

AGENCY NAME: RIALTO UNIFIED (3667850)

— Percentage Change from 2013-14:	5%
— One-time or "Off the Schedule" Across the Board Bonus:	0.00
— Any Contingency Language in your Collective Bargaining Agreement that could Retroactively Increase/Decrease your 2014-15 Teachers Salary Schedule? (Yes/No):	N
— Number of Scheduled/Required Service or Work Days for Returning Teachers:	184
— Number of Teacher Instructional Days:	180
— Does Your District's Salary Schedule Include Health & Welfare Benefits Amounts?	N
— Effective Date of the 2014-15 Certificated Salary Schedule:	07/01/2014
— Highest Entry Level Step for an Experienced Teacher:	

Hourly \$40.03 Daily \$0 Session \$0  
Summer School Teacher Pay Rate Explanation:

Counselor Y Psychologist N Nurse Y Librarian Y

CERTIFICATED TEACHER SALARY SCHEDULE WITH PLACEMENT, 2014-15 (FORM J-90)

<u>AGENCY CODE</u>	<u>AGENCY NAME</u>	<u>TOTAL</u>
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## CERTIFICATED BARGAINING UNIT BENEFIT SCHEDULE (ACTIVE EMPLOYEES), 2014-15

AGENCY CODE	AGENCY NAME
3667850	RIALTO UNIFIED

Benefit Plans:	Single Party Plan	Two-Party Plan	Family Plan	Composite Plan
<b>HEALTH</b>				
United Healthcare PPO				
Annual Cost of Plan:	0.00	0.00	0.00	24,581.52
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	4.00
Kaiser HMO				
Annual Cost of Plan:	0.00	0.00	0.00	11,994.12
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	954.00
United Healthcare (High)				
Annual Cost of Plan:	0.00	0.00	0.00	24,980.52
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	22.00
United Healthcare (Low)				
Annual Cost of Plan:	0.00	0.00	0.00	12,335.28
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	147.00
<b>DENTAL</b>				
Western Dental HMO				
Annual Cost of Plan:	0.00	0.00	0.00	415.44
District Contribution:	0.00	0.00	0.00	415.44
Number of FTE's:	0.00	0.00	0.00	21.00
Delta HMO				
Annual Cost of Plan:	0.00	0.00	0.00	379.92
District Contribution:	0.00	0.00	0.00	379.92
Number of FTE's:	0.00	0.00	0.00	84.00
Delta PPO				
Annual Cost of Plan:	0.00	0.00	0.00	1,778.52
District Contribution:	0.00	0.00	0.00	1,778.52



## CERTIFICATED BARGAINING UNIT BENEFIT SCHEDULE (RETIRED EMPLOYEES, 65 OR YOUNGER), 2014-15

AGENCY CODE	AGENCY NAME
3667850	RIALTO UNIFIED

Benefit Plans:	Single Party Plan	Two-Party Plan	Family Plan	Composite Plan
<b>HEALTH</b>				
Kaiser HMO				
Annual Cost of Plan:	0.00	0.00	0.00	11,994.12
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	56.00
United Healthcare PPO				
Annual Cost of Plan:	0.00	0.00	0.00	24,581.52
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	1.00
United Healthcare PPO-OOS				
Annual Cost of Plan:	0.00	0.00	0.00	16,882.32
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	3.00
United Healthcare (High)				
Annual Cost of Plan:	0.00	0.00	0.00	24,980.52
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	1.00
United Healthcare (Low)				
Annual Cost of Plan:	0.00	0.00	0.00	12,335.28
District Contribution:	0.00	0.00	0.00	11,994.12
Number of FTE's:	0.00	0.00	0.00	12.00