

**University of Chicago Medical Center**  
**Fourth Economic Proposal and Response to NNOC/NNU**  
**Economic Proposals**

UCMC reserves the right to supplement and/or correct these proposals at an appropriate time. UCMC notes that NNOC/NNU has not yet presented all of its other proposals, including seniority. UCMC reserves the right to make additional proposals after receiving all of NNOC/NNU's proposals

**Provided that NNOC/NU withdraws its proposals to change the language of Section 10.2 (benefits changes, copays, deductibles) and to increase or add overtime (double time), shift, weekend, on call, and other differentials and add ons to other elements of pay (NNOC 4.4, 12.3, 12.5, 12.7); UCMC withdraws proposals to change Sections 4.4, 12.4)**

**NEW PACKAGE PROPOSAL OF September 5, 2019**

**NEW UCMC PACKAGE PROPOSAL OF SEPTEMBER 5, 2019**

**Modify Sections 5.4 and 5.5 Article 5 Regarding Holidays as follows:**

**Section 5.4                   Holidays Worked**

An eligible employee, except one in the Flight Nurse or Nurse Associate classification, who is required to work on a Regular Medical Center holiday, shall be compensated at the appropriate overtime rate. Flight Nurses or Nurse Associates who work on a holiday shall receive a compensating personal holiday off with pay.

Such employees shall be given another personal holiday off under Section 5.7 with pay (a substitute holiday). Nurses on designated or voluntary on-call who are called in and work a majority of the shift's hours are eligible to request a substitute personal holiday.

**Section 5.5                   Holidays Falling on Employee's Day Off**

If a regular Medical Center holiday falls on an employee's regularly scheduled day off (except that this Section shall not apply to employees in the Nurse Associate classification), (s)he shall be given another personal holiday day off under Section 5.7 with pay (a substitute holiday).

**Modify Section 9.4 as follows to provide for use of vacation and personal time during periods of illness:**

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Section 9.4                      Sick Leave Pay

Working hours lost because of the employee's illness or injury, not otherwise compensable shall be charged against the employee's accrued sick leave. Once such time is exhausted, accrued vacation and personal holiday hours shall be utilized. Such hours shall be compensated at the base straight-time hourly rate until the employee's accrued leave is exhausted. No compensation shall be paid for periods of absence in excess of the sick leave, vacation, or personal holiday time accrued prior to such absence.

Employees unable to report to work shall call in at least two (2) hours before the starting time of their scheduled shift to work. Working time lost by employees who fail to provide timely notice of absence shall be treated as an unexcused absence.

**UCMC Offer of August 23, 2019: Provided NNOC/NNU agrees to proposed section 9.4, UCMC modifies its position on Section 10.1 (Package Deal)**

**Section 10.1    Disability Benefits**

The Medical Center agrees to provide disability coverage for employees who have completed their probationary period. Following is a general description of the benefits and conditions of this Plan:

A.     Any non-probationary employee who is absent from work because of a non-work connected accident or illness will be entitled to short-term benefit payments beginning the **fifteenth (15th) day of such absence or at the completion of time covered by accrued sick leave, vacation, and personal holidays, whichever is the longer period. Short-term disability shall be paid at the rate of fifty percent (50%) of base salary, to a maximum of twenty-six (26) weeks.**

B.     Any non-probationary employee enrolled in the long-term disability plan, who is absent from work because of a non-work connected accident or illness for more than **twenty-six (26) weeks**, will be entitled to long-term benefit payments pursuant to the provisions of the long-term disability plan, but not less than sixty percent (60%) of base salary. (Prior to receiving long-term disability payments, the employee must exhaust all paid time and short-term disability, both of which will be credited toward becoming eligible for long-term disability.)

A full description of the Plan is available upon request from the Human Resources Benefits Office.

**NEW UCMC Package Proposal of August 23, 2019; packaged with changes to Section 9.4.**

**Note: Because of the need for a new open enrollment period to effectuate the change, changes to STD and start of LTD language will be effective following the next scheduled open enrollment (May 2020 for July 1, 2020).**

**Modify Article 10 as follows, which would apply to both existing represented and newly represented nurses:**

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**ARTICLE 10 BENEFITS**

**Section 10.1 Disability Benefits – See Proposal Above.**

**Section 10.2 Benefits**

During the term of this Agreement nurses shall remain eligible to participate in the following benefit programs to the same extent that such programs are applicable to all Medical Center's personnel. If during the term of this Agreement, the Medical Center decides to remove or change any of the benefits provided under the plans set forth below, the Medical Center will give NNU notice of the Medical Center's planned design changes as soon as practical and at least fourteen (14) days before notice is provided to nurses of UCMC's intention to implement these changes for nurses (or fourteen (14) days before implementation if sooner). This obligation shall not apply to routine plan administrative changes, but only those that will change a nurse's benefits. If either party requests a meeting within ten (10) days of such notice, parties will meet within fourteen (14) days to bargain about the effects of such changes (but UCMC will not be obligated to bargain over its decision to make the change). The effects-only bargaining provided for under this provision will not delay UCMC's implementation of the changes or the effective date of any changes.

**[UCMC Package Proposal of August 23, 2019 UCMC offers to withdraw above proposed changes and retain current CBA language as noted above if NNU withdraws its proposed changes to language of Section 10.2, both sides leaving open proposals regarding medical insurance premiums.]**

- A. Employee Retirement Income Plan
- B. Group life Insurance Program
- C. Medical Insurance
- D. Dental Insurance
- E. Vision Service Plan (VSP)
- F. Flexible Spending Accounts (medical, dependent care and transportation)
- G. Long Term Disability Plan
- H. Personal Accident Insurance Plan

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- I. Tuition Reimbursement Plan (University of Chicago courses for employees and their children)
- J. Employee Assistance Program

Through June 30, 2020, employee contribution rates for nurses will not change from the rates in effect under the prior contract.

Thereafter, the following premium shares shall be in effect:

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**EMPLOYEE PREMIUM SHARE (FULL TIME EMPLOYEES)**

Plan	Tier	7/1/2019 (FY20) (NO CHANGE)	7/1/2020 (FY 21)	7/1/2021 (FY 22)	7/1/2022 (FY 23)	7/1/23 (FY 24)
UCHP <sup>1</sup>	Employee Only	21.0% NC	22.0%	23.0%	23.0% (NC)	23.0% (NC)
	Employee + Spouse	24.8% NC	25.0%	25.0% (NC)	25.0% (NC)	25.0% (NC)
	Employee + Child(ren)	25.0% NC	25.0% (NC)	25.0% (NC)	25.0% (NC)	25.0% (NC)
	Employee + Family	21.0% NC	22.25%	23.5%	24.5%	25.0%
BCBS PPO <sup>1</sup>	Employee Only	21.0% NC	22.0%	23.0%	23.0% (NC)	23.0% (NC)
	Employee + Spouse	25.0% NC	25.0% (NC)	25.0% (NC)	25.0% (NC)	25.0% (NC)
	Employee + Child(ren)	25.0% NC	25.0% (NC)	25.0% (NC)	25.0% (NC)	25.0% (NC)
	Employee + Family	21.0% NC	22.25%	23.5%	24.5%	25.0%
Advantage	Employee Only	12.0 NC	13.0%	14.0%	14.5%	14.5% (NC)
	Employee + Spouse	13.0 NC	14.5	16.0%	17.5%	18.5%
	Employee + Child(ren)	13.0% NC	14.5%	16.0%	17.5%	18.5%
	Employee + Family	13.0% NC	14.5%	16.0%	17.5%	18.5%
Standard Plan <sup>2</sup>	Employee Only	8.5% NC	8.5% NC	8.5% NC	8.5% NC	8.5% NC
	Employee + Spouse	10.0% NC	10.0% NC	10.0% NC	10.0% NC	10.0% NC
	Employee + Child(ren)	10.0% NC	10.0% NC	10.0% NC	10.0% NC	10.0% NC
	Employee + Family	10.0% NC	10.0% NC	10.0% NC	10.0% NC	10.0% NC

Note: Beginning in the plan year after rates for full-time nurses for any plan reach twenty-three percent (23%) of the total health insurance premium cost for single coverage or twenty-five percent (25%) of the total health insurance premium cost for all other coverages (14.5% individual and 18.5% other coverages for Advantage and 8.5% individual and 10.0% other coverages for Standard Plan), then as to that plan, and for each subsequent plan year, the monthly contribution for full and part-time nurses covered by the plan shall increase by the lesser of the actual increase in the cost of their insurance or ten percent (10%) of the nurse's prior year's cost, whichever is less.

**PART-TIME EMPLOYEES**

Plan	Tier	7/1/2019 NC	7/1/2020 (FY 21)	7/1/2021 (FY 22)	7/1/2022 (FY 23)	7/1/2023 (FY24)
UCHP	Employee Only	39.2% NC	40.0%	40.0% NC	40.0% NC	40.0% NC
	Employee + Spouse	40.0% NC	40.0% NC	40.0% NC	40.0% NC	40.0% NC
	Employee + Child(ren)	40.0% NC	40.0% NC	40.0% NC	40.0% NC	40.0% NC
	Employee + Family	37.0% NC	38.0%	39.0%	40.0%	40.0% NC
BCBS PPO	Employee Only	40.0% NC	40.0% NC	40.0% NC	40.0% NC	40.0% NC
	Employee + Spouse	40.0% NC	40.0% NC	40.0% NC	40.0% NC	40.0% NC
	Employee + Child(ren)	40.0% NC	40.0% NC	40.0% NC	40.0% NC	40.0% NC
	Employee + Family	37.0% NC	38.0%	39.0%	40.0%	40.0% NC
Advantage	Employee Only	24.0% NC	25.5%	27.0%	28.0%	29.0%
	Employee + Spouse	26.0% NC	29.0%	32.0%	35.0%	37.0%
	Employee + Child(ren)	26.0% NC	29.0%	32.0%	35.0%	37.0%

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	Employee + Family	26.0% NC	29.0%	32.0%	35.0%	37.0%
Standard Plan <sup>2</sup>	Employee Only	17.0% NC	17.0% NC	17.0% NC	17.0% NC	17.0% NC
	Employee + Spouse	20.0% NC	20.0% NC	20.0% NC	20.0% NC	20.0% NC
	Employee + Child(ren)	20.0% NC	20.0% NC	20.0% NC	20.0% NC	20.0% NC
	Employee + Family	20.0% NC	20.0% NC	20.0% NC	20.0% NC	20.0% NC

Note: For part-time nurses, the same rules as noted above for full time employees shall apply when the nurse's portion of full premium reaches forty percent (40%) (29% individual and 37.0% other coverages for Advantage and 17% individual and 20% other coverages for Standard Plan).

**UCMC Package offer of September 6, 2019:**

1. **UCMC withdraws proposals regarding a spousal surcharge (struck through below);**
2. **NNOC/NNU agrees to the premium percentages above and that all proposals regarding Section 10.2 are resolved based on the language here;**
3. **Both parties agree that nurses who accept UCMC medical benefits through a spouse or other relative will not have waived benefits and will not be eligible to receive an additional lump sum payment or additional wages paid to those who elect not to take UCMC benefits as provided in Section 12.3.**

There will be four (4) monthly contribution levels for medical, dental and vision as follows: Employee Only; Employee and Spouse (including a Same Sex Spouse and/or Civil Union Partner); Employee plus Child(ren); and Family.

The Medical Center contributions toward the medical and dental plan coverage are applicable only for employees who are in active pay status, except as provided in Section 9.3 and Section 11.5 of the Agreement.

Health insurance coverage for new employees will begin the first (1<sup>st</sup>) month following the first thirty (30) days of employment.

**Revised UCMC Proposals of August 23, 2019; REVISED MEDICAL CENTER PROPOSAL OF SEPTEMBER 5, 2019; REVISED UCMC PROPOSAL OF SEPTEMBER 6, 2019.**



**Modify Article 12 to read as follows, which would apply to both existing represented and newly represented nurses (note for ease of reading, percentages are not entered in redline):**

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## **ARTICLE 12 COMPENSATION**

### **Section 12.1(a) Salaries**

- A. Effective on the first day of the first full payroll that begins immediately following ratification, all rates in the attached Schedule pay rate charts will be increased by one and three quarters percent (1.75%), for all hours worked.
- B. Effective on the first day of the first full payroll period that begins immediately on or after the first anniversary of ratification (Year 2), all rates in the attached Schedule pay rate charts will be increased by an additional one and three-quarters percent (1.75%), for all hours worked.
- C. Effective on the first day of the first full payroll period that begins immediately on or after the second anniversary of ratification (Year 3), all rates in the attached Schedule pay rate charts will be increased by an additional one and three-quarters percent (1.75%), for all hours worked.
- D. Effective on the first day of the first payroll that begins immediately on or after the third anniversary of ratification (Year 4), all rates in the attached Schedule pay rate charts will be increased by two percent (2.0%), for all hours worked.
- E. The wage schedules attached as Schedule A shall be updated to reflect these changes.
- F. Nurses in newly represented positions (other than IHR) not previously covered by this Agreement as of April 1, 2019, shall be eligible to receive the same one and a half percent (1.5%) annual increases to their base hourly wage/salary as set forth above but shall not be covered by the wage charts attached to this Agreement or by the provisions of this Agreement describing differentials, incentives, overtime, and other pay terms except where expressly agreed in writing that expressly refers to this group or portion thereof.

The In-House Registry (IHR) hourly rate of pay for nurses in positions covered by this Agreement as of April 1, 2019, will be forty-six dollars (\$46.00) effective the first full pay period on or after ratification.

**REVISED UCMC OFFER OF SEPTEMBER 6, 2019: UCMC is open to continuing to discuss wages as further progress is made on other economic proposals.**

**Modify Article 12.2 as follows, which would apply to existing represented nurses (newly represented nurses would remain ineligible for incentive pay):**

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## **Section 12.2 Incentive Compensation**

For nurses hired and working continuously in positions covered by the prior NNOC/NNU collective bargaining agreement as of the date of the last payroll period that falls immediately prior to ratification of the 2019 Agreement and eligible for incentive pay as of that date, the following incentive pay provisions shall apply.

For the purposes of this section, the rate of pay for the first twenty four (24) straight time hours worked in a payroll week will be referred to as the “normal base rate”.

In any payroll week, a staff nurse works twenty-four (24) straight time hours, the next sixteen (16) straight time hours worked in that payroll will be paid at a rate that equals the nurse’s normal base rate plus an amount equal to an additional twenty percent (20%) above the “normal base rate” in effect as of the last day of the payroll period that falls immediately prior to the ratification of the 2019 Agreement and the additional pay thus calculated will be referred to as “incentive compensation”. The incentive compensation rate will not increase thereafter. All hours paid but not worked will be paid at the “normal base rate” and will not count toward qualifying or receiving the “incentive compensation”.

The “incentive compensation” is a calculation based on multiplying 0.20 times the “normal base rate” in effect for that nurse on the payroll period that immediately precedes ratification times the number of hours worked in a workweek beyond twenty four (24).

For example the calculation would be as follows for a 1.0 FTE employee making \$40.00 per hour as of the payroll period immediately prior to ratification:  $0.20 \times \$40 \times 16 \text{ hours} = \$128.00$  “incentive compensation”.

To determine your incentive overtime rate see Section 4.4.

Incentive compensation will apply only to Registered Nurses working in the classification of Staff Nurse, and Operating Room Nurse as of the last day of the payroll period that fell immediately prior to the date of ratification of the 2019 Agreement and were eligible for incentive pay as of that date. Incentive pay will not be paid to nurses hired or transferred into an incentive eligible position after that date for any reason. Nurses presently eligible to receive incentive pay who voluntarily transfer and/or are promoted into a position not covered by incentive compensation will not be eligible for incentive pay if they later return to a “grandfathered” incentive pay position for any reason.

**NO CHANGE**

**Modify Section 16.2 as follows, which would apply to existing and newly represented nurses:**

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### **Section 16.2 Tuition Reimbursement**

To encourage the self-development of nurses in ways of value to the Nursing Department, the Medical Center will reimburse a nurse for the tuition fee paid for an approved course of education or training given by an accredited institution, taken for credit and successfully completed by the nurse. Registered Nurses shall be eligible for tuition reimbursement on a basis as follows:

- A. All full-time nurses who have completed their probationary period shall be eligible for one hundred percent (100%) reimbursement of tuition fees paid for the B.S.N. and M.S.N., subject to the conditions set forth in this Section.
- B. All full time nurses who have completed their probationary period shall be eligible for seventy five percent (75%) reimbursement of tuition fees paid for the Ph.D./Doctorate in Nursing (DNP), subject to the conditions set forth in this Section.
- C. All part time nurses who have completed their probationary period shall be eligible for fifty percent (50%) reimbursement of tuition fees paid for the B.S.N., M.S.N. and Ph.D./Doctorate in Nursing (DNP), subject to the conditions of this Section.
- D. The nurse must be matriculated or be an acceptable candidate for matriculation in an NLNAC or CCNE approved program leading to a Baccalaureate or Master's degree in Nursing or to a Doctorate in Nursing or a related area. The nurse will submit:
  - 1. A statement from an NLNAC or CCNE approved program that s/he has been accepted for matriculation or;
  - 2. A statement, such as the curriculum design, from an NLNAC or CCNE approved program in which s/he intends to get a degree showing that the course is a prerequisite for nursing and required for completion of the program.
- E. When providing this benefit, the Medical Center may designate (and periodically change) a preferred list of educational institutions and/or networks of such institutions offering these degrees to support nurses' educational development. Nurses who elect to attend a school outside of the preferred list designated by the Medical Center after the announcement date may still attend that school but will have the cost of their annual tuition benefit capped at \$4,000 annually. A current nurse at the Medical Center who is presently eligible for tuition reimbursement and enrolled in an institution outside of the network at the time a network school is announced and/or changed will be permitted to continue taking courses at that institution and receive full reimbursement as provided

above in full without regard to these dollar limits until the degree for which the nurse is currently enrolled is completed.

**August 23, 2019: UCMC withdraws reimbursement obligation contingent upon reaching agreement on preferred provider language.**

### **Remaining Proposals and Expiration**

This offer includes all tentative agreements signed by both parties. All other NNOC/NU economic proposals are rejected.

**The Agreement will expire four (4) years from the date of ratification, and Article 21 shall be updated to reflect this date.**