APPENDIX A

UNIVERSITY OF MAINE SYSTEM
PROFESSIONAL AND ADMINISTRATIVE STAFF UNIT
STEP 1 GRIEVANCE FORM

Grievant: ___________________________ Date: ___________________________
CAMPUS: ___________________________ UMPSA Grievance
Department: ___________________________ Representative: ___________________________
Mailing Address: ___________________________
Mailing Address: ___________________________

Article(s) and Section(s) of Agreement violated: ___________________________

Statement of grievance (including date of acts or omissions complained of):

Redress sought:

I will be represented in this grievance by: (check one)

UMPSA Myself

UMPSA grievance representative's signature ___________________________
(If UMPSA is representing the grievant, an UMPSA representative must sign here).

This grievance was filed with the office of ___________________________ on ___________________________
by (check on) mail or personal delivery

Signature of Grievant ___________________________

Date Received: ___________________________ By ___________________________ Grevance Number ___________________________

DISTRIBUTION ORIGINAL 1st COPY 2nd COPY
Step 1 Administrator whose action or decision is being contested Grievant Campus Grievance Person or UMPSA (Bangor)
APPENDIX B

UNIVERSITY OF MAINE SYSTEM
PROFESSIONAL AND ADMINISTRATIVE STAFF UNIT
GRIEVANCE DECISION REVIEW FORM

DATE: __________________________

TO: ____________________________

I hereby request that a Step _____ review of the attached decision be made in connection with the attached grievance because:

______________________________________________________________________________

______________________________________________________________________________

I received the decision on ____________________________ and filed this request for review at Step _____ with the office of ____________________________

on ____________________________ by: (check one) mail or personal delivery

UMPSA grievance representative's signature ____________________________

Name of Grievant ____________________________ Signature of Grievant ____________________________

Date Received: ____________ By _________________ Grievance Number: ____________

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<td>Campus Grievance File</td>
<td>Campus Grievance Person or UMPSA (Bangor)</td>
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<tr>
<td>Step 3</td>
<td>Chancellor or Designee</td>
<td>Campus Grievance File</td>
<td>UMPSA (Bangor)</td>
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</tbody>
</table>
APPENDIX C
UNIVERSITY OF MAINE SYSTEM
SALARIED EMPLOYEE PERFORMANCE ASSESSMENT

PURPOSE

A meaningful and effective performance assessment system promotes and enhances an on-going, collaborative process between supervisors and employees in order to:

a) mutually establish performance expectations and goals;
b) provide feedback on accomplishments and areas in need of improvement;
c) develop a plan for maintaining job performance at a satisfactory level or for improving performance.

The formal, written performance assessment for each assessment period summarizes the employee's job performance for that period. The assessment process is an opportunity to recognize positive performance and reinforce job expectations. Areas for improvement or challenges noted are meant to reinforce prior discussions and support/coaching.

INSTRUCTIONS

1. The time period for performance assessment shall encompass no more than a year prior to the date the evaluation form is completed.

2. The following characteristics/skills set should be kept in mind when completing performance assessment forms—the self assessment, the 360 assessment (if used) and the supervisors' assessment of:

   ➢ Written Communications
   ➢ Oral Communication
   ➢ Job Knowledge
   ➢ Organization and Planning
   ➢ Leadership
   ➢ Supervision — if supervision is checked on the employee's Position Description Questionnaire (PDQ)
   ➢ Dependability
   ➢ Initiative
   ➢ Problem Solving Ability
   ➢ Flexibility/Adaptability
   ➢ Professionalism

Questions pertaining to these characteristics are included after the instruction section.

3. The supervisor forwards to the employee a "Salaried Employee Self Assessment " and an uncompleted "Salaried Employee Performance Assessment" form. The employee should complete the self assessment using the job description and characteristics listed above as a guideline and return it within two weeks. The Performance Assessment form is provided as a guide for discussion. The supervisor will also forward a copy of the current job description to the employee. NOTE: This would be an appropriate time for the employee to review their PDQ to ensure that it reflects the current functions and percentages of time in each function.

4. Once the self assessment has been returned or if it is not returned, within the two week period, the supervisor should schedule an interview with the employee.
5. If either the supervisor and/or employee choose to have others participate in the assessment process, both should be given a chance to invite participation from people of their choice. The employee must be given prior notice of participants who will be included in the performance assessment process. A description of the 360 degree process, sample letter and form are attached that may be used to facilitate this process. Any performance assessment forms provided from these evaluators will not be included in the permanent personnel file, nor will the unit member have access to them—they will be used only to assist the supervisor in completing the performance assessment form.

6. Prior to the interview the supervisor should first review the self assessment and 360 feedback (if used) and then complete the assessment sections.

➢ Using the job description and characteristics listed in #1 above, identify the employee’s strengths. Please provide examples to support your observations.
➢ Using the job description and characteristics listed in #1 above, identify the employee’s challenges and areas in need of improvement. Please provide examples to support your observations.

7. During the interview the supervisor and employee should discuss the completed assessment forms. The job description should be reviewed with the employee. The supervisor should point out areas of satisfactory or outstanding performance as well as areas to be improved making specific suggestions for improvement.

8. The supervisor and employee should establish goals and objectives for the employee, which will be used in the next assessment.

9. After the performance assessment document has been completed both the supervisor and employee must sign the assessment form. If a copy of the assessment is not signed by the employee and returned within seven (7) calendar days, an unsigned copy shall be placed in the personnel file. The supervisor gives a copy to the employee, sends another copy through to the appropriate administrator and then to the custodian of salaried employee personnel files. No alterations or comments may be made on the form after the employee and supervisor have signed it.

10. Confidentiality of the information is the shared responsibility of the supervisor, any reviewing administrator(s) and the file custodian. Ordinarily, the performance assessment document will be available only to the employee involved, his or her supervisor, appropriate administrators, and/or a duly designated representative in accordance with the collective bargaining agreement.

11. The employee will not have access to the actual input provided by employees or other individuals. In the event that an employee receives a rating of unsatisfactory and input was given by someone other than the supervisor, the employee may request and will receive a summary of comments from those who provided input, but the comments will not be attributed to the contributor. The employee, upon receiving an unsatisfactory rating when input has been sought and received, will have the right to ask another individual to provide input on their behalf.
REFERENCE QUESTIONS
APPENDIX C
Salaried Employee Performance Criteria

(For voluntary use in conjunction with the Salaried Employee Performance Assessment)
The questions listed below each criterion are intended to illustrate aspects of the performance area. Not all questions will be applicable to every position. In addition, there may be other dimensions of a criterion which apply to some positions. The questions are intended to assist, but not to limit, the evaluation.

A. Communications (oral and written):
   How well does the employee express him / herself?
   How well does employee communicate with direct / indirect reports, peers, students, and other professional contacts?
   How well does the employee keep his / her supervisor informed?

B. Job Knowledge:
   Assess the employee's command of the knowledge base required to perform the job.
   How well does employee understand job responsibilities?
   How well does employee understand and adhere to policies and procedures?
   Does employee consistently attempt to expand job knowledge and keep abreast of developments in the field?

C. Organization and Planning:
   Does employee reappraise procedures or techniques to insure efficiency?
   Does employee define and arrange activities in a logical manner?
   Does employee effectively use resources including staff, time, money, and materials?

D. Leadership and Supervision:
   Does employee set a good example for others?
   Does employee delegate appropriate tasks to direct / indirect reports?
   Does employee develop the capabilities of direct / indirect reports?
   Does employee motivate direct / indirect reports so that they work together toward common objectives?

E. Dependability:
   Can the employee be relied on to fulfill job responsibilities in both routine and complex job situations?
   Does employee observe and meet deadlines?
   Is employee punctual for meetings?
   What is the employee's attendance record?

F. Initiative:
   Does employee act independently when appropriate?
   Does employee actively pursue or initiate projects for the benefit of the department and/or the University?

G. Problem Solving and Creative Ability:
   Does employee develop logical and creative solutions to problems and make effective decisions?
   Can employee distinguish between significant and minor issues?
Does the employee's work reflect creativity?

H. Adaptability:
   Does employee adapt to changing work demands?
   Is employee receptive to new ideas and concepts?

I. Professional Attitude:
   Does employee demonstrate interest in the job, the department and the University?
   Does employee emphasize the positive aspects of most situations?
   Does employee work effectively under pressure or in crisis situations?
   Is employee willing to work beyond normal expectations when work load and deadlines require it?

J. Productivity:
   Does employee produce work at satisfactory levels?
   Is the employee's work timely, complete and accurate?

K. Relationship with Others:
   Does employee have the confidence of others?
   Does employee work effectively with other people?
360-DEGREE PERFORMANCE ASSESSMENT PROCEDURE
UNIVERSITY OF MAINE SYSTEM
360-Degree Performance Assessment Procedure

In some situations, the supervisor or employee may want to expand input into a performance assessment and request that other people (e.g., project directors, clients, or others who have significant interaction with the supervisee) participate in the assessment of a supervisee, especially if the supervisor is not able to directly observe performance. This process is often referred to as a 360-degree performance assessment.

When a supervisor or employee has identified additional participants to provide input to a performance assessment, each participant will be contacted and provided with the approved UMS performance assessment instrument and a specific time frame for its return.

The following text may be used or adapted for this purpose.

To:
From:
Date:
RE: Annual Performance Assessment of ________________ for the period of:

As someone who has significant interaction with the person noted above, I request your participation in providing input to this year's performance assessment. Please use the performance assessment document enclosed and return it with your comments and signature by [mm/dd/yy]. Your input will not be available to the employee and any feedback given by the supervisor will not be attributed to any individual contributor. Your input is considered confidential material, therefore, please do not share it with anyone.

Because performance assessment is important to an employee's professional growth and the University's advancement, please indicate strengths as well as areas that may benefit from additional training, development, and/or improvement based on your direct observation. This information will be part of the performance assessment conversation that will take place and will inform performance objectives for the coming year. Please note that the performance assessment is not a performance improvement plan, but is rather an opportunity to provide feedback and suggestions for building individual and organizational capacity.

Thank you for participating in this important process. Please feel free to contact me if you have questions concerning the assessment instrument, the process, or the time frame for submission of the completed assessment [telephone # & email].
360-Degree Performance Assessment Form

Employee:

Supervisor:

Please Return to Supervisor by: ________________

The following characteristics/skills set should be kept in mind when completing the performance assessment forms – the self assessment, the 360 assessment (if used) and/or the supervisors' assessment of:

➢ Written Communications
➢ Oral Communication
➢ Job Knowledge
➢ Organization and Planning
➢ Leadership
➢ Supervision – if supervision is applicable
➢ Dependability
➢ Initiative
➢ Problem Solving Ability
➢ Flexibility/Adaptability
➢ Professionalism

1. Identify the employee's strengths. Please provide examples from the past year to support your observations.

2. Identify the employee's challenges and areas in need of improvement. Please provide examples from the past year to support your observations.

3. Additional Comments:

Contributor's Name: __________________ Signatures: __________________

Date: ____________________________
SALARIED EMPLOYEE SELF-ASSESSMENT
UNIVERSITY OF MAINE SYSTEM
SALARIED EMPLOYEE SELF-ASSESSMENT

1. What changes, if any, are needed to make your job description accurately reflect your current responsibilities?

2. What were your most important achievements in your University position during the past year?

3. Is your current workload reasonable? What adjustments in workload would you suggest?

4. If you and your supervisor set goals and objectives for this year, comment on your progress in achieving them.
5. Have you participated in professional development activities this past year? If so, please list these activities. How have they helped you develop? What type of professional development activities would be most helpful to you?

6. What do you suggest for goals in the upcoming year?

7. How can your supervisor help in your job performance and personal and professional development?

The following questions are optional. Your responses will be helpful to the University if you wish to respond. Please respond on a separate piece of paper, which will not be placed in your personnel file and will not be part of your performance assessment, unless you so wish. If you wish these responses to be placed in your personnel file, check here. __

8. Do you feel that certain aspects of the University's structure and management particularly enhance or hamper your job activities? (Please cite positive or negative conditions which are particularly important to you.)

9. Overall comment (a short statement of your overall experience as a University employee during the past year):

Employee Name: ___________________________ Employee Signature: ___________________________

Date: ____________________________
SUPERVISOR’S SECTION OF PERFORMANCE ASSESSMENT
UNIVERSITY OF MAINE SYSTEM
SALARIED EMPLOYEE PERFORMANCE ASSESSMENT

Employee ____________________ Date of Appointment to Current Job ____________

Title ________________________ ASSESSMENT PERIOD From ____ To ____

Supervisor ____________________ Date of Assessment Interview ________________

I. Job Description

A. The supervisor and employee should review the job description to be certain that there is a mutual understanding of responsibilities of the job. Identify changes that have occurred in the position. Any changes in the job description must be approved by the appropriate University administrator before a new job description is placed in the employee's personnel file. Check here if the job description is being revised and forwarded for approval. 

B. Complete the attached assessment form using the job description — you may refer to the list of skill sets/characteristics listed in #1 of the instructions to assist you.

1. List major achievements and accomplishments of goals set for the past year:

2. Highlight areas of the job description where the employee exceeds expectations.

3. Identify professional challenges faced in the past year:
4. Identify personal strengths:

5. Identify areas for growth or improvement: (include what needs improvement, action plan with timelines for improvement as well as support to be given by supervisor):

6. List plans/goals for the upcoming year:

7. What training, professional development or other support is needed to support achievement goals? (The supervisor is the one completing this section.)

8. The employee's overall performance is unsatisfactory _____ satisfactory ____ outstanding _______.
   If unsatisfactory is checked – please enclose documentation and a PIP (Performance Improvement Plan or include PIP that is presently in progress).
   If outstanding, please explain.

9. Summary Comments (Optional):
   Supervisor:

   Employee:
Employee Signature: ___________________________ Date: __________
The signature of the employee attests that s/he has been shown and has discussed the assessment and/or performance plan.

Supervisor Signature: ___________________________ Date: __________
Department Head Review: ___________________________ Date: __________
If appropriate:
Department Chair/Dean: ___________________________ Date: __________

Please forward for inclusion in the official personnel file.
APPENDIX C 1

Recommendations from the Evaluation Committee

The Evaluation Committee would like to make the following three recommendations to enhance the professional assessment process:

1. The Universities will abide by the University of Maine System Board of Trustee policy that requires annual assessments to be done. It is a job requirement of Supervisors to assess the employees that report to them. Those who fail in fulfilling this requirement should be held accountable for that performance failure.

2. The new Professional Performance Assessment tool should be the only assessment tool in use for professional unit members. Should a department, division or campus desire to deviate from this tool, the campus head of human resources will be required to follow the requirements of Article 13, Section L of the agreement with UMPSA in order to make that change.

3. Employees who have questions concerning the location of their official personnel file will be directed to campus Human Resources for an answer.
## APPENDIX D

**Unit Employee Representative Services Fee Schedule**

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<td>UMPSA President</td>
<td></td>
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<tr>
<td>Grievance Representative</td>
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APPENDIX E

Memorandum of Understanding

AGREEMENT made by, between and among the University of Maine System, an institution of higher education with principal offices at Bangor, Maine (hereinafter "University") and the Universities of Maine Professional Staff Association of the University of Maine, MEA/NEA, an employee organization with a place of business at Bangor, Maine (hereinafter "Association"). For valuable considerations, and in consideration of the mutual promises and covenants contained herein, the University and the Association hereby agree as follows:

Pursuant to discussions between the parties regarding employee travel reimbursement, the following agreement has been reached by the parties:

1. Employees in bargaining units covered by this Agreement shall normally be reimbursed for travel based upon the actual expenses incurred. Such actual expenses shall include, but not be limited to, both meals and lodging.

2. Employees may, prior to the start of travel, request to be reimbursed for expenses incurred on a per diem basis for meals and/or lodging. Such requests shall, except in extraordinary circumstances, be approved by the administration.

3. In those instances where employees are reimbursed on a per diem basis, there will be one rate for meals and one rate for lodging. This rate will be the same as the Federal Standard per diem for the entire continental United States at the time of travel (CONUS Rate) unless the University, at its discretion, approves a higher per diem rate.

It is hereby affirmed that these represent the agreements reached by the parties in their discussions. No other agreements, promises or inducements are made or implied. These agreements represent the totality of the understandings reached.

These agreements will be incorporated into Administrative Practice Letter #26 which shall be reissued with a new effective date upon execution of this Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement.

Dated: 2/21/03       By: Frank C. Gerry
University of Maine System

Dated: 2/21/03       By: Jerry Nadeau
UMPSA, MEA/NEA
APPENDIX F
Memorandum of Understanding

This Memorandum of Understanding is made by, between and among the University of Maine System, a body politic and corporate and an instrumentality and an agency of the State of Maine with principal offices at Bangor, Maine (hereinafter “System”) and the Universities of Maine Professional Staff Association, MEA/NEA, an employee organization with a place of business at Bangor, Maine (hereinafter “Association”). For valuable considerations, and in consideration of the mutual promises and covenants contained herein, the System and Association agree as follows:

1. The following Unit Member Initiated Position Review (hereinafter “Review”) protocol will be established as part of the Salaried Employees Classification and Compensation Program for eligible unit members effective December 1, 2005. An eligible unit member is one who is on the payroll at the time of the request and remains on the payroll until final resolution.

2. Reviews for this process constitute a unit member's request using the approved Request for Salaried Classification Review (hereinafter “RSCR”) form available on the System's web-site to seek an administrative evaluation to determine if the present duties performed are significantly different from those outlined in the unit member's current Position Description Questionnaire (PDQ). The RSCR shall be developed in consultation with the Association.

3. The employee and supervisor shall prepare a revised job description and a new PDQ to reflect the current duties being performed.

4. The revised job description and PDQ together with the completed and signed RSCR shall be submitted to the supervisor who will have 20 (twenty) working days to complete the supervisor's portion of the review and submit it to the campus Human Resources (HR) Office. The unit member shall be provided a copy of the RSCR at the time it is forwarded by the supervisor.

5. In the event there is a disagreement between the employee and the supervisor, the supervisor may indicate this disagreement in the supervisor's portion of the form. The supervisor may not require an employee to change an entry in the employee section of the form if the employee does not wish to do so. Both the employee's documentation and that of the supervisor shall be forwarded to the campus HR Office.

6. The campus HR Office will evaluate the position using the Point Factor Instrument and review the job family assignment to determine whether the employee's job has changed significantly. If a significant change in duties and responsibilities has occurred, the campus HR office will determine the appropriate job family, salary band, and placement within the salary band. The campus HR office will communicate the results of the position review to the unit member. Any change shall become effective on the date the completed review request was submitted by the unit member to the appropriate supervisor.

7. An employee who has been determined to warrant a salary adjustment as a result of a reclassification shall, except in exceptional circumstances, receive a minimum salary increase of 5% and be placed on at least the minimum and not more than the maximum of the salary band.

In the event an increase of less than 5% is granted, the University shall provide the Association with information concerning the exceptional nature of the circumstance.

Subject to the terms above, for employees hired prior to 01-01-05, the salary resulting from a reclassification may exceed the maximum of the salary band if necessary to provide for an increase of 5%.

A salary increase granted under the terms above shall not constitute an inequity within the SECCP.
APPENDIX F

8. The campus HR Office will have 20 (twenty) working days to provide the employee with written notice setting forth the reasons as to why the request was either approved or disapproved. A copy of this notice shall be provided to the UMPSA designated representative. In the event the campus HR Office fails to respond within 20 (twenty) days and there is no mutual agreement to extend the time limits, the employee may advance the matter to the next level of this procedure by filing written notice to the System Appeals Committee (SAC).

9. If the unit member is dissatisfied with the campus HR Office decision, the unit member may file a written appeal to the SAC within 20 (twenty) working days from receipt of the denial from the campus HR Office. The unit member's appeal shall state exactly what part of the campus HR Office decision they are appealing.

10. The SAC shall consist of one representative from the Association and one representative from the System. The SAC shall provide the unit member with a written response within 30 (thirty) working days.

11. If the SAC is able to reach consensus that the job has or has not changed significantly, they shall inform the campus HR, the unit member and the supervisor of their findings. Such findings shall be final and binding and may include any changes to any Factor Rating or a change in Job Family. The campus HR Office shall implement the findings of the SAC and will compute any increase in salary and will communicate that determination to the supervisor and the unit member and Chair of the Association Salary Committee. Any change shall become effective on the date the completed review request was submitted by the unit member to the appropriate supervisor. If the SAC denies the request, said denial will end the review process.

12. If the SAC is unable to reach consensus, the appeal will be forwarded to the single arbitrator selected by the parties to hear such appeals. If the arbitrator determines that there has not been a significant change in the job duties and responsibilities, the arbitrator shall deny the appeal. The arbitrator's decision shall be binding and no other avenue, including Article 15 – Grievance procedure, will be available to the unit member to appeal the denial. If the arbitrator approves the appeal, the campus HR Office will calculate the salary band and placement in the band and communicate any change to the unit member. Any change shall become effective on the date the completed review request was submitted by the unit member to the appropriate supervisor. The selection of the arbitrator shall be subject to periodic review.

13. Employees shall be granted release time to present their own appeal or serve on the SAC. The System agrees to provide training to those unit members who are designated to serve on the SAC.

14. Any fees charged by the impartial arbitrator shall be borne equally by the System and the Association.

15. All reviews shall be filed within the time limits set forth or the review shall be deemed to have been resolved by the decision at the prior step. The time limits herein may be extended by mutual agreement of the System and Association.

16. Should a request for review result in the granting of an increase in salary, the unit member's manager may be allowed to eliminate the assigned duties that resulted in the granting of the increase. The employee will receive compensation from the date of the employee request for review until the duties are actually taken away.

17. Article 17 (C) (2) of the Collective Bargaining Agreement shall be amended to read, “A unit member who believes she/he has been assigned significant additional responsibilities may request consideration for an increase as described in the Memorandum of Understanding dated February ___ 2006.”

18. In the event there is any conflict between this Memorandum of Understanding and the Professional Agreement, this Memorandum of Understanding shall be controlling.
APPENDIX F

19. The Association and System agree to meet and confer on an as needed basis to discuss issues related to the implementation and application of the Review Protocol.

20. No later than October 31 of each year, the University System shall provide to the Association a data file containing the name, campus address, position, job family, point factor count, wage band and salary of all members of the unit. Those members of the unit who are new shall be grouped by their start date.

21. Commencing with the effective date of this agreement, the University System agrees to provide the Association with a quarterly report of all new employees in the unit. This report shall also contain the job factor points, wage band assignment, actual salary.

This appendix is designed to present the definition of terms frequently used in the Salaried Employee Classification and Compensation Program. They are provided for information purposes and reflect current thinking on any given issue but are not controlling.

Position Description Questionnaire (PDQ) - Document used by employees and supervision to determine the actual duties, skills and elements of a given position

Point Factor Instrument (PFI) - Scoring sheet for the PDQ

Quartile - Salary bands are divided into sections, each individual section represents a quartile

SECCP - Salaried Employee Classification and Compensation Program

Significant Change in Duties and Responsibilities - Is present when either:

1. changes will result in increases in at least two factor ratings on the PFI and at least a 10% increase in the point value of the position, or

2. a change in Job Family assignment that affects the salary band

3·2·06
Date

F. Andrew Henry
University of Maine System

2/28/2006
Date

Kerry F. Sullivan
University of Maine Professional Staff Association

MEA/NEA
Appendix G

Memorandum of Understanding

This Agreement ("Agreement") is made by, between and among the University of Maine System, a body politic and corporate and an instrumentality and an agency of the State of Maine with offices in Bangor, Maine, (hereinafter "University"), the Associated C.O.L.T. Staff of the Universities of Maine (ACSUM), MEA/NEA, an employee organization with a place of business in Bangor, Maine, and the Universities of Maine Professional Staff Association (UMPSA), MEA/NEA, an employee organization with a place of business in Bangor, Maine hereinafter ("Associations"). For valuable considerations, and in consideration of the mutual promises and covenants contained herein, the University and the Association hereby agree as follows:

1. The University Telecommuting Guidelines dated December 10, 2008 are hereby amended as follows for the purpose of approving telecommuting agreements for employees represented by the Association:

   In the event that more than one unit member in the same classification and the same department wishes to participate in the telecommuting program of the University and in all other aspects they possess equal qualifications, the most senior unit member shall receive the telecommuting assignment, if both cannot be approved.

   This agreement shall be in full force and in effect until June 30, 2011 and shall be incorporated as an appendix to the parties' successor collective bargaining agreement.

2. It is hereby affirmed that this document represents the agreement reached by the parties in their discussions over the telecommuting policy. No other agreements, promises or inducements are made or applied. This Agreement represents the totality of the understandings.

3. In the event that this Agreement conflicts with any provision of the collective bargaining agreement between the Association and the University, this Agreement shall be controlling.

4. By signing below, the parties witness their agreement to all the terms and conditions set forth in this Agreement.

[Signatures]

7-15-09
Date
University of Maine System

6-29-09
Date
Associated C.O.L.T. Staff of the Universities of Maine

7-15-09
Date
Universities of Maine Professional Staff Association
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*UMS current methodology for Tiering can be found on the UMS Benefits webpage at: http://www.maine.edu/system/hr/medicalqip.php. Current UMS criteria may change as UMS refines the criteria in conjunction with the Maine Health Management Coalition and the Employee Health Plan Task Force (EHPTF).*
January 16, 2014

Jennifer Perry
UMPSA Chief Negotiator
University of Maine
Orono, ME 04473

Dear Ms. Perry:

The parties have discussed the implementation of the extraordinary pay increase portion of the cohort pay processing. Due to concerns expressed by the UMPSA bargaining unit, the University of Maine System will be reviewing proposed extraordinary pay increases from each University prior to their implementation. The University of Maine System's review is to check for and address any inconsistencies that may be reflected in its review of the recommended increases.

The University of Maine System will share with UMPSA the final number of extraordinary pay increases before or upon implementation.

Sincerely,

Mark R. Schmelz