

*Nurses put the care in  healthcare*

## **MINNESOTA NURSES ASSOCIATION NEGOTIATIONS UPDATE - FIRST NEGOTIATIONS MEETING WITH ALLINA HEALTH - FEBRUARY 10, 2016 – PART 1**

### **Stay informed on the Early Limited Negotiations February 10, 17, 19, 2016**

Today, representatives of Minnesota Nurses Association, our union, met with representatives of Allina Health for Early Limited Scope bargaining. Our union has agreed to meet with Allina Health for three (3) early bargaining sessions, on 3 issues, one of which is wages. The last session is scheduled for February 19, 2016.

**Our union representatives today presented a proposal on Staffing. Allina Health presented changes to Health Insurance.**

#### **MNA Proposal on Staffing:**

- The Charge Nurse will determine the appropriate staffing levels, per shift per unit, without any prior approval.
- The Charge Nurse will not be counted in the staffing numbers.
- Capacity Pay Program (double time) hospital wide for shifts that remain unfilled, 24 hrs prior to the start of the shift. If the shift is still not filled prior to its start, units will close to admissions or transfers until the unit is staffed appropriately.
- The Union and the Hospital will agree on the core staffing yearly, and will not change without mutual agreement.
- Yearly staffing matrix evaluation on each unit prior to the budgeting period or earlier if there are changes on the unit. The matrix will not be adjusted downward unless the nurses in the department vote in the majority to accept the change.
- Hospital will provide each unit a nurse to cover breaks who will not be included in the matrix numbers.
- The Charge Nurse in the ED will have the authority close to admissions, and go on divert, subject to applicable statute, and regulations having the force of law, including the Emergency Medical Treatment and Active Labor Act (EMTALA).

**Allina Health is proposing to totally eliminate all four MNA health insurance plans (250, Advantage, Choice, and Plus plans) and move Registered Nurses to the Allina non-contract “core” health insurance plans.**

Allina states, “Transitioning nurses to the core plans will save Allina Health \$10 million.”

MNA nurses will be receiving a flier from Allina providing its perspective on the proposal, claiming your premiums are too high and too “expensive” for you.

The truth is Allina’s plans will cost you much more in out-of-pocket and other expenses if you use health care. The “core” plans for non-contract employees have lower premiums because you pay much more if you access any health care.

Have you talked to your non-contract colleagues and asked what their out-of-pocket costs for health care are? Watch for an update at the end of the day. Check your hospital Facebook group, the MNA website, and email for more information including a video.