

Children's Minnesota | MNA
2019 Negotiations

Issue(s) Tentative Agreement
June 14, 2019

Modify Minneapolis Article 24(a)(1) as follows with the language in the rest of this article remaining the same.
Modify St. Paul Article 20(a)(1) as follows with the language in the rest of this article remaining the same.

(a) Hospitalization Insurance

The Hospital shall provide the nurses the benefits contained in the Hospital's Group Hospitalization and Medical Insurance Program existing from time to time on the following basis:

- (1) Nurses will pay the same amount for monthly premiums as non-Contract employees of the Hospital.

- (a) Notwithstanding the sentence in subparagraph (1) immediately above, the following shall apply during the term of the June 1, 2019, through May 31, 2022 collective bargaining agreement. This subparagraph (a) shall only apply to the most comprehensive plan offered by the Hospital (which is the Care Plan as of June of 2019).

For any premium increases for the most comprehensive plan during the term of the 6/1/19 through 5/31/2022 collective bargaining agreement, the monthly premiums for nurses for a particular coverage level will not, from one year to the next, increase by a larger percentage than the percentage increase to the monthly contribution made by the Hospital.

This subparagraph (a) shall expire at 11:59 p.m. on May 31, 2022.

- (b) Notwithstanding the sentence in subparagraph (1) immediately above, the following shall apply during the term of the June 1, 2019, through May 31, 2022 collective bargaining agreement. This subparagraph (b) shall only apply to the middle plan offered by the Hospital (which is the Choice Plan as of June of 2019).

The Hospital shall pay seventy percent (70%) of any increase in the total monthly rate for coverage by the middle plan during the term of the 6/1/19 through 5/31/22 collective bargaining agreement. This shall be applicable coverage level by coverage level for each coverage level available.

This subparagraph (b) shall expire at 11:59 p.m. on May 31, 2022.

Add a new Article 24(j) to the Minneapolis contract as follows.

Add a new Article 20(j) to the St. Paul contract as follows.

The MNA bargaining unit chairs and the MNA Labor Relations Specialist, and the Union's insurance consultant, will be invited to attend at least two meetings per year devoted to health insurance, which would also be attended by some combination of Hospital representatives from Finance, Human Resources (including Benefits specifically), an actuarial consultant, and plan administrator. During such meetings, the attendees will review and discuss overall costs, claims, and trends for the health insurance plans.

Modify Minneapolis Article 14(d) and St. Paul Article 12(c) as follows.

Mpls Article 14(d) [pages 48-49]	St Paul Article 12(c) [pages 47-48]
<p><u>(d) Mandatory Low Need Days</u></p> <p>If additional reductions are indicated, low need days shall be taken by the least senior regularly scheduled part-time nurse scheduled for the particular unit and shift where the reduction is necessary.</p> <p>No regularly scheduled part-time nurse shall be required by the Hospital to take more than three (3) low need days per year, with the year defined as November 1 through October 31. If the least senior part-time nurse on a particular unit and shift has been assigned three (3) low need days, the next least senior part-time nurse scheduled for the particular unit and shift may be assigned the low need day. In any case, the total of low need days under Part (d) of this provision shall not exceed three (3) per year for any regularly scheduled part-time nurse.</p> <p>A part-time nurse with a confirmed work agreement of .75 FTE or more shall be considered as a full-time nurse for purposes of this Section and shall not be assigned low need days. Nurses with 41,600 or more hours of seniority will not be subject to mandatory low need days.</p> <p>A nurse to be assigned a low need day pursuant to this Part (d) shall be given a</p>	<p><u>(c) Mandatory Low Need Days</u></p> <p>If additional reductions are indicated, low need days shall be taken by the least senior regularly scheduled part-time nurse scheduled for the particular unit and shift where the reduction is necessary.</p> <p>No regularly scheduled part-time nurse shall be required by the Hospital to take more than three (3) low need days per year, with the year defined as November 1 through October 31. If the least senior part-time nurse on a particular unit and shift has been assigned three (3) low need days, the next least senior part-time nurse scheduled for the particular unit and shift may be assigned the low need day. In any case, the total of low need days under Part (c) of this provision shall not exceed three (3) per year for any regularly scheduled part-time nurse.</p> <p>A part-time nurse with a confirmed work agreement of .75 FTE or more shall be considered as a full-time nurse for purposes of this Section and shall not be assigned low need days. Nurses with 41,600 or more hours of seniority will not be subject to mandatory low need days.</p> <p>A nurse to be assigned a low-need day pursuant to this Part (c) shall be given a minimum of two (2) hours advance notice</p>

<p>minimum of two (2) hours advance notice before the beginning of the shift.</p> <p>A nurse who receives a mandatory low need day on a holiday will have the choice of the following options:</p> <p>(1) She/He may request and be granted flex time on an additional nonholiday weekend during the year. This request shall be granted separately from the vacation requests for that particular weekend.</p> <p>(2) She/He may have that holiday count as two holidays for the purposes of being scheduled holidays for that year. Casual or temporary nurses shall not be assigned to work on units for which the nurse receiving low need days is oriented or otherwise qualified. Part-time nurses having hours reduced shall be given first opportunity for subsequent additional work hours that may become available to replace work hours lost.</p>	<p>before the beginning of the shift.</p> <p>A nurse who receives a mandatory low need day on a holiday will have the choice of the following options:</p> <p>(1) She/He may request and be granted flex time on an additional nonholiday weekend during the year. This request shall be granted separately from the vacation requests for that particular weekend.</p> <p>(2) She/He may have that holiday count as two holidays for the purposes of being scheduled holidays for that year.</p> <p>Casual nurses or temporary nurses shall not be assigned to work on units for which the nurse receiving low need days is oriented or otherwise qualified. Part-time nurses having hours reduced shall be given first opportunity for subsequent additional work hours that may become available to replace work hours lost.</p>
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Add a new Article 2(c)(6) to the Minneapolis contract as follows.

Add a new Article 2(c)(6) to the St. Paul contract as follows.

(c) Workshops, Courses, and Other Educational Programs

- (6) If a nurse has used all four hundred dollars (\$400) for the year for workshops, courses, and other educational programs available by virtue of Article 2(c) immediately above, the nurse may use up to two hundred dollars (\$200) for workshops, courses, and other types of educational programs that meet the requirements of this section, with the amount used up to \$200 coming out of the amount available to that nurse for Tuition Reimbursement under Article 2(a) above.

This resolves U-19 & U-20.

[Remainder of page intentionally left blank.]

The Union withdraws U-24 on preceptor differential.

The Employer withdraws ER-3 on maximum flex time balance.

Hospital signature(s) / initials <i>Ronda Penham</i>	Date <i>14 June 19</i>
MNA signature(s) / initials <i>[Signature]</i>	Date <i>6/14/19</i>

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