



**HPAE Local 5186 - Registered Nurses
Summary of 2021 Tentative Contract Agreement
Membership Meeting - July, 6 2021**

**The Bargaining Committee Recommends the
Membership Vote YES to Ratify the Agreement.**

Our Union Proposals Won!

- Duration of Contract: 3 years
- Won 3% cumulative raises for **2021**: move two experience steps plus across the board increase totaling 3%
**Off the steps and per diems 3% across the board*
- Won 3% cumulative raises for **2022**: move two experience steps plus across the board increase totaling 3%
**Off the steps and per diems 3% across the board*
- Won 3% cumulative raises for **2023**: move two experience steps plus across the board increase totaling 3%
**Off the steps and per diems 3% across the board*
- For ICU, OR, ED and Cath Lab/Special Procedures: **\$6/hr** differential for all hours worked (including if qualified nurses float there, they can receive float pay and \$6/hr)
- For all other units: bonus shift increases to **\$25/hr** (remains \$20/hr for ICU, OR, ED and Cath Lab/Special Procedures)
- Increase in call pay by \$1.00/hr. **from \$10.00/hr. to \$11.00/hr.**

IN ADDITION TO ALL OF THE ABOVE:

- Health and Safety Language: standing items in Labor Management on PPE inventory, PPE training and education, and workplace exposure after OSHA complaint.
- Stronger staffing language to improve staffing: reduction of 1:6 on Med-Surgical night shifts.

WHAT MANAGEMENT WANTED AND WHAT WE DEFEATED

Initial wage proposal of 0.5% per year

Health insurance: increases of up to 35% in employee contributions per year.

Peri-op forced overtime to finish cases on call - defeated

Downstaffing up to four shifts per four week contract – we held our limit of 24 hours per four week schedule in the contract

Elimination of Resource RN on 3T, 5S, and 6T

Elimination of Assistant Nurse Manager in Endo and OR

Shift rotation without limits – now four week limit, inverse seniority, voluntary first, emergency only

On-call: management wanted to reduce on-call minimum to 3 hours instead of 4 hours (current contract language)

Charge nurses required to take patient assignment – we kept our limits in the contract

Permanent reduction of Emergency Room numbers from 7-9-7 to 5-8-5. Instead one year reduction to 6-8-6 due to reduced ED census with mediation and arbitration to revisit numbers in June 2022

Current Contract: ALL language in contract remains unless specifically changed in the tentative agreements.

*Added CDMP to contract removed obsolete depts (TCU, MCH, Case mgmt., etc)

*1 hour notice of cancellation of overtime

*no floating for nurses new to practice or specialty for six months

*Change in downstaffing: Volunteers first. Then Agency (non contract), then bonus, OT, per diem who have met their requirement, agency (contract), part time on extra shifts, then involuntary full time on a rotating basis. Downstaffing practice from ICU (on “taking turns” and even distribution of downstaffing) for whole house

*You may VOLUNTEER to leave early (downstaffing) after 50% of your shift

*During a layoff, if a nurse chooses a specialty area, you will be entered into the Nurse Training Tuition Forgiveness program as new hire, but at 75% of the cost

*compliance with state law on flu vaccine, military leave, and non-emergency foreseeable use of NJ sick leave (can be declined)

*holiday requested off – rotated off year to year, unless coverage or staffing allow

*priority summer vacation requests move to March 15 instead of April 1.

Health Insurance Plan Changes:

- Maintain the current plan without increased contributions or other changes through 12/31/21. Effective 1/1/22, the plan year will be the calendar year. All negotiated changes will become effective 1/1/22.
- All Bi-weekly employee health insurance contributions are pre-tax
- Raise deductible from \$750/\$1500 to \$850/\$1,700 (single/family)
- Increase office visit co-pay from \$40 to \$50
- Increase emergency room coinsurance from 20% to 25%
- Increase in-network coinsurance from 20% to 25%
- Move to Horizon Direct Access network. Overlap with current network is 95%. More information is available at https://doctorfinder.horizonblue.com/dhf_search (Click continue as guest then choose medical. Select Direct Access as your plan and choose a zip code and then a provider. See also: <https://www.horizonblue.com/members/plans/medical-plans/horizon-direct-access>. See attached information outline.
- Employees now contribute approximately 20% of the cost. This is well below national averages. According to the US Bureau of Labor Statistics, in 2020, the average employee contribution for family coverage was 33%.
- Accordingly, Christ and HPAE agree the annual increase in contributions from 20% to 25% for employee only coverage and from 12% to 18% for all tiers of dependents coverage (employee plus 1 and employee plus 2 or more). Note that an 18% increase of 20% of the cost is only 3.6% of the cost.

MANAGEMENT INITIALLY PROPOSED:***SINGLE COVERAGE TO INCREASE BY 35% PER YEAR****\$234 for full time per pay period by 2024****\$544 for part time per pay period by 2024*****DEPENDENT COVERAGE TO INCREASE BY 25% PER YEAR****Employee +1 \$311 and employee +2 \$616 for full time per pay period by 2024****Employee + 1 \$723 and employee +2 \$1431 for part time per pay period by 2024**

Full time		Full time	Full time	Full time
Current Contributions		Jan 1, 2022 Contributions	1/1/2023 contributions	1/1/2024 contributions
Bi-weekly		Bi-weekly	Bi-weekly	Bi-weekly
Single - \$95.23	Increase by 25%/year	\$119.04	\$148.80	\$186.00
Employee +1 - \$159.47	Increase by 18%/year	\$188.17	\$222.05	\$262.01
Employee + 2 -\$315.60	Increase by 18%/year	\$372.41	\$439.44	\$518.54
Part-time		Full time	Full time	Full time
Current Contributions		Jan 1, 2022 Contributions	1/1/2023 contributions	1/1/2024 contributions
Bi-weekly		Bi-weekly	Bi-weekly	Bi-weekly
\$221.17	Increase by 25%/year	\$276.46	\$345.58	\$431.97
\$370.43	Increase by 18%/year	\$437.11	\$515.79	\$608.63
\$733.08	Increase by 18%/year	\$865.03	\$1,020.74	\$1,204.47

All Dental plans (DMO, PPO) bi-weekly employee contributions will increase by 10% per year from current amounts

DMO	Full & Benefits Eligible Part Time	Full & Benefits Eligible Part Time		Full & Benefits Eligible Part Time		Full & Benefits Eligible Part Time	
	Current Contributions	10% increase 1/1/22 - 12/31/22	\$ Change	10% increase 1/1/22 - 12/31/22	\$ Change	10% increase 1/1/22 - 12/31/22	\$ Change
	Bi-Weekly	Bi-Weekly		Bi-Weekly		Bi-Weekly	
Employee	\$ 3.75	\$ 4.13	\$ 0.38	\$ 4.54	\$ 0.41	\$ 4.99	\$ 0.45
EE & Plus 1	\$ 7.51	\$ 8.26	\$ 0.75	\$ 9.09	\$ 0.83	\$ 10.00	\$ 0.91
EE & Plus 2 or more	\$ 11.26	\$ 12.39	\$ 1.13	\$ 13.62	\$ 1.24	\$ 14.99	\$ 1.36
PPO	Full & Benefits Eligible Part Time	Full & Benefits Eligible Part Time		Full & Benefits Eligible Part Time		Full & Benefits Eligible Part Time	
	Current Contributions	10% increase 1/1/22 - 12/31/22	\$ Change	10% increase 1/1/22 - 12/31/22	\$ Change	10% increase 1/1/22 - 12/31/22	\$ Change
	Bi-Weekly	Bi-Weekly		Bi-Weekly		Bi-Weekly	
Employee	\$ 7.51	\$ 8.26	\$ 0.75	\$ 9.09	\$ 0.83	\$ 10.00	\$ 0.91
EE & Plus 1	\$ 13.15	\$ 14.47	\$ 1.32	\$ 15.91	\$ 1.45	\$ 17.50	\$ 1.59
EE & Plus 2 or more	\$ 20.65	\$ 22.72	\$ 2.07	\$ 24.99	\$ 2.27	\$ 27.49	\$ 2.50

Prescription Drug Plan

- Co-pay proposal (G = Generic, PB = Preferred Brand, NPB = Non-Preferred Brand):

RX Copays	
Retail (30 DOS)	G: \$6.00 PB: \$50.00 NPB: \$70.00
Retail Maintenance (90 DOS)	G: \$16.00 PB: \$90.00 NPB: \$130.00
CarePoint Health Pharmacy (BMC and Christ) 30 DOS	G: \$3.00 PB: \$45.00 NPB: \$60.00
CarePoint Health Pharmacy BMC and Christ) 90 DOS	G: \$10.00 PB: \$80.00 NPB: \$110.00

Notes: Generic Copays are reduced by \$4.00.

Preferred Brand and Non-Preferred Brand Copays are increased by \$10.00.

Copays will remain at these levels for the life of the new agreement.

- Transform Diabetes Care. THIS PROGRAM IS PURELY VOLUNTARY. It is offered by CVS. It is designed to work with patients who have diabetes with the goal of improving their diabetes (i.e. lowering A1C) as well as their overall health. CVS uses all available data to create a custom care plan for each patient. CVS works with the patient and MD to close care gaps and address adherence issues that are often a challenge for those with diabetes. The program includes face-to-face counseling, telephonic outreach, as well as digital connection points via their app and connected blood glucose meter. Their digital app offering also works to address things like hypertension management and nutritional support. The goal of the program is to work with the patient in a “holistic approach” rather than only focusing on the diabetes alone.
- CVS Maintenance Choice: This is a pharmacy network option through which members get 90 day supplies of medication (after 2 grace fills) at a CVS retail or mail pharmacy for medications used on an on-going or “maintenance” basis. Claims filled at CVS pharmacies in 90 day supplies receive the best discounts and rebates, saving members and the plan money.
- Align Retail 90/ Mail Copay to 2.5 x Retail Copay: Currently, RX copays for 90 day or 3 month supplies are equal to 2x the retail 30 day copay. As a result, the plan loses a full 30 day copay each time someone fills a 90 day Rx. The best practice is for copays for 90 day supplies to be at least 2.5x the retail 30 copay.