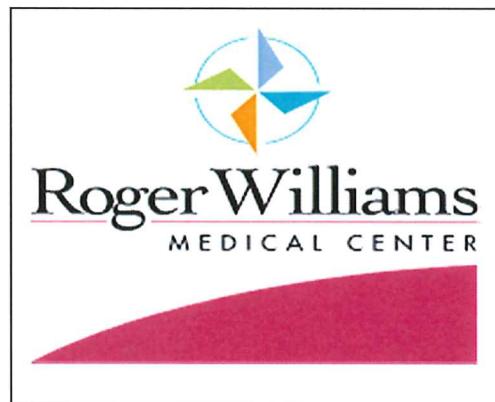


CONTRACT BETWEEN

PROSPECT CHARTERCARE,LLC
AND
UNITED NURSES & ALLIED PROFESSIONALS
LOCAL 5092

REGISTERED NURSES AGREEMENT
ROGER WILLIAMS MEDICAL CENTER

DECEMBER 1, 2022 THROUGH NOVEMBER 30, 2025



PURPOSES

The intent and purposes of this Agreement are to encourage harmonious relationships between the Hospital and the registered nurses it employs who are subject hereto; to promote and improve those relationships subject to their joint duties to the community and to the high standards of patient care; to clarify certain rights and privileges of the parties; to set forth and define rates of pay, economic benefits and other conditions of employment that shall apply to such employees; and to establish amicable processes for collective bargaining. The Union agrees that it will cooperate with the Employer and support its efforts to assure efficient operation, to serve the needs of the community, and to meet the highest of professional standards in such services.

Table of Contents

	Page
I. Recognition.....	4
II. Union Activities.....	6
III. Management Rights.....	9
IV. Continuity of Operations.....	9
V. Grievance and Arbitration.....	10
VI. Employment Status.....	12
VII. Hours of Work	18
VIII. Overtime	22
IX. Salaries and Differentials	22
X. Holidays	24
XI. Earned Time Off	25
XII. Insurance	28
XIII. Retirement	30
XIV. Leaves of Absence	30
XV. Other Benefits	33
XVI. Joint Committee.....	34
XVII. Health and Safety	35
XVIII. Separability	36
XIX. Printing Agreement	36
XX. Staffing	37

XXI.	Closures, Transfers, Consolidations and Mergers	37
XXII.	Duration	39
	Signature Page	40
	Memorandum of Agreement	41
	Appendix A -Wage Scales	42
	Appendix B- Per Diem Employees	46
	Appendix C-Units	49
	Appendix D – Educational Assistance/Loan Forgiveness.....	50
	Appendix E- Insurances.....	51

ARTICLE I. **RECOGNITION**

Section 1.1 Bargaining Unit. In accordance with the provisions of the certification of the National Labor Relations Board in Case No. 01-RC-288207, the Employer recognizes the Union as the sole and exclusive bargaining representative with respect to salaries, hours of employment and other conditions of employment for all full-time, regular part-time and per diem Registered Nurses employed by the Employer at its Roger Williams Medical Center located at 825 Chalkstone Avenue, Providence, Rhode Island, including Case Managers, Educators and Resource Registered Nurses, but excluding all other employees, including Nurse Practitioners; Clinical Nurse Specialists; ED Care Navigators – RWMC; Clinical Lead, Cancer Center; Wound Care Specialist; Clinical Research Nurse; managers; and guards and supervisors as defined by the Act.

Section 1.2 Scope of the Bargaining Unit and Agreement. The terms “employee” and “employees” as used hereinafter in this Agreement refer only to such persons employed by the Employer and covered by this Agreement.

Section 1.3 Definitions.

- (a) Full-time Employees. The terms “full-time employee” and “full-time employees” as used in this Agreement refer only to employees employed on a regular basis who are normally scheduled to work thirty-six (36) (12 hour shifts) or more hours per week or are normally scheduled to work thirty-two (32) (8 hour shifts) or more hours per week or who are normally scheduled to work forty (40) (10 hour shifts) or more hours per week.
- (b) Part-time Employees. The terms “part-time employee” and “part-time employees” as used in this Agreement refer only to employees employed on a regular basis who are normally scheduled to work at least sixteen (16) hours per week, but less than thirty-two (32) hours per week.
- (c) Per Diem Employees. The terms “per diem employee” and “per diem employees” as used in this Agreement refer only to employees who are employed on an “as needed” and “as available” basis in accordance with Employer work expectation guidelines; see Appendix B.
- (d) Temporary Employees. The terms “temporary employee” and “temporary employees” as used in this Agreement refer only to employees who are hired (i) to work for a specific period of time which normally will not exceed ninety (90) days or (ii) to

replace an employee who is on a leave of absence. Temporary employees are not included in the bargaining unit described in Section 1.1.

- (e) Unit. The term “unit” as used in this Agreement refers to a nursing unit in the Department of Nursing and to other departments within the Roger Williams Medical Center facility in which bargaining unit members’ work. The list of units as of the date of this Agreement is entered into is set forth in Appendix C.

Section 1.4 Nondiscrimination. The parties are mindful of their obligations under federal and state laws pertaining to discrimination and sexual harassment in employment and, accordingly, the Employer and the Union agree that neither will discriminate against any employee with respect to matters relating to employment because of such employee’s race, color, national origin, religion, sex, age, sexual orientation, gender identification, disability or activity with respect to the Union in violation of such federal or state laws.

No grievance alleging a violation of this section will be subject to arbitration pursuant to Step 4 of the Grievance and Arbitration Procedure (Article V) unless the grieving employee has not filed a claim/complaint with any governmental agency or in state or federal court and has agreed in writing that the contractual arbitration procedure will be the exclusive means by which the grieving employee may receive any remedy for the alleged violation of this section.

Section 1.5 New Registered Nurse Classifications. The Employer shall have the right to create or combine classifications and the Union expressly waives any right under federal law to bargain over such decisions. Should newly created or combined classifications perform as their primary duties the duties of one or more of the classifications covered by this Agreement, the Employer shall notify the Union of these new or combined classifications and the terms and conditions of employment applicable to these classifications shall conform to the terms and conditions of this Agreement. The Employer shall provide such notification to the Union at least thirty (30) days in advance and, upon request from the Union, meet with the Union and discuss the changes.

Section 1.6 Bargaining Unit Work. The performance of bargaining unit work by non-bargaining unit Employees shall not result in the erosion of the scope of the bargaining unit as set forth in Article 1 herein and shall not result in the displacement or layoff (defined as one shift or longer) of bargaining unit employees, unless there is an emergent situation, such as an act of God, preventing the Employer from being able to get a bargaining unit employee to perform the work within a reasonable period of time.

Section 1.7 Exempt Classifications The classifications of Case Manager and Educator are exempt classifications and, as such, employees in these classifications will not be eligible to receive overtime.

Section 1.8 Successors and Assigns

This Agreement shall remain in effect and shall be binding upon all successors and assigns of the Employer. The Employer shall include this requirement as a condition of sale or transfer of ownership or operation. Provided, however, that nothing herein shall operate to impose this Agreement on any employees not includable in the bargaining unit described in Article I hereof as a matter of law, or to prevent the discontinuance, or the reduction or transfer of operations to another entity or location.

ARTICLE II. **UNION ACTIVITIES**

Section 2.1 Participation in Union Activities. The Employer will advise all newly hired employees, at the time of their employment, that the Union is their bargaining representative. The Employer and the Union recognize the right of any employee to become and remain a member of the Union or to refrain from becoming and/or remaining a member of the Union, and neither party will interfere with any employee in the exercise of that right.

Section 2.2 New Hire Orientation. During the new hire orientation, Employer shall provide the President of Local 5092 or her/his designee with thirty (30) minutes to orient each new hire to Local 5092. The President/designee shall provide each new hire with a packet containing the following information: the Collective Bargaining Agreement, the Constitution and Bylaws, a list of Local Officers, a UNAP calendar, a UNAP promotional brochure, the most recent UNAP and Local newsletters, a history of the Local, a letter regarding the dues structure, the President's business card, and a UNAP badge holder. It is understood that the Employer is providing the President/designee this opportunity conditional upon the President/designee not saying or presenting anything to new hires which will place Roger Williams Medical Center or those associated with it in a negative light. Accordingly, the Union's right to speak at orientation may be terminated by the Employer, if the Employer determines that this condition has been violated. The Employer may have a representative present at each orientation by the Union President/designee.

Section 2.3 Union Representative. An authorized representative of the Union shall have reasonable opportunity to visit the Roger Williams Medical Center facility for the purpose of conferring with authorized representatives of the Employer and for the purpose of conferring for a reasonable period of time with a local Union representative and/or employee relative to any question arising under this Agreement. Any such visit with a local Union representative and/or employee shall not interfere with orderly operations at the Roger Williams Medical Center facility. Except in emergency circumstances, the Union representative shall make an appointment with a Human Resources designee in advance of any such visit to meet with a representative of the Employer and shall advise the Human Resources designee reasonably in advance of any such visit to confer with a local Union representative and/or employee. Upon

arrival at the Roger Williams Medical Center facility, shall be subject to the reasonable control of the Employer with respect to the time and place for such visit. This provision shall not be construed as permitting group meetings on the Employer's premises.

Section 2.4 Local Union Representatives. The Union agrees to appoint, and the Employer agrees to recognize the Union President, the Grievance Chairperson, and three (3) other grievance committee members as local Union representatives who may deal with the Employer concerning problems arising under this Agreement and grievances at Step 2 and above. The Employer agrees to recognize Union Vice Presidents and unit representatives designated by the Union as local Union representatives who may deal with immediate supervisors concerning problems in their units and Step 1 grievance. The Union will notify the Employer of the local Union representatives' and designees' unit designations and authority and any change in either.

One (1) local Union representative and one (1) other employees who attends a jointly scheduled grievance hearing or arbitration hearing will not lose any pay for his/her regularly scheduled hours because of such attendance.

Section 2.5 Union Activities on Employer Premises. Unless allowed by the Hospital, there shall be no Union meetings, and no other Union activities which interfere with or are incompatible with the Employer's operations on its premises.

Section 2.6 Bulletin Board Subject to space availability, the Union may locate one 2' x 3' bulletin board supplied by the Union in each locker room utilized by bargaining unit employees. Such bulletin boards shall be used for posting of notices of Union meetings, Union elections, Union social events, and information relating to employees' nursing practice/work. No Union notices will be posted at locations other than these bulletin boards.

Section 2.7 Dues Deductions. Once per month, the Employer agrees to provide a list containing the name, date of hire, date of termination, shift, weekly hours, unit/department, job title, and known contact information (address, phone number, email address) for all employees in the bargaining unit. Dues deductions shall be in the amounts certified by the Union and shall be made in accordance with the terms of written authorization received from the employee. Withheld amounts will be forwarded to the designated Union officer during the calendar month following the month in which the actual withholding occurs, together with the record of the amount and the names of those for whom deductions have been made. The Employer shall not be required to make deductions with respect to an employee for a workweek in which the employee is on an approved leave of absence or layoff, or for which the employee shall not have received net wages at least equal to the deductions. The Employer shall cease to make deductions upon the employee's termination, transfer to a position not covered by this Agreement, or upon revocation of the authorization by the employee.

The Hospital shall provide a monthly report to the Union containing the name, complete address, telephone number, email address, pay rate, title of position, the shift, the hours to be worked and the unit of the newly hired employee or employee who has had a change in status.

The Union shall indemnify, defend and save the Employer harmless against any and all claims, demands, suits, or other forms of liability that may arise out of, or by reason of, any action taken or not taken by the Employer for the purpose of complying with this Section.

Section 2.8 Union Security. All employees who are members of the Union on the effective date of this Agreement shall maintain their membership or pay agency fees during the term of this Agreement as a condition of continued employment.

Beginning either on the 60th calendar day following the beginning of employment or the 60th day following the effective date of this Agreement, whichever is later, an employee must become and remain a member of the Union in good standing or pay agency fees.

The Union shall indemnify, defend and save the Employer harmless against all claims, demands, suits, or other forms of liability that may arise out of, or by reason of, any action taken or not taken by the Employer for the purpose of complying with this Section.

Section 2.9 Union Leave. An employee who wishes to attend the Union's annual national professional issues conference, national convention, or state convention may request and shall be granted Union leave in conformance with the vacation request practices applicable to the unit in which the employee works. Vacation scheduling will take priority over requests for Union leave. Each immediate supervisor will determine the maximum number of employees who may be scheduled off at any time based on the immediate supervisor's determination of staffing needs. Employees who are granted Union leave may take time without pay or use accrued paid vacation, holiday, and personal time off.

At request of the Union, the President of the Local Union shall be permitted a minimum of one (1) and a maximum of two (2) workdays per month out of his/her regular non-holiday weekday work schedule to carry out the business of the local union and to administer the collective bargaining agreement. The President of the local union will not be required to use President's Leave days to attend collective bargaining negotiation sessions. At the discretion of the Local union, the President may take the leave without pay, substitute paid leave or shall continue on the active payroll subject to the conditions below.

The President will continue on the active payroll while on President's Leave. The Employer will bill the Union monthly for the costs of all compensation (including, but not limited to, salaries, differentials, premiums, fringe benefits, insurance, pension, and taxes) attributable to days on President's Leave. The Union will remit a check to the Employer within two (2) weeks of being billed for the amount invoiced.

ARTICLE III.

MANAGEMENT RIGHTS

The Union recognizes the right of the Employer to operate and manage the RWMC facility. All rights, functions, prerogatives, and discretions of the management of the Employer, formerly exercised, potentially exercisable, or otherwise, are vested exclusively in the Employer except to the extent that such rights are specifically modified by the express provisions of this Agreement. Without limiting the generality of the foregoing, the Employer reserves to itself, subject only to the express provisions of this Agreement, the management of the Employer and the right to: direct the employees and assign work; determine the quality, quantity and type of work to be performed; determine qualifications for employees; establish standards of performance and rules of conduct; require the maintenance of discipline, order and efficiency; evaluate competency and performance; hire, transfer and promote; establish, promulgate, administer, regulate, determine and redetermine policies, practices, methods, procedures and conditions related to standards of departments covered by this Agreement, performance standards for employees, patient care, staffing, research, education, training, operations, services and maintenance; determine the number and location of divisions, departments, units, and all other facilities of the Employer and whether the whole or any part of its operations shall continue to operate and where it shall operate; to lay off employees for lack of work or other reasons or to reduce an employee's work hours; determine and redetermine job content and establish, expand, reduce, alter, combine, consolidate, abolish or discontinue any department, unit, operation or service or portion thereof; subcontract work (provided that such subcontracting does not result in the layoff of bargaining unit employees); or use the services of auxiliary, temporary or volunteer employees; discharge, dismiss, suspend, demote, warn or otherwise discipline employees in accordance with Section 6.4.; require additional hours of work; institute, publish and republish, promulgate, implement, enforce and require adherence to rules, policies and procedures relating to any or all of its rights and prerogatives.

ARTICLE IV.

CONTINUITY OF OPERATIONS

Section 4.1 No Strikes or Other Interferences. The Union agrees that there will be no strikes of any kind whatsoever (whether general or sympathetic or otherwise), walkouts, stoppages of work, sit-downs or slowdowns, sick-outs or sit-ins, or any other interference with the Employer's activities or operations during the life of this Agreement. Neither the Union nor any officer, steward or other agent or representative or member of the Union nor any employee shall engage in, induce, encourage, instigate, authorize, assist, aid, condone or participate in any violation of this Section 4.1. Violation of this Article shall constitute just cause for immediate termination. A discharge of an employee pursuant to this Article shall not be subject to the grievance and arbitration provision of this Agreement, except for the question of whether the employee engaged in conduct violative of this Article.

Section 4.2 No Lockouts. The Employer agrees not to conduct a lock-out of employees during the life of this Agreement.

Section 4.3 Union's Best Efforts. The Union agrees that in the event of any violation of Section 4.1., the Union will immediately order that such violation cease, and the Union, its officers, other agents, and representatives will use their best efforts to cause such violation to cease and to cause work to resume fully.

ARTICLE V. **GRIEVANCE AND ARBITRATION**

Section 5.1 Purpose. The purpose of this article is to establish a procedure for the settlement of grievances which involve the interpretation and application of a specific provision of this Agreement. The grievance and arbitration procedure provided for herein shall be the exclusive procedure for the resolution of disputes concerning the interpretation or application of the Agreement.

Section 5.2 Informal Adjustments. The parties recognize that day-to-day problems affecting employees will normally be adjusted between the employee and her or his immediate supervisor. Such matters shall not be deemed grievances, and their settlement shall not establish a precedent for the resolution of other or similar problems between an employee and her or his immediate supervisor or elsewhere in the Roger Williams Medical Center facility.

Section 5.3 Grievance and Arbitration Procedure.

- (a) **Definitions.** For the purpose of this Agreement, a "grievance" is a complaint by an employee that the Employer has interpreted or applied this Agreement in violation of a specific provision hereof and that such interpretation or application has adversely affected her or his interest as an employee under this Agreement, or by the Employer concerning the interpretation or application of this Agreement. The term "days" as used in this Section shall mean Monday through Friday, excluding holidays. Only grievances as defined in this Article are subject to grievance and arbitration hereunder. A grievance filed by the Employer against the Union may be initiated at Step 3 of the Grievance Procedure.
- (b) Any grievance which cannot be adjusted as contemplated by Section 5.2 shall be subject to resolution in the following manner:

STEP 1. The aggrieved employee shall submit the grievance in writing to her or his immediate supervisor within ten (10) days after the aggrieved employee first knew or should have had reason to know of the factual basis for the grievance. The grievance shall be signed by the aggrieved employee and shall state the specific provision(s) of the Agreement alleged to have been violated, the facts on which the grievance is based, and the remedy sought. The immediate supervisor, as the case may be, will meet with the aggrieved employee and a local Union

representative regarding the grievance and will give her or his answer in writing within ten (10) days after the conclusion of the meeting regarding the grievance.

STEP 2. If the aggrieved employee is not satisfied with the answer at Step 1, within ten (10) days after receipt of such answer, the grievance may be submitted in writing to the appropriate Department Head, as the case may be, or her or his designee will meet with the aggrieved employee and a local Union representative regarding the grievance and will give her or his answer in writing within ten (10) days after the conclusion of the meeting regarding the grievance.

STEP 3. If the aggrieved employee is not satisfied with the answer at Step 2, within ten (10) days after receipt of such answer, the grievance may be submitted in writing to the Human Resources Designee. The Human Resources Designee will meet with the aggrieved employee and a Union Representative regarding the grievance and will give his or her answer in writing within ten (10) days after the conclusion of the meeting regarding the grievance. A Grievance by the Employer against the Union may be filed with a designated Union representative within ten (10) days after the Employer first knew or should have known of the factual basis for the grievance.

STEP 4. If the Union or Employer are not satisfied with the answer to the grievance at Step 3, the Union may refer the grievance to arbitration by filing a Demand for Arbitration with the Labor Relations Connection and a copy with the Human Resources Designee, within thirty (30) days after receipt of the answer at Step 3. An Employer-initiated Demand for Arbitration shall be submitted to the Union representative designated to receive grievances in Step 3 above. Notwithstanding the foregoing, any individual employee or group of employees shall have the right at any time to present grievances to the Employer and to have such grievances adjusted, provided that any grievance adjustment shall not be inconsistent with this Agreement and a local Union representative shall be given an opportunity to be present at any such adjustment.

Section 5.4 Union Grievance. The Union may submit a grievance in writing at Step 1 with regard to a grievable matter which affects either the entire bargaining unit in precisely the same way or a group of fifteen (15) or more employees or all employees in a unit where the factual basis is precisely the same with respect to all members of the group. In order to be timely, a grievance must be filed within ten (10) days after any member of the unit/group knew or should have had reason to know of the factual basis for the grievance.

Section 5.5 Arbitrator's Function and Authority. The function of the arbitrator is to determine the interpretation and application of the specific provisions of this Agreement to the grievance as submitted in accordance with Section 5.3. There shall be no right in arbitration of a grievance to obtain, and no arbitrator shall have any authority or power directly or indirectly to award or determine, any change in, modification, or alteration of, addition to, or detracting from, any of the provisions of this Agreement.

Section 5.6 Effect of Arbitrator's Decision. Subject to the Employer's or Union's right to seek to set aside or modify an arbitrator's decision in court, the decision of the arbitrator shall be final and binding upon the Employer, the Union, and the aggrieved employee.

Section 5.7 Rules. Any arbitration hereunder shall be conducted in accordance with the rules of the Labor Relations Connection then applicable to voluntary labor arbitrations except to the extent that such rules may be in conflict with the provisions of this Agreement. In the event of any such conflict, the provisions of this Agreement shall govern.

Section 5.8 Expenses. The administration fees of the Labor Relations Connection and the fees and expenses of the arbitrator shall be shared equally by the parties.

Section 5.9 Time Limits Mandatory. The time limits provided for herein are mandatory. Any waiver or extension thereof must be in writing, signed by an authorized representative of the party who is granting such waiver or extension and is to be bound thereby. If a grievance is once settled or if it is not presented in writing or advanced to the next step of the grievance and arbitration procedure within the time limits provided for herein, it shall be considered closed and shall not thereafter be subject to the grievance procedure or arbitration hereunder. If an answer is not given within said time limits, the grievance shall be deemed denied on the date that such answer was due, and the grievance may then be referred to the next step.

ARTICLE VI. **EMPLOYMENT STATUS**

Section 6.1 Probationary Period. Each newly employed employee shall be deemed a probationary employee during her/his first ninety (90) days of continuous employment. Days lost from work during said ninety (90) day probationary period shall not be considered in computing the ninety (90) day period but shall not break the continuous employment. The Employer may, in its sole discretion, extend an employee's probationary period up to a maximum of ninety (90) days. The Employer will notify the Union in the event of an extension of the probationary period. During the probationary period, discipline, discharge, layoff, or transfer of the employee shall be at the sole discretion of the Employer without recourse under this Agreement. Grievances submitted by probationary employees shall be limited to whether the wage or economic fringe benefit provisions of the contract are being applied accurately to the employee.

An employee shall not acquire any seniority status until the completion of her/his probationary period. Upon completion of the probationary period, an employee's seniority shall then be calculated from her/his date of employment.

A newly hired employee will be given a copy of her/his job description and informed of the starting wage rate.

The Employer shall not place or assign any employee with less than one year of licensure on orientation to any individual regular or overtime patient assignment until the employee completes orientation.

Section 6.2 Seniority.

- (a) Full-time, part-time, limited part-time and per diem employees who have completed their probationary periods shall have seniority. Employees shall have earned seniority for all time prior to the effective date of this Agreement in continuous employment with the Employer in any position requiring an employee to hold a professional nurse (R.N.) license. For all time on and after the effective date of the Agreement, seniority shall accrue as the length of continuous employment with the Employer in a position in the registered nurse bargaining unit covered by this Agreement.

(b) The most recent date of total continuous service with the Employer, including any period of employment outside the bargaining unit, will continue to govern with respect to eligibility for service awards, leaves of absence, annual vacation accrual, educational assistance, and performance evaluations.

Section 6.3 Licensure/Certification. Each employee who is required by the Employer to be licensed or certified will advise the Employer of any revocation, suspension, or other action affecting their license or certification.

Section 6.4 Discipline and Discharge. An employee who has completed her/his probationary period will not receive any discipline or suspension or be demoted or discharged without just cause. The Employer will make every reasonable effort to notify the Union within forty-eight (48) hours after a suspension or discharge, but the failure to do so shall not affect any disciplinary action taken.

An employee who is required to meet with a supervisor or manager for the purpose of investigating circumstances that might reasonably lead to the employee being disciplined, or for the purpose of imposing discipline, shall be permitted to have a union representative present. In either instance, the supervisor or manager shall inform the employee of his/her right to have such a representative present; provided, however, that the failure of a supervisor or manager to so advise an employee shall not in and of itself negate or adversely affect any disciplinary action taken by the Hospital with regard to that employee. The supervisor/manager will postpone for a reasonable period of time any such meeting if a local representative is unavailable to attend.

The Employer shall notify the Union and the employee simultaneously when imposing disciplinary suspensions and terminations, provided the Union has not received advance notice

of the disciplinary suspension or termination. The Employer shall notify the Union as soon as is practical when the employee is placed on investigatory leave.

Should an investigation extend beyond fifteen (15) business days, the employee on investigatory leave shall be paid each day thereafter their base rate of pay for their regularly worked shifts, including shift differential, if any, until completion of the investigation. Such payment shall be made notwithstanding a finding of misconduct; however, if any employee is not cooperating with the investigation, the payments shall cease. Investigations should be completed expeditiously and in a reasonable amount of time. Upon request, the Employer shall update the Union on the progress of the investigation.

The Employer will not consider a prior infraction for purposes of issuing subsequent discipline, as long as (1) the prior infraction was not the subject of a final warning or suspension, (2) fifteen (15) months have passed from the date of the infraction with no subsequent write-ups, and (3) the prior infraction was not related to caring or treatment (medical or service) of patients and their families/visitors may be considered for subsequent discipline. Nothing in this Article shall require the Employer to remove write-ups from an employee's personnel file.

Section 6.5 Loss of Seniority. Seniority and all rights and benefits under this Agreement shall terminate and be lost by the employee for the following reasons:

- (c) Voluntary resignation
- (d) Discharge in accordance with Section 6.4.
- (e) Failure on recall from layoff to report to work within seven (7) working days following the mailing of the notice of recall by certified mail to the employee to report to work.
- (f) After a layoff of twelve (12) months.
- (g) Other employment during a leave of absence, unless approved by the Employer, which approval shall not be unreasonably withheld.
- (h) Failure to return upon expiration of a leave of absence.
- (i) Absence from work for more than three (3) consecutive workdays without notifying the Employer before the expiration of said three (3) consecutive workdays.
- (j) Not performing any work for Employer for a period of one (1) year (365 days).

Section 6.6 Seniority Lists. The Employer will post and furnish to the Union, a seniority list within sixty (60) days of the signing of this agreement. A revised seniority list will be furnished to the Union and to the Local President effective the pay period ending closest to December 31,

and June 30 of each year, unless, due to a reduction in the workforce, a list is otherwise required. An employee may protest her or his seniority within thirty (30) days after the list is posted.

Section 6.7 Layoff. When the Employer decides to reduce the workforce through a layoff, the Employer will designate the employees in the positions (job classification, unit, hours per week, and shifts) to be eliminated and the following procedures shall apply.

(a) Employees who have been designated for layoff may fill an available bargaining unit vacancy provided they are “qualified”. An employee will be required to fill an available vacancy for which she/he is qualified if it involves the same unit, number of hours per week, and shift as the position the employee held when the employee was designated for layoff.

(b) If an employee does not fill a vacancy pursuant to the preceding paragraph, then the employee will have the option either to be laid off or, if qualified, to displace pursuant to the following order of displacement:

- (i) The employee will have the option to displace either (a) the least senior employee in the employee’s unit with the same shift irrespective of the number of hours per week, or (b) the least senior employee in the employee’s unit with the same number of hours per week irrespective of shift;
- (ii) If the employee does not displace pursuant to (i) above, the employee must displace the least senior employee in any unit with the same shift and the same number of hours per week;
- (iii) If the employee is unable to displace pursuant to (ii) above, the employee must displace either (a) the least senior employee in any unit with the same shift irrespective of the number of hours per week, or (b) the least senior employee in any unit with the same number of hours per week irrespective of shift, the option of same shift or same number of hours per week to be the employees.

Employees who have been displaced as a result of the process set forth in paragraph (b)(i)-(iii) above, in seniority order, shall follow the procedure set forth in said paragraph (b)(i)-(iii).

Displacement into a particular unit shall be subject to a reasonable numerical limit as to the number of qualified nurses that the unit could absorb based on patient quality of care considerations, as determined by the Employer in its judgment. The reasonableness of the Employer’s judgment regarding a reasonable numerical limit shall not be set aside unless it is determined to be arbitrary and capricious.

In order to displace, an employee must be qualified and be more senior than the employee to be displaced. An employee who has been designated for layoff and is unable to displace will be laid off.

(c) The term “qualified” as used in this Section 6.7 means that the employee has the present ability to perform the essential functions of the job and, with an orientation not exceeding fourteen (14) calendar days, could perform the full range of duties in a competent manner.

(d) An employee who has been designated for layoff must exercise available options under (a) and (b) above within twenty-four (24) hours of notification that he/she has been designated for layoff.

(e) The Employer will continue to pay its share of the cost of medical and dental insurance coverage during the first three (3) months an employee is on layoff, provided the employee continues to pay her/his share of the cost.

Section 6.8 Recall From Layoff. Notices of vacancies will be sent to employees on layoff with recall rights and such employees shall have the right to apply and be considered for vacancies along with active employees. If the vacancy is not filled through the internal vacancy filling process, employees in the job classification and unit where the vacancy exists who are qualified as defined in subsection 6.7 above and who have recall rights will be recalled to the vacancy in order of their respective seniority. Such employees shall be recalled in order of their respective seniority. Recall rights shall apply for a period of one (1) year from the date of layoff, provided that an employee shall lose recall rights if she/he rejects recall to a position in her/his job classification and unit with the same shift and hours which the employee worked when she/he was laid off. While on layoff status, employees shall continue to be eligible to apply for vacant positions which are posted within the Roger Williams Medical Center facility.

Section 6.9 Personnel Files. The Employer will maintain one official personnel file for formal personnel documents relating to an employee. An employee will be given reasonable access to his/her personnel file by prearrangement with the Human Resources office. An employee will be given a copy of any document to be added to his/her personnel file which is critical of the employee’s performance or conduct. The employee will be required to initial a copy of any such document. Such shall signify that the employee is aware of the document but shall not signify agreement with its contents. Copies of grievance procedure papers (grievance, answers, and appeals) shall be included in a file separate from the employee’s personnel file. Such papers shall not be considered in decisions regarding promotion, transfer, or assignment.

The Employer will remove from an employee’s personnel file documentation of disciplinary action which is neither a suspension nor a final warning if the employee has no other disciplinary action of any kind during the 15 months following such disciplinary action, except that all documentation of discipline which relates to the care or treatment (medical or service) of patients and their families/visitors shall be retained in the employee’s personnel file.

Section 6.10 Annual Evaluation. Each employee shall be evaluated annually. The employee will meet with the evaluating supervisor to discuss her/his performance/conduct. The employee will be given a copy of the official evaluation document. An employee who disagrees with the

contents of the official evaluation document may submit a written statement which will be filed with the official evaluation document. The Employer shall have the right to determine the content and format of performance evaluations. The categories evaluated will take into account the duties and responsibilities included in the employee's job description. Except for disciplinary actions that are a consequence of evaluations, all matters relating to employee evaluations shall not be subject to the grievance and arbitration procedures in this Agreement.

Section 6.11 Vacancies. If the Employer decides to fill a vacancy in a bargaining unit position, the vacancy will be posted for a period of five (5) calendar days, inclusive of weekends and holidays. Among qualified bargaining unit members who apply for a vacancy, the vacancy will be awarded based on the comparative ability and performance (collectively the qualifications) of the applicants. As between two (2) or more employee applicants whose qualifications are relatively equal, the position will be awarded to the applicant with the most seniority. The Employer may fill the vacancy with a non-bargaining unit member only if there are no qualified bargaining unit candidates. The Employer will provide intranet access, phone access, or job posting boards listing all current bargaining unit vacancies.

An employee will not be eligible to bid on another bargaining unit position during his/her probationary period unless mutually agreed by the Hospital and the Union. An employee who has completed her/his probationary period may transfer up to two (2) times during a twelve (12) month period; provided, however, that an employee will not, in any case, be prohibited from bidding on a position on his/her unit.

Section 6.12 New Hire Orientation. The Employer will provide all newly hired employees with an orientation. The Employer, in consultation with nurse educators and preceptors, will determine the content and extent of the unit orientation for a new hire, taking into account the new hire's skills and nursing experience. Before taking an independent assignment, new hires will be oriented to essential unit policies and procedures, equipment, and location, and the frequently occurring activities necessary for the new hire to function competently. All nurses are expected to support, guide, and serve as a resource to new hires and to work to provide a climate in which new hires are encouraged to seek their assistance when they have questions or are exposed to a policy or procedure which is new to them.

ARTICLE VII. **HOURS OF WORK**

Section 7.1 Basic Workweek. The basic work week for full-time employees consists of thirty-two (32) or thirty-six (36) or forty (40) hours of work per week. The workweek consists of the seven consecutive days beginning with the day shift on Sunday. The basic schedule for full-time employees shall include two days off in each week. The basic day for full-time employees

shall consist of shifts of eight, ten or twelve hours of work per day. The basic workday is the twenty-four hour period beginning with the start of the day shift.

Section 7.2 Normal Work Schedule.

- (a) The normal workweek for full-time employees shall be thirty-two (32) or thirty six (36) or forty (40) hours inclusive in all cases, of a thirty (30) duty-free minute meal period. An employee is entitled to receive one (1) fifteen (15) minute paid rest break during each full shift. Part-time employees working a shift of eight (8) hours or more shall be entitled to a duty-free thirty (30) minute meal period and one (1) fifteen (15) minute rest break.

Section 7.3 Employee Work Schedules.

A. The parties recognize that the operating needs of the Employer require that the Employer be free to schedule employees consistent with those operating needs and consistent with the provisions of this Article. Before making any permanent schedule change, within a seven (7) day period following notice to the Union, the Employer will meet and confer with the Union regarding the permanent schedule change. An employee will be given at least thirty (30) calendar days' notice of any permanent schedule change. The Employer will first seek volunteers from among the employees in the group affected by a schedule change and, if there are not sufficient volunteers, will either select the least senior qualified employees from among such employees or rotate the assignment until the next vacancy arises on that shift at which time the rotating hours will be the posted position. Any changes in an employee's shift hours will be limited to hours falling within the definition of shifts in this Article.

Changes to an employee's hours of work, which result in a change to non-benefited status or a change in status from full-time to part-time or per diem, or from part-time to full-time or per diem, shall be considered eligible to apply the layoff provisions of the CBA, including the right to bump less senior employees in accordance with the provisions outlined in the CBA and preference for vacant positions, should the employee not wish to accept the change in hours and/or status.

B. A work schedule shall be posted at least two weeks in advance of the first day on which the schedule is to be effective. Specific work schedules for each department or unit/section shall be prepared covering a period of at least six (6) weeks. For unplanned circumstances such as resignations or absences, when changes to the posted schedule are necessary, they would affect employees in inverse order of seniority among the available, qualified employees on a rotating basis.

Work schedules will normally be maintained so that a department continuously has six (6) weeks of current time schedules. In the event of conflicting requests within a particular unit, preference normally will be given to the most senior employee. The Employer will make a good faith effort to avoid making changes in posted schedules. However, if the Employer determines that, due to

unusual circumstances, operating needs require an employee's or employees' schedule(s) to be changed, the employee(s) on the unit affected will make a good faith effort to accommodate the change. If despite such good faith effort, the Employer's needs are not accommodated, the Employer may proceed with the schedule change(s) and the employee(s) affected will have the right to grieve the appropriateness of the change(s). Such changes would be made only after every effort has been made to provide alternate means of coverage including, but not limited to the solicitation of volunteers, assignment of per diems or assignment of permanent floats. Any such schedule change(s) will, to the extent practicable, be rotated equitably among available staff.

C. Swaps. An employee may exchange a work schedule with another qualified employee with the knowledge and consent of the employee's supervisor.

Section 7.4 Basic Shifts. The following shifts are applicable to all bargaining unit members.

The basic eight-hour work shifts are as follows:

Day shifts shall begin at or after 7:00 a.m. and end at or before 3:30 p.m.

Evening shifts shall begin at or after 3:00 p.m. and end at or before 11:30 p.m.

Night shifts shall begin at or after 11:00 p.m. and end at or before 7:30 a.m.

The basic twelve-hour shifts are as follows:

Day shifts shall begin at or after 7:00 a.m. and end at or before 7:30 p.m.

Evening shifts shall begin at or after 3:00 p.m. and end at or before 3:30 a.m.

Night shifts shall begin at or after 7:00 p.m. and end at or before 7:30 a.m.

The Employer may create and post shifts that differ from the above only after providing the Union with two weeks' notice and the opportunity to meet and discuss. No bargaining unit member shall be required to work a shift that falls outside the above hours.

Section 7.5 Weekends. Employees who, at time of ratification of this Agreement, work every third weekend shall continue to work every third weekend. Employees who, at time of ratification of this Agreement, work every other weekend, shall continue to work every other weekend.

Employees hired after the ratification of this Agreement into positions which require weekend work, shall work every other weekend.

Section 7.6 On-Call. The following provisions apply to mandatory and voluntary call:

Employees who are on call who report to work after being called in will be paid a minimum of four (4) hours, regardless of the duration of the assignment. This payment shall be at the employee's regular base hourly rate.

Employees on-call who report to work after being called in will receive the shift differential applicable to that shift when the call assignment is at least four hours in duration.

Employees shall not be required to be on call following a 12 hour shift unless mutually agreed upon between the employee and her/his supervisor.

If an on-call assignment results in an employee working 16 consecutive hours, she/he will be offered her/his next shift off if that shift is on the following day.

If the on-call assignment is completed eight (8) hours or more prior to the next scheduled on-duty time, employees are expected to report to work at their regularly assigned time. If the on-call assignment is completed within eight (8) hours of the employee's next scheduled work starting time, employees may report to work at their regularly scheduled time or report to work no later than eight (8) hours after the on-call assignment was completed. The employee is responsible for notifying her/his supervisor of the option chosen before leaving the conclusion of the on-call assignment.

A. Mandatory Call

The Employer reserves the right to require employees to be on-call in any unit as the Employer in its sole judgment deems warranted by seniority on a rotating basis based on skill needed with the following considerations:

On-call occurs when the Hospital assigns an employee who is not assigned to work to be available during a period of time established by the Hospital to come into work.

Per Diem employees shall not be subject to mandatory call.

Employees required to be on-call shall be compensated at the rate of \$2.00 per hour of the on-call period, except for the OR and Endo, IR/PACU, where the on-call rate is \$5.00 per hour.

B. Voluntary On-call

Units/Departments may participate in voluntary on-call programs. Voluntary on-call shifts will typically be no more than four (4) hour blocks of time.

Employees who do voluntary on-call shall be compensated at the rate of \$2.00 per hour of the on-call period, except for the OR, ED and Endo, IR/PACU, where the on-call rate is \$5.00 per hour.

Section 7.7 Rotation.

Rotating to another shift shall be voluntary.

Section 7.8 Floating. The Employer will consider available resources, employee qualifications and experience, and patient care need when making floating assignments. An employee who is floated to a different unit will not be required to perform any duties which the employee is not competent to perform. The Employer will distribute floating assignments equitably among employees on a shift within a unit in order of inverse seniority on a rotating basis who possesses the necessary qualifications and experience.

New hires in their probationary period shall not be floated for the duration of their probationary period.

Employees shall not be required to float to positions other than positions of their own job classification.

If a unit-based registered nurse is involuntarily floated, s/he will not be backfilled by another registered nurse. Backfilling means floating a unit-based registered nurse and then replacing him/her in the unit/department from which s/he floated with another registered nurse outside the unit/department on the same shift as the float.

Float pool nurses and per diem nurses who have the requisite clinical skill and who are on duty in a unit from which a nurse will be floated shall be floated before a regular staff nurse from that unit is required to float.

Section 7.9 Voluntary Call-Offs. Employees may be offered the opportunity to be called off in situations where there is a drop in the census and/or the acuity level on their unit. The option of being called off will be offered to qualified employees on a rotating basis in order of unit seniority, provided, however, that employees with 20 or more years of service will be the first to have the opportunity to be called off from their unit on weekends, subject to patient care needs. Employees who elect to be called off may have the option to float off the unit or take ETO/holiday time or unpaid time off. Employees shall not be involuntarily called off.

ARTICLE VIII. **OVERTIME**

Section 8.1 **Overtime Pay.**

Time worked in excess of forty (40) hours in one week will be paid at time and one-half. With regard to daily overtime, such time worked will be paid at the overtime rate, provided the employee works thirty (30) minutes or longer past the end of their shift, in which case all hours worked past the end of the employee's shift will be paid at time and one-half. Notwithstanding the above, if a nurse stays past the end of their shift for less than fifteen (15) minutes past the end of their shift either at the direction of management or under the approval of management, that time will be paid at the overtime rate.

This provision shall be implemented on or before July 1, 2023.

Any units which currently offer daily overtime shall continue to do so.

Section 8.2 No Duplication or Pyramiding. There shall be no duplication or pyramiding of overtime or premium pay.

Section 8.3 Paid Time as Hours Worked. The current practice of whether paid time off counts as hours worked shall continue. An employee who works double shift and who is scheduled to work another shift within sixteen (16) hours after the end of the double shift will have the option to be relieved without pay from working the other shift.

Section 8.4 Mandatory Overtime. In accordance with Rhode Island statute, members shall not be mandated to work overtime, except as outlined in the statute.

Section 8.5 Extra Time. A volunteer sign-up sheet, or e-mail sign-up system, or similar system for extra time should be provided on each unit with each graph/schedule.

Extra hours (unfilled hours on a schedule after all full and part time employees have received their standard hours, and per diems have received their minimum required hours) shall be offered equitably to employees on the basis of seniority. Extra hours should first be offered to the most senior employee and if not accepted then to the remaining employees by descending order of seniority.

ARTICLE IX. **SALARIES AND DIFFERENTIALS**

Section 9.1 Pay Scales. The pay scales that will be in effect during the term of this Agreement are set forth in Appendix A.

- a) Newly Employed Employees. The initial salary placement on the salary schedule of a newly employed non-exempt employee shall be determined by the Employer based upon its assessment of the employee's prior work experience, education, special training, and other job-related qualifications.

Section 9.2 Step Increases All non-exempt employees shall progress on the pay scale each October for each contract year unless otherwise specified in this agreement. All step increases shall be subject to the employee's performance being satisfactory.

Section 9.3 Market Increase Adjustments The Employer reserves the right, in its sole discretion, to implement market increase adjustments for particular job classifications. The Employer will give the Union advance notice of any market increase adjustment.

Section 9.4 Shift Differential.

- (a) **Eligibility.** Any non-exempt employee whose scheduled shift includes at least four (4) hours after 3:00 p.m. will be paid evening shift differential for all hours worked after 3:00 p.m. Any non-exempt employee whose scheduled shift includes at least four (4) hours after 11:00 p.m. will be paid night shift differential

for all hours worked after 11:00 p.m. Current payroll practices will continue to apply with regard to the payment of evening shift differential to day shift employees who work into the evening shift and to evening shift employees who work into the night shift.

(b) **Evening Differential.** The shift differential for the evening shift (3:00 p.m. to 11:30 p.m.) shall be \$1.75 per hour.

(c) **Night Differential.** The shift differential for the night shift (11:00 p.m. to 7:30 a.m.) shall be \$3.00 per hour.

Section 9.5 Weekend Differential. The applicable weekend differential for non-exempt employees and exempt employees who are required to regularly work weekends is \$3.75 per hour. The weekend differential shall be paid to such employees for all regularly scheduled hours worked between 7:00 a.m. Saturday and 7:00 a.m. Monday.

Section 9.6 Float Differential Effective upon the ratification of this Agreement, any employee assigned to float from one unit to cover patient care needs in another unit shall be paid a floating differential of \$2.00 for all hours worked during the floating assignment.

Section 9.7 Charge. An employee who is assigned by the Employer to be in charge of a unit for a full shift or part thereof will be paid a charge premium of \$2.00 per hour for such duty, provided that not more than one (1) employee per charge assignment may receive the premium at a time.

Section 9.8 Time Recording. Employees are responsible for ensuring that they use the time recording devices both at the start of their shift and at the end of their shift and that their entry has been recorded. In cases of a verified mechanical failure of the time recording device, employees will receive their pay as soon as practicable and will not be required to wait until the next pay period.

Section 9.9 Preceptor Provision. Nurses who successfully complete the Employer's training program, and maintain competency, and who are designated and assigned as preceptors, will be paid \$2.00 per hour premium for such duty during each shift the nurse is so assigned. Continued participation as a preceptor will be based on evaluations of preceptors, as assessed by the Employer.

Section 9.10 Sleep Time. Sleep time of up to eight (8) hours shall be offered to employees required to take on call. The Hospital shall endeavor to find suitable sleeping arrangements for a nurse who is on call. Notwithstanding the above, management reserves the right to require the nurse to start their next shift as scheduled, provided that the nurse has a reasonable belief that such request allows him/her to work in a safe fashion.

ARTICLE X.
HOLIDAYS

Section 10.1. Paid Holidays. Full-time employees will be eligible for the following ten (10) paid holidays:

New Year's Day	Labor Day
President's Day	Indigenous People's Day
Memorial Day	Veteran's Day
Independence Day	Thanksgiving Day
Victory Day	Christmas Day

A part-time employee will be eligible only for those named paid holidays which fall on the employee's regularly scheduled work day. If a holiday falls during an employee's leave of absence, no holiday pay or substitute holiday off with pay will be granted.

The holiday will be celebrated on the holiday itself for units that are open on the holiday and will be celebrated on the day on which the holiday is celebrated by the State of Rhode Island for units that are not open on the holiday.

Holiday time is not cumulative and must be taken within thirty (30) days before or ninety (90) days after the holiday. The Hospital will schedule the employee for such holiday time, and if it fails to do so, will pay out the holiday time to the employee.

Section 10.2. Holiday Pay. Holiday pay shall be computed on the basis of the employee's base rate plus shift differential, if the employee is regularly assigned to the evening or night shift, multiplied by the number of hours which the employee would have worked that day had it not been a holiday. Hours granted for holiday pay are excluded from all calculations of overtime.

Section 10.3. Holiday Scheduling. Each employee will be expected to work her/his fair share of named holidays. The fair share scheduling will be in accordance with existing practices of individual units and shall generally be considered every other holiday. The holiday rotation schedule will be posted by January 15 of each year. It may be superseded or changed if operating needs so require in the sole judgment of the Employer. In the event that an employee's holiday work commitment conflicts with her/his weekend off, the holiday commitment prevails. The Employer will endeavor not to schedule an employee to work a particular major holiday

(i.e., New Year's Day, Thanksgiving Day, and Christmas Day) during a period of two (2) consecutive years. The Employer will endeavor not to schedule an employee to work both a shift that begins on the day before a major holiday and a shift that begins on that major holiday.

Section 10.4. Work on a Holiday. Full time and per diem employees who work the holiday will be paid at time and one-half for all hours worked on the holiday. In addition, full-time employees will receive a substitute day off with pay. Part time employees working a holiday shall receive double time when working a holiday in lieu of a substitute day off.

Section 10.5. Holidays Which Fall on a Day a Full-Time Employee Is Not Scheduled to Work. If a holiday falls on a full-time Employee's regular day off, the employee will receive a substitute day off with pay.

The Hospital will maintain a request list by which 12-hour employees may request time off in four (4) hour increments. Such requests must be made to the staffing office at least 48 hours before the holiday and requests will be granted by seniority and applies to all holidays.

ARTICLE XI. EARNED TIME OFF

Section 11.1 Earned Time Off. Earned Time Off (ETO) combines paid vacation and sick time benefits into a single ETO bank.

All regular full-time and part-time employees are eligible for ETO benefits. ETO begins on the employee's date of hire, accrues daily, is recorded at the end of each biweekly payroll period, and is displayed on employee pay statements.

Accrual levels are based on continuous years of service as defined in Article _.

Section 11.2 Accrual

Initial Accrual	2-5.9 years	6-10.9 years	11+ years
18 days	23 days	23 days	29 days

*Accrual is based on a 40-hour work week.

No employee will accrue ETO during an unpaid leave of absence.

Section 11.3 Payment Payment of ETO will be at the employee's regular rate of pay for all hours an employee would otherwise work as part of their regular schedule.

Whenever an employee's accrual rate changes, the employee's new accrual rate will begin with the first pay period following the date of the change.

When a holiday falls during scheduled ETO, the day will be paid as a holiday, pursuant to Article X, instead of ETO.

Section 11.4 Scheduling. ETO is either scheduled or unscheduled.

If the ETO is unscheduled, the employee must provide her/his manager notice as soon as is practicable.

Scheduled ETO must be approved in advance by the employee's manager.

Requests for the time period of January, February and March must be submitted between October 1-15. Responses to such requests must be posted by November 1.

Requests for the time period of April, May and June must be submitted between January 1-15. Responses to such requests must be posted by February 1.

Requests for the time period of July, August and September must be submitted between April 1-15. Responses to such requests must be posted by May 1.

Requests for the time period of October, November and December must be submitted between July 1-15. Responses to such requests must be posted by August 1.

Requests submitted outside of the window periods set forth above will be considered on a first come, first served basis after those which were submitted in a timely fashion.

In the event of conflicting requests within a particular department, preference shall be given to the employee with the greatest seniority.

During prime time (June 1 through Labor Day) preference shall be given to requests for whole weeks.

When considering requests for ETO during prime time, the Employer will first accommodate as many employees within a department as it can for up to two (2) weeks of ETO and then, if any additional ETO is granted, further requests will be considered.

Section 11.5 ETO Restoration If an illness, a death of an immediate family member, or an injury preventing work occurs prior to but extends into an employee's scheduled ETO, the ETO shall be postponed and rescheduled pursuant to the scheduling process set forth above. If a death of an immediate family member occurs after an employee commences her/his scheduled ETO, the employee may take bereavement time, pursuant to Article 15.4 in lieu of ETO and reschedule the ETO.

Similarly, if an employee is called to jury duty during scheduled ETO, the employee may use jury duty leave, pursuant to Article 15.2, in lieu of ETO and reschedule the ETO.

Section 11.6 Carryover of Accrued, Unused ETO An employee may carry over unused ETO up to a maximum of not more than one and one half (1 ½) times the employee's annual accrual. Once the employee reaches that maximum s/he will no longer accrue ETO until her/his bank falls below the maximum.

Section 11.7 Utilization Employees may utilize ETO for partial day absences in one-hour increments.

Section 11.8 Payment at Termination. Employees who terminate their employment after completion of one (1) year of service will be paid all accrued unused ETO hours.

ARTICLE XII. **INSURANCE**

Section 12.1 Medical Insurance

Employees may enroll in the CharterCare Health Partners medical insurance plans and wellness program. The 2023 plan designs, employee contributions (premium share) and prescription co-pays are set forth in Appendix E to this collective bargaining agreement.

Employee contributions premium share percentage (e.g., 20% of cost) for the Limited PPO, Premier PPO and Value Plan, shall remain at the same percentage for the life of this agreement. With regard to the EPO plan, the current dollar amount that employees in that plan are paying in premiums shall be frozen for the life of the agreement, as follows:

EPO premium rates	Full-time	Part-time
Employee only	\$34.75	\$67.18
Employee + spouse	\$72.97	\$141.08
Employee + children	\$69.32	\$134.03
Employee + family	\$104.24	\$201.55

Notwithstanding, nothing herein shall otherwise preclude the Employer from making changes to the above plans provided such changes result in benefits that are substantially equivalent to those in effect as of the date of this Agreement.

Section 12.2 Dental & Vision Insurance

Employees may enroll in the CharterCare Health Partners dental and vision plans. The 2023 plan designs and employee contributions (premium share) are set forth in Appendix E.

Notwithstanding, nothing herein shall otherwise preclude the Employer from making changes to the above plans provided such changes result in benefits that are substantially equivalent to those in effect as of the date of this Agreement.

Section 12.3 Life Insurance

The Employer shall provide basic life and accidental death & dismemberment (AD&D) insurance benefits at no cost to eligible employees. Eligible employees may also enroll in optional life and AD&D insurance at their own expense. The 2023 plan designs and employee contributions (premium share) for optional coverage are set forth in Appendix E.

Notwithstanding, nothing herein shall otherwise preclude the Employer from making changes to the above plans provided such changes result in benefits that are substantially equivalent to those in effect as of the date of this Agreement.

Section 12.4 Long Term Disability

The Employer shall provide long-term disability insurance Benefits, which shall be paid for by eligible employees. The 2023 plan design is set forth in Appendix E. Notwithstanding, nothing herein shall otherwise preclude the Employer from making changes to the above plans provided such changes result in benefits that are substantially equivalent to those in effect as of the date of this Agreement.

ARTICLE XIII.
RETIREMENT

Section 13.1 401(k) Plan.

Employees will continue to be offered the Hospital's defined contribution plan, as it may be amended, provided the benefits remain substantially equivalent to the benefits in effect as of the effective date of this Agreement. There shall continue to be a fifty percent (50%) matching Employer contribution for eligible employees up to a maximum match of two percent (2%) of the employee's yearly pay. The matching contribution is made on an annual basis to the participating employee's account.

ARTICLE XIV.
LEAVES OF ABSENCE

Section 14.1 General. Leaves of Absence are continuous periods of absence from work, whether paid or unpaid, for the reasons set forth in this Article.

Section 14.2 Medical Leave. A leave of absence for personal illness or injury will be granted up to the maximum period shown in the following schedule:

<u>Length of Continuous Employment</u>	<u>Maximum Leave</u>
1 year - 5 years	26 work weeks
5 years - 10 years	39 work weeks
10 years	52 work weeks

An employee who returns from a Medical Leave during the first thirteen (13) workweeks of the leave, will be reinstated to the position which the employee held at the start of the leave or an equivalent position. While the Hospital cannot guarantee reinstatement beyond thirteen (13) weeks, the Hospital will make every reasonable attempt to cover the period of the leave beyond thirteen (13) weeks with staff who are willing to pick up additional straight-time hours or with a temporary employee. If an employee is returning from a leave that has extended beyond thirteen (13) workweeks, and which was not covered for the full period of the leave beyond thirteen (13) weeks, the employee will be offered the opportunity to fill available vacancies for which the employee is qualified. If there are none, the employee will be eligible to bid on vacancies that arise for a period set forth under the Maximum Leave listing herein for which the employee is eligible.

Employees who have worked for the Employer for at least twelve (12) months and for 1,250 hours in the year preceding a requested leave may, upon documentation of medical necessity,

take such leave on an intermittent or reduced schedule basis for up to twelve (12) workweeks during any twelve (12) month period, meaning a “rolling” twelve (12) month period measured back from the date the employee uses such leave. Intermittent leave is defined as non-consecutive leave; reduced schedule leave allows an employee to reduce the usual number of hours worked per week or per day. At the Employer’s option, employees utilizing intermittent or reduced schedule leave may be transferred temporarily to an alternative equivalent position that better accommodates recurring periods of leave. A workweek for purposes of this section is defined as the number of hours an employee is regularly scheduled to work during a seven (7) day period Sunday 7:00 a.m. through Sunday 7:00 a.m.

An employee will be required to furnish a completed physician or practitioner certification form as a condition of being granted a medical leave of absence and of being reinstated and must be cleared by Employee Health before returning to work. If the employer has reason to doubt the validity of a medical certification, it may require the employee to obtain a second medical opinion at the Employer’s expense. The Employer may designate the physician to furnish the second medical opinion, but that physician may not be employed on a regular basis by the Employer. The Employer may not regularly contract with or otherwise regularly utilize the services of the physician furnishing the second medical opinion. If there is a disagreement between the employee’s health provider and the Employer-designated physician, the employee will be evaluated by a third healthcare provider selected by the Employer and the employee. The third opinion shall be at the Employer’s expense and shall be final and binding. If the employer requires the employee to obtain a second or third medical opinion, the Employer must reimburse an employee or the family member for any reasonable out-of-pocket travel expenses incurred, to obtain the second or third medical opinion. The Employer may not require the employee or family member to travel outside normal commuting distance for purposes of obtaining the second or third medical opinion, except in very unusual circumstances.

An employee on a continuous leave of absence shall have their health benefits continued for the first twenty-six (26) weeks of such leave at the then-current cost of such coverage. Thereafter, and until the employee either returns to work or leaves the employ of the Hospital, the employee shall be eligible for health coverage consistent with the Consolidated Omnibus Budget Reconciliation Act of 1985 (“COBRA”). During such time the employee is on leave, he/she shall be required to pay his/her share of the premium, whether under the Hospital plan or COBRA. If premiums are not paid within one month of the date they become owing, benefits for the employee shall be ceased.

Section 14.4 Parental/Family Leave. Leaves for purposes of maternity, adoption, child-rearing, and for the serious health condition or death of a member of the employee’s immediate family (parent, spouse, child, parent-in-law) will be granted for up to thirteen (13) workweeks

and employees will be reinstated to the position which they held at the start of the leave. If an employee is returning from a leave that has extended beyond thirteen (13) workweeks, the employee will be offered the opportunity to fill available vacancies for which the employee is qualified. If there are none, the employee will be eligible to bid on vacancies that arise for a period of twelve (12) months from the date the employee is available to return to work. Sick time and vacation time accruals and benefits continuation shall be as set forth in Section 15.2 above. Intermittent and reduced schedule leave as defined in Section 15.2 above shall be available to an employee to care for a member of the employee's immediate family with a serious health condition. If possible, the employee's schedule should meet the needs of the employee and the Employer. Intermittent and reduced schedule leave for other parental/family reasons shall be subject to the Employer's approval at its sole discretion. Medical certification may be required for leaves due to a serious health condition of a member of the employee's immediate family.

The maximum leave time an employee may take during any twelve (12) month period for medical and parental/family reasons is the maximum leave time shown in the schedule in Section 15.2.

Section 14.5 Worker's Compensation Leave. An employee who is absent because of a workplace accident will be granted a leave of absence for up to one (1) year. Reinstatement shall be in accordance with Rhode Island law. Sick time and vacation time accruals shall be as set forth in Section 15.1 above. Benefit continuation shall be in accordance with Rhode Island law.

Section 14.6 Educational Leave. Subject to the Employer's operating needs, as determined by the current educational policy as identified in the Hospital's policy #HR-500-00010-C, a leave of absence for educational purposes may be granted by the Employer for a period up to the applicable maximum period shown in the schedule in Section 14.1 above. Available accrued vacation time must be used during an education leave. There is no accrual of paid time off for vacation or sick leave during such a leave. The full cost of insurance benefits, to the extent that such are available to employees during an educational leave, shall be paid by the employee. The Employer will not hold open the position the employee held at the start of the leave and the employee is not assured of reinstatement at the end of the leave.

Section 14.7 Personal Leave. Subject to the Employer's operating needs, as determined by the Employer, a personal leave of absence may be granted by the Employer for compelling personal reasons for a period not to exceed thirteen (13) weeks. Available accrued vacation must be used during a personal leave of absence. There is no accrual of paid time off for vacation or sick leave during such a leave. The full cost of insurance benefits, to the extent that such are available to employees during a personal leave, shall be paid by the employee after thirty (30)

days. The Employer will not hold open the position the employee held at the start of the leave. The employee is not assured of reinstatement at the end of the leave.

ARTICLE XV. **OTHER BENEFITS**

Section 15.1 Miscellaneous Benefits. The Employer provides an employee assistance program and discounts for Hospital services. No change will be made in these programs without first advising the Union and, upon request, fulfilling any bargaining obligations the Employer may have.

Section 15.2 Jury Duty Pay. An employee who has completed her/his probationary period is eligible for jury duty pay. The Employer will pay an employee the difference between the amount received for jury duty and the amount the employee would have earned at their base rate of pay plus shift differential for employees who are assigned to work permanent evening and night shifts for each day of jury service on which the employee was scheduled to work. To be eligible for payment under this section, an employee must furnish documentary evidence from the court which sets forth the amount of such fees received by the employee as a juror.

Section 15.3 Subpoena Pay. An employee who is subpoenaed and appears as a witness in any court or agency proceeding which arose out of or as a result of the employee's employment will be paid at her/his base hourly rate for the time required for such appearance and testimony.

Section 15.4 Bereavement Leave. A full-time or part-time employee who has completed thirty (30) days of continuous employment and who suffers a death in the family will be granted time off without loss of pay, not to exceed a maximum of three (3) scheduled workdays. Such leave will be allowed within seven (7) days after the date of death. "Day" for purposes of this section is defined as the length of the employee's normal shift (e.g., eight (8) hours, ten (10) hours, or twelve (12) hours).

The family includes parent, spouse, brother, sister and child, daughter-in-law, son-in-law, father-in-law and mother-in-law, brother-in-law, sister-in-law, or grandparent, or any of the foregoing where there is a step relation or any other relative who is a member of the employee's household.

An eligible employee who needs additional time off from work beyond that set forth above may request additional bereavement leave which may be granted or denied at the sole discretion of the Employer. Any request will be given fair consideration by the Employer. If granted, the employee will use their vacation and personal time and, if none, will be placed on excused absence or personal leave of absence.

Section 15.5 Annual Military Reserve Training. A full-time employee who has completed at least twelve (12) continuous months of employment and who is required to attend annual military reserve training as a member of the Armed Force Reserves or National Guard will be paid the difference between the employee's military training pay received for the period of training and her/his regular pay computed at the employee's base rate plus shift differential for

employees who are assigned to work permanent evening and night shifts and based on the regularly scheduled hours which the employee would have worked during the period. An employee shall not receive supplemental pay for more than fifteen (15) days on which the employee would have worked in any calendar year. Payment will be made following receipt of documentation evidencing the military pay received.

Section 15.6 Educational Assistance The tuition assistance benefit for courses which commence on October 1, 2008, shall be as follows: Full-time maximum benefit of \$3,000; part-time maximum benefit of \$1,500. The terms and conditions of the tuition assistance benefit shall be continued and are contained in Appendix D.

Section 15.7 Nursing Tuition Loan Forgiveness The Employer shall continue to offer Nursing Tuition Loan Forgiveness of up to \$30,000. The terms and conditions of the tuition assistance benefit shall be continued and are contained in Appendix D.

Section 15.8 Mandatory In-Service Education Programs Employees are required to attend mandatory in-service education programs for their area of practice. Employees who are unable to attend a scheduled mandatory program will be required to attend a make-up program as scheduled by the employee's supervisor no later than 30 days before the deadline for completion of such mandatory program. An employee who fails to successfully complete a mandatory program associated with her/his area of practice within required time frames will not be allowed to continue to practice in her/his position until such a mandatory program has been successfully completed. The employee's supervisor shall provide written notice of the make-up program and written notice that failure to attend the program will result in the employee not being allowed to continue to practice in her/his position until she/he has successfully completed the mandatory program. The Employer will make mandatory programs accessible to employees during paid time. The Employer will make available to employees a schedule of in-service program offerings.

ARTICLE XVI. **JOINT COMMITTEE**

Section 16.1 Joint Committee Meetings There shall be a joint labor-management committee comprised of not more than five (5) representatives of each party. The committee will meet quarterly or more frequently if mutually agreed, to discuss matters of mutual interest, including issues relating to the parties' relationship, and administration of the Agreement. The committee is not a forum for dealing with grievances, for addressing negotiations, or for addressing negotiable matters. Agenda items may be proposed by either party and will be exchanged between the Human Resources Designee and the President of the Union and agreed upon one (1) week prior to a scheduled meeting.

Section 16.2 The parties agree to dedicate a portion of each joint labor-management committee meeting to answering and addressing questions raised by the Union and/or bargaining unit nurses regarding the Employer's health and welfare plans. The parties agree to dedicate a portion of each joint labor-management to answering and addressing questions regarding safety of the

workforce/incidents of workplace violence. The Union is encouraged to add such items to the agenda ahead of each meeting. The Employer shall provide members of administration to address the joint labor-management committee that will be able to address agenda items, i.e. Director of Safety, Benefits Administrator.

Job Description Revisions. Any proposed change to the job descriptions of bargaining unit members shall be presented to the Joint Committee for the Joint Committee's consideration and recommendation. The Employer shall consider any written Joint Committee recommendations prior to implementing any proposed change. If the person authorized by the Employer to implement any proposed changes to job descriptions of bargaining unit members is not a member of the Joint Committee, then that person shall set forth in writing reasons for adopting or not adopting any recommendation of the Joint Committee.

Section 16.3 Professional Councils. The parties acknowledge that the Nursing Administration utilizes professional councils which, with employee participation, assist Nursing Administration with certain matters affecting the health care delivery system. It is not the purpose of these councils to make final decisions regarding terms and conditions of employment. The Employer, in its judgment, after consultation with the Union, may add new councils, eliminate existing councils and make changes regarding any aspect of the councils, including, but not limited to, council policies and procedures. Neither such actions nor any aspect of the councils' work shall be subject to the grievance and arbitration procedure of this Agreement.

ARTICLE XVII.

HEALTH AND SAFETY

Section 17.1 The Employer will comply with all laws and regulations relating to employee health and safety. Employees are expected to report immediately any condition which may be unsafe or unhealthful. Equipment and supplies needed to perform the job safely will be provided to employees by the Employer. Governmentally required tests and/or immunizations from exposure and contact with infectious diseases and hazards in the workplace will be provided to employees at no cost to employees.

The parties recognize the obligation to provide a safe working environment. The Hospital is committed to provide a continuum of high-quality healthcare that is sensitive to the needs of individuals in Rhode Island and to improve the health of its communities. The Hospital recognizes professional nurses and other direct care employees play a key role in satisfying this commitment. The Hospital further recognizes and is committed to, providing a safe and secure workplace for these caregivers.

Section 17.2 To this end, the Hospital agrees to the following in furtherance of its commitment to the prevention of workplace violence;

- 1) The Hospital acknowledges that a safe and secure workplace is an element of providing optimal service as a community hospital and maintaining an effective collective

bargaining relationship as those terms are used in Article 16 Joint Committee meeting of the Parties' Agreement. Discussion of workplace safety and security is appropriate for inclusion in discussions pursuant to that Article 16;

- 2) The Hospital agrees to allow one bargaining unit employee to be a member of the workplace safety committee.

If a bargaining unit employee working with a patient is assaulted by a patient, files a worker's compensation claim that is approved, and loses time from work, the employer shall reimburse the employee for a maximum of one day of lost time at the employee's regular rate of pay.

ARTICLE XVIII. **SEPARABILITY**

Section 18.1 In the event that any provision of this Agreement shall at any time be declared invalid by a final judgment of any court of competent jurisdiction or through final decree of a government, federal, state or local body, such decision shall not invalidate the entire agreement; it being the expressed intention of the parties hereto that all other provisions are not declared invalid and shall remain in full force and effect. The parties agree that any provisions to this Agreement which have been invalidated shall be the subject of negotiations within a thirty (30) day period.

ARTICLE XIX. **PRINTING OF THE AGREEMENT**

Section 19.1 The parties will share equally in the cost of printing of this Agreement. The number of copies printed shall be sufficient to provide each employee and each supervisor and manager with responsibility for employees and provide a reasonable number of copies for newly hired employees.

ARTICLE XX. **STAFFING**

Section 20.1 Labor Management Staffing Committee

There will be a Labor Management Staffing Committee consisting of three (3) members appointed by the Union and three (3) members appointed by the Employer.

The Committee will meet on a quarterly basis on a mutually agreeable day and time unless both parties agree that there are no agenda items to discuss. Interim meetings may be scheduled by mutual agreement.

Union members serving on the committee shall be released from work with pay at their regular rate to attend such meetings.

The role of the Committee will be to devise and utilize a mutually agreeable process for addressing staffing and other related issues.

If an employee is confronted with an emergent staffing situation which is compromising or could compromise the quality of patient care or is putting an employee's license/certification at risk, the employee will immediately notify his/her supervisor. The supervisor will assist in managing the situation promptly.

In addition, the matter will be submitted to the Committee for review at its next meeting.

The Committee is not empowered to take any action that would change this Agreement in any way.

Matters that are subject to an active grievance or arbitration may not be submitted to or considered by the Committee.

The Committee may make recommendations to the Employer and/or the Union. However, the failure of the Employer to take action on a recommendation shall not be subject to the grievance or arbitration procedure in this Agreement.

ARTICLE XXI.

CLOSURES, TRANSFERS, CONSOLIDATIONS AND MERGERS

Section 21.1 If the employer decides to close a unit or department or transfer, consolidate or merge all or part of a Roger Williams service or program and locate it at another Employer facility, the Employer will notify the President of the Union at least forty-five (45) days in advance of the implementation of the decision. Upon request, the Employer will meet with the Union to discuss the effects of the decision upon bargaining unit nurses. Section __ (Layoff) will apply to nurses whose positions are eliminated as a result of the Employer's decision. In the alternative in a transfer, consolidation, or merger, such nurses will be given first preference for any vacancies at the other Employer facility in the service or program which is transferred, consolidated, or merged. Similarly, if a service or program is discontinued in whole or in part at another Employer facility and is transferred, consolidated, or merged at the Roger Williams facility, affected nurses from the other facility will be given first preference for any vacancies in the transferred, consolidated, or merged service or program at the Roger Williams facility. Any nurse who transfers to another Employer facility as a result of any such organizational change described herein will be given full service and seniority credit for time worked at the Roger Williams facility but will no longer be a member of the bargaining unit at the Roger Williams

facility. Correspondingly, any nurse who transfers to the Roger Williams facility as a result of any such change will be given service and seniority credit for time worked at the other facility but will become a member of the bargaining unit covered by this Agreement. Appendix XX contains a list of Employer satellite facilities as of October 1, 2022.

Section 21.2 Vacancies at Other Employer Facilities. A nurse who is laid off as a result of the discontinuance in whole or in part of a service or program at the RWMC facility shall be given first preference of the external applicants for vacancies at other Employer facilities. Such preference shall be given only if the nurse who has been laid off is fully qualified to perform the duties of the vacant position.

Section 21.3 Service and Seniority Credit. Service and seniority credit shall be determined in accordance with Section 6.2 of this Agreement.

Section 21.4 Temporary Transfers. An employee who is transferred temporarily to another facility of the Employer will retain her/his bargaining unit status. A non-bargaining unit employee from another facility of the Employer who is transferred temporarily to the RWMC facility to perform work within the scope of the work performed by bargaining unit employees will retain her/his non-bargaining unit status. If a temporary transfer exceeds three (3) months and the nurse from another facility works a majority of his/her hours at the RWMC facility, then the nurse will become part of RWMC facility bargaining unit. Any temporary assignment will not cause the displacement of any full-time, part-time, or limited part-time nurse at the facility to which the nurse is temporarily assigned.

Section 21.5 New Joint Ventures. The parties agree that, if the RWMC facility enters into new joint ventures with other healthcare entities, the Employer will bargain with the Union if the joint venture would affect the terms and conditions of employment of any nurse employed at the RWMC facility.

Section 21.6 Union Representation. If the Employer transfers a service or program to a new site and if the Union makes a claim that it represents a majority of nurses in an appropriate bargaining unit, the Employer will determine whether it believes that the Union does represent a majority of nurses in an appropriate unit. If the Employer agrees with the Union, the Employer will recognize the Union. If the Employer does not agree with the Union, the Employer will cooperate in the processing of any representation petition before the NLRB.

Section 21.7 Reciprocal Agreement. This article shall be contingent upon a reciprocal agreement at the other facility, if necessary.

Section 21.8 Closures and Relocations. If the employer decides to close a unit or department in which bargaining unit employees are employed, the Employer will notify the President of the Union at least forty-five (45) days in advance of the implementation of the decision and, upon request, meet with the Union to discuss the effects of the decision upon bargaining unit employees.

Section 21.9 Preference for Vacancies. An employee who is laid off as a result of closing a unit or department will be given preference for bargaining unit vacancies in the classification the employee held at the time of layoff, provided the employee is qualified as defined in Section 6.7(c).

ARTICLE XXII.
DURATION

Section 22.1 This Agreement shall become effective on December 1, 2022, and shall remain in full force and effect through November 30, 2025 and thereafter for successive periods of one year unless either party shall on or before the 90th day prior to the expiration of this Agreement, serves written notice to the other party of their desire to change, modify, amend or re-negotiate this Agreement.

SIGNATURES

Roger Williams Medical Center

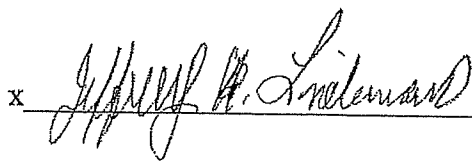
Prospect CharterCARE LLC

United Nurses & Allied Professionals, Local 5092

Lynn Redding, President

Jeffrey H. Liebman, CEO

x 

x 

Date 3/13/2023

Date 2/23/2023

MEMORANDUM OF AGREEMENT
RE: IMPLEMENTATION OF THE WAGE SCALE

November 9, 2022

Effective the first full payroll period following ratification the Employer shall implement the wage scales attached hereto and marked as Exhibit 1.

Employees shall be placed on the scale pursuant to the spreadsheet attached hereto and marked as Exhibit 2.

Employees shall receive step increases pursuant to the contract language (Effective on the closest payperiod to October 1 of each year).

COLA increases shall be pursuant to the contract language (Effective on the closest payperiod to April 1 of each year).

New hires shall be placed on the wage scale based upon years of relevant work experience and advance as set forth above.

In no event shall a new hire be placed on a wage scale above an incumbent employee who has the same or more years of relevant work experience.

Incumbent employees who transfer from per diem to a benefited position shall be placed on the wage scale pursuant to their years of experience.

Staff nurses who transfer to a case manager or educator position shall be placed on the wage scale at the same step as their staff nurse step (e.g. a nurse at step 6 who becomes a case manager shall be at Step 6 of the case manager scale).

As a point of clarification, issues regarding placement on the wage scale set forth in Exhibits 1 and 2 shall be subject to the grievance/arbitration provisions of the Agreement.

MEMORANDUM OF AGREEMENT
UNIT STIPEND

Bargaining unit members who work in the ED, OR, ICU, or CCU shall continue to receive \$5.00 per hour as a stipend (e.g. members shall receive a \$60 stipend per 12 hour shift worked), until May 1, 2023. The Parties agree that in advance of the May 1, 2023 expiration date of the above stipend, they will meet and discuss whether to continue the stipend

APPENDIX A- WAGE SCALES

Case Manager & Nurse Educator Wage Rates

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10	Step 11	Step 12	Step 15	Step 20	Step 25	Step 30
	\$33.58	\$34.83	\$36.08	\$37.40	\$39.12	\$40.56	\$42.07	\$43.24	\$44.95	\$46.53	\$48.27	\$50.08	\$52.19	\$53.68	\$56.21	\$57.80
3.0% April 2023	\$34.59	\$35.87	\$37.16	\$38.52	\$40.29	\$41.78	\$43.33	\$44.54	\$46.30	\$47.93	\$49.72	\$51.58	\$53.76	\$55.29	\$57.90	\$59.53
1.5% April 2024	\$35.11	\$36.41	\$37.72	\$39.10	\$40.90	\$42.40	\$43.98	\$45.21	\$46.99	\$48.64	\$50.46	\$52.36	\$54.56	\$56.12	\$58.76	\$60.43
1.5% October 1, 2024	\$35.63	\$36.96	\$38.29	\$39.69	\$41.51	\$43.04	\$44.64	\$45.88	\$47.70	\$49.37	\$51.22	\$53.14	\$55.38	\$56.96	\$59.65	\$61.33
1.5% April 1, 2025	\$36.17	\$37.51	\$38.86	\$40.28	\$42.13	\$43.69	\$45.31	\$46.57	\$48.41	\$50.12	\$51.99	\$53.94	\$56.21	\$57.82	\$60.54	\$62.25
1.5% October 1, 2025	\$36.71	\$38.08	\$39.44	\$40.89	\$42.77	\$44.34	\$45.99	\$47.27	\$49.14	\$50.87	\$52.77	\$54.75	\$57.05	\$58.68	\$61.45	\$63.19

Step increases subject to Article IX.

-Members of the bargaining unit shall receive a 3.0% increase effective first full pay period closest to April 1, 2023.

-Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to April 1, 2024.

-Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to October 1, 2024.

-Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to April 1, 2025.

-Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to October 1, 2025.

-Progression to succeeding steps in the pay scale will be on an annual basis thereafter on the first full pay period closest to October 1st of each contract year.

-Current bargaining unit members shall be placed on the above wage scale according to their years of experience, but in no case shall a member have their pay reduced.

-Any member whose rate is greater than the corresponding date shall remain on that step until such time that the step movement shall provide an increase in pay. Such members shall continue to receive annual COLAs.

RN Wage Scale

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10	Step 11	Step 12	Step 15	Step 20	Step 25	Step 30
	\$30.58	\$31.83	\$33.08	\$34.40	\$36.12	\$37.56	\$39.07	\$40.24	\$41.95	\$43.53	\$45.27	\$47.08	\$49.19	\$50.68	\$53.21	\$54.80
3.0% April 2023	\$31.50	\$32.78	\$34.07	\$35.43	\$37.20	\$38.69	\$40.24	\$41.45	\$43.21	\$44.84	\$46.63	\$48.49	\$50.67	\$52.20	\$54.81	\$56.44
1.5% April 2024	\$31.97	\$33.28	\$34.58	\$35.96	\$37.76	\$39.27	\$40.85	\$42.07	\$43.86	\$45.51	\$47.33	\$49.22	\$51.43	\$52.98	\$55.63	\$57.29
1.5% October 1, 2024	\$32.45	\$33.78	\$35.10	\$36.50	\$38.33	\$39.86	\$41.46	\$42.70	\$44.51	\$46.19	\$48.04	\$49.96	\$52.20	\$53.78	\$56.46	\$58.15
1.5% April 1, 2025	\$32.94	\$34.28	\$35.63	\$37.05	\$38.90	\$40.45	\$42.08	\$43.34	\$45.18	\$46.88	\$48.76	\$50.71	\$52.98	\$54.58	\$57.31	\$59.02
1.5% October 1, 2025	\$33.43	\$34.80	\$36.16	\$37.61	\$39.49	\$41.06	\$42.71	\$43.99	\$45.86	\$47.59	\$49.49	\$51.47	\$53.77	\$55.40	\$58.17	\$59.91

- Step 1 of the pay scale is the starting rate for a newly licensed Nurse, Registered
- Progression to succeeding steps in the pay scale will be on an annual basis thereafter on the first full pay period closest to October 1st of each contract year.
- Current bargaining unit members shall be placed on the above wage scale according to their years of experience, but in no case shall a member have their pay reduced.
- Any member whose rate is greater than the corresponding date shall remain on that step until such time that step movement shall provide an increase in pay. Such members shall continue to receive annual COLAs.

Step increases subject to Article IX.

- Members of the bargaining unit shall receive a 3.0% increase effective first full pay period closest to April 1, 2023.
- Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to April 1, 2024.
- Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to October 1, 2024.
- Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to April 1, 2025.
- Members of the bargaining unit shall receive a 1.5% increase effective first full pay period closest to October 1, 2025.

APPENDIX B – PER DIEM EMPLOYEES

Wages

For new hires:

Shift 1: \$44.11

Shift 2: \$46.64

Shift 3: \$50.41

Per diem nurses who currently make more than the above rates will be “red-circled” for the life of the Agreement.

Regular Per Diems

- Work Requirements (remains as proposed): 72 hours per 6 week schedule (including 2 weekend shifts). One major and one minor holiday per year.
- Regular per diem employees shall receive an additional 20% premium for all hours worked.
- Hourly rates shall increase by the yearly COLA.
- Shall be eligible to participate in the 401k plan.

Premium Per Diems

- Work Requirements (new): 144 hours per 6 week schedule (including 2 weekend shifts). One major and one minor holiday per year.
- Premium per diem shall receive an additional 20% premium for all hours worked
- Hourly rates shall increase by the yearly COLA.
- Shall be eligible to participate in the 401k plan.

All per diem employees shall be eligible to participate in the 401k/retirement plan.

Eligibility-

- Current Rhode Island Registered Nurse License
- Two years of hospital experience in a health care organization required.
- BLS and ACLS required.

- Cannot be currently employed at a CharterCARE Health Care facility or affiliate in Rhode Island.

Continuing Education

- Employees are required to successfully complete all mandatory education as assigned via HealthStream.
- It is the employee's responsibility to complete and return all continuing education documents, i.e. certificates/forms by the posted due date to document knowledge of recent changes.

Per Diems Work requirements

- A Minimum of seventy-two (72) hours per 6 week schedule period (this includes two weekend shifts). The availability commitment for Premium Per Diems shall be 144 hours in a six week schedule period (this includes two weekend shifts).
- A minimum of 1 shift per week is preferred
- Unit assignment will be aligned to Nurse Experience and skill set.
- Employees will be one (1) hour prior to start of their shift if not needed for days and two (2) hours prior to other shifts.
- All shifts will be booked through the Staffing Office not individual Unit leaders.
- Employees will not decide what units they will work, also first to float when needed.
- Employees will fill out the 6-week schedule in two weeks in advance with their available time
- Once per diems have been scheduled for minimum commitment, they can pick up shifts for other bargaining unit employees.
- Obligated to work a minimum of 1 Minor Holiday and 1 Major Holiday on a rotational basis. (Major Holidays are Thanksgiving, Christmas, New Year's Day and Independence Day)

Attendance


- Failure to meet the seventy-two (72) hour availability commitment for the six (6) week schedule period may result in termination. The availability commitment for Premium Per Diems shall be 144 hours in a six week schedule period (this includes two weekend shifts).
- Will be held accountable to Roger Williams Medical Center attendance policy.
- If there is a need to call out for their scheduled shift the employee will need to notify the following:
Staffing office (401) 456- 4892 Monday- Friday 8a -4pm. If the per diem employee does not speak to someone, they must notify the Nursing Leader or Nursing Supervisor. Nursing Supervisor on off shifts (401) 919-0862, during off hours

- Call outs must be 2 hours before the start of the employee's shift except for days, which will be 1.0 hours before 7:00 am.
- Canceling a shift after confirmation of schedule will be counted as an occurrence
- If the staff is canceled by employer this will not count as an occurrence.
- A minimum of 1 shift per week is preferred.
- Unit assignments will be aligned to Nurse experience and skill set.
- The Hospital will make every effort to notify the employee of any change or cancellation at least one (1) hour before day shift and two (2) hours before other shifts, prior to the start of the shift.

APPENDIX C- UNITS

1. Emergency Department
2. Ambulatory Surgery Unit (ASU)
3. Post Anesthesia Care Unit (PACU)
4. Peri-Operative Services
5. Interventional Radiology (IR)
6. Nuclear Medicine
7. Endoscopy
8. Cancer Center
9. Center 1- Addiction Medicine
10. Bone Marrow Transplant (BMT)
11. Intensive Care Unit
12. Critical Care Unit
13. East 3A- Medical Surgical/Telemetry
14. East 3B- Medical Surgical/Telemetry
15. Center 3- Medical Surgical/Telemetry
16. West 3 Geriatric Psychiatry
17. East 4 Orthopedic Surgery
18. Center 4 Bariatric and Surgical Oncology
19. West 4 Psychiatric
20. Nurse Educator
21. Case Management

APPENDIX D- EDUCATIONAL ASSISTANCE/LOAN FORGIVENESS

 arterCARE HEALTH PARTNERS	HUMAN RESOURCES		
	Chapter		Effective Date 12/1/2018
	Policy	Educational Assistance	Approved By Signature on file
			Policy # HR-500-00010-C

1.0 Purpose and Scope

The organization recognizes that its ability to deliver quality patient care is largely dependent on the exceptional clinical and professional skills of its employees. One way that the organization seeks to assist with the development of these skills is through reimbursement assistance of certain educational expenses.

2.0 Policy Statement

Financial assistance will be provided to eligible employees who take the initiative on their own time for the purposes of self development in the following manners:

- Completing individually approved courses of study undertaken for the purpose of improving skills required by the employee in his/her present position, or
- Enrolling as a candidate for a university degree directly applicable to the employee's career development within the organization, or
- Obtaining and/or renewing certification by a recognized professional organization that is relevant to the employee's profession and not a required qualification for a position, or
- Enrolling in qualifying continuing education programs that might not otherwise be offered through the organization.


3.0 Eligibility

A. Status

- Individuals must be employed full- or part-time (20+ standard hours per week) for benefits under this policy.
- Individuals who are limited-time (less than 20 hours per week), Per Diem, and/or Temporary employees are ineligible for the program.
- To receive reimbursement, employees must be in an active work status. Employees on a Leave-of-Absence are eligible for reimbursement upon return to work, provided their application for Educational Assistance was received prior to the start of the leave of absence.

B. Length of Service

- Employees must be employed on a full- or part-time basis for a minimum of 6 months by the beginning of the semester for which the employee requests assistance.

	HUMAN RESOURCES		
	Chapter		Effective Date 12/1/2018
	Policy	Educational Assistance	Approved By Signature on file
			Policy # HR-500-00010-C

C. Collective Bargaining Agreements

- Members of a collective bargaining unit are eligible for Educational Assistance as specified in their respective agreements and should refer to their contract for eligibility guidelines and procedures.

4.0 Definitions


Education Assistance includes Tuition Reimbursement and Continuing Education.

A. Tuition Reimbursement

- Any course from an accredited school, college or university that is directly related to the employee's current job, as approved by Human Resources, and for which degree credits are granted is eligible for reimbursement.
- Only accredited universities and schools shall be covered by this policy. On-line and correspondence-type instruction is to be approved only if comparable classroom-type instruction is not available and only if the institution, in the judgment of the department and Human Resources, provides a satisfactory standard of education.
- Tuition reimbursement is limited to tuition, course fees, and books directly related to the course and required by the educational facility for Fall, Spring, Winter, or Summer College courses.
- Course may be Graduate or Undergraduate in nature and are typically 3 or 4 credit courses.

B. Continuing Education

- A course or program accredited through a professional organization that provides continuing education credits or contact hours. Continuing Education programs can include live seminars, satellite broadcasts, videos, professional journals, and on-line courses.
- The training must be related to the employee's work. There must be evidence that the employee can use the training and that his/her performance will benefit from it.
- Educational Assistance reimbursements do not include reimbursements to employees for licenses and certifications that are a required qualification of their current position.

 arterCARE HEALTH PARTNERS	HUMAN RESOURCES		
	Chapter		Effective Date 12/1/2018
	Policy	Educational Assistance	Approved By Signature on file
			Policy # HR-500-00010-C

5.0 Grade Requirement

- For tuition reimbursement, a grade of not less than (C) or "average" by the institution's standards (or pass in a pass/fail course) must be attained in order to receive the benefit of a refund. For graduate level course, a grade of not less than a (B) is required.
- A "pass" on a certifying examination is required.
- A certificate of attendance/completion is required for Continuing Education.


6.0 Reimbursement Benefit

Following successful completion of the approved course, and if the requirements of this policy are met, a reimbursement will be made by the organization. The refund will be 75% of the actual cost to the employee of tuition, books, lab fees and registration, after deducting payments from any institutional or government source. Any travel expenses or lodging charges are excluded from reimbursement.

1. **Full-Time** (defined as 32+ hours per week) – A maximum of \$3,000 per academic year (September 1 through August 31)
2. **Part-Time** (defined as 20-31 hours per week) – A maximum of \$1,500 per academic year (September 1 through August 31)

7.0 Reimbursement Procedure

1. The Education Reimbursement Application is located on the CCHP Intranet under HR -> Benefits -> Education Reimbursement.
2. The employee should complete the form and submit to his/her manager for evaluation and approval.
3. If approved, the employee should deliver the signed form to Human Resources by fax, email, or in person as noted on the Education Reimbursement Application.
4. Reimbursement will be provided to the employee only when the form has been approved by the manager and received and processed by Human Resources prior to the start of the course.
5. Upon receipt of a qualifying grade, the employees must submit to Human Resources all supporting documentation for expenses. Eligible reimbursable expense documentation must include:
 - a. Detailed bill from the educational institution / organization,

	HUMAN RESOURCES		
	Chapter		Effective Date 12/1/2018
	Policy	Educational Assistance	Approved By Signature on file Policy # HR-500-00010-C

- b. Proof of payment in full for each course/program verified in writing by the school, college or university, or certifying organization, and
 - c. A copy of the final grade report.
- 6. Proof of participation and payment are required within 30 days of completing the program to receive reimbursement.
- 7. Education Reimbursement will be processed by Human Resources. Employees will receive reimbursement in the form of a live check mailed to their home. It can take up to 4-6 weeks to receive the reimbursement check.
- 8. The organization does not make withholding from refunds for tax purposes.
- 9. The reimbursement amount is dependent upon the employee's full-time or part-status at the time the reimbursement is paid. If an employee has transferred to an ineligible status or is no longer employed by CCHP, he/she is not eligible for reimbursement. CCHP reserves the right to recover education assistance money paid if an individual terminates employment within 6 months of receiving reimbursement.

8.0 Timing

Coursework must be taken on the employee's own time. There must be more than a reasonable expectation that he/she will be able to carry the workload of the selected course of study without infringement to his/her work responsibility.

9.0 Department Mandated Training

A manager or department may require designated employees to attend a specific course during or after working hours. In such cases, that department will assume related costs for the course as appropriate. Various departments may from time to time pay for courses or make funds available for specific education purposes. These situations are outside of the Educational Assistance Plan and should not be confused with those available under the plan.

Revision History

Date	Description of Change
3/1/13	Replaces CCHP Educational Assistance Policy (Policy Number HR-500-00010-C)
12/1/2018	Updated reimbursement maximums, added clarifying language, defined FT as 32 hours

Attachment:

Education Reimbursement Application



Education Reimbursement Program

CharterCARE Health Partners recognizes that its ability to deliver quality patient care is largely dependent on the exceptional clinical and professional skills of its employees. One way that CharterCARE seeks to assist with the development of these skills is through reimbursement assistance of certain educational expenses.

Financial assistance will be provided to eligible employees across all CharterCARE entities who take the initiative on their own time for the purposes of self-development in the following manners:

- Completing individually approved courses of study undertaken for the purpose of improving skills required by the employee in his/her present position, or
- Enrolling as a candidate for a university degree directly applicable to the employee's career development within the organization, or
- Obtaining and/or renewing certification by a recognized professional organization that is relevant to the employee's profession and not a required qualification for a position, or
- Enrolling in qualifying continuing education programs that might not otherwise be offered through the organization.

Eligibility:

Individuals must be employed full- and/or part-time (40+ standard hours bi-weekly) for six months by the beginning of the semester for which the employee requests CharterCARE's assistance. Only employees who are actively at work may request a refund. Employees on a Leave of Absence are not eligible for reimbursement until their return to active employment. Members of a collective bargaining unit are eligible for Educational Assistance as specified in their respective agreements and should refer to their contract for eligibility guidelines and procedures.

Reimbursement:

Following successful completion of the approved course, and if the requirements of this program are met, a reimbursement will be made by CharterCARE. The refund will be 75% of the actual cost to the employee of tuition, books, lab fees and registration, after deducting payments from any institutional or government source.

- Full-Time (32+ hours per week) – A maximum \$3,000 per academic year (September 1 through August 31).
- Part-Time (20-31 hours per week) – Pro-rated up to a maximum of \$1,500 per academic year (September 1 through August 31).

Process and Required Documents:

1. The employee must submit a completed Education Reimbursement Application with manager signatures **PRIOR** to the start of the course to the Human Resources Department. Applications

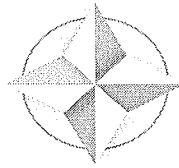
can be faxed to 401-519-3347, emailed to educationreimbursement@chartercare.org or interoffice to Bianca Ledo in Human Resources at Marian Hall.

2. Following the end of the course, the employee must submit the following documentation within 30 days of the course end date:
 - Detailed bill from the educational institution/organization, and
 - Proof of payment in full for each course verified in writing by the school, college or university, or certifying organization, and
 - Proof of passing grade of a "C" or better for undergraduate course, or "B" or better for graduate level courses. A "pass" on a certifying examination is required.
3. Upon receipt of the above required documents, the reimbursement will be processed and sent to Accounts Payable for payment. It can take up to 30 days to receive the reimbursement check in the mail to your home address.

Failure to submit the required documentation as outlined above will result in a denial of the request.

Additional Notes:

- Applications and refund procedure may be obtained from the Human Resources Department or on the CCHP Intranet (HR – Benefits – Education Reimbursement).
- The employee's application for a specific course of study and educational institution must be approved prior to each enrollment period by the Human Resources Department and Manager.
- The training must be taken on the employee's own time. There must be more than a reasonable expectation that he/she will be able to carry the workload of the selected course of study without infringement to his/her work responsibility.
- The training must be related to the employee's work. There must be evidence that the employee can use the training and that his/her performance will benefit from it. Again, training that is department mandated will be handled by the department and not through this program.
- The employee must be actively employed at the time payment is due. If an employee terminates employment within six months from reimbursement, CharterCARE reserves the right to request full reimbursement.
- On-line and correspondence-type instruction is to be approved only if comparable classroom-type instruction is not available and only if the institution, in the judgment of the department and Human Resources, provides a satisfactory standard of education.
- CharterCARE does not take any withholding from reimbursements for tax purposes.



CharterCARE
HEALTH PARTNERS

Nursing Tuition Loan Forgiveness

Employer will incrementally reimburse up to \$30,000 of nursing school student loan debt over a three-year period for eligible RNs who are employed in a benefits-eligible position.

ELIGIBILITY SCOPE

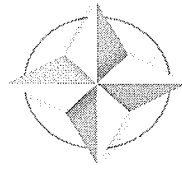
Applicants must meet all of the following requirements to qualify:

- a. Be a Registered Nurse employed with CharterCARE Health Partners.
- b. Work in a benefits-eligible, part-time (minimum 20 hours per week) or full-time, Registered Nurse required position within CharterCARE Health Partners.
- c. Not have active corrective action within 12 months of application.
- d. Carry student loan debt related to the completion of an initial nursing degree or currently be enrolled in a nursing-related degree.
- e. Employees may participate in both tuition reimbursement and tuition forgiveness program, but they cannot stack the programs. This means that in no case will the combined tuition reimbursement and forgiveness amount exceed lesser of initial (at time of student loan forgiveness program application) student loan debt or \$10,000 per year.
- f. Nurses who receive a sign-on bonus are eligible for both the sign-on and tuition forgiveness.

GENERAL GUIDELINES/PROCEDURE

The Nursing Loan Forgiveness Program is transferrable throughout all CCHP facilities. This program does not extend to other PMH-owned entities.

- a. The first loan payment (reduced by applicable tax withholding) is issued in the employee's paycheck after one (1) year of completed employment (part-time minimum of 20 hours per week or full-time status). For existing employees hired prior to September 1, 2021, the first loan payment is issued if all program requirements are met as of September 1, 2022.
- b. The second loan payment (reduced by applicable tax withholding) is issued in the employee's paycheck after two (2) consecutive years of completed employment (part-time minimum of 20 hours per week or full-time status). For existing employees hired prior to September 1, 2021, the second loan payment is issued if all program requirements are met as of September 1, 2023.
- c. The final loan payment (reduced by applicable tax withholding) is issued in the employee's paycheck after three (3) consecutive years of completed employment (part-time minimum of 20 hours per week or full-time status). For existing employees hired prior to September 1, 2021, the second loan payment is issued if all program requirements are met as of September 1, 2024.
- d. The loan payment for part-time employees is prorated based on forty (40) hour budgeted hours per week.
- e. The loan payments will not be prorated or paid out if an employee leaves the organization or becomes ineligible to participate in the program for any reason.
- f. The loan payment will not be prorated or paid out in the year in which an employee becomes subject to formal corrective action.
- g. Employees will apply and complete the Student Loan Forgiveness Agreement and adhere to the program detail requirements.



CharterCARE
HEALTH PARTNERS

Nursing Tuition Loan Forgiveness

PROCESS:

- a. Nurse: Obtain a Loan Forgiveness Agreement from Human Resources.
- b. Nurse: Complete the Loan Forgiveness Agreement.
- c. Nurse: Submit Loan Forgiveness Agreement and loan statement(s) to Human Resources within thirty (30) days of hire. Employees hired prior to December 20, 2021, must submit paperwork by January 31, 2022.
- d. Human Resources: Review documents for completeness and accuracy. Provide feedback to Nurse if additional documentation is needed.
- e. Nurse: Notify Human Resources of any change in status or transfer; a change in status or leave of absence may result in ineligibility for payment.
- f. Human Resources: Before issuing payment at 1 year mark, confirm eligibility status with Manager & HRBP.
- g. Nurse: Provide updated student loan statement upon request
- h. Human Resources: Submit tuition reimbursement for processing.
- i. Human Resources: Maintain original loan agreement and documentation; provide nurse with a copy of the decision notification.
- j. Nurse: For reimbursement in Year 2 and Year 3, submit new Loan Forgiveness Agreement and current loan statement. HR will verify eligibility and submit payment.

APPENDIX E- INSURANCES

4867-2151-7131, v. 1

YOUR 2023 Benefits



2023 Contributions -

CharterCARE Health Partners, CharterCARE Medical Associates, Roger Williams Medical Center, Blackstone Valley Surgicare, Home Health and Hospice, Our Lady of Fatima Hospital

Eligibility for Benefits

	Full Time Employees	Part Time Employees
Hours Requirement	32 - 40 hours per week	20 - 31 hours per week

Medical - 26 Pay Periods

	Payroll Deductions* Bi-Weekly - 26 Pay Periods	
	Full Time	Part Time
EPO		
Employee Only	\$47.06	\$83.19
Employee + Spouse	\$103.54	\$183.02
Employee + Child(ren)	\$97.78	\$164.72
Employee + Family	\$130.73	\$261.46
Limited PPO		
Employee Only	\$68.02	\$136.05
Employee + Spouse	\$148.86	\$297.73
Employee + Child(ren)	\$141.41	\$282.84
Employee + Family	\$198.01	\$396.02
Premier PPO		
Employee Only	\$155.89	\$287.60
Employee + Spouse	\$341.15	\$603.96
Employee + Child(ren)	\$324.09	\$573.76
Employee + Family	\$453.77	\$862.79
Value PPO		
Employee Only	\$32.94	\$32.94
Employee + Spouse	\$72.48	\$128.11
Employee + Child(ren)	\$68.45	\$115.31
Employee + Family	\$91.51	\$183.03

* If you have not completed the required Wellness activities, you will pay an additional \$50 per month surcharge. Also, if you use tobacco products, you will pay an additional \$50 per month surcharge. For more information, please see the Wellness section of your Employee Benefits Guide for details.

Contributions may differ slightly from published rates due to system rounding.

JANUARY 1, 2023 - DECEMBER 31, 2023

2023 Contributions (continued)

Dental & Vision

	Payroll Deductions 26 Pay Periods	
	Full Time	Part Time
Dental: DPPO		
Employee Only	\$1.82	\$3.64
Employee + Spouse	\$4.09	\$8.17
Employee + Child(ren)	\$3.88	\$7.76
Employee + Family	\$6.55	\$13.11
Vision		
Employee Only	\$3.42	
Employee + Spouse	\$6.84	
Employee + Child(ren)	\$7.32	
Employee + Family	\$11.70	

Optional Life

Monthly Rate per \$1,000 of Coverage	
Employee or Spouse (Based on Employee Age as of Jan. 1)	
Under age 25	\$0.06
Age 25 to 29	\$0.07
Age 30 to 34	\$0.08
Age 35 to 39	\$0.10
Age 40 to 44	\$0.12
Age 45 to 49	\$0.19
Age 50 to 54	\$0.43
Age 55 to 59	\$0.65
Age 60 to 64	\$0.78
Age 65 to 69	\$1.27
Age 70 or older	\$2.06
Child	
Age 14 days to 26 years	\$0.12

Optional AD&D

Monthly Rate per \$1,000 of Coverage	
Employee Coverage	\$0.02
Spouse Coverage	\$0.03
Child Coverage	\$0.03

Optional Long Term Disability (LTD)

Monthly Rate per \$100 of Coverage	
Under age 25	\$0.10
Age 25 to 29	\$0.16
Age 30 to 34	\$0.24
Age 35 to 39	\$0.55
Age 40 to 44	\$0.76
Age 45 to 49	\$1.01
Age 50 to 54	\$1.08
Age 55 to 59	\$1.11
Age 60 to 64	\$1.37
Age 65 to 69	\$1.49
Age 70 or older	\$0.47

Sample Optional LTD Calculation:

Your deduction is based off your monthly salary.

For example, if you are 36 years old, your monthly rate per \$100 of coverage is \$0.55.

Then if you make \$2,500 per month:

$$\$2,500 \div 100 \times 0.550 \times 12 \div 26 =$$

$$\$6.34 \text{ per pay period}$$

Sample Optional Life Calculation:

34 year old employee elects \$50,000 for himself, \$25,000 for his 36 year old spouse, and \$10,000 for children.

Employee: $\$50,000/1000 = 50 \times 0.08 = \4.00 per month	$\$4.00 \times 12/26 = \1.85 per pay period
Spouse: $\$25,000/1000 = 25 \times 0.08 = \2.00 per month	$\$2.00 \times 12/26 = \0.92 per pay period
Child(ren): $\$10,000/1000 = 10 \times 0.12 = \1.20 per month	$\$1.20 \times 12/26 = \0.55 per pay period

Sample Optional AD&D Calculation:

Employee elects \$50,000 = $50 \times .02 = \$1.00 \times 12/26 = \0.46 per pay period
 Employee elects \$50,000 for spouse = $50 \times .03 = \$1.50 \times 12/26 = \0.69 per pay period

Medical: Exclusive Provider Organization (EPO)

The Medical Exclusive Provider Organization (EPO) plan requires that you receive your health care from providers in the PMH National Network (Tier 1). The EPO Plan offers a full range of coverage with low out of pocket costs and is designed to be a cost-effective means of obtaining your health care services to protect you and your family in the event of an illness or injury.

All services must be received from providers in the Tier 1 Network when available, regardless of where you reside. If utilizing a Tier 1 Network provider, benefits will be paid based on your covered benefits where you are employed. Out-of-network benefits are only available for emergency services; otherwise the service will not be covered. If services are not available within the Tier 1 Network, you may access care through the Blue Cross Blue Shield BlueCard PPO Network (Tier 2). Tier 2 benefits apply when services are rendered by a Tier 2 provider.

	Blue Cross Blue Shield EPO	
	Tier 1 Roger Williams Medical Center, Our Lady of Fatima Hospital, St. Joseph Health Center, Blackstone Valley Surgicare, CharterCARE Medical Associates and affiliated providers** and PMH National Network***	Tier 2 Services Not Available in the CharterCARE Network****
Lifetime Plan Maximum (per individual)		
Essential Health Benefits	Unlimited	
Calendar Year Deductible		
Individual	\$0	\$250
Family	\$0	\$750
Calendar Year Out-of-Pocket Maximum (includes Deductible)		
Individual	\$2,750	\$2,750
Family	\$8,250	\$8,250
Physician Services		
Office Visit (Primary Care Physician)	\$35 copay	
Office Visit (Specialist)	\$40 copay	
Surgeon, Assistant Surgeon, Anesthesia	No charge	No charge*
Teladoc (Telemedicine Visit)	\$10 copay	\$10 copay
Inpatient Services - Facility		
Inpatient Hospital Room & Board	No charge	\$600/admit, then 10%*
Outpatient Services - Facility		
Outpatient Lab, X-Ray, Diagnostic	No charge	10%*
Outpatient Surgery	No charge	\$300/service, then 10%*
Ambulatory Surgical Center	No charge	\$300/service, then 10%*
Hospital-Outpatient Treatment (nonsurgical & other expenses)	No charge	\$300/service, then 10%*
Emergency Care		
Urgent Care	\$35 copay	
Emergency Room (copay waived if admitted)	No charge	\$170 copay*
Emergency Room Physician	No charge	No charge*
Ambulance	10%	10%*
Preventive Care / Wellness Services		
Physical Exams and Periodic Check-Ups	No charge	No charge
Well Baby and Well Child Care	No charge	No charge
Well Woman Exams	No charge	No charge
Immunizations	No charge	No charge

* After deductible

** When service is available

*** When service is available and based on covered benefits where you are employed

**** Members may access BCBS/BlueCard Participating Providers only when services are not available in the Preferred EPO network or Emergency Services

Medical: Exclusive Provider Organization (EPO) (continued)

Blue Cross Blue Shield EPO		
	Tier 1 Roger Williams Medical Center, Our Lady of Fatima Hospital, St. Joseph Health Center, Blackstone Valley Surgicare, CharterCARE Medical Associates and affiliated providers** and PMH National Network***	Tier 2 Services Not Available in the CharterCARE Network****
Other Provider Services		
Physical, Speech, Occupational & ABA Therapy (60 combined visits/cal yr)	\$40 copay	\$40 copay
Chiropractic Care (unlimited)	Not covered	Not covered
Acupuncture	Not covered	Not covered
Allergy Services - Primary Care	\$35 copay	\$35 copay
Allergy Services - Specialist	\$40 copay	\$40 copay
Allergy Services - Injections & Serum	No charge	No charge
Pregnancy and Maternity Care		
Pre-Natal Care (Initial Visit)	No charge	No charge
Inpatient Hospital Room and Semi Private	No charge	\$600/admit, then 10%*
General Medical Services		
Physician's Office, Lab and X-Ray	No charge after OV copay	OV copay, then 10%
Independent Lab and X-Ray	No charge after OV copay	OV copay, then 10%
Advanced Imaging	No charge	\$100 copay
Skilled Nursing or Extended Care Facility (up to 100 visits/cal year)	No charge	\$100 copay/day
Home Health Care (up to 100 visits/cal year)	\$35 copay/visit	\$35 copay/visit
Hospice Care	No charge	\$100 copay/day
Durable Medical Equipment	No charge	No charge*
Hearing Aid Services & Ancillary Equipment	No charge, deductible waived \$2,000 allowance every 24 months (does not count towards OOP Max)	
Mental or Nervous Disorders and Substance Abuse		
Inpatient Facility	No charge	\$600/admit, then 10%*
Inpatient Physician	No charge	No charge*
Outpatient Visits (physician)	\$35 copay	
Prescription Drug Coverage	Medimpact Mandatory Generic Retail ¹	
Deductible (Individual/Family)	None	
Out-of-Pocket Max (Indiv/Family)	\$2,500 / \$5,000	\$2,500 / \$5,000
Retail Rx (up to 30-day supply)		
Generic	\$15 copay	
Formulary Brand	\$45 copay	
Non-Formulary Brand ²	\$60 copay	
Mail Order Rx (90 day supply)		
Generic	\$30 copay	
Formulary Brand	\$90 copay	
Non-Formulary Brand ²	\$120 copay	
Specialty (30-day supply)	25% (\$150 max.)	

* After deductible

** When service is available

*** When service is available and based on covered benefits where you are employed

**** Members may access BCBS/BlueCard Participating Providers only when services are not available in the Preferred EPO network or Emergency Services

1 If a brand name drug is dispensed and a generic drug is available, member will be responsible for the Brand copay plus the difference in cost between the brand and generic drug.

2 Prior authorization is required for non-formulary and specialty prescriptions.

Medical: Limited PPO

With the Limited PPO plan, you have flexibility to use the PMH National Network (Tier 1) or the Blue Cross Blue Shield Network (Tier 2). Your cost sharing will depend on whether you use Tier 1 or Tier 2 networks. There is no out-of-network coverage unless it is an emergency.

	Blue Cross Blue Shield Limited PPO	
	Tier 1 PMH National Network**	Tier 2 Blue Cross / Blue Shield Preferred Network
Lifetime Plan Maximum (per individual)		
Essential Health Benefits	Unlimited	
Calendar Year Deductible		
Individual	\$0	\$1,630
Family	\$0	\$4,890
Calendar Year Out-of-Pocket Maximum (includes Deductible)		
Individual	\$2,750	\$5,000
Family	\$8,250	\$10,000
Physician Services		
Office Visit (Primary Care Physician)	\$35 copay	20%*
Office Visit (Specialist)	\$40 copay	20%*
Surgeon, Assistant Surgeon, Anesthesia	No charge	20%*
Teladoc (Telemedicine Visit)	\$10 copay	\$10 copay
Inpatient Services - Facility		
Inpatient Hospital Room & Board	No charge	20%*
Outpatient Services - Facility		
Outpatient Lab, X-Ray, Diagnostic	No charge	20%*
Outpatient Surgery	No charge	20%*
Ambulatory Surgical Center	No charge	20%*
Hospital-Outpatient Treatment (nonsurgical & other expenses)	No charge	20%*
Emergency Care		
Urgent Care	\$35 copay	
Emergency Room (copay waived if admitted)	No charge	20%*
Emergency Room Physician	No charge	20%*
Ambulance	10%	10%*
Preventive Care / Wellness Services		
Physical Exams and Periodic Check-Ups	No charge	
Well Baby and Well Child Care	No charge	
Well Woman Exams	No charge	
Immunizations	No charge	

* After deductible

** When service is available and based on covered benefits where you are employed.

Medical: Limited PPO (continued)

	Blue Cross Blue Shield Limited PPO	
	Tier 1 PMH National Network**	Tier 2 Blue Cross / Blue Shield Preferred Network
Other Provider Services		
Physical, Speech, Occupational & ABA Therapy (60 combined visits/cal yr)	\$40 copay	20%*
Chiropractic Care (unlimited)	Not covered	Not covered
Acupuncture	Not covered	Not covered
Allergy Services - Primary Care	\$35 copay	20%*
Allergy Services - Specialist	\$40 copay	20%*
Allergy Services - Injections & Serum	No charge	20%*
Pregnancy and Maternity Care		
Pre-Natal Care (Initial Visit)	No charge	No charge
Inpatient Hospital Room and Semi Private	No charge	20%*
General Medical Services		
Physician's Office, Lab and X-Ray	No charge after OV copay	20%*
Independent Lab and X-Ray	No charge	20%*
Advanced Imaging	No charge	20%*
Skilled Nursing or Extended Care Facility (up to 100 visits/cal year)	No charge	20%*
Home Health Care (up to 100 visits/cal year)	\$35 copay/visit	20%*
Hospice Care	No charge	20%*
Durable Medical Equipment	No charge	20%*
Hearing Aid Services & Ancillary Equipment	No charge; \$2,000 allowance every 24 months (does not count towards OOP Max)	20%*
Mental or Nervous Disorders and Substance Abuse		
Inpatient Facility	No charge	20%*
Inpatient Physician	No charge	20%*
Outpatient Visits (physician)	\$35 copay	20%*
Prescription Drug Coverage	Medimpact Mandatory Generic Retail ¹	
Deductible (Individual/Family)	None	
Out-of-Pocket Max (Indiv/Family)	\$2,500 / \$5,000	
Retail Rx (up to 30-day supply)		
Generic	\$15 copay	
Formulary Brand	\$45 copay	
Non-Formulary Brand ²	\$60 copay	
Mail Order Rx (90 day supply)		
Generic	\$30 copay	
Formulary Brand	\$90 copay	
Non-Formulary Brand ²	\$120 copay	
Specialty (30-day supply)	25% (\$150 max.)	

* After deductible

** When service is available and based on covered benefits where you are employed.

1 If a brand name drug is dispensed and a generic drug is available, member will be responsible for the Brand copay plus the difference in cost between the brand and generic drug.

2 Prior authorization is required for non-formulary and specialty prescriptions.

Medical: Premier PPO

The Premier PPO plan offers the ultimate freedom of choice and is the richest plan offered. You may obtain services from any provider you choose, but your costs will be lower when utilizing the PMH National Network (Tier 1) or the Blue Cross Blue Shield Network (Tier 2) Provider. For services received Out-of-Network, you will be responsible for any difference between the covered expense and actual charges.

	Blue Cross Blue Shield Premier PPO		
	Tier 1 PMH National Network**	Tier 2 Blue Cross / Blue Shield Preferred Network	Tier 3 Out-of-Network***
Lifetime Plan Maximum (per individual)			
Essential Health Benefits	Unlimited		
Calendar Year Deductible			
Individual	\$0	\$500	\$500
Family	\$0	\$1,500	\$1,500
Calendar Year Out-of-Pocket Maximum (includes Deductible)			
Individual	\$2,250	\$2,650	\$4,650
Family	\$5,625	\$6,625	\$13,950
Physician Services			
Office Visit (Primary Care Physician)	\$20 copay	\$30 copay	30%*
Office Visit (Specialist)	\$25 copay	\$30 copay	30%*
Surgeon, Assistant Surgeon, Anesthesia	10%	10%*	30%*
Teladoc (Telemedicine Visit)	\$10 copay	\$10 copay	\$10 copay
Inpatient Services - Facility			
Inpatient Hospital Room & Board	No charge	10%*	30%*
Outpatient Services - Facility			
Outpatient Lab, X-Ray, Diagnostic	No charge	10%*	30%*
Outpatient Surgery	No charge	10%*	30%*
Ambulatory Surgical Center	10%	10%*	30%*
Hospital-Outpatient Treatment (nonsurgical & other expenses)	No charge	10%*	30%*
Emergency Care			
Urgent Care	\$25 copay	\$30 copay	30%*
Emergency Room (copay waived if admitted)	No charge	\$120 + 10%*	
Emergency Room Physician	10%	10%*	10%*
Ambulance	10%	10%*	10%*
Preventive Care / Wellness Services			
Physical Exams and Periodic Check-Ups	No charge	No charge	Not covered
Well Baby and Well Child Care	No charge	No charge	Not covered
Well Woman Exams	No charge	No charge	Not covered
Immunizations	No charge	No charge	Not covered

* After deductible

** When service is available and based on covered benefits where you are employed.

*** When utilizing Out-of-Network benefits, the Plan payment will be based on the Maximum Allowable Charges for the services. You will be responsible to pay the provider / facility any difference between the Plan's payment and the provider's / facility's full charge for the services.

Medical: Premier PPO (continued)

	Blue Cross Blue Shield Premier PPO		
	Tier 1 PMH National Network**	Tier 2 Blue Cross / Blue Shield Preferred Network	Tier 3 Out-of-Network***
Other Provider Services			
Physical, Speech, Occupational & ABA Therapy (60 combined visits/cal yr)	\$25 copay	\$30 copay	30%*
Chiropractic Care (unlimited)	\$30 copay	\$30 copay	Not covered
Acupuncture	\$30 copay	\$30 copay	\$30 copay
Allergy Services - Primary Care	\$25 copay	\$30 copay	30%*
Allergy Services - Specialist	\$25 copay	\$30 copay	30%*
Allergy Services - Injections & Serum	\$25 copay	\$30 copay	30%*
Pregnancy and Maternity Care			
Pre-Natal Care (Initial Visit)	No charge	No charge	30%*
Inpatient Hospital Room and Semi Private	10%	10%*	30%*
General Medical Services			
Physician's Office, Lab and X-Ray	No charge after OV copay	No charge after OV copay	30%*
Independent Lab and X-Ray	No charge	\$40 copay*	30%*
Advanced Imaging	No charge	\$40 copay*	30%*
Skilled Nursing or Extended Care Facility (up to 100 visits/cal year)	No charge	10%*	30%*
Home Health Care (up to 100 visits/cal year)	10%	10%*	Not covered
Hospice Care	No charge	10%*	Not covered
Durable Medical Equipment	10%	10%*	30%
Hearing Aid Services & Ancillary Equipment	10%	10%	30%
	\$2,000 allowance every 24 months (does not count towards OOP Max)		
Mental or Nervous Disorders and Substance Abuse			
Inpatient Facility	No charge	10%*	30%*
Inpatient Physician	10%	10%*	30%*
Outpatient Visits (physician)	\$25 copay	\$30 copay	30%*
Prescription Drug Coverage	Medimpact Mandatory Generic Retail ^l		Tier 3
Deductible (Individual/Family)	None		None
Out-of-Pocket Max (Indiv/Family)	\$2,500 / \$5,000		N/A
Retail Rx (up to 30-day supply)			
Generic	\$15 copay		Not covered
Formulary Brand	\$45 copay		
Non-Formulary Brand ²	\$60 copay		
Mail Order Rx (90 day supply)			
Generic	\$30 copay		Not covered
Formulary Brand	\$90 copay		
Non-Formulary Brand ²	\$120 copay		
Specialty (30-day supply)	25% (\$150 max.)		

* After deductible

** When service is available and based on covered benefits where you are employed.

*** When utilizing Out-of-Network benefits, the Plan payment will be based on the Maximum Allowable Charges for the services. You will be responsible to pay the provider / facility any difference between the Plan's payment and the provider's / facility's full charge for the services.

1 If a brand name drug is dispensed and a generic drug is available, member will be responsible for the Brand copay plus the difference in cost between the brand and generic drug.

2 Prior authorization is required for non-formulary and specialty prescriptions.

Medical: Value PPO

The Value PPO offers freedom of choice and allows you the ability to go out-of-network. You may obtain services from any provider you choose, but your costs will be lower when utilizing the PMH National Network (Tier 1) or the Blue Cross Blue Shield Network (Tier 2) Provider. This PPO has high deductibles and cost sharing but your annual preventive exams are always covered at 100% within the Tier 1 or Tier 2 networks. For services received Out-of-Network, you will be responsible for any difference between the covered expense and actual charges.

	Blue Cross Blue Shield Value PPO		
	Tier 1 PMH National Network**	Tier 2 Blue Cross / Blue Shield Preferred Network	Tier 3 Out-of-Network***
Lifetime Plan Maximum (per individual)			
Essential Health Benefits	Unlimited		
Calendar Year Deductible			
Individual	\$3,000	\$5,900	\$10,000
Family	\$6,000	\$11,800	\$20,000
Calendar Year Out-of-Pocket Maximum (includes Deductible)			
Individual	\$5,000	\$5,900	\$30,000
Family	\$10,000	\$11,800	\$60,000
Physician Services			
Office Visit (Primary Care Physician)	No charge*		50%*
Office Visit (Specialist)	No charge*		50%*
Surgeon, Assistant Surgeon, Anesthesia	No charge*		50%*
Teladoc (Telemedicine Visit)	\$10 copay		\$10 copay
Inpatient Services - Facility			
Inpatient Hospital Room & Board	No charge*		50%*
Outpatient Services - Facility			
Outpatient Lab, X-Ray, Diagnostic	No charge*		50%*
Outpatient Surgery	No charge*		50%*
Ambulatory Surgical Center	No charge*		50%*
Hospital-Outpatient Treatment (nonsurgical & other expenses)	No charge*		50%*
Emergency Care			
Urgent Care	No charge*		10%*
Emergency Room (copay waived if admitted)	No charge*		No charge*
Emergency Room Physician	No charge*		10%*
Ambulance	No charge*		10%*
Preventive Care / Wellness Services			
Physical Exams and Periodic Check-Ups	No charge		50%*
Well Baby and Well Child Care	No charge		50%*
Well Woman Exams	No charge		50%*
Immunizations	No charge		50%*

* After deductible

** When service is available and based on covered benefits where you are employed.

*** When utilizing Out-of-Network benefits, the Plan payment will be based on the Maximum Allowable Charges for the services. You will be responsible to pay the provider / facility any difference between the Plan's payment and the provider's / facility's full charge for the services.

Medical: Value PPO (continued)

	Blue Cross Blue Shield Value PPO		
	Tier 1 PMH National Network ¹	Tier 2 Blue Cross / Blue Shield Preferred Network	Tier 3 Out-of-Network ^{***}
Other Provider Services			
Physical, Speech, Occupational & ABA Therapy (60 combined visits/cal yr)	No charge*	No charge*	50%*
Chiropractic Care (unlimited)		Not covered	
Acupuncture		Not covered	
Allergy Services - Primary Care	No charge*	No charge*	50%*
Allergy Services - Specialist	No charge*	No charge*	50%*
Allergy Services - Injections & Serum	No charge*	No charge*	50%*
Pregnancy and Maternity Care			
Pre-Natal Care (Initial Visit)	No charge	No charge	50%*
Inpatient Hospital Room and Semi Private	No charge*	No charge*	50%*
General Medical Services			
Physician's Office, Lab and X-Ray	No charge*		50%*
Independent Lab and X-Ray	No charge*		50%*
Advanced Imaging	No charge*		50%*
Skilled Nursing or Extended Care Facility (up to 100 visits/cal year)	No charge*		50%*
Home Health Care (up to 100 visits/cal year)	No charge*		50%*
Hospice Care	No charge*		50%*
Durable Medical Equipment	No charge*		50%*
Hearing Aid Services & Ancillary Equipment	20%		50%
	\$2,000 allowance every 24 months (does not count towards OOP Max)		
Mental or Nervous Disorders and Substance Abuse			
Inpatient Facility	No charge*		50%*
Inpatient Physician	No charge*		50%*
Outpatient Visits (physician)	No charge*		50%*
Prescription Drug Coverage	Medimpact Mandatory Generic Retail ¹		Tier 3
Deductible (Individual/Family)	None		None
Out-of-Pocket Max (Indiv/Family)	\$2,650 / \$5,300		N/A
Retail Rx (up to 30-day supply)			
Generic	\$15 copay		Not covered
Formulary Brand	\$45 copay		
Non-Formulary Brand ²	\$60 copay		
Mail Order Rx (90 day supply)			
Generic	\$30 copay		Not covered
Formulary Brand	\$90 copay		
Non-Formulary Brand ²	\$120 copay		
Specialty (30-day supply)	25% (\$150 max.)		

* After deductible

** When service is available and based on covered benefits where you are employed.

*** When utilizing Out-of-Network benefits, the Plan payment will be based on the Maximum Allowable Charges for the services. You will be responsible to pay the provider / facility any difference between the Plan's payment and the provider's / facility's full charge for the services.

1 If a brand name drug is dispensed and a generic drug is available, member will be responsible for the Brand copay plus the difference in cost between the brand and generic drug.

2 Prior authorization is required for non-formulary and specialty prescriptions.

Prescription Drugs

Your medical plan includes coverage for prescription medication. When you enroll in the EPO or PPO medical plans, you are automatically enrolled in the prescription drug plan administered by MedImpact. The prescription drug information is combined with your medical ID card. To access a complete listing of MedImpact pharmacies near you, log onto www.medimpact.com.

Exclusive Home Delivery for Maintenance Medications

If you take maintenance medication, such as those used to treat high blood pressure or high cholesterol, you can avoid higher costs by taking advantage of the convenience of home delivery pharmacy services. This program allows you to refill maintenance medications at a retail pharmacy twice without incurring a higher cost. After the second purchase, you'll be responsible for paying the entire cost of the medication when using a retail pharmacy. You can avoid these higher costs by signing up for home delivery by contacting MedImpact at 800-788-2949 or log in to www.medimpact.com.

Crozer Health Pharmacy

Prospect Medical (PM) continues to partner with Crozer Health Pharmacy (CHP) as the preferred pharmacy for **Specialty Medications** for Prospect Medical (PM) employees and dependents who are enrolled in a PM medical plan. Crozer Health Pharmacy is affiliated with PM, which allows our employees to utilize its own specialty pharmacy services. Crozer Health Pharmacy, located in Upland, PA, will provide mail order and pick-up services for PM employees.

Should you need NEW specialty prescriptions **on or after January 1, 2023**, please ask your physician's office to e-prescribe or call in a new prescription to the Crozer Health Pharmacy:

Crozer Health Pharmacy
Crozer-Chester Medical Center
One Medical Center Boulevard
Upland, PA 19013
610-447-2850

Hours: Monday to Friday from 7 a.m. to 4 p.m. EST

24 Hour Access: Ask your physician's office to e-prescribe or call in a new prescription to 610-447-2850. Refill a prescription using the Refill Telemanager at 610-447-2850.

As part of the Pharmacy Benefits transition to MedImpact, SaveOnSP is going away and will be replaced with MedImpact Assist®. Accredo Specialty Pharmacy will no longer be an in-network pharmacy for PM. If Crozer is unable to fill your medication, they will coordinate with a specialty pharmacy who can on your behalf. BioPlus Specialty Pharmacy will be taking the place of Accredo for most of these drugs.



Wellness



PMH's employees are its greatest assets, and we take your health and well-being very seriously. That's why PMH provides the Healthy Prospects employee wellness program to promote and support wellness among its workforce.

If you are enrolled in the PMH medical benefits plan, you will have access to a wide array of the wellness program services and tools to help you to improve your health, at no cost to you, including:

- Biometric screening
- Health assessment
- Health coaching
- Chronic condition management
- Wellness challenges
- Tobacco cessation
- Wellness incentive
- Other wellness program activities and resources

Healthy Prospects Program Vendor: Eligible employees can access the Healthy Prospects ActiveHealth website at www.myactivehealth.com/pmh.

Wellness Incentive

Employees enrolled in the PMH medical plan who do not complete the wellness program requirements in 2023 will pay an additional \$50 per month (\$600 per year) more for their medical premium during the 2024 benefits year.

To avoid the additional \$50 per month medical premium surcharge during 2024, you must meet the following criteria during 2023:

- Complete a biometric screening option, and
- Complete an online health assessment on the Healthy Prospects site at www.myactivehealth.com/pmh.

Please note: Newly eligible employees that become active on PMH medical benefits on or after June 1, 2023 will not need to complete the wellness requirements in 2023 to avoid the 2024 medical premium surcharge. Employees who are newly enrolled in medical coverage on or after January 1, 2023 will automatically avoid the 2023 surcharge.

Biometric Screening

Biometric screening involves simple tests that will provide you with information on key indicators for your risk for cardiovascular disease, stroke, diabetes, and other health conditions, including your body fat percentage, body mass index (BMI), blood pressure, cholesterol and triglyceride levels, and blood glucose.

Employees have several options through ActiveHealth's biometrics screening partner - Quest Diagnostics - for completing the screenings during 2023 to meet the wellness incentive requirement. Those options will be communicated to employees throughout the year, based on considerations related to the COVID-19 situation. The screening results will be confidential, and no individual results will be reported to PMH. The screening options can be accessed through the Healthy Prospects site at www.myactivehealth.com/pmh.

Online Health Assessment

An online health assessment evaluates your risks for chronic health conditions. Once you complete your health assessment, you will receive a summary of your results, as well as an action plan customized to your health risks. The online health assessment can be accessed by visiting the Healthy Prospects site provided through ActiveHealth at www.myactivehealth.com/pmh.

Health Coaching through ActiveHealth

PMH employees have access to health coaching through our wellness program vendor, ActiveHealth. You may self-enroll in health coaching through the Healthy Prospects site at www.myactivehealth.com/pmh, or by calling the toll-free number at 855-206-1303. If you are identified as being at moderate to high risk based on your biometric screening or health assessment results, you may receive an outreach call from an ActiveHealth coach to offer you support in developing and pursuing a plan of action to reduce your risk.

Wellness (continued)

Areas of focus for health risk reduction include:

- Exercise management
- Nutrition management
- Weight management
- Metabolic syndrome
- Pre-diabetes
- Pre-hypertension
- Stress management
- Sleep
- Tobacco cessation

If you are living with a chronic health condition (e.g., asthma, COPD, coronary artery disease, hyperlipidemia, heart failure, obesity, chronic back/neck pain, depression, etc.) and are identified as being eligible for condition management assistance based on ActiveHealth's analytics, you may receive an outreach call to offer you the services of an ActiveHealth health coach who specializes in managing chronic conditions. You may also contact a health coach through the Healthy Prospects site at www.myactivehealth.com/pmh, by calling the toll-free number at 855-206-1303 to request assistance with managing your chronic condition.

Diabetes and Hypertension Management through Omada

To assist individuals living with diabetes (Type 1 or 2) and/or high blood pressure, PMH is now offering employees enrolled in a PMH health plan the opportunity to participate in the Omada Health diabetes/hypertension management program. If you are eligible and enroll in the Omada program, you will be provided with the following resources, at no cost to you:

- A dedicated specialized health coach
- Connected wireless device(s) for glucose and/or blood pressure monitoring
- Medication adherence support
- Health metrics tracking
- Interactive online lessons for making healthier choices
- Online peer support community

If you are identified through Omada's medical/pharmacy claims analytics as having either Type 1 or Type 2 diabetes or hypertension, you may receive an outreach communication from Omada. If you have been diagnosed with one of these conditions, you may also self-enroll through the Omada website at www.omadahealth.com/pmh.

Tobacco-Free Incentive

Employees who indicate they are tobacco users during benefit enrollment will be assessed a \$50 per month tobacco surcharge for the 2023 benefit year. As an incentive to be tobacco-free, employees who indicate during benefits enrollment that they do not use tobacco products, or who complete a tobacco cessation program (see below), will receive a waiver of the surcharge.

If you indicate during benefit enrollment that you are tobacco-free, you are verifying that you have not used tobacco products during the past 30 days, are currently tobacco-free, and will not use tobacco products during the 2023 benefits year. Tobacco products include cigarettes, cigars, chewing or pipe tobacco, any other tobacco products (including electronic cigarettes or "vapes"), regardless of the frequency or method of use. Misrepresentation of your tobacco status may result in the imposition of the tobacco-use surcharge for the entire year, as well as disciplinary action.

Tobacco Cessation Program: Employees who are current tobacco users can become eligible for waiver of the tobacco surcharge by meeting the following tobacco cessation program requirements:

- Complete 6 sessions of telephonic tobacco cessation coaching with ActiveHealth within 90 days of the effective date of medical benefits coverage.
- Submit written confirmation to your Human Resources representative after completion of the 6 telephonic tobacco cessation coaching sessions. Your completion of the required sessions will be verified by Human Resources through reporting from ActiveHealth.

Once the above requirements are met and verified, the \$50 per month tobacco surcharge will be removed from the employee cost of health care insurance effective the first pay period following the submission of verification of the completed tobacco cessation program, and the tobacco surcharge collected prior to that pay period will be rebated.

To access the tobacco cessation program, contact ActiveHealth at 855-206-1303.

Dental – Delta Dental of RI

Your dental options promote and encourage preventive dental care and provide benefits for services that are essential to good oral health.

Delta Dental PPO offers a network of dentists who have agreed to reduced contracted rates for their services and they cannot “balance bill” enrollees for additional charges. You are able to visit any licensed dentist of your choice, but you will usually have less out-of-pocket expenses when you visit a Delta Dental PPO network dentist. A Delta Dental Premier® dentist is your next best bet; their contracted rates are slightly higher than those of PPO dentists, but you will still enjoy some cost protection. Enrollees who visit Delta Dental dentists receive the advantages of no billing beyond the charges allowed by the plan and the submission of claims by dentists.

Delta Dental of Rhode Island

Phone: 800-843-3582

Website: www.deltadentalri.com

To locate a dentist, create an account and print a temporary ID card, visit the Delta Dental website.



	Delta Dental PPO*	
	Delta Dental PPO Dentists**	Non-Delta Dental PPO Dentists**
Calendar Year Deductible		
Individual	\$25	\$50
Family	\$75	\$150
Calendar Year Plan Maximum		
Per Individual	\$2,000	\$1,500
	You Pay	You Pay
Preventive Care		
Oral Exams, X-rays, Cleanings, Fluoride, Space Maintainers, Sealants	No charge (deductible waived)	20% (deductible waived)
Basic Services		
Oral Surgery, Fillings, Endodontic Treatment, Periodontic Treatment, Repairs of Dentures and Crowns	20%	20%
Major Services		
Crowns, Jackets, Dentures, Bridge Implants	50%	50%
Orthodontia		
Covered (Adult & Child to age 26)	50%	
Lifetime Orthodontia Plan Maximum (Per Individual)	\$1,500	

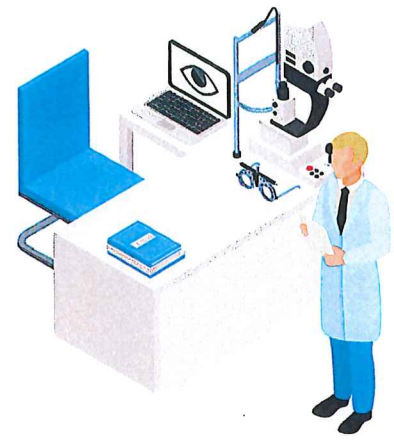
* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental maximum contract allowances and not necessarily each dentist's submitted fees.

** Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and Premier contracted fees for non-Delta Dental dentists.

Vision

Vision care is essential to your overall health. Getting regular eye exams helps your doctor detect a variety of medical conditions before they become big problems.

Your vision plan is administered by Vision Service Plan (VSP), one of America's oldest and largest eye care organizations. VSP offers a network of thousands of eye care professionals located throughout the country. You may use any provider, but you will receive greater benefits when you select a VSP Choice Network Preferred Provider. To use your VSP plan, just call a VSP provider and make an appointment and identify yourself as a VSP member. There are no claim forms to file when you use a VSP provider; you simply pay any amounts not covered by the plan. To use other providers, you will need to pay in full for the services, and then file a claim with VSP.



Vision Service Plan

Phone: 800-877-7195

Website: www.vsp.com

To locate a VSP provider or print an ID card, log on to the VSP website.

	VSP Vision Plan	
	In-Network	Out-of-Network
	You pay	Reimbursement
Exam & Materials		
Exam	\$15 copay	Up to \$45 reimbursement after \$15 copay
Materials	\$20 copay	Eye wear reimbursement listed below after \$20 copay
Lenses		
Single	100% after copay	Up to \$45 reimbursement
Bifocals	100% after copay	Up to \$65 reimbursement
Trifocals	100% after copay	Up to \$85 reimbursement
Frames*		
Frames	\$250 allowance after copay	Up to \$47 reimbursement
Contact Lenses** (in lieu of lenses & frames)		
Medically Necessary	100% after copay	Up to \$210 reimbursement
Elective	\$200 allowance; copay waived	Up to \$150 reimbursement (lenses / exam combined)
Benefit Frequency		
Exams	Once every calendar year	Once every calendar year
Lenses	Once every calendar year	Once every calendar year
Frames	Once every two calendar years	Once every two calendar years
Contacts	Once every calendar year	Once every calendar year

* You may use your frame allowance toward ready-to-wear non-prescription sunglasses from a VSP doctor.

** Contacts (every calendar year) in lieu of lenses and frames. \$60 allowance for contact lens exam (fitting and evaluation); members also receive 15% discount on contact lens exam and services.

Life and AD&D Insurance

Basic Life and Accidental Death and Dismemberment (AD&D) Insurance

As an important part of your financial planning, you are automatically provided with basic life and AD&D insurance to protect you and your family in the event of an accident or death.

- Coverage is provided to full-time and part-time employees by The Standard at no cost to you, paid for by CCHP.
- For both basic life and AD&D insurance, you are covered in an amount of \$25,000.
- AD&D insurance pays specific benefit amounts for a covered accidental bodily injury that causes dismemberment. If death occurs from an accident, 100% of the AD&D benefit would be payable to your beneficiary.
- Benefits are paid to the beneficiary you designate. Please keep your beneficiary information up to date.

Things to Keep in Mind

Life and AD&D insurance provides many benefits, but there are a few points to keep in mind:

- **Imputed Income:** The value of your company-provided life insurance premiums over \$50,000 is considered taxable. Contact your tax professional for more information.
- **Age Reduction:** Benefit amounts reduce as you age. At age 70, reduction to 67% of the benefit amount. At age 75, reduction to 50% of the benefit amount.
- **Portability:** If you leave the company, you can convert your policy to an individual policy and continue your coverage.



Additional Information

Annually, during the Open Enrollment period, you may increase your Optional Life election one level without the Evidence of Insurability requirement up to the Guaranteed Issue amount.

To learn more, please see the schedule of benefits for a full list of benefits and costs.

Life and AD&D Insurance (continued)

Optional Life Insurance

As a full-time or part-time employee, you may purchase Optional Life insurance for yourself and your dependents for additional financial protection through The Standard. Premiums are determined by your age and will be deducted from your paycheck after tax. You may elect spouse and/or dependent life insurance for your eligible dependent children if you elect Optional Life for yourself. You may not be covered as an employee and as a dependent.

For any Optional Life amount elected after your initial eligibility period or above the Guarantee Issue amount, you must complete a medical questionnaire (Evidence of Insurability) and be approved for the amount elected. You do not have to purchase the same amount for Optional Life and Optional AD&D.

Coverage	Available benefit
Employee	<ul style="list-style-type: none">▪ Increments of \$25,000, up to \$750,000, to a maximum benefit of the lesser of 5x annual salary or \$750,000▪ Guaranteed issue amount: \$250,000
Spouse	<ul style="list-style-type: none">▪ Increments of \$5,000 to \$250,000, not to exceed 100% of employee amount▪ Guaranteed issue amount: \$50,000
Dependent Child(ren) to age 26	<ul style="list-style-type: none">▪ \$5,000 or \$10,000▪ Guaranteed issue amounts:<ul style="list-style-type: none">- Live birth to 14 days: \$1,000- 14 days to 6 months: \$1,000- 6 months to age 26: \$10,000

Guaranteed Issue

Guarantee Issue is the amount of insurance you are guaranteed without having to complete Evidence of Insurability (EOI). Any amounts above the Guaranteed Issue amount are subject to underwriting where you will be required to complete an EOI form.

Optional AD&D

As a full-time or part-time employee, you may enroll in Optional AD&D at affordable group rates through The Standard. If you elect Optional AD&D for yourself, you may elect Optional AD&D coverage for your family.

Coverage	Available benefit
Employee	<ul style="list-style-type: none">▪ Increments of \$25,000, up to \$750,000, to a maximum benefit of the lesser of 5x annual salary or \$750,000
Spouse	<ul style="list-style-type: none">▪ Increments of \$5,000 to \$250,000, not to exceed 100% of employee amount
Child(ren)	<ul style="list-style-type: none">▪ \$5,000 or \$10,000

Disability Insurance

An unexpected injury or illness can create a financial burden. Disability insurance replaces a portion on your income when you are unable to work.

Important: Disability benefits are reduced by other income you receive, such as Social Security, state disability benefits, pension benefits, and Workers' Compensation.

Optional Long Term Disability

Long Term Disability (LTD) insurance helps pay for ongoing living expenses such as rent, mortgage, car payments, utilities or out-of-pocket medical expenses. You will receive a portion of your monthly income for as long as you are disabled or until you reach your Social Security Normal Retirement Age, whichever comes first. LTD is available through The Standard. Benefits will be coordinated with any income from other sources which may reduce your benefit. If you are interested in enrolling please refer to the rate sheet.

Plan Benefits	Long Term Disability
Eligible Class	Full-Time and Part-Time Employees
Monthly Benefit	60% of monthly earnings
Monthly Maximum	\$5,000
Offset by Other Disability Benefits?	Yes**
Elimination Period	180 days sickness / injury
Waiver of Premium*	Included
Benefit Duration	To Social Security normal retirement age (see policy for benefit amounts beyond SSNRA)

* If you become Totally Disabled while insured, the Waiver of Premium Provision may continue your Life and/or Disability Insurance without any further payment of premiums by you.

**Refer to contract for details

The Standard

Phone: 800-422-1549

Website: www.standard.com



Additional Information

You will be subject to pre-existing limitations under LTD plan if you received medical treatment, consultation, care or services including diagnostic measures, or took prescribed drugs or medicines in the 3 months just prior to your effective date of coverage; and the disability begins in the first 12 months after your effective date of coverage.

To learn more, please see the schedule of benefits for a full list of benefits and costs.

Helpful Disability Insurance Terms

Qualifying disability: A sickness or injury that causes you to be unable to perform any other work for which you are or could be qualified by education, training or experience

Benefit Duration: Maximum amount of time you may receive proceeds for a continuous disability

Elimination or Waiting Period: The time you must wait before you are eligible to receive benefit payments