

## **MEA Bargaining 2025-2026**

Session #3

Thursday, August 21, 2025

Those present: Pat Barber, Christina Britton, Valerie Finnegan, Silvana Ianinska, Derek Jensen, Joanna Keovilay, Helen King, Brian Kirchberg, Rob Lyons, Gina Maliniak, Cathy Milley, Kevin Pendley, Bruce Proud, Sharon Scarbrough, Rachel Sellers, Jon Syre, Dawn Walker and Mark West.

Began at 5:49 p.m.

MW – We have a response to your proposal. We also recognize that health insurance committee (HIC) has met. Wanted to bring this to the table. Christina shared HIC recommendation.

BP – You got copies of the minutes?

MW – Not sure everyone had an opportunity to review. Will take a look at those.

Management handout – HIC recommendation to bargaining.

CB – Pat has taught me so much about health insurance. HIC delayed decision until we had 6 months of data. First projection was high. A number of options. Committee came to conclusion to make a recommendation to bargaining. Increase in prescription (Rx) copay and additional copay for specialty drugs. Regenxx benefit added. Premium increases are per month, not per paycheck in terms of dollar increase. 5.5% increase across the board.

BP – Pg 3 – in plan design – bronze individual – deductible increasing by \$500?

CB – Correct.

BP – So, an individual may have \$500 in additional costs.

CB – Yes, if they require meeting a deductible.

BP – That is an additional out of pocket expense for copay before there is a change in how much the plan pays.

CB – Yes.

BP – Out of pocket (OOP) annual – Additional \$1000 OOP for bronze in network, \$500 in silver, \$500 OOP for gold?

CB – Yes.

BP – That's if they're staying in network. There are additional changes in out of network

CB – Yes.

BP – So the responsibility of an employee with serious medical concerns increases costs of \$1000 just in those 2 items?

CB – Yes.

BP – So, it's \$1000 out of their pocket.

CB – If needed.

BP – So, instead of copay they would pay deductible of up to \$3000 rather than \$300 copay instead of that they would pay that for inpatient first. So that's a cost shift of a considerable amount of what they would be responsible for out of pocket

CB – Correct.

BP – Ambulatory surgery center changes to copay.

CB – Encourages use of ambulatory surgical center instead of hospital. It is significantly cheaper. Encourage procedures to move that way.

BP – Some surgeries are required to be inpatient. Based on condition a doctor wouldn't recommend going anywhere but the inpatient route.

CB – Correct.

BP – Now it becomes a monetary issue as well. \$5500.

CB – An estimate, yep.

BP – Surgery may not be choice but may be required. Promotes the use of cheaper process, but punitive.

CB – I don't know I would characterize it as punitive.

BP – Some may avoid surgery because of expense or delay to figure out how to come up with \$6000.

CB – That's true.

BP – Using same for inpatient for substance abuse, mental. 30% after deductible. So, pay \$3000 then 30% more. Again, a deterrent to having inpatient services may be required to have to become healthy. What's the savings to the plan for these plan design changes?

CB – \$1M savings.

BP – So, the consultant anticipated that \$1,000,000 would be shifted to employee. So, OOP employees would pay?

CB – I don't think \$1M is linked to plan changes. It's changes in premium and changes in plan.

BP – Changes only apply to those who use the plan.

CB - \$1M.

BP – So, how else will plan save unless it comes out of employees' pockets?

CB – It would not.

BP – Page 2 numbers based on para and teacher bargaining units collectively?

CB – Yes, those who are enrolled.

BP – Is that current or projected enrollment?

CB – Current.

BP – From the previous data that is a reduction in the number of employees participating.

CB – It is, but we have not enrolled any new employees. 400+ new hires who haven't had the opportunity to enroll. The enrollment is based on enrollment as of Tuesday of this week.

BP – Calculations were done at same percentage? Employer percent of premium based on each specific plan and different coverage to maintain percentage?

CB – Yes.

BP – Monthly premiums?

CB – Yes.

BP – Deducted in payments?

CB – Agreed.

BP – 2<sup>nd</sup> page includes per paycheck?

CB – Yes.

BP – Emergency Room (ER) copay - \$1200 but didn't change – waives if they become inpatient on any of them?

MW – Copay waived if admitted.

CB – Copay becomes part of the deductible.

BP – Even if inpatient you would pay that amount plus more for the ER. Any discussion of ways for people who don't choose benefits?

CB – High-deductible options in future. Beneficial for all to increase total census.

BP – Still there would be a high deductible that they would have to be faced with.

CB – Some like to take the risk. Some may take benefits because Medicaid won't be as affordable and may push employees into our plan. But that won't go into effect for a year or so.

BP – Was that only discussion to increase the number of participants?

CB – Yes.

BP – There are 1000 people in these two bargaining units (BU) who do not participate in plan. District contribution to the plan is reduced, as much as \$1M for this plan year. District is paying less overall, and employees are paying more of a percentage overall as fewer participate in the plan overall.

Employees in plan continue to pick up the burden. This year that's \$1M. What does the district do with that \$1M? Right now they're at \$500K. Likely the district is not paying \$1M by the end of the year.

CB – Being self-insured keeps the balance healthier. It does go back to the employees.

BP – No, it's covered by reinsurance. Nothing else is covered by the district.

RS – The district is putting in 94% of the premium into the plan compared to the employees' 6%.

BP – I understand that. At the end of the year, the number of employees is reduced. The district saves \$1M by not having employees in plan or having them choose a lower plan at a lower cost. That happened last year as well. What does the district do with that money in the budget when they don't expend it through the health plan?

RS – If it's in the health plan, it stays in the health plan. Everything expended within the plan stays in the plan. Savings are in reserves of the health plan.

BP – It never goes into the health plan. It never got in there.

RS – If they chose to participate, it would have been paid.

BP – It's a budgeted amount that the district doesn't pay. It goes in the district's reserves.

RS – No, it doesn't mix in with the general fund.

BP – If the number is reduced or coverage reduced the district didn't put the money in the plan; it just put in what was required each time. That's what the report says.

MW – We can look into that. Any other questions? Appreciate your team and what's been done.

BP – You're not implying this was a unanimous decision.

RS – I said 'yes.'

BP – I don't believe this was unanimous. We will discuss it in caucus.

MW – Switch gears to your proposal. We did quite a bit of work since the last meeting to try to understand things. Management handout. Working from your sheet last week – performance hiring schedule – placement chart – 6% increase – lump those together first. We took what we currently have and used what you had with .21% compression between steps with 6% increase across the board – combined was \$11,686,640. Actual cost is \$2,176,530 with benefits. \$100 and \$125 performance pay (PP) – Actual cost \$389,478. Then you proposed 6% degree supplements – actual cost \$121,429. Differentiated supplements – school supplements – actual cost \$93,000 – lower than what you projected. Retention supplements for 16 and 25+ year – \$191,381 with benefits. Retention at 10+ – about \$1,490,562 with benefits. That covered individual pieces. Came to \$16,149,021 as an increase to what we have this year. Broke that out to capture all of what you had.

BP – I don't think it's accurate. Confused about compression through 13a. We didn't propose anything for 13a.

MW – We used the placement scale with what we currently have. You mentioned doing away with the salary schedule (SS). We're not going to be able to do individualized salary. Currently use SS as the placement schedule. Have to continue to keep history of where employees are on the SS in the actual dollar amount. Part of the reason we have Joanne here. For her to hear what your ideas are and what you want to get to.

BP – We didn't do compression to 13a. If you go through the numbers, the levels end at 10a. I don't know where you get 13a.

GM – If you stop at 9c the next person would be making less money.

BP – Not if you multiply by 6%.

GM – I'm multiplying by 6%. Eliminated compression and added 6%. I assumed.

BP – No, compression is in the new schedule. No, anyone currently employed would receive 6%. An individual's salary would be increased from where they are right now.

GM – So those in compressed would only get a change on your proposed schedule?

BP – No, all would get 6%. Compression only for new employees. But I will review again. Only went to 10a. 25 levels and calculated 6% beyond that. Anyone at any level 1c through the end would receive 6%. Only new hires would receive a compressed schedule.

JK – Are we identifying new and old employee teachers? If I got hired as of 8/4/25 for 25-26 which salary placement should I follow? There are 250 around this time, maybe more. Where should I place those new teachers? Is the intent to get \$49,702?

BP – No, the intent is to get \$49,702 and 6%.

JK – But they're brand new.

BP – The contract is typically retroactive.

JK – Would have to separate new versus current teacher. If hired in 24-25 . . . hiring 25-26 hiring schedule who would fall or am I misinterpreting. Where would those values come in? Because we can better place.

BP – I didn't know how many were hired for this school year. We would have to establish a date and who is eligible for 6%. Typical conversations based on options of specific date, who worked previously would be eligible for increases. I didn't know which direction you were going. Based on not having in system at this point and would be on new schedule. Not opposed. Would make pay \$52,684. Good point of identifying date and time since we're already into the year.

MW – Thank you for clarifying that. Any questions about others?

BP – I recognize my number was not the number I thought it was in a couple categories.

MW – That's why we wanted to provide it to you. We did calculations on paras as well. Didn't have the sheet to hand out. 1 step w/ benefits = \$331,145. \$0.70 increase = \$807,093

BP – I would like to see the data used for step because I used the numbers given in April. Assume some would not receive step increase if they are not working or were hired this year. Don't know how many are not eligible that are currently employed and did not work 99 days last year or who were hired this year.

MW – Alright. We will take a look at that. Need questions for clarification?

JK – Hiring schedule 25-26. Intended to keep the dollar amount every year?

BP – It's a year-by-year agreement. Would be subject to negotiations.

JK – Are we only including base salary excluding degree supplements or extra hours (like guidance) – what is the basis for 6%?

BP – Based on an individual's base rate. Like grandfathered (GF) – on performance pay schedule (PP) – proposed to increase degree supplement by 6%. The extra hours would be at their regular rate which includes their rate of pay. That would be calculated based on extra hours they work. Current not previous rate of pay. That's how it has been in the past. If it has been done differently, I'd like to know. Include that cost in supplement schedule. Just said extra hours.

MW – Caucus. We should only need a few minutes.

Caucus at 6:47 p.m. Reconvened at 7:58 p.m.

MW – thank you for giving us a few extra minutes. Have a proposal. Management proposal. 2 handouts. Heard what you said about placement schedule. Looking to move forward – proposing placement schedule for 25-26 school year and moving forward for this year. Teachers currently hired coming in brand new are at \$49,702. That's what they're hired on. Baseline amount. Trying to decompress along those lines. Presenting that. If we move to this SS that will incur a cost of \$530,000. That's with a little over 300 folks in that category. PP increase – 2.5% increase for all employees who are on that SS with a cost of \$3,938,775 without benefits. PP – proposing \$50 for E/GF, \$63 for HF. Cost of \$159,299. At this time supplements not an area we can increase because of budget restraints. Paras – 1 step costs \$289,755. We went back and looked at those who are eligible. It's a Scribner's note that we wanted to correct. Increase to para SS of \$0.15 across board costs \$157,515. \$5,869,144 for teachers and \$548,711 for paras for a total cost of \$6,417,855.

BP – So, the amount between the hiring schedule is .15%?

MW – Yes.

BP – From what I can see the district is barely providing the increase that is required under the Teacher Salary Improvement Allocation (TSIA) dollars earmarked for teachers. Very little is coming out of the district budget otherwise, other than what the state allocated for TSIA. Which is \$3.7M. So, you're saying that is all that is available?

MW – That is all.

BP - That's all that you have with a reserve of \$61M or more? State said districts have to come forward rather than carrying it over, over and over again. The state sent a letter to every teacher saying you have lots of money.

MW – I didn't see that letter.

BP – You didn't see the letter?

MW – I saw a letter that went from the commissioner to every teacher.

BP – It didn't say there was lots of money in the district coffers for salary improvement?

MW – I don't recollect that part.

BP – I'm sure someone can pull it up quickly.

BP – People will be losing money in their paycheck with healthcare benefit changes and premium increases. They will be making less money than they currently have with this proposal. I don't have any more questions. We will take a caucus.

Caucus at 8:15 p.m. Reconvened at 9:21.

BP – Reviewed your proposal. Step increase compression schedule – particular reason for using 1c to 9c rather than years of experience or how is this going to work? See no connection between what it is and what it will be used for.

MW – Identified what current salary schedule was. Currently use first 12 steps for placement. Would do the same thing. The first 25 would be placed on that. Would adjust that and would correspond within years of experience.

BP – What's the purpose for hanging on to 1a, 2a, 3c, etc.?

MW – Not hanging on – what we would show is the number of years of experience as placement chart and then these values.

BP – I look forward to seeing what that means. Your proposal for teachers on performance does not change degree supplements. Is that true?

MW – Correct.

BP – So GF would be increased because degrees are on the schedule and performance would not change. It would be less of a value for degrees.

MW – That is the proposal.

BP – Performance pay amount – \$50 and \$63. Is the calculation of 1.25% of 50 to get to 63?

MW – I believe so, yes.

BP – How did you come up with \$530,034 for decompression of the placement schedule?

MW – That held us up in caucus and took us time to do. Rough estimate.

GM – Based on number currently sitting in those spots currently.

BP – But they won't be at those current grades and steps currently.

GM – Have no idea how they will be in the future.

BP – Would be calculated at 2.5%.

GM – Have teachers you haven't hired yet.

BP – You used current people to calculate cost. Overexaggeration of what it would cost. 200 new employees?

MW – Potential of what it could be.

BP – How many would that be?

GM – 2894 on board. 293 new employees. Allocation of 3003. 109 to hire. That's 400.

BP – What number did you use to get \$530,034?

GM – Everyone currently on that grade and step.

BP – On 10 and 11 month up to 25?

GM – Yes.

BP – Calculation of 2.5% is 2894 people based on where they are on the schedule now or based on formula for getting to \$3,938,775?

GM – Based on where they sit on grade and step.

BP – Some of which would have been counted in the \$530,034 figure already?

GM – No, calculated separately. Some people only counted on raise increase.

BP – I'm still not clear. You told me it was the same people, but I will move on. With proposal of step and 15 cents hour for paras approximately 500 people on schedule would mean an increase of 20 cents per hour. Calculating that would be about \$10.88 per pay period. Anybody that has more than employee only coverage bronze and maybe bronze employee children and other would be taking home less money than what they currently have in their paycheck. Paycheck will be less than what they are receiving this year. Would not promote having more people be part of health plan. Doubt that they feel they would retain their services with the district. Trying to figure out the motivation for your proposal for para bargaining unit based on a reduction in pay. Don't have a counter at this time. I understand that this was slightly more money than the previous proposal. We could be here a long time if we continue to move in such small increments.

Mw – We came forward with what we've put in the budget and what we've received approval for total amount. Not interested in doing any used car salesman stuff. Giving what we have. Put it out as quickly as possible to teachers. Wasn't because we're holding back anything. Not holding back anything. Trying to put forth the goals you put forward. Why we put a proposal to you. Not far off from what we



said originally. Not able to do everything. At least we wanted to address some things. I understand you don't have a counter proposal tonight.

BP – We're scheduled to meet on 9/2/25.

MW – Same place, same time.

Adjourned at 9:38 p.m.