are not limited to colonoscopy, sigmoidoscopy and endoscopy.</i>		
Surgery - Outpatient <sup>1</sup>	No copay*	20%*
Therapeutic Treatments - Outpatient <sup>1</sup>	No copay*	20%*
<i>Therapeutic treatments include, but are not limited to dialysis, intravenous chemotherapy, intravenous infusion, medical education services and radiation oncology.</i>		
<b>Supplies and Services</b>		
Diabetes Self-Management Items <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
Diabetes Self-Management and Training/Diabetic Eye Exams/Foot Care <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	

\*After the Annual Medical Deductible has been met.

<sup>1</sup>Prior Authorization Required. Refer to SPD.



## What You Pay for Services

Copays (\$) and Coinsurance (%) for Covered Health Care Services	Network	Out-of-Network
Durable Medical Equipment (DME), Orthotics and Supplies <sup>1</sup>	No copay*	20%*
Enteral Nutrition	No copay*	20%*
Hearing Aids	No copay*	20%*
<i>Limited to a single purchase per hearing impaired ear every 2 years.</i>		
Ostomy Supplies	No copay*	20%*
Pharmaceutical Products - Outpatient	No copay*	20%*
<i>This includes medications given at a doctor's office, or in a covered person's home.</i>		
Prosthetic Devices <sup>1</sup>	No copay*	20%*
Urinary Catheters	No copay*	20%*
<b>Pregnancy</b>		
Pregnancy - Maternity Services <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
<b>Mental Health Care &amp; Substance Related and Addictive Disorder Services</b>		
Inpatient <sup>1</sup>	No copay*	20%*
Outpatient <sup>1</sup>	No copay*	20%*
Partial Hospitalization <sup>1</sup>	No copay*	20%*
<b>Other Services</b>		
Acupuncture Services	No copay*	20%*
Cellular and Gene Therapy	The amount you pay is based on where the covered health care service is provided.	Not covered
<i>For Network Benefits, Cellular or Gene Therapy services must be received from a Designated Provider.</i>		
Clinical Trials <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
Gender Dysphoria <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
Hospice Care <sup>1</sup>	No copay*	20%*
Infertility Services <sup>1</sup>	No copay*	20%*
Obesity - Weight Loss Surgery	The amount you pay is based on where the covered health care service is provided.	
Reconstructive Procedures <sup>1</sup>	The amount you pay is based on where the covered health care service is provided.	
Transplantation Services	The amount you pay is based on where the covered health care service is provided.	
<i>Network Benefits must be received from a Designated Provider.</i>		

\* After the Annual Medical Deductible has been met.

<sup>1</sup>Prior Authorization Required. Refer to SPD.

## What You Pay for Services

### Copays (\$) and Coinsurance (%) for Covered Health Care Services

	Network	Out-of-Network
Vision Exams <i>Limited to 1 exam per year.</i>	No copay*	20%*
Wigs <i>Limited to 1 wig per year.</i>	No copay*	20%*

\* After the Annual Medical Deductible has been met.

† Prior Authorization Required. Refer to SPD.

# Pharmacy Benefits

## In Network and Out of Network

Annual Pharmacy Deductible	
Individual	See the Annual Medical Deductible section
Family	See the Annual Medical Deductible section

*The Pharmacy Deductible is the amount you pay for pharmacy expenses per year before you begin to receive Pharmacy Benefits.*

## In Network and Out of Network

Annual Pharmacy Out-of-Pocket Limit	
Individual	See the Annual Medical Out-of-Pocket Limit section
Family	See the Annual Medical Out-of-Pocket Limit section

Prescription Drug Product Tier Level	Up to a 30-day supply		Up to a 90-day supply
	Retail Network	Out-of-Network Pharmacy	Mail Order Network Pharmacy**
<b>Tier 1</b> \$	\$10*	20%*	\$20*
<b>Tier 2</b> \$\$	\$25*	20%*	\$50*
<b>Tier 3</b> \$\$\$	\$40*	20%*	\$80*

\* After the Annual Pharmacy Deductible has been met.

\*\* Only certain Prescription Drug Products are available through mail order; please visit [myuhc.com](http://myuhc.com) or call Customer Care at the telephone number on the back of your ID card for more information. You will be charged a retail Copayment and/or Coinsurance for 31 days or 2 times for 60 days based on the number of days supply dispensed for any Prescription Order or Refills sent to the mail order pharmacy. To maximize your Benefit, ask your Physician to write your Prescription Order or Refill for a 90-day supply, with refills when appropriate, rather than a 30-day supply with three refills.

If you are a member, you can find individualized information on your benefit coverage, determine tier status, check the status of claims and search for network pharmacies by logging into your account on [myuhc.com](http://myuhc.com) or calling the Customer Care number on your ID card. If you are not a member, you can view prescription information at [welcometouhc.com](http://welcometouhc.com) > Benefits > Pharmacy Benefits.

For an out-of-network Pharmacy, you may have to pay the difference between the out-of-network reimbursement rate and the pharmacy's usual and customary charge.

# Here's an example of how the plan's costs come into play.

## 1 At the start of your plan year...

You're responsible for paying 100% of your covered health services until you reach your **deductible**, which is the amount you pay before your health plan pays a portion.

YOU PAY 100%

## 2 Once you reach your deductible...

Your health plan starts to share a percentage of costs (the allowed amounts, excluding copays) for covered health care services with you—this is your **coinsurance**.\*

YOU PAY 20%\*

YOUR PLAN PAYS 80%

## 3 When you reach your out-of-pocket limit...

Your plan covers your costs (the allowed amount) at 100%. Your **out-of-pocket limit** is the most you'll pay for covered health services in a plan year—copays and coinsurance count toward this.

YOUR PLAN PAYS 100%

Along the way, you may also be required to pay a fixed amount (for example, \$15)—or **copay**—for covered health care services, such as seeing a provider or purchasing a prescription. You pay 100% of the copay, usually when you receive the service.

\* Your coinsurance may vary by service. This example is for illustrative purposes only.

## More ways to help manage your health plan and stay in the loop.



### Search the network to find doctors.

You can go to providers in and out of our network — but when you stay in network, you'll likely pay less for care. To get started:

- Go to [welcometouhc.com](http://welcometouhc.com) > **Benefits** > **Find a Doctor or Facility**.
- Choose **Search for a health plan**.
- Choose **Choice Plus** to view providers in the health plan's network.



### Access your plan online.

With [myuhc.com](http://myuhc.com)<sup>®</sup>, you've got a personalized health hub to help you find a doctor, manage your claims, estimate costs and more.



### Get on-the-go access.

When you're out and about, the UnitedHealthcare<sup>®</sup> app puts your health plan at your fingertips. Download to find nearby care, video chat with a doctor 24/7, access your health plan ID card and more.

Good stuff that's good to know.

I dig it!

# Other important information about your benefits.

## Medical Exclusions

Services your plan generally does NOT cover. It is recommended that you review your SPD, Amendments and Riders for an exact description of the services and supplies that are covered, those which are excluded or limited, and other terms and conditions of coverage.

- Cosmetic Surgery
- Dental Care (Adult/Child)
- Glasses
- Long-Term Care
- Routine Foot Care
- Temporomandibular Joint Services
- Weight Loss Programs

## Outpatient Prescription Drug Benefits

For Prescription Drug Products dispensed at a retail Network Pharmacy, you are responsible for paying the lowest of the following: 1) The applicable Copayment and/or Coinsurance; 2) The Network Pharmacy's Usual and Customary Charge for the Prescription Drug Product; and 3) The Prescription Drug Charge for that Prescription Drug Product. For Prescription Drug Products from a mail order Network Pharmacy, you are responsible for paying the lower of the following: 1) The applicable Copayment and/or Coinsurance; and 2) The Prescription Drug Charge for that Prescription Drug Product. For an out-of-Network Pharmacy, your reimbursement is based on the Out-of-Network Reimbursement Rate, and you are responsible for the difference between the Out-of-Network Reimbursement Rate and the out-of-Network Pharmacy's Usual and Customary Charge.

See the Copayment and/or Coinsurance stated in the Benefit Information table for amounts. We will not reimburse you for any non-covered drug product.

For a single Copayment and/or Coinsurance, you may receive a Prescription Drug Product up to the stated supply limit. Some products are subject to additional supply limits based on criteria that we have developed. Supply limits are subject, from time to time, to our review and change.

Specialty Prescription Drug Products supply limits are as written by the provider, up to a consecutive 31-day supply of the Specialty Prescription Drug Product, unless adjusted based on the drug manufacturer's packaging size, or based on supply limits, or as allowed under the Smart Fill Program. Supply limits apply to Specialty Prescription Drug Products obtained at a Preferred Specialty Network Pharmacy, a Non-Preferred Specialty Network Pharmacy, an out-of-Network Pharmacy, a mail order Network Pharmacy or a Designated Pharmacy.

Certain Prescription Drug Products for which Benefits are described under the Prescription Drug Rider are subject to step therapy requirements. In order to receive Benefits for such Prescription Drug Products you must use a different Prescription Drug Product(s) first. You may find out whether a Prescription Drug Product is subject to step therapy requirements by contacting us at [myuhc.com](http://myuhc.com) or the telephone number on your ID card.

Before certain Prescription Drug Products are dispensed to you, your Physician, your pharmacist or you are required to obtain prior authorization from us or our designee to determine whether the Prescription Drug Product is in accordance with our approved guidelines and it meets the definition of a Covered Health Care Service and is not an Experimental or Investigational or Unproven Service. We may also require you to obtain prior authorization from us or our designee so we can determine whether the Prescription Drug Product, in accordance with our approved guidelines, was prescribed by a Specialist.

If you require certain Prescription Drug Products, we may direct you to a Designated Pharmacy with whom we have an arrangement to provide those Prescription Drug Products. If you are directed to a Designated Pharmacy and you choose not to obtain your Prescription Drug Product from the Designated Pharmacy, you will be subject to the Out-of-Network Benefit for that Prescription Drug Product.

Certain Preventative Care Medications may be covered at zero costshare. You can get more information by contacting us at [myuhc.com](http://myuhc.com) or the telephone number on your ID card.

Benefits are provided for certain Prescription Drug Products dispensed by a mail order Network Pharmacy or Preferred 90 Day Retail Network Pharmacy. The Outpatient Prescription Drug Schedule of Benefits will tell you how mail order Network Pharmacy and Preferred 90 Day Retail Network Pharmacy supply limits apply. Please contact us at myuhc.com or the telephone number on your ID card to find out if Benefits are provided for your Prescription Drug Product and for information on how to obtain your Prescription Drug Product through a mail order Network Pharmacy or Preferred 90 Day Retail Network Pharmacy.

## Other important information about your benefits.

### Pharmacy Exclusions

The following exclusions apply. In addition see your Pharmacy Rider and SBN for additional exclusions and limitations that may apply.

- A Pharmaceutical Product for which Benefits are provided in your Certificate.
- A Prescription Drug Product with either: an approved biosimilar, a biosimilar and Therapeutically Equivalent to another covered Prescription Drug Product.
- Any Prescription Drug Product to the extent payment or benefits are provided or available from the local, state or federal government (for example, Medicare).
- Any product dispensed for the purpose of appetite suppression or weight loss.
- Any product for which the primary use is a source of nutrition, nutritional supplements, or dietary management of disease, and prescription medical food products even when used for the treatment of Sickness or Injury, except as required by state mandate.
- Certain New Prescription Drug Products and/or new dosage forms until the date they are reviewed and placed on a tier by our PDL Management Committee.
- Certain Prescription Drug Products for tobacco cessation.
- Certain Prescription Drug Products for which there are Therapeutically Equivalent alternatives available.
- Certain Prescription Drug Products that are FDA approved as a package with a device or application, including smart package sensors and/or embedded drug sensors.
- Certain compounded drugs.
- Diagnostic kits and products.
- Drugs available over-the-counter.
- Drugs which are prescribed, dispensed or intended for use during an Inpatient Stay.
- Durable Medical Equipment, including insulin pumps and related supplies for the management and treatment of diabetes, for which Benefits are provided in your Certificate. Prescribed and non-prescribed outpatient supplies. This does not apply to diabetic supplies and inhaler spacers specifically stated as covered.
- Experimental or Investigational or Unproven Services and medications.
- General vitamins, except Prenatal vitamins, vitamins with fluoride, and single entity vitamins when accompanied by a Prescription Order or Refill.
- Growth hormone for children with familial short stature (short stature based upon heredity and not caused by a diagnosed medical condition).
- Medications used for cosmetic purposes.
- Prescription Drug Products designed to adjust sleep schedules, such as for jet lag or shift work.
- Prescription Drug Products dispensed outside the United States, except as required for Emergency treatment.
- Prescription Drug Products when prescribed as sleep aids.
- Prescription Drug Products when prescribed to treat infertility unless required by state law.
- Prescription Drug Products, including New Prescription Drug Products or new dosage forms, that we determine do not meet the definition of a Covered Health Care Service.
- Publicly available software applications and/or monitors that may be available with or without a Prescription Order or Refill.

UnitedHealthcare does not treat members differently because of sex, age, race, color, disability or national origin.

If you think you weren't treated fairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator:

**Online: UHC\_Civil\_Rights@uhc.com**

**Mail:** Civil Rights Coordinator  
UnitedHealthcare Civil Rights Grievance  
P.O. Box 30608, Salt Lake City, UT 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m. You can also file a complaint with the U.S. Dept. of Health and Human Services.

**Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**

Complaint forms are available at:

**<http://www.hhs.gov/ocr/office/file/index.html>**

**Phone:** Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

**Mail:** U.S. Dept. of Health and Human Services,  
200 Independence Avenue, SW Room 509F, HHH Building  
Washington, D.C. 20201

We provide free services to help you communicate with us such as letters in others languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan ID card.

**ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

**ATENCIÓN:** Si habla español (**Spanish**), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

**請注意:** 如果您說中文 (**Chinese**)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

**XIN LƯU Ý:** Nếu quý vị nói tiếng Việt (**Vietnamese**), quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

**알림:** 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

**PAALALA:** Kung nagsasalita ka ng Tagalog (**Tagalog**), may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

**ВНИМАНИЕ:** бесплатные услуги перевода доступны для людей, чей родной язык является русский (**Russian**). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

ةيوغللا ؤدعاسملا تامدخ ناف، (Arabic) ؤيبرعلا ؤدحتت تنك اذا :هيبنت  
ولع جردملا يناعملا فتاهل مقرب لاصتالا يجرى. كل ؤحاتم ؤيناعملا  
كعب ؤصاخلا فيرعلا ؤاطب

**ATANSYON:** Si w pale Kreyòl ayisyen (**Haitian Creole**), ou kapab benefisyè sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

**ATTENTION :** Si vous parlez français (**French**), des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

**UWAGA:** Jeżeli mówisz po polsku (**Polish**), udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

**ATENÇÃO:** Se você fala português (**Portuguese**), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

**ATTENZIONE:** in caso la lingua parlata sia l'italiano (**Italian**), sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

**ACHTUNG:** Falls Sie Deutsch (**German**) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

**注意事項:** 日本語 (**Japanese**) を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

**ध्यान दें:** यदि आप हिंदी (**Hindi**) बोलते हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

**CEEB TOOM:** Yog koj hais Lus Hmoob (**Hmong**), muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

**ΠΡΟΣΟΧΗ :** Αν μιλάτε Ελληνικά (**Greek**), υπάρχει δωρεάν βοήθεια στη γλώσσα σας. Παρακαλείστε να καλέσετε το δωρεάν αριθμό που θα βρείτε στην κάρτα ταυτότητας μέλους.

**PAKDAAR:** Nu saritaem ti Ilocano (**Ilocano**), ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyan. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

**DÍI BAA'ÁKONÍNÍZIN:** Diné (**Navajo**) bizaad bee yániiti'go, saad bee áka'anida'awo'ígíí, t'áá jííik'eh, bee ná'ahóót'i'. T'áá shòodí ninaaltsos nitl'izi bee nééhozinígíí bine'déé' t'áá jííik'ehgo béésh bee hane'í biká'ígíí bee hodiilnih.

**OGOW:** Haddii aad ku hadasho Soomaali (**Somali**), adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

**ગુજરાતી (Gujarati):** ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો તો આપને ભાષાકીય મદદરૂપ સેવા વલના મૂલ્યે પરાપ્ય છે. મહેરબાની કરી તમારા આઈડી કાર્ડની સૂચિ પર આપેલી સેભ્ય માટેના ટોલ-ફ્રી નંબર ઉપર કોલ કરો.

APPENDIX B- Summary of Benefits Coverage for Dental Plan





Canton Town and Board of Education  
 Group #04747  
 Delta Dental PPO Plus Premier  
 Full Plan Plus Rider A  
 Effective 7/1/2022

	In-Network		Out-of-Network
	If a Delta Dental PPO™ Dentist is Used	If a Delta Dental Premier® Dentist is Used	If a Non-Participating Dentist is Used
<b>Preventive &amp; Diagnostic</b> Exams & Cleanings ( <i>each twice in a calendar year</i> ) Bitewing X-Rays ( <i>2 per calendar year</i> ) Fluoride Treatments ( <i>Frequency limitations apply</i> )	100%	100%	100%
<b>Basic</b> Fillings ( <i>composite fillings on all teeth</i> ) Simple Extractions Root Canals (Endodontics) Repair of Dentures Emergency Palliative Treatment Athletic Mouth Guards Cone Beam X-Rays	100%	100%	100%
<b>Major</b> Crowns & Gold Restorations Oral Surgery Space Maintainers Inlays, Onlays	50%	50%	50%
<b>Maximum (per person)</b>		Unlimited	
<b>Deductible</b> Per Person Family Maximum	None None	None None	None None

Dependent children are covered to age 26.

There are not separate calendar year maximums and deductibles for each type of dentist. The calendar year maximums & deductibles cross-accumulate among Delta Dental PPO, Delta Dental Premier and non-participating dentists.

Over 300,000 participating dental offices nationwide participate with the national Delta Dental system, although you may choose any fully licensed dentist to render necessary services. Participating dentists will be paid directly by Delta Dental to the extent that services are covered by the contract. Non-participating dentists will bill the patient directly, and Delta Dental will make payment directly to the member. **Maximum benefit may be derived by utilizing the services of a participating dentist.**

Where the eligible patient is treated by a Delta Dental PPO<sup>SM</sup> dentist, the fee for the covered service(s) will not exceed the Delta Dental PPO maximum allowable charge(s). Where the eligible patient is treated by a Delta Dental Premier<sup>®</sup> dentist who does not participate in Delta Dental PPO or by a *Participating Specialist*, the dentist has agreed not to charge eligible patients more than the dentist's filed fee or Delta Dental's established maximum plan allowance, and Delta Dental will pay such dentists based on the least of the actual fee, the filed fee, or Delta Dental's established maximum plan allowance for the procedure(s). Claims for services provided by dentists who are neither Delta Dental Premier, Delta Dental PPO dentists, or *Participating Specialists* are paid based on the lesser of the dentist's actual charge or the prevailing fee. Members utilizing non-participating dentists may be billed for the difference between the dentist's charge and Delta Dental's allowable charge.

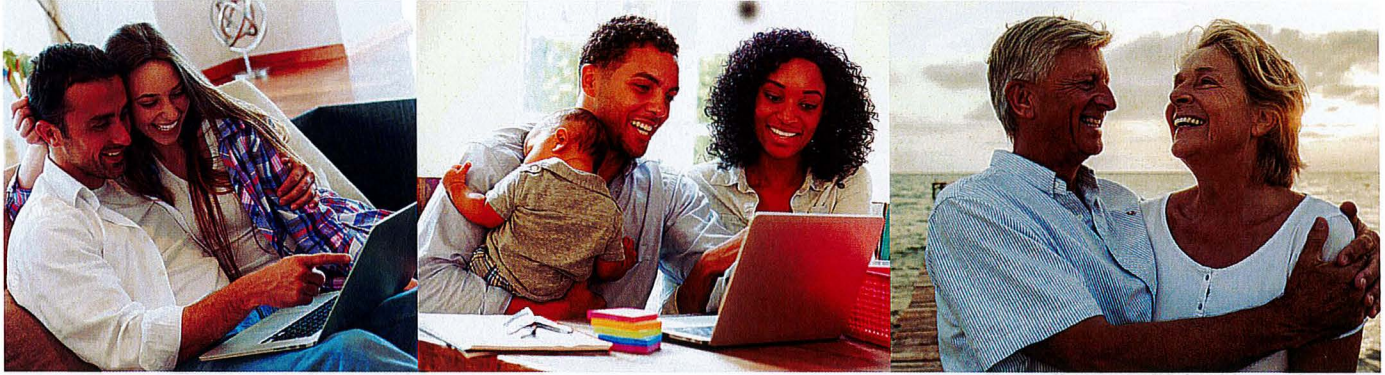
Visit your own dentist. If you do not have a dentist, visit [www.deltadentalct.com](http://www.deltadentalct.com) for a directory of participating dentists.

During your FIRST appointment, tell your dentist that you are covered under this program. Give him/her your Group's name, its Delta Dental Group Number and your Member ID number.

If you have any questions regarding your benefits, you may contact our Customer Service Department Monday through Thursday, 8:00 a.m. to 6:30 p.m. EST and Friday, 8:00 a.m. to 5:00 p.m. EST, at 1-800-452-9310.




This overview contains a general description of your dental care program for your use as a convenient reference. Complete details of your program appear in the group contract between your plan sponsor and Delta Dental of New Jersey, Inc. which governs the benefits and operation of your program. In CT, Delta Dental of Connecticut writes dental coverage on an insured basis and Delta Dental of New Jersey administers self-funded dental benefit programs. The group contract would control if there should be any inconsistency or difference between its provisions and the information in this overview.

# Everyone Deserves a Healthy Smile



## Manage Your Dental Benefits with MySmile®

Thank you for choosing Delta Dental. To access MySmile, go to [DeltaDentalCT.com](https://DeltaDentalCT.com) and click on 'Sign in or Register' at the top right of the page. Once registered and logged in, you will be able to:

-  ▶ View your dental benefits to see important details regarding your dental coverage
-  ▶ Print your ID card
-  ▶ Provide an endorsement for your dentist to help others find the one that meets their needs

### Other member tools available, include:

-  ▶ Our Find a Dentist tool - find a dentist near where you work or live
-  ▶ Dental Cost Estimator - find out cost ranges for common dental care needs
-  ▶ Forms - download and use important Delta Dental forms
-  ▶ Explanation of Benefits - view and print your EOBs
-  ▶ Oral Health and Wellness - Check out *grin!* magazine to learn more about the connection between a healthy smile and overall wellbeing

## Three Easy Ways to Find a Participating Dentist

1. Website. Use the Find a Dentist tool at [DeltaDentalCT.com](https://DeltaDentalCT.com)
2. Mobile App. Download the Delta Dental App on your smart phone.
3. Telephone. Call us at 800-DELTAOK to have a listing sent to you.



**Canton Town and Board of Education**  
**Group #04747**  
**Delta Dental PPO Plus Premier**  
**Full Plan**  
*Effective 7/1/2022*

	In-Network		Out-of-Network
	If a Delta Dental PPO™ Dentist is Used	If a Delta Dental Premier® Dentist is Used	If a Non-Participating Dentist is Used
<b>Preventive &amp; Diagnostic</b> Exams & Cleanings ( <i>each twice in a calendar year</i> ) Bitewing X-Rays ( <i>2 per calendar year</i> ) Fluoride Treatments ( <i>Frequency limitations apply</i> )	100%	100%	100%
<b>Basic</b> Fillings ( <i>composite fillings on all teeth</i> ) Simple Extractions Root Canals (Endodontics) Repair of Dentures Emergency Palliative Treatment Athletic Mouth Guards Cone Beam X-Rays	100%	100%	100%
<b>Maximum (per person)</b>		Unlimited	
<b>Deductible</b> Per Person Family Maximum	None None	None None	None None

Dependent children are covered to age 26.

There are not separate calendar year maximums and deductibles for each type of dentist. The calendar year maximums & deductibles cross-accumulate among Delta Dental PPO, Delta Dental Premier and non-participating dentists.

Over 300,000 participating dental offices nationwide participate with the national Delta Dental system, although you may choose any fully licensed dentist to render necessary services. Participating dentists will be paid directly by Delta Dental to the extent that services are covered by the contract. Non-participating dentists will bill the patient directly, and Delta Dental will make payment directly to the member. **Maximum benefit may be derived by utilizing the services of a participating dentist.**

Where the eligible patient is treated by a Delta Dental PPO<sup>SM</sup> dentist, the fee for the covered service(s) will not exceed the Delta Dental PPO maximum allowable charge(s). Where the eligible patient is treated by a Delta Dental Premier<sup>®</sup> dentist who does not participate in Delta Dental PPO or by a *Participating Specialist*, the dentist has agreed not to charge eligible patients more than the dentist's filed fee or Delta Dental's established maximum plan allowance, and Delta Dental will pay such dentists based on the least of the actual fee, the filed fee, or Delta Dental's established maximum plan allowance for the procedure(s). Claims for services provided by dentists who are neither Delta Dental Premier, Delta Dental PPO dentists, or *Participating Specialists* are paid based on the lesser of the dentist's actual charge or the prevailing fee. Members utilizing non-participating dentists may be billed for the difference between the dentist's charge and Delta Dental's allowable charge.

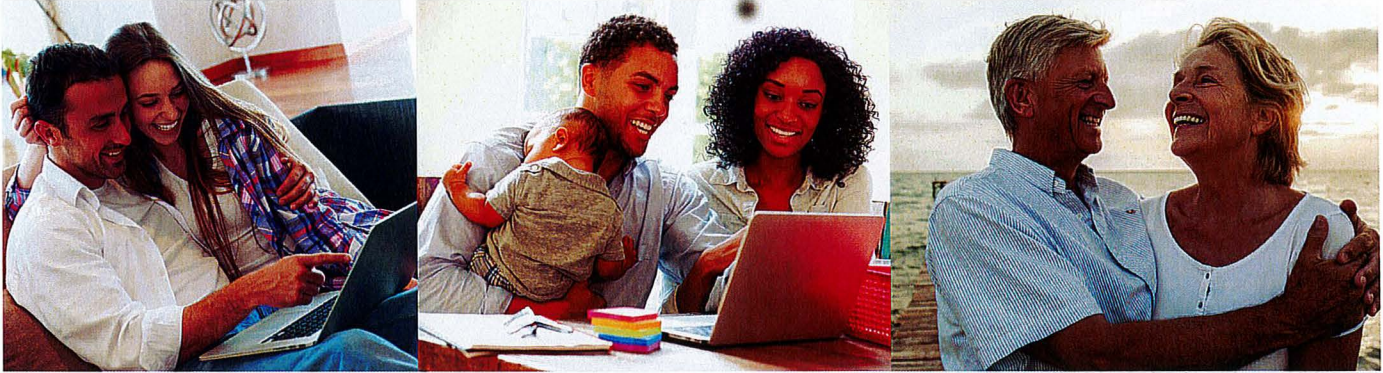
Visit your own dentist. If you do not have a dentist, visit [www.deltadentalct.com](http://www.deltadentalct.com) for a directory of participating dentists.

During your FIRST appointment, tell your dentist that you are covered under this program. Give him/her your Group's name, its Delta Dental Group Number and your Member ID number.

If you have any questions regarding your benefits, you may contact our Customer Service Department Monday through Thursday, 8:00 a.m. to 6:30 p.m. EST and Friday, 8:00 a.m. to 5:00 p.m. EST, at 1-800-452-9310.




This overview contains a general description of your dental care program for your use as a convenient reference. Complete details of your program appear in the group contract between your plan sponsor and Delta Dental of New Jersey, Inc. which governs the benefits and operation of your program. In CT, Delta Dental of Connecticut writes dental coverage on an insured basis and Delta Dental of New Jersey administers self-funded dental benefit programs. The group contract would control if there should be any inconsistency or difference between its provisions and the information in this overview.

# Everyone Deserves a Healthy Smile







## Manage Your Dental Benefits with MySmile®

Thank you for choosing Delta Dental. To access MySmile, go to [DeltaDentalCT.com](http://DeltaDentalCT.com) and click on 'Sign in or Register' at the top right of the page. Once registered and logged in, you will be able to:

-  ▶ View your dental benefits to see important details regarding your dental coverage
-  ▶ Print your ID card
-  ▶ Provide an endorsement for your dentist to help others find the one that meets their needs

### Other member tools available, include:

-  ▶ Our Find a Dentist tool - find a dentist near where you work or live
-  ▶ Dental Cost Estimator - find out cost ranges for common dental care needs
-  ▶ Forms - download and use important Delta Dental forms
-  ▶ Explanation of Benefits - view and print your EOBs
-  ▶ Oral Health and Wellness - Check out *grin!* magazine to learn more about the connection between a healthy smile and overall wellbeing

## Three Easy Ways to Find a Participating Dentist

1. Website. Use the Find a Dentist tool at [DeltaDentalCT.com](http://DeltaDentalCT.com)
2. Mobile App. Download the Delta Dental App on your smart phone.
3. Telephone. Call us at 800-DELTAOK to have a listing sent to you.