

CONTRACT SUMMARY (NMC) – 2017

Going into this year's negotiations, the primary goal of the Negotiation Team was to continue to increase the base wages and maintain insurance at the same cost. We also wanted to obtain a longer term contract rather than going one year at a time. We believe that we have reached a Tentative Agreement with the County that successfully achieves our most important goals. In the area of wages and insurance the contract is the following:

Term: February 1, 2017 – January 31, 2020 (3-years)

3-year contract for 11% compounded to = 11.15%

Current Top Step RN II = \$63.68 Below will be the new top step base salary rates.

1.5% - (\$64.64) Following ratification by MCRNA and the County. (2/4/17)

1.5% - 7/17 (\$65.61)

2.0% - 1/18 (\$66.92)

2.0% - 7/18 (\$68.26)

2.0% - 1/19 (\$69.62)

2.0% - 7/19 (\$71.01)

On July of 2013 a top step RN earned \$52.80/hr. By the end of this contract the same nurse will make \$71.01/hr. or an increase of \$18.21/hr. This does not factor in any longevity, education, certificate or other specialty pays. At the end of SVMH's current 5-year contract in March of 2019, a NMC top step nurse will only be making \$1.79/hr. less than their similar RN and our additional last 2% raise will still be coming a few months later. In the last several years, MCRNA has closed the gap significantly on SVMH and other surrounding hospitals.

More important, when the PERS pension is factored in it can be argued that a MCRNA nurse is doing better than those employed at private hospitals. A PERS pension is guaranteed and not dependant, like a 401K, on the stock market. For instance, an RN retiring with 25 years of service will make 50% of their salary. If someone upon retirement earns \$150,000/yr. they will retire at \$75,000/yr with a

2% PERS increase per year. This is substantially greater than the retirements of nurses working at facilities that are not part of PERS.

In the last 3 contracts MCRNA members, in addition to other benefits, have received raises equaling 25.4%. During this same period of time SEIU and most other County employees have collected 12% in wage increases.

Since the inception of MCRNA, it has been our aim to narrow the gap of what other nurses earn who work in neighboring private hospitals. This 11.15% wage increase acts to accomplish what has been our mission!

The other main goal was not to increase the premium contributions for insurance. This contract freezes the insurance contributions at the exact same rate it has been since the start of MCRNA. The other item added is that TCRN was added as a certificate for Trauma and ICU. Finally, due to the complete uncertainty regarding the status of the ACA (Obamacare) the County can request a re-opener no sooner than July 1, 2018 to discuss the impact of the changed circumstances. Any discussions would most likely extend well into the 3rd year of the contract.

To accomplish our goal of obtaining the wages and insurance, we needed to make some modifications to the contract. The Negotiation Team worked hard to mitigate the changes as much as possible. They are the following:

1. Call-off order changed to move RN's on OT status to 2nd on the list.
2. Part-time RN's in MIU will be called off before full-time if on an extra shift.
3. In the event of a call-off error the RN will receive 4 hours of straight time.
4. Workweek changed to comply with FLSA (PTO will not be part of the workweek).
5. Eliminate extra pay for the 10-hour rule, so all RN's are under the same rule.
6. Calls made for an unscheduled shift will be on a 4 hour notice.
7. RN's rescinding their OT waiver cannot work a position requiring a waiver.
8. Eliminate time and 1 ½ pay for working the Friday after Thanksgiving.