

AGENCY NAME: LAS VIRGENES UNIFIED (1964683)

- Percentage of regular salary schedule change for 2022-23: 8%
- 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 2022-23 Teachers Salary Schedule? (Yes/No): N
- Number of Scheduled/Required Service or Work Days for Returning Teachers: 185
- Number of Teacher Instructional Days: 180
- Does Your District's Salary Schedule Include Health & Welfare Benefits Amounts? N
- Effective Date of the 2022-23 Certificated Salary Schedule: 08/01/2022
- Highest Entry Level Step for an Experienced Teacher: Step 10 Column 6
- Highest Entry Level Step for an Emergency / Credential Teacher: Step 1 Column 1
- Number of FTEs with an Emergency or Intern Credential: 5
- Summer School Classroom Teacher Pay Rate:
 - Hourly \$0 Daily \$0 Session \$0
 - Summer School Teacher Pay Rate Explanation:
 - Summer school teachers are paid their hourly rate.
- Number of Charter School FTE included on the Salary Schedule: N/A
- Other Professionals Paid from the Same Salary Schedule:
 - Counselor Y Psychologist Y Nurse Y Librarian Y
- Certificated Bargaining Unit Salary Enhancements:

	% or Amount	FTE
Masters Degree	0	0
Doctorate Degree	\$400	10
Special Education Assignment	1.5%	78.5
Bilingual Assignment	0	0
CLAD Certificate	0	0
BCLAD Certificate	\$2,567	16
National Teacher Certification	0	0
- Do these bonuses increase automatically as across-the-board increases are applied to the salary schedule?: N
- Other Salary and Service Day Information:

	Salary	Days
Elementary School Principals	\$146,919	208
Middle School Principals	\$171,445	216
High School Principals	\$171,677	225
Superintendent	\$290,520	225
Percent for less than full-time Superintendent:		0%
- Name of the agency if the district purchases health plans through a joint powers authority or trust:
- Age or Number of Years a Retiree Receives Health and Welfare Benefits:
- Retires with any Health and Welfare Benefits Provided for Life? (Yes/No): N
- Health and Welfare Benefit Maximums for Active FTEs:

Maximum Contribution for a Cafeteria Plan	0
Maximum Contribution for a Employee Only Plan	11,350
Maximum Contribution for a Two-Party Plan	12,875
Maximum Contribution for a Three-Party Plan	0
Maximum Contribution for a Family Plan	15,525
Indicate whether the Health and Welfare Benefit Maximums are Hard Caps or Soft Caps:	HARD
- Date of latest actuarial study for its post-employment benefits: 10/07/2022
- Unfunded liability amount as reported in the study: 34,254,112

CERTIFICATED TEACHER SALARY SCHEDULE WITH PLACEMENT, 2022-23 (FORM J-90)

AGENCY CODE	AGENCY NAME	TOTAL SALARIES		TOTAL F.T.E.		AVERAGE SALARY FROM SALARY SCHEDULE				
1964683	LAS VIRGENES UNIFIED	50,522,828		525.10		96,216				
CLASS I			CLASS II		CLASS III		CLASS IV		CLASS V	
NON-CRED			BA		BA+15		BA+30		BA+45 OR MA	
STEP	ANNUAL SALARY	F.T.E	ANNUAL SALARY	F.T.E	ANNUAL SALARY	F.T.E	ANNUAL SALARY	F.T.E	ANNUAL SALARY	F.T.E
1	54,521	5.60	57,664	0.00	58,856	1.00	60,048	4.20	61,241	4.20
2	56,155	1.00	58,817	3.00	60,586	0.00	61,779	3.00	62,971	4.00
3	57,346	2.00	60,586	0.00	61,779	1.00	62,971	1.00	64,514	2.20
4	58,539	1.00	61,779	1.00	62,971	0.00	64,483	3.00	68,153	3.00
5	59,731	0.00	62,971	0.00	64,163	0.00	67,515	0.00	71,182	1.80
6	60,924	1.00	64,163	0.00	66,864	1.00	70,535	0.00	74,207	5.00
7	62,611	0.00	66,222	0.00	69,881	1.00	73,556	6.50	77,229	1.00
8	65,468	0.00	69,245	0.00	72,898	1.00	76,589	0.60	80,262	1.00
9	67,280	0.00	71,162	0.00	75,930	0.00	79,608	2.00	83,279	1.00
10	0	0.00	71,162	0.00	78,031	2.00	82,625	1.00	86,297	0.00
11	0	0.00	71,162	0.00	78,031	0.00	85,644	1.20	89,317	3.50
12	0	0.00	71,162	0.00	78,031	0.00	88,014	3.00	93,002	2.00
13	0	0.00	71,162	0.00	78,031	0.00	88,014	0.00	95,576	6.00
14	0	0.00	71,162	0.00	78,031	0.00	88,014	0.00	95,576	0.00
15	0	0.00	71,162	0.00	78,031	0.00	88,014	0.00	95,576	0.00
16	0	0.00	72,671	0.00	79,540	0.00	89,523	1.00	97,085	6.70
17	0	0.00	72,671	0.00	79,540	0.00	89,523	0.00	97,085	0.00
18	0	0.00	72,671	0.00	79,540	0.00	89,523	0.00	97,085	0.00
19	0	0.00	72,671	0.00	79,540	0.00	89,523	0.00	97,085	0.00
20	0	0.00	72,671	0.00	79,540	0.00	89,523	0.00	97,085	0.00
21	0	0.00	75,390	0.00	82,259	1.00	92,242	2.00	99,804	5.00
22	0	0.00	75,390	0.00	82,259	0.00	92,242	0.00	99,804	0.00
23	0	0.00	75,390	0.00	82,259	0.00	92,242	0.00	99,804	0.00
24	0	0.00	75,390	0.00	82,259	0.00	92,242	0.00	99,804	0.00
25	0	0.00	75,390	0.00	82,259	0.00	92,242	0.00	99,804	0.00
26	0	0.00	79,180	1.00	86,049	0.00	96,032	0.00	103,594	2.50
27	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
28	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
29	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
30	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
31	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
32	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
33	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
34	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
35	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
36	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
37	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
38	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
39	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
40	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00

CERTIFICATED TEACHER SALARY SCHEDULE WITH PLACEMENT, 2022-23 (FORM J-90)

AGENCY CODE	AGENCY NAME	TOTAL SALARIES	TOTAL F.T.E.	AVERAGE SALARY FROM SALARY SCHEDULE						
1964683	LAS VIRGENES UNIFIED	50,522,828	525.10	96,216						
CLASS VI		CLASS VII		CLASS VIII		CLASS IX		CLASS X		
BA+60 OR MA+45		BA+75 OR MA+60								
STEP	ANNUAL SALARY	F.T.E.	ANNUAL SALARY	F.T.E.	ANNUAL SALARY	F.T.E.	ANNUAL SALARY	F.T.E.	ANNUAL SALARY	F.T.E.
1	62,433	3.00	63,877	3.00	0	0.00	0	0.00	0	0.00
2	65,146	1.00	68,786	4.00	0	0.00	0	0.00	0	0.00
3	68,150	2.00	71,784	3.00	0	0.00	0	0.00	0	0.00
4	71,835	2.50	75,501	3.00	0	0.00	0	0.00	0	0.00
5	74,849	3.80	78,521	5.80	0	0.00	0	0.00	0	0.00
6	77,880	3.60	81,551	9.20	0	0.00	0	0.00	0	0.00
7	80,902	3.30	84,569	16.60	0	0.00	0	0.00	0	0.00
8	83,936	4.40	87,601	31.10	0	0.00	0	0.00	0	0.00
9	86,949	4.20	90,623	11.00	0	0.00	0	0.00	0	0.00
10	89,979	4.00	93,648	13.70	0	0.00	0	0.00	0	0.00
11	93,003	5.00	96,676	13.20	0	0.00	0	0.00	0	0.00
12	96,717	4.00	100,414	7.00	0	0.00	0	0.00	0	0.00
13	99,394	20.20	106,562	6.00	0	0.00	0	0.00	0	0.00
14	99,394	0.00	109,511	49.90	0	0.00	0	0.00	0	0.00
15	99,394	0.00	109,511	0.00	0	0.00	0	0.00	0	0.00
16	100,903	14.60	111,020	71.80	0	0.00	0	0.00	0	0.00
17	100,903	0.00	111,020	0.00	0	0.00	0	0.00	0	0.00
18	100,903	0.00	111,020	0.00	0	0.00	0	0.00	0	0.00
19	100,903	0.00	111,020	0.00	0	0.00	0	0.00	0	0.00
20	100,903	0.00	111,020	0.00	0	0.00	0	0.00	0	0.00
21	103,622	7.00	113,739	44.30	0	0.00	0	0.00	0	0.00
22	103,622	0.00	113,739	0.00	0	0.00	0	0.00	0	0.00
23	103,622	0.00	113,739	0.00	0	0.00	0	0.00	0	0.00
24	103,622	0.00	113,739	0.00	0	0.00	0	0.00	0	0.00
25	103,622	0.00	113,739	0.00	0	0.00	0	0.00	0	0.00
26	107,412	5.00	117,529	43.90	0	0.00	0	0.00	0	0.00
27	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
28	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
29	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
30	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
31	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
32	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
33	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
34	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
35	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
36	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
37	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
38	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
39	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
40	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00

CERTIFICATED BARGAINING UNIT BENEFIT SCHEDULE (ACTIVE EMPLOYEES), 2022-23

AGENCY CODE	AGENCY NAME
1964683	LAS VIRGENES UNIFIED

Benefit Plans:	Single Party Plan	Two-Party Plan	Three-Party Plan	Family Plan	Composite Plan
MEDICAL					
Anthem Blue Cross HMO Select					
Annual Cost of Plan:	8,877.06	17,754.11	0.00	23,080.40	0.00
District Contribution:	8,877.06	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	6.00	1.00	0.00	4.00	0.00
Anthem Blue Cross HMO Select-V					
Annual Cost of Plan:	9,207.40	18,414.80	0.00	23,939.22	0.00
District Contribution:	9,207.40	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	7.00	0.00	0.00	0.00	0.00
Blue Shield HMO Access +					
Annual Cost of Plan:	8,881.63	17,763.26	0.00	23,092.19	0.00
District Contribution:	8,881.63	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	8.00	0.00	0.00	2.50	0.00
Blue Shield HMO Access +-V					
Annual Cost of Plan:	10,136.60	20,273.20	0.00	26,355.20	0.00
District Contribution:	10,136.60	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	2.00	1.00	0.00	3.00	0.00
Blue Shield Trio					
Annual Cost of Plan:	7,957.72	15,915.45	0.00	20,690.04	0.00
District Contribution:	7,957.72	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	1.00	1.00	0.00	1.00	0.00
Health Net Salud y Mas HMO					
Annual Cost of Plan:	7,294.27	14,588.54	0.00	18,965.05	0.00
District Contribution:	7,294.27	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	0.00	1.00	0.00	1.00	0.00
Health Net Salud y Mas HMO-V					
Annual Cost of Plan:	8,407.89	16,815.77	0.00	21,860.56	0.00
District Contribution:	8,407.89	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	0.00	0.00	0.00	1.00	0.00

Kaiser HMO

Annual Cost of Plan:	8,970.05	18,156.64	0.00	23,603.58	0.00
District Contribution:	8,970.05	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	43.80	11.00	0.00	13.00	0.00

Kaiser HMO-V

Annual Cost of Plan:	9,097.27	18,194.41	0.00	23,652.78	0.00
District Contribution:	9,097.27	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	36.70	9.00	0.00	16.00	0.00

PERS Gold

Annual Cost of Plan:	8,184.85	16,369.70	0.00	21,280.59	0.00
District Contribution:	8,184.85	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	75.40	27.00	0.00	76.70	0.00

PERS Gold-V

Annual Cost of Plan:	8,384.07	16,744.08	0.00	21,767.32	0.00
District Contribution:	8,384.07	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	2.00	0.00	0.00	0.00	0.00

PERS Platinum

Annual Cost of Plan:	11,940.86	23,881.72	0.00	31,046.18	0.00
District Contribution:	11,350.00	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	32.00	9.00	0.00	9.80	0.00

PERS Platinum-V

Annual Cost of Plan:	12,208.04	24,416.09	0.00	31,740.91	0.00
District Contribution:	11,350.00	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	29.00	4.00	0.00	6.00	0.00

UnitedHealthcareAlliance HMO-V

Annual Cost of Plan:	9,547.37	19,094.74	0.00	24,823.18	0.00
District Contribution:	9,547.37	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	2.80	0.00	0.00	1.00	0.00

UnitedHealthcareAlliance HMO

Annual Cost of Plan:	9,509.23	19,018.47	0.00	24,724.06	0.00
District Contribution:	9,509.23	12,875.00	0.00	15,525.00	0.00
Number of FTE's:	0.00	0.00	0.00	0.00	0.00