

MEMORANDUM OF UNDERSTANDING
BETWEEN
WASHINGTON HEALTH
AND
ENGINEERS AND SCIENTISTS OF CALIFORNIA
IFPTE LOCAL 20
FEBRUARY 1, 2024 THROUGH JANUARY 31, 2027

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MEMORANDUM OF UNDERSTANDING

THIS MEMORANDUM is made and entered into this day, April 19, 2021 (date ratified by District Board) by and between WASHINGTON HEALTH, hereinafter called the "Hospital", and Engineers and Scientists of California International Federation of Professional and Technical Engineers (AFL-CIO-CLC), hereinafter called ESC/IFPTE Local 20 or the "Union".

WITNESSETH:

PREAMBLE

Both parties recognize that it is to their mutual advantage and for the protection of the patients to have efficient and uninterrupted operation of the Hospital. This Memorandum as established through Hospital Board Resolution 331A is for the purpose of establishing such harmonious and constructive relationships between the parties that such results will be possible.

It is mutually agreed that it is the duty and right of the Administrator to manage the Hospital and to direct the working forces. This includes the right to hire, transfer, promote, reclassify, lay off and discharge employees.

1. RECOGNITION

The Hospital recognizes the Union as majority representative for: Clinical Laboratory Scientists, Medical Laboratory Technicians, Clinical Dietitians, Case Managers, Socials Workers, Clinical Pharmacists, Pharmacy Technicians, Pharmacy Interns when employed as Pharmacy Technicians, Speech Pathologists, Occupational Therapists, Lymphedema Therapists, Physical Therapists and Physical Therapist Assistants hereafter referred to as Unit Members, covered by this Memorandum whose classifications are listed in Section 7.

2. HIRING, PROBATIONARY PERIOD AND POSTING OF VACANCIES

(a) Any person may be employed who, in the judgment of the Hospital, will make the best Scientist, Medical Laboratory Technician, Pharmacy Technician, Clinical Pharmacist, Speech Pathologist, Occupational Therapist, Lymphedema Therapists, Physical Therapist or Physical Therapist Assistant and the Hospital shall be sole judge of the fitness of any applicant for the job. Neither the Union nor the Hospital shall discriminate in respect to employment by reason of Union activity, race, color, creed, national origin, sex, age or handicap as prescribed by law, or sexual orientation as may be prescribed by law.

(b) Vacancies will be posted for a period of seven (7) days so that present unit members within the department shall have an opportunity to apply for such vacancies. Unit members shall have an opportunity to bid for vacancies prior to outside applicants. If more than one qualified unit member submits a bid the vacancy shall be filled in accordance with Section 19 below. *Regular full-time and regular part-time unit members will be considered prior to per diem unit members. Length of service for the purpose of bidding for current vacancies only will apply to per diem unit members if only per diem unit members are bidding. Length of service for per diem unit members is based on the sum of hours worked since hire.

(c) A unit member on vacation or leave of absence who has requested from the Personnel Department notification of such vacancies shall be notified at the address indicated by the unit member.

(d) The Union shall be notified of vacancies in order that it may refer applicants to the Hospital for consideration.

(e) A probationary period of ninety (90) days or five hundred and twenty (520) hours whichever is greater from date of first hiring shall be established for new unit members. During such probationary period, the unit member may be discharged for any reason which, in the opinion of the Hospital, is just and sufficient.

(f) Before posting new regular part-time positions, the Hospital will consider the feasibility of granting requests for additional days to current regular part-time employees.

(g) Member positions will be posted to reflect the primary shift that the employee is expect to work (i.e. days, evenings, nights). All member job positions require employees to be available and to work shifts other than their primary shift according to the staffing needs and/or other operational needs of the department.

3. UNION MEMBERSHIP PROVISION

(a) Any employee who is covered by this Memorandum of Understanding has the right to voluntarily become a member of the Union and pay Union dues..

(b) Any employee who is a member of a bona fide religion, body or sect which has historically held conscientious objections to joining or financially supporting a public employee organization may, in lieu of dues, initiation fees, or voluntary agency fees, pay sums equal to such dues, initiation fees or agency fees to a nonreligious, non-labor charitable fund exempt from taxation under Section 501(c)(3) of the IRC. Three charitable funds shall be mutually agreed upon through the meet and confer process between the Employer and the Union, if the need to designate such charitable funds arises. During the term of this Memorandum the charities will be: The United Way, American Heart Association and the American Cancer Society.

(c) This provision shall not apply to management, confidential or supervisory employees.

(d) The Union shall indemnify and save the Hospital harmless from any cost or liability resulting from any and all claims, demands, suits or any other action arising from the operation of this provision or from the use of the monies remitted to the Union, including the costs of defending against any such actions or claims. The Union agrees to refund to the Hospital any amounts paid to it in error.

(e) The Hospital shall deduct on a monthly basis the periodic membership dues from the paycheck of each unit member for whom the Union has certified that a valid dues check-off authorization form has been executed. Voluntary check-off authorization for union dues which were executed prior to the execution of this agreement shall remain in full force and effect. The

Hospital's Director of Human Resources must be informed one month in advance of any dues changes. This notification must be by receipt requested certified mail and copied to the Payroll Department. Any modifications submitted by the Union for dues check-off authorizations shall be made by the Hospital by the first appropriate pay period following notification by the Union.

(f) If any provision of this section is invalid under Federal or State law, said provision shall be modified to comply with the requirement of the law.

(g) In applying the above provisions, it is the intent of the parties to act in conformity with the provisions of Section 3502 of the Government Code.

(h) New unit members will be given a copy of this Memorandum on hire which shall be supplied by the Union.

(i) Legislative Education Action PAC (LEAP) Deductions. The Hospital shall make payroll deductions for employee LEAP contributions.

(i) ESC Local 20 and Washington Health acknowledge that Washington's agreement to implement payroll deductions for employees who voluntarily choose to make contributions to LEAP is in no way an endorsement of LEAP by Washington Health.

(ii) Responsibility for communicating information to employees about LEAP resides with ESC Local 20, not Washington Health.

(iii) Washington Health agrees to deduct LEAP contributions on a monthly basis from the paycheck of each unit member for whom the Union has certified that a valid LEAP deduction authorization form has been executed. Such deductions shall be remitted as set forth in Section 3.E.

(iv) LEAP deductions may be cancelled by the employee with thirty (30) days' notice to Washington Health.

(v) ESC Local 20 agrees not to file grievances on its own behalf or on behalf of any employee concerning the implementation or administration of this Section.

4. BULLETIN BOARDS

Use of bulletin boards for the posting of notices by representatives of the employee organization will be as follows:

(a) All materials to be posted must receive the advance approval of the appropriate designated representative of the Hospital.

(b) All materials must identify the organization which published them.

(c) All materials will be posted in areas designated by the Hospital; posting will be performed by the organization representative. An additional posting board will be made available at the Civic Center door.

(d) After a notice is approved by the Hospital's designated representative, the organization representative may hand such notices to unit members within the represented group so long as such activity does not impede or delay the unit member's work.

(e) All such posting and distribution of such notices shall be governed by Section 17 of Resolution 331A of the Board of Directors of Washington Health.

5. EMPLOYEE RULES

(a) The Hospital shall have the right to discharge any unit member for proven dishonesty, insubordination, insobriety, incompetence, willful negligence, failure to perform work as required, or for violating Hospital house rules which have been communicated to unit members. The Hospital agrees to exercise fair and reasonable judgment in the application of this Section.

(b) A unit member who is dismissed by the Hospital will be promptly given a written notice of the reason for the discharge. Upon his request, a copy of such discharge notice will be sent to the Union.

(c) If, in the opinion of the Union, a unit member has been unjustifiably discharged, or has been discharged or laid off to avoid tenure advancement or because of the Association activity, such discharge or lay-off shall be subject to the grievance procedure.

(d) The Hospital agrees to furnish the Union with copies of all work rules and rules of conduct pertaining to its unit members. Such copies will be forwarded by certified mail, return receipt requested.

6. TERMINATION AND RESIGNATION NOTICE

(a) In cases of termination of employment by the Hospital, except for discharge for just cause, the Hospital shall give to a regularly employed unit member with six (6) months or more of continuous service, fourteen (14) calendar days' notice or ten (10) days' pay in lieu thereof. Similarly, the unit member shall give to the Hospital at least fourteen (14) days' notice of resignation.

(b) A unit member who is recommended for dismissal for cause by the Hospital will promptly be given written notification, with a copy to the Union, of the reason(s) for the recommendation, the materials on which the action is based, and information informing the employee of the right to respond orally or in writing and to whom and when to respond. If the employee is terminated, notice of discharge will be sent to the employee and the Union.

7. JOB CLASSIFICATIONS

(a) Unit members covered by this Memorandum shall be employed in the following classifications: Clinical Laboratory Scientists, Senior Clinical Laboratory Scientists, Lead Laboratory Scientists, Medical Laboratory Technicians, Clinical Pharmacists, Pharmacy Technicians, Speech Language Pathologists, Occupational Therapists, Lymphedema Therapists, Physical Therapists, Physical Therapists Assistants, Clinical Dieticians, Case Managers, Senior

Case Managers, Licensed Social Workers, Unlicensed Social Workers, Utilization Review Coordinators, Portal of Entry Coordinators, and Denials and Appeals Coordinators.

(b) the following minimum qualifications for each classification are contained in this Memorandum for information and their inclusion is subject to Resolution 331 A, Section 5 (The Hospital Right to: "determine content of job descriptions and classifications").

See Appendix A for Laboratory job classifications.

See Appendix B for Pharmacy job classifications.

See Appendix C for Therapists' job classifications.

See Appendix D for Clinical Dietitians' job classifications.

See Appendix E for Case Managers' and Social Workers' job classifications.

See Appendix F for Utilization Review job classifications.

8. COMPENSATION

See Appendix A for Laboratory rates of pay and shift differentials.

See Appendix B for Pharmacy rates of pay and shift differentials.

See Appendix C for Therapists' rates of pay and shift differentials.

See Appendix D for Clinical Dietitians' rates of pay and shift differentials.

See Appendix E for Case Managers' and Social Workers' rates of pay and shift differentials.

See Appendix F for Utilization Review job classifications.

9. EMPLOYMENT CATEGORIES

(a) Employee. Individuals who are employed by Washington Health and have any portion of their income from Washington Health subject to income tax withholding or for whom Social Security contributions are made by the Hospital.

(b) Employees covered by this Memorandum of Understanding. All employees covered by this MOU will be considered in one of the following categories.

(i) Benefited Employees. Employees who are classified as benefited, work a regular full-time or part-time work schedule and receive Hospital benefits as well as the benefits provided under this Memorandum of Understanding.

(A) Regular Full-Time Employees. All employees who are regularly scheduled to work forty hours per week, or eighty hours per pay period, and who have completed

their initial probationary period. This includes employees who work four 10-hour shifts per week, and three 12-hour shifts per week.

(B) Regular Part-Time Employees. All employees who are regularly scheduled to work at least twenty but less than forty hours per week or at least forty but less than eighty hours per pay period. Part-time employees must hold 4/5 positions, 3/5 positions or 2.5/5 positions to be eligible for benefits.

(ii) Probationary Employees.

(A) All Regular Full-Time and Part-Time employees shall be considered probationary employees during the first ninety (90) days of employment.

(B) Per Diem employees are probationary until they exceed the greater of 90 days or 520 hours.

(C) During the probationary period, an employee may be discharged for any reason that, in the opinion of the Hospital, is just and sufficient.

(iii) Non-Benefited Employees.

(A) Per Diem employees are those employees who work a flexible or sporadic work schedule and are hired on an as-needed basis. Employees who are classified as Per Diem do not receive Hospital benefits, but may receive additional compensation (defined either in this Memorandum of Understanding or by the details of a specific job) in lieu of any negotiated benefits ("Per Diem differential"). The Per Diem differential is over and above the straight time rates set for Regular Full-time and Regular Part-time employees in the MOU. The Per Diem differential has been bargained for and is intended to cover all benefits, including additional paid time off for sick leave or other reasons. The Hospital and Union agree that the Per Diem differential and the terms of this MOU meet the exemption criteria set forth in California Labor Code Section 245.5(a)(1).

(B) A per diem unit member is one who: a) is regularly employed to work a predetermined work schedule of fewer than twenty (20) hours per week or b) is employed to-work-on an-intermittent as needed basis. In this case, intermittent is defined as any work pattern ranging from 0-40 hours per week but not a regular, predetermined schedule; or c) is hired to work temporarily on a predetermined work schedule which does not extend beyond three (3) calendar months; or d) is hired to work temporarily to replace a regular full-time or regular part-time employee who is on an authorized leave of absence for the full duration of the leave of absence.

(C) All per diem unit members shall advance to the next higher tenure step for salary purposes upon completion of 1000 hours worked and one year of employment, and will thereafter continue to advance to the next higher step for each subsequent 1000 hours of work, except that no such unit member hired after May 9, 1984, shall receive more than one such increase in any twelve (12) month period, until they reach the maximum step of the range.

(D) Per Diem Scientists may advance to the Senior Per Diem Scientist classification when they meet the following qualifications:

1. Completion of a minimum of one (1) year and 1000 hours at the third step of the Clinical Laboratory Scientist per diem rate;
2. The specifications for Senior Scientist as set forth in paragraph A7 B (found in Appendix A);
3. The demonstrated abilities to perform the duties of the Senior Clinical Laboratory Scientist as evidenced by the quality of work as a Clinical Laboratory Scientist.

The Hospital shall be the sole judge of the Scientist's abilities to so perform, but advancement under these provisions shall not be unreasonably denied.

(E) Per diem unit members who are re-employed within one year of their last previous work date, shall be re-hired at the same relative salary step in the range as they had attained during their previous employment at Washington Health.

(F) If a unit member who is reclassified from per diem to regular part-time or regular full-time, was previously a regular part-time or regular full-time employee with no break in service, the unit member retains for vacation accumulation the same date the unit member had when a regular full-time or regular part-time employee, adjusted forward for the length of time in per diem status. Such unit member shall also have any accumulated ESL balance restored if the transfer to per diem status occurred less than one year previously.

(G) Minimum Availability. Per diem employees are expected to be available for the shifts and hours as discussed and agreed to in the hiring interview. In addition, per diem employees are required to:

1. Put forth good effort to submit availability for shifts for which the department is actively looking to fill.
2. Be available to work a minimum of six shifts per month (one shift per 24 hours) or commit to a schedule of every other weekend. Availability for holidays and shifts during the holiday weeks (Christmas, New Year's, Thanksgiving, and the PM shifts of 12/24 and 12/31) will count towards the minimum of six shifts per month availability.
3. Be available to work a minimum of one out of three weekends (Saturday and Sunday) per month or two weekend shifts (can be two non-consecutive shifts) per month that will not result in overtime.
4. Be available to work a minimum of one of the following major holidays per year: Thanksgiving, Christmas, New Year's, and the PM shifts of 12/24 and 12/31.
5. Be available to work at least two other holidays per year.

6. The Department will attempt to schedule per diem employees on their preferred shifts, but on occasion, per diem employees must make themselves available to accept assignments for any shift.

(H) Submitting Availability. Per diem employees are required to submit their availability for work to their supervisor via email, fax or in person on a monthly basis using an approved form. This form should be submitted by the 1st of the month preceding the month when the schedule is made. The supervisor will approve the form only if the required minimum availability is specified. Any changes or additions must be resubmitted on a new form. The supervisor will prepare work schedules based on the availability indicated on the submitted form and staffing needs of the department. The supervisor must approve any trades or replacements in advance. The supervisor will make appropriate changes in the work schedule as needed. Per Diems may submit their availability further in advance, in addition to their regular availability requirements. Assignments for future availability will be made on a first come first served basis.

(I) Requesting Regularly Scheduled Weekends Off. Per diem employees who are regularly scheduled to work weekends may request to have occasional weekends off. These requests should be submitted by the 1st of the month preceding the month when the schedule is made on the form described above. Timely requests will be considered in order of seniority and in conjunction with time off requests from benefited employees. Requests submitted after the deadline, i.e. "last minute" requests will be considered on a first-come, first-served basis. Approval will be based on the department policy, staffing needs and the availability of relief coverage.

(J) Disciplinary Action/Termination.

1. Per diem employees may be terminated for excessive self-cancellations in a running twelve-month period (per Hospital Attendance Policy). A self-cancellation is defined as any sick call or unavailability for the scheduled days after the schedule has been posted. Sequential sick days will be counted as one occurrence. It will not be considered a self-cancellation if the per diem finds a suitable replacement.

2. Per diem employees must work 75% of their scheduled time or they are not meeting the availability requirement. If per diem employees do not work two consecutive 30-day periods, then they are not meeting their availability requirement. There is a maximum of two 30-day periods per year that a per diem employee does not work and still be considered available. Non-availability for medical reasons requires a physician's note and will be evaluated on an individual basis by the supervisor and/or director.

3. Per Diem employees who do not meet the minimum availability requirements limit their usefulness to the Hospital and their employment may be terminated.

(K) Labor Management Committee Per Diem Availability Review. The Labor Management Committee may review and update the Per diem availability policy for any particular department during the term of the Agreement.

(c) Preceptors.

(i) Certain unit members engaged in clinical practice or direct patient care may be assigned as preceptors for newly-hired, newly-transferred, or newly-promoted employees.

(ii) Preceptorship will be based on a unit/program-based precepting packet to be developed by the Hospital, which shall include skills checklists and competencies and shall include written objective, measurable and time-limited goals. All documents are to be provided to the preceptor's supervisor at the end of the preceptor period.

(iii) The role of preceptor shall be limited to time spent in actual precepting and oversight of employees in clinical or patient care areas. Precepting shall not include time spent in the ordinary orientation of new employees, or newly promoted or transferred employees, or time spent training students.

(iv) Unit members who are assigned to the preceptor role shall receive a premium of \$2.50 per hour for all hours worked in the role of preceptor.

10. WORK SCHEDULES AND HOURS OF WORK

See Appendix A for Laboratory work schedules and hours of work.

See Appendix B for Pharmacy work schedules and hours of work.

See Appendix C for Therapists' work schedules and hours of work.

See Appendix D for Clinical Dietitians' work schedules and hours of work.

See Appendix E for Case Managers' and Social Workers' work schedules and hours of work.

See Appendix F for Utilization Review Department work schedules and hours of work.

(a) Meal Periods, Rest Breaks, and Waivers

(i) Unit members will receive rest breaks and meal periods in accordance with the provisions of this Section of the Memorandum of Understanding. In doing so, the Union agrees that unit members will forfeit the monetary remedy that is outlined in SB1334 as provided herein.

(ii) Meal Periods and Rest Breaks in Regularly Scheduled Shifts

(A) Unit members who work more than five (5) consecutive hours in a day shall be provided an uninterrupted, 30-minute, duty-free meal period during their shift. Supervisors shall attempt to schedule unit members' meal periods prior to the end of their fifth hour of work. However, unit members acknowledge that patient care may not permit scheduling each unit member's meal period prior to the end of the fifth hour of work, and agree that the Hospital has discretion to schedule meal periods pursuant to the staffing and scheduling needs of

the department and shift, as determined by each unit member's supervisor in collaboration with the unit member. The Hospital shall maintain discretion to schedule unit members' meal periods to limit disruption to patient care.

(B) Unit members are authorized and permitted to take a 15-minute rest break during every four (4) hour work period or major fraction thereof. Rest breaks should be taken in such a manner as to limit disruption to patient care.

(C) For scheduling purposes, unit members may be allowed to take two rest breaks one after the other, or right before and/or right after a meal period, subject to the staffing and scheduling needs of the department and shift, as determined by the appropriate supervisory employee.

(D) If a unit member misses a meal period or rest break due to work related reasons, the unit member must report the missed meal period or rest break to their supervisor, and document the missed meal period or rest break by filling out a Missed Meal Period/Rest Break Log.

(iii) Meal Period and Rest Period Waivers

(A) If a unit member's total hours worked do not exceed six hours, the unit member may voluntarily waive the meal period by filling out a Meal & Rest Period Waiver form.

(B) Unit members who work more than 10 consecutive hours in a day shall be provided a second uninterrupted, 30-minute, duty-free meal period. If the unit member works more than 10 consecutive hours in a day, the unit member may voluntarily waive the second meal period by filling out a Second Meal Period Waiver. However, if the second meal period is waived, the first meal period must be taken. The waiver only needs to be filled out once and will apply to all subsequent second meal periods unless the unit member revokes the waiver in writing with advance notice.

(C) Unit members may decide to voluntarily waive their right in writing to any or all of their meal period(s) and rest breaks should they so choose, by filling out the Meal & Rest Period Waiver form and submitting it to their department manager and Human Resources. In doing so, it is understood by the unit member that they will be forfeiting any monetary remedy due to them by missing a meal period and/or rest break they have chosen to waive.

(D) The unit member may decide to revoke such waiver with advance written notice to their department manager and Human Resources.

(E) Unit members who enter into a waiver in accordance with this Section of the Memorandum of Understanding will not be entitled to any monetary remedy for missed meal periods and/or rest breaks that are the subject of the voluntary waiver.

(iv) Monetary Remedy

(A) Pursuant to California law, unit members shall be entitled to a monetary remedy equivalent to one additional hour of pay at the unit member's regular rate of pay for each workday that the unit member was scheduled to take a meal period as set forth herein, was not able to take the meal period due to work related reasons, and reported and documented their missed meal period as set forth herein. A unit member who has waived their meal period as set forth above shall not be entitled to a monetary remedy payment.

(B) Additionally, pursuant to California law, unit members shall be entitled to a monetary remedy equivalent to one additional hour of pay at the unit member's regular rate of pay for each workday that the unit member was not authorized or permitted to take a rest break due to work related reasons, and reported and documented their missed rest break as set forth herein. A unit member who has waived their rest breaks as set forth above shall not be entitled to a monetary remedy payment.

(C) As required by California law and subject to any applicable waivers set forth herein, unit members may receive a maximum of two hours of additional compensation per day (one hour for a meal period remedy payment and one hour for a rest break remedy payment).

11. EARNED TIME OFF PROGRAM

(a) All regular full-time and regular part-time unit members as defined in this Memorandum of Understanding shall be eligible to earn and use ETO as defined hereafter in this section.

(b) Eligible unit members' ETO days or hours may be used for scheduled vacation, holidays, short term illnesses, family emergencies, religious observances, preventive health or dental care, and personal business. ETO is used for any excused elective absence from work with the exceptions of educational leave, jury duty and bereavement leave which are defined elsewhere in this Memorandum of Understanding.

(c) Eligible unit members as defined in A) above shall also be eligible for an Extended Sick Leave benefit, hereafter known as "ESL" for use when a unit member has an illness which requires hospitalization for one full day or more or which qualifies as a workers' compensation related illness or injury extending beyond three (3) days or an illness or injury covered by State Disability Insurance which extends beyond seven (7) days.

(d) The per hour accrual rates for ETO are shown below. Eligible unit members shall not accrue ETO on more than eighty (80) hours in a pay period. All ESL and ETO accruals shall be based on service hours (i.e. hours worked) and benefitted hours used to support service hours (i.e. ESL, ETO, Bereavement, Jury Duty, Military Pay and ED leave).

Length of Eligible Service		ETO Accrual Rate
9 or more years		0.1539 per hour
5 to 9 years		0.1346 per hour
2 to 4 years		0.1154 per hour
1st year		0.0961 per hour

(e) ETO hours may be used as soon as they are earned after the first 30 days of employment, but may not be used in advance of accrual. Note: Holidays which occur early in a period of employment may not be payable, depending on how much ETO has been accrued.

(f) Unit members covered by this Memorandum who are required to work on any of the fixed Hospital observed paid holidays shown below will be paid at a rate of one and a half (1.5) times the regular rate of pay. Fixed holidays are: New Year's Day (January 1), Washington's Birthday/President's Day (3rd Monday in February), Memorial Day (4th Monday in May), Independence Day (July 4), Labor Day (1st Monday in September), Thanksgiving Day (4th Thursday in November), Christmas Day (December 25) The Hospital agrees to follow the current Hospital Memorandum of Understanding No. 2-111B, provided the holiday worked was mandated by Management. Major holidays shall be: Thanksgiving Day, Christmas Day, and New Year's Day. The Hospital shall make a good faith effort to grant a unit member's request for ETO or time off on the unit member's birthday, where the request is made in writing in advance of the posting of the schedules covering those days.

(g) The Hospital will grant each bargaining unit member qualifying for ETO at least one of the following three holidays off: Thanksgiving Day, Christmas Day, and the following New Year's Day. If a bargaining unit member qualifying for ETO is required to work on both Christmas Day and New Year's Day he/she will receive double time for all hours worked on such New Year's Day in accordance with Hospital Memorandum of Understanding No. 2-111B (rather than time and one half), in addition to the holiday pay to which she/he is entitled.

(h) The Hospital will use its best efforts to ensure that no bargaining unit member will work the same such holiday in two consecutive years. The Hospital will also exercise its best efforts in order to allow a bargaining unit member at least two (2) of the four (4) following holidays as days off: Washington's Birthday/President's Day, Memorial Day, Independence Day, and Labor Day.

(i) In the Pharmacy when scheduling the major holidays, the PM shifts of 12/24 and 12/31 shall be considered along with all shifts of Thanksgiving, Christmas, and New Year's as holiday shifts, for the purposes of scheduling, and the Hospital will use its best effort to ensure no unit member will be scheduled to work;

- (i) Such holiday shifts on two consecutive days;
- (ii) More than two such shifts in one holiday season;
- (iii) More than three such shifts in two consecutive holiday seasons.

A holiday shift is defined as a shift in which the major portion of the shift is worked on the holiday.

(iv) If the Pharmacy employee worked one major holiday last year, the employee shall not be required to work the same holiday this year. Pharmacy employees may still choose to work any holiday shifts on a voluntary basis. Pharmacy employees are required to note this on their yearly preference form.

(j) In the Laboratory, when scheduling the major holidays, including Christmas Eve and New year's Eve, reasonable efforts will be made to consider any member requests for time off. Holiday scheduling will be completed with member participation. All ETO must be scheduled in advance and approved by the Department Head or Supervisor.

The holiday sign-up process will be as follows: Each year in November, the sign up list will be posted for the following year. All lab employees will be required to sign up for at least one major and two minor holidays by January 31. If the holiday falls on the employee's usual shift and the employee wishes to work that holiday, the employee must still sign up.

Priority for holidays off will be granted as follows:

- By seniority for each shift, subject to rotation.
- A rotation list will be maintained so that no employee will be required to work the same major holiday in two consecutive holiday seasons .
- Shifts that are not filled through this process will be filled with the person who would be regularly scheduled on the shift and has the required skill mix, by reverse seniority.
- Employees may still choose to work any holiday shift on a voluntary basis.

Requests for single holidays off will be answered based on the above process. Approvals will be based on staffing matches and will be answered no later than 6 weeks prior to the holiday. ETO requests for single day holidays will not count as priority choices for holiday vacation bidding.

An exception to this rule will be made when illness or emergencies occur. In these instances, the unit member will be obligated to phone explaining the illness or emergency as soon as practicable and unless physically impossible, prior to the start of the shift. Department Heads and Supervisors may request post verification of illness.

(k) Unit members shall annually submit their requests for vacation by January 31. Vacation schedules will be posted on the department bulletin board no later than March 1. Seniority, as defined in the Memorandum, will apply to the unit member's first choice of vacation in any calendar year. Once all unit members (in a work group) have received one choice, seniority would then again apply for the selection of another vacation period. Requests not submitted during the posting period shall be considered on a first-come first-served basis. The Hospital will provide a response to such requests within 14 calendar days. If the member has not received a response within 14 calendar days, the member may meet with the director to request a response. For Unit

Members in the Therapy Department: Employees shall submit their requests for vacation to occur between the dates of May 1st and October 31st by the preceding March 1st, and vacation schedules for this period will be posted no later than April 1st. Employees shall submit their requests for vacations to occur between the dates of November 1st and April 30th by the preceding September 1st., and vacation schedules will be posted no later than October 1st. Seniority in the selection of vacation schedules will apply to the employee's first choice in each 6-month period. Once all employees in the department have received one choice in each 6-month period, seniority would then again apply in the selection of another vacation period. Requests not submitted during the semi-annual posting period shall be considered on a first-come first-serve basis. Approval for such shall be based on staffing requirements necessary to maintain adequate coverage. The Hospital shall use its best efforts to respond to such vacation requests within 14 days after such submission. Per Diem employee's requests should be submitted in accordance with Hospital policy. Vacation requests made pursuant to this section (k) shall not be used to circumvent a unit member's weekend work obligations as set forth in the applicable Appendix. This section (k) shall not apply to the Case Management/Social Work department, Utilization Review department, and Clinical Dietitian department.

(l) Vacation Scheduling During Holiday Period

The Holiday Period will be defined as the week that includes Christmas Day and the week that includes New Year's Day.

Requests for multiple weeks during the holiday period may be submitted and will be considered based on operational and staffing needs. However, unit members may not request vacation for both the week of Christmas Day and the week of New Year's Day.

Requests for individual days will be considered when the schedule is made and if coverage is available.

Those who are awarded vacation on the first round will go to the bottom of the seniority list for the following year(s). Each year, vacation requests for the Holiday Period will be awarded to the most senior bidder(s), by shift, who did not get vacation the previous year(s). This process will repeat until everyone in the bargaining unit has an opportunity to take time off during the Holiday Period.

Consecutive weeks or single day holiday requests outside the Holiday Period will be considered along with the ETO awarding process outside the Holiday Period.

(m) Approval for vacation requests shall be based on staffing requirements necessary to maintain adequate coverage. In establishing vacation schedules, supervisors will be included in the departments to which they are assigned and be scheduled on a seniority basis where a unit member's ETO time off covers more than one pay period, no additional tax deductions shall be imposed if only one check is made covering such period. ETO checks shall be available immediately prior to the unit member's ETO time off upon two weeks' notice to the Payroll Department.

(n) ETO pay shall include normal differentials (i.e., regular shift differential and special duty differential).

(o) Upon verification of a serious illness or death in the family (as family is defined in Section 18 Bereavement Leave), a unit member will be granted an emergency ETO of a maximum of five accrued ETO days or his/her balance whichever is less. In the case of death, such ETO shall be in addition to bereavement leave allowable under Section 18.

(p) ETO must be used for all time off except for ESL, as noted below, jury duty, bereavement leave, and education leave. Leave without pay may be granted when unit members are voluntarily asked to reduce hours because of reduced workloads or when mutually agreed between the unit member and the Hospital.

(q) Upon termination of employment with the Hospital or on changing to non-benefits status, all unused ETO will be paid off at the then current rate of pay. ETO hours may not be used to extend employment beyond the actual last day worked. The maximum accrual of ETO is 640 hours. Full-time unit members must use a minimum of 15 days ETO per year. This will equate to the use of 10 paid holidays and 5 vacation days. Unit members who work less than full-time must use a minimum of the appropriate pro-rata amounts depending on their status. For example, 4/5ths = 12 days; 3/5ths = 9 days; 2.5/5ths = 7.5 days. Unit members who have accumulated in excess of 640 ETO hours at the end of a particular ETO anniversary will be required to accept cash payout of all hours in excess of 640. ETO cash outs will be in accordance with the Hospital's buy-out policy.

(r) When ETO is used it will be identified on time records as ETO#2 if used for" personal illness and ETO# 1 if used for any other purpose.

(s) The ESL Benefit: Eligible unit members will accrue ESL at a rate of 0.0308 per hour. Eligible unit members shall not accrue ESL on more than eighty (80) hours in a pay period. ESL shall only accrue on service hours and benefited hours used to support service hours as set forth in paragraph D. above. This benefit is for use when and if the unit member qualifies for State Disability Insurance or Workers' Compensation Insurance and, according to legal requirements, will be used to supplement SDI or Workers' Compensation pay as necessary during extended illness. Once all ESL is exhausted, ETO, if available, must be used if the illness continues. There is no limit to the amount of ESL which can be accrued, but time in an ESL account can never be converted to cash. ESL may never be used for family illness.

12. HEALTH AND DENTAL INSURANCE PROGRAMS

(a) The Hospital will enroll all eligible regular full-time and regular part-time unit members covered by this Memorandum in the newly established Washington Hospital Core Choice PPO Plan or its equivalent as set forth in Appendix H. Unit members' per pay period contributions will be as follows:

Regular Full-Time Unit Members

\$0 (Employee)
\$15.00 (Employee + Spouse)
\$13.00 (Employee + Child)
\$29.00 (Employee + Family)

Regular Part-Time Unit Members

\$0 (Employee)
\$18.00 (Employee + Spouse)
\$16.00 (Employee + Child)
\$35.00 (Employee + Family)

(b) Alternatively, all eligible regular full-time and regular part-time unit members will have the opportunity to elect to enroll in the Washington Hospital Choice Plus Plan.

(c) The Hospital will continue to enroll all eligible regular full-time and regular part-time unit members covered by this Memorandum in the Hospital's Dental Program or its equivalent at the Hospital's expense. Alternatively, all eligible regular full-time and regular part-time unit members will have the opportunity to elect to enroll in the Hospital's Buy-Up Dental Plan.

(d) The Hospital will continue to enroll all eligible regular full-time and regular part-time unit members covered by this Memorandum in the Hospital's Prescription Drug Plan.

(e) The Hospital will continue to enroll all eligible regular full-time and regular part-time unit members covered by the Memorandum in the Hospital's Vision Care program. Alternatively, all eligible regular full-time and regular part-time unit members will have the opportunity to elect to enroll in the Hospital's Buy-Up Vision Care Plan.

(f) For the purposes of group health benefits under this Article only, an eligible regular full-time unit member is defined as a unit member who regularly works an average of thirty (30) or more hours a week for the Hospital and who continues to work such a schedule. For the purposes of group health benefits under this Article only, an eligible regular part-time unit member is defined as a unit member who regularly works twenty (20) or more hours a week for the Hospital and who continues to work such a schedule. Coverage will be effective on the first of the calendar month following date of hire into an eligible position, and will be maintained throughout the last calendar month of such eligibility.

(g) An eligible unit member's dependent children up to 26 years of age shall be enrolled in the Health, Dental, Drug and Vision programs in accordance with the respective benefit plan. The unit member, at his or her option, may waive such coverage upon submission of a written request to the Hospital.

(h) The Hospital will continue coverage of an employee disabled for work by a job-connected injury or illness as determined by the Workers' Compensation Appeals Board during such disability up to a maximum of twelve (12) months.

(i) If there is conflict as to whether a particular illness or injury is or is not work-related, the Hospital will continue coverage of the subject employee until such time as there is a final resolution of the issue by a competent authority or twelve (12) months, whichever comes first. In the event that the final determination is that the injury or illness is not work-related, the amounts paid by the Hospital will be refunded by the subject employee.

(j) All physical examinations required of unit members in connection with their employment and all costs incident to those examinations shall be borne by the Hospital.

(k) The Hospital agrees to provide all eligible unit members and the Union with brochures describing all Health and Dental plans which are currently in effect.

13. GROUP LIFE INSURANCE

(a) The Hospital shall cover and pay premiums for each regular unit member working a pre-determined work schedule of more than twenty (20) hours a week with a \$50,000 group life and a \$10,000 group accidental death and dismemberment insurance coverage. Such coverage will be, effective on the first calendar month following completion of ninety (90) days of continuous employment. In addition, the unit member shall have the option to purchase additional coverage up to three (3) times his/her annual salary

(b) If such additional coverage is elected, the amount of coverage will be automatically adjusted to correspond to salary adjustments.

14. RETIREMENT PLAN

(a) The current pension plan will remain in force for all Regular Full-Time and Regular Part-Time Employees. The following is the Early Retirement Reduction Table for the Pension Plan:

Separation Age	Percentage of Accrued Benefits	Early Retirement Reduction Table Exceptions
55	50%	
56	53%	
57	56%	
58	60%	
59	63%	
60	66%	100% if 30 years of vesting credit
61	73%	100% if 30 years of vesting credit
62	80%	100% if 20 years of vesting credit
63	86%	100% if 20 years of vesting credit
64	93%	100% if 20 years of vesting credit

(b) Retiree Medical Benefits are available for regular employees who separate from employment by retiring, and start receiving pension benefits from the Hospital's retirement plan immediately upon separation. There are two options to choose from:

(i) **Retiree Medical Insurance Plan:** Regular Employees between the ages of 55 and 64 who separate from employment by retiring from the Hospital, and have at least 15 years of vesting service (last 5 years have to be benefited up to the date of retirement), will be eligible to participate in the Retiree Medical Insurance Plan, which includes prescription benefits. The retiree can remain in the plan until age 65 or Medicare eligible, whichever occurs first. Spouses are not eligible for this benefit. The Hospital will subsidize a portion of the cost of the Retiree Medical Plan. The premium rate will be the same as the COBRA rate established for the regular Hospital medical insurance plan. The retiree will be responsible for his/her share of the cost of the plan based on years of service and age, as follows:

Age 55 plus at least:

15 years of service	Employee will pay 65% of premium
20 years of service	Employee will pay 40% of premium
25 years of service	Employee will pay 15% of premium
30 years of service	Employee will pay 0% of premium

Employees who elect coverage under this Plan must make the election in writing within 30 days of retirement. Failure to make such an election waives any right to continued health insurance coverage beyond COBRA statutory coverage required by law. Employees can elect COBRA coverage for up to 18 months prior to electing the Retiree Medical Plan, but will have to pay the full COBRA premium. If a retiree covered under the Retiree Medical Insurance Plan misses a payment, he/she shall have 30 days from the due date to make up the payment and get reinstated in the plan.

OR

(ii) **Retiree Medical Reimbursement Plan.** Regular Employees between the ages of 55 and 64 who separate from employment by retiring from the Hospital, and have at least 20 years of vesting service, will be eligible for up to \$440 (four hundred forty dollars) per month in reimbursement for health care expenses, until age 65. The reimbursement is for health insurance premiums, deductibles, co-payments or other out-of-pocket medical expenses incurred by the employee. To receive the reimbursement, itemized receipts or canceled checks, with invoices, must be submitted to the Human Resources Department. At age 65 the medical reimbursement benefit ceases and the Hospital will start reimbursement of the Medicare Part B premium.

(c) **Medicare Part B Premium Reimbursement.** Regular Employees, who separate from employment by retiring from the Hospital and start receiving pension benefits immediately upon retirement, will receive the Medicare Part B premium reimbursement at age 65. Reimbursement is on a post calendar quarterly basis. Medicare Part B pays for doctor fees and a variety of other medical services and supplies that are not covered by Medicare Hospital Insurance Part A.

(d) **Prescription Reimbursement Program.** Regular Employees, who separate from employment by retiring from the Hospital and start receiving pension benefits immediately upon retirement, are eligible to receive the Retiree Prescription Drug Reimbursement at age 65. The employee must have been employed with the Employer for at least twenty-five (25) years in a benefited position at the time of the employee's termination of employment.

Effective Date. The Hospital established a Retiree Prescription Drug Reimbursement Program, which went into effect on March 9, 2006, the date the Hospital Board of Directors approved the new benefit.

Submission of Claims. The retiree will have 90 days after the end of each calendar year to submit their paperwork and receipts to the Human Resources Department talent for processing.

Reimbursement.

- Eligible retirees have the option of beginning the benefit in the year they turn 65 or waiting until January 1 of the following year.
- Upon the establishment of the plan, eligible retirees will be reimbursed up to \$450.00 (four hundred and fifty dollars) per calendar year for out-of-pocket, employee only, prescription drug costs or Medicare Part D premium costs.
- For the year 2006, qualifying expenditures must occur on or after March 9, 2006. In the following years, qualifying expenditures must occur on or after January 1st of each year.
- Reimbursement will be made between January 1st and April 30th for employees who have provided completed documentation for the previous calendar year.
- Reimbursement will be made once a year for a maximum of 10 consecutive years.
- Eligible expenses include expenses not covered by another plan.
- There will be no rollover of annual unused amounts.

(e) Tax Deferred Compensation Plan. The Hospital will continue in force its voluntary tax-sheltered deferred compensation plans.

(f) Employer Match to the 403(b) Tax Deferred Compensation Plan. The Hospital will maintain the 403(b) pension plan provision whereby the Hospital will match the pre-tax contribution of each benefited Employee, contributing one dollar for every one dollar contributed by the Employee, up to a maximum of 1.5% of the Employee's annual compensation. The Employee's entitlement to the Hospital contributions will vest at the rate of 20% each year.

Participating Employees will become fully vested after 5 years of participation, starting from the date of the initial Employee contribution under this provision or after 15 years of service (which must include at least 5 years of benefited service) with the Hospital, whichever comes first.

15. EDUCATIONAL LEAVE

(a) Eligibility Criteria. A regular full-time unit member shall be entitled to forty-eight hours (taken in a minimum of four hour increments, unless otherwise approved by the supervisor) leave with pay each year and a regular part-time unit member will be entitled to a pro-rata number of days based on hours worked to attend courses, institutes, workshops or classes of an educational nature including up to 24 hours per year to complete home study courses:

- (i) The unit member applies in advance in writing, specifying the course, institute, workshop or class he wishes to attend;
- (ii) The unit member obtains permission from his/her Director to attend;
- (iii) Such leave shall not interfere with staffing necessary to meet patient needs;
- (iv) The educational activity meets a requirement for continuing education for re-licensure by the State of California or is accredited by an appropriate accreditation agency.
- (v) Permission for such educational leave will not be unreasonably denied.
- (vi) Paid educational leave shall not be granted when combined with approved vacation of five days or greater.

(b) Yearly Basis. Educational leave is to be granted on a calendar year basis. To be eligible for educational leave, the full-time unit member must be employed prior to October 1st of the year in question. If he or she is employed on or after October 1, he or she qualifies for educational leave in the following year.

(c) Accumulation. Educational leave may be accumulated for up to two (2) years but no unit member may acquire educational leave in excess of twelve (12) days. If an employee requests educational leave and does not receive it in a particular year for which qualified, the employee may accumulate it for the following year. Any paid educational leave hours that are rolled over and not granted after making a second request in the second year after the request was originally made will be converted to accrued ETO hours upon written request of the employee.

(d) Leave at Request of Hospital. If the Hospital wishes the unit member to engage in an educational program other than one carried on within the Hospital, the Hospital and the unit member may mutually agree that this is charged against the unit member's educational leave. If the unit member declines to engage in such educational program, the Hospital has the option to withdraw its request or to require the unit member to engage in such program, in which event it is not charged against his or her educational leave. If the Hospital requires a unit member to attend a specific course or program, the Hospital will bear the cost of the program and reasonable expenses. It is understood that an individual unit member shall have a choice in the selection of the types of educational programs in which he/she will participate.

(e) If a unit member requests an educational leave day on a scheduled day off, the Hospital will make its best effort to grant a different work day off during that pay period to the unit member provided sufficient written notice of the request is given.

(f) The Hospital will make best efforts to consider the educational needs of the unit members by granting leave to as many applicants for a specific program as is operationally feasible.

(g) The Hospital will also make efforts to consider the education needs of the unit members and make appropriate classes available when feasible.

(h) Approved education leave hours shall be paid for the actual time spent in the class, seminar, or course, at the member's straight time rate of pay. Education leave time may not be included in the total hours used for the computation of overtime in that week or pay period.

(i) Certification. Unit members may apply for and be granted a cost reimbursement of up to \$400.00 annually for obtaining or renewing a specialty or advanced certification that exceeds the minimum requirements of the unit member's job classification and that is preferred for the area in which the unit member is working or for an area for which the unit member is seeking transfer within the bargaining unit, subject to management approval.

16. OTHER LEAVES OF ABSENCE

(a) Requests for leaves of absence shall be in writing. Any granting of a leave shall be in writing.

(b) By reason of such leave of absence, the unit member shall not forfeit any accrued rights under this Memorandum, but likewise, he/she shall not accrue any rights during such leave.

(c) The Hospital will implement the statutory changes mandated by the Federal and State disability and family leave statutes including these statutes' definition of leave of absence. Unit employees shall be entitled to the benefits of all applicable state and federal leave laws. Where the statutory language differs with the language of this Memorandum, the statutory language will be followed.

(d) Disability Leave.

(i) Any regular unit member in service with the Hospital for at least one (1) year shall be entitled to a leave of absence on proper proof that he/she needs it because of his own physical disability. Such leave shall be not more than six (6) months, except if the disability arises from industrial injury such leave will be not more than twelve (12) months.

(ii) It may be extended only by agreement between the unit member and the Hospital. The Hospital may require reasonable proof that the unit member will be able to return to duty within the time for which the leave is requested.

(iii) When a unit member returns to duty, in compliance with an authorized leave of absence, he/she shall be reinstated in the same classification in which he/she was employed before the absence; but if conditions in the Hospital have so changed that it would be unreasonable to reinstate him/her in the same classification, the Hospital will reinstate him/her in a classification as nearly comparable to the original classification as is reasonable under the circumstances.

(iv) Any unit member on leave of absence pursuant to this Section shall not have his/her anniversary date adjusted for purposes of this Memorandum when the leave of absence is less than thirty (30) days duration. Any unit member on leave of absence due to disability other than that arising from industrial injury shall not have his/her anniversary date adjusted when the leave of absence is less than six (6) months in duration. Any unit member on leave of absence due to disability stemming from industrial injury shall not have his/her anniversary date adjusted when the leave of absence is less than twelve (12) months in duration. If the leave exceeds these limits, the anniversary date may be adjusted for the full period of the leave.

(e) Pregnancy Disability Leave.

(i) Any unit member who is disabled due to pregnancy, childbirth or related medical conditions will be granted an unpaid leave of absence during the pendency of disability but not to exceed four (4) months. Unit members requesting a pregnancy-related disability must give the Hospital reasonable notice of the date the leave will commence and the estimated duration of the leave. In addition, the unit member must present written confirmation of the disability from her physician.

(ii) Provided the pregnancy-related disability leave does not exceed four (4) months, at the conclusion of the leave the unit member will be returned to her original position unless that position no longer exists due to legitimate business reasons; or to keep the position open would have substantially undermined the Hospital's ability to operate safely and efficiently.

(iii) In the event that the unit member cannot be returned to her original position, the Hospital will provide the unit member with a substantially similar position.

(iv) Benefited unit members who are disabled due to pregnancy, childbirth or related medical conditions will be granted an unpaid leave of absence during the pendency of disability but not to exceed six months. For disabilities extending beyond the four (4) months, reinstatement will follow the language under disability (16D) not the language under pregnancy disability (16E).

(f) Personal Leave. Personal leave up to twelve (12) months' duration may be granted by the Hospital on a case by case basis when requested by an employee. Anniversary date will be adjusted when the personal leave of absences is longer than thirty (30) days. The Hospital will reinstate after the leave in a classification as nearly comparable to the original classification as is reasonable under the circumstances.

17. JURY DUTY AND SUBPOENAED WITNESS PAY

(a) Leave with pay will be granted to any regular full-time or regular part-time unit member who is called for jury duty, provided such unit member shall deposit any jury fee with the Hospital cashier. Leave with pay will be granted to any unit member who is answering a subpoena relating to Hospital business, provided such unit member shall deposit any witness fee with the Hospital cashier. For evening and night shift employees who are required by the courts to call in periodically during the day in order to determine whether or not the court will require their

testimony, the Hospital will agree to call in for such employees during the hours of 8:00 a.m. to 4:30 p.m., Monday through Friday.

(b) When jury duty occurs during weeks that an employee is scheduled to work the weekend, the Hospital will use its best efforts to reschedule the employee for a Monday through Friday workweek.

18. BEREAVEMENT LEAVE

(a) Bereavement leave of up to three (3) paid days shall be granted to regular full-time and part-time unit members in cases of death in the unit member's immediate family, which shall be defined to include spouse, mother, father, daughter, son, sister, sister-in-law, brother, brother-in-law, father-in-law, mother-in-law, grandmother, grandfather, grandchildren, step-father, step-mother, step-daughter, step-son, or persons who, prior to the unit member's having attained legal majority, officially stood in the place of mother or father, and registered domestic partners as defined by California law.

(b) Regular full-time and regular part-time unit members may take an additional two (2) days of bereavement leave, without pay. Per diem unit members shall be granted up to five (5) work days of bereavement leave, without pay, in the case of a death in the unit member's immediate family member as defined above.

(c) Bereavement Leave may be divided due to timing of services and related circumstances and need not be taken on consecutive days as long as the request for time off is within three (3) months following the death in the family.

(d) Reproductive Loss Leave. Unit members who have been employed by the Hospital for at least 30 days shall be eligible for up to five (5) days of reproductive loss leave following a reproductive loss event. A "reproductive loss event" means the day or, for a multiple-day event, the final day of a failed adoption, failed surrogacy, miscarriage, stillbirth, or an unsuccessful assisted reproduction. If a unit member experiences more than one reproductive loss event within a 12-month period, the total amount of reproductive loss leave time may not exceed 20 days within a 12-month period. The days a unit member takes for reproductive loss leave need not be consecutive, but must be taken within three months of the event triggering the leave except as provided under applicable law. Reproductive Loss Leave will be unpaid unless a unit member chooses to use accrued ETO. The Hospital will, to the extent allowed by law, maintain the confidentiality of a unit member requesting leave under this policy.

19. SENIORITY

(a) The parties agree that in cases of layoffs, rehiring, and promotions, as well as schedule preference, extra hours, overtime, ETO, educational leave, and other time off, the principle of seniority shall be observed for all unit members who have completed their initial probationary period and who are not on disciplinary probation, provided that ability, competency, and merit as determined by the Hospital are demonstrated.

Seniority and all related rights under this agreement shall be forfeited upon:

- (i) Resignation;
- (ii) Termination for cause;
- (iii) Layoff without re-employment for twelve (12) consecutive months;
- (iv) Failure to return to work in accordance with the approved terms of a leave of absence.

(b) A unit member's seniority is determined by the date of employment in the bargaining unit in the Therapy Department, Pharmacy or Laboratory (most recent date of employment in the case of rehire) on the following basis:

(i) Regular full-time and regular part-time unit members as defined in Section 9A and 9B will be considered senior to all per diem employees. For bidding purposes only, regular full-time and regular part-time unit members are senior to all non-unit members except in the case of an opening in Lead Scientist classification. In this case, Supervisor Hospital seniority will apply.

(ii) For bidding purposes only, a supervisor's seniority from date of hire in the Department will be counted once a supervisor has successfully bid into a represented classification.

(iii) Seniority among per diem employees shall be length of service. Length of service for per diem employees shall be based on hours worked since hire in the bargaining unit in the Pharmacy or Laboratory. See 9C for definition of a per diem.

(c) Ability, competency and merit apply to such unit members based on the following criteria:

(i) Job Classification. The job title and salary grade normally used to define the position. For the purposes of this section, Senior Clinical Laboratory Scientist and Clinical Laboratory Scientist will be considered one job classification.

(ii) Job Description. All of the component tasks of a particular position including Standards of Performance and any federal, state or regulatory agency requirements. The current job description, including Standards of Performance and any federal, state, or regulatory agency requirements will be posted in the work area.

(iii) Specialty Training. Knowledge and skills needed for a particular job description which, vary substantially from, or are in addition to, knowledge and skills required for other job descriptions in the same classifications.

(iv) Demonstrated Proficiency. Where a unit member usually and customarily performs the functions of a particular job description or usually and customarily relieves in a particular job description in another unit.

(d) Effective August 1, 1987, a per diem employee who changes to regular status shall have seniority earned as a per diem credited to regular status on the basis of each 100 hours worked

as a per diem equaling one month's service, except that no such employee shall accumulate more than one year's service in any calendar year.

20. LAY-OFF AND REDUCTION OF HOURS

(a) Reduction in Staffing. The parties recognize that the Hospital may experience changes which require temporary reductions in staffing in the Therapy Department, Laboratory and/or the Pharmacy. These reductions will be accomplished in accordance with this section.

Short Term Reduction:

(i) Short Term – Voluntary.

(A) In the event of a temporary reduction of Hospital operations resulting in the need to reduce staffing of employees, affected staff may volunteer to reduce hours for a specified period of time.

(B) This time may be paid or non-paid as mutually agreed upon by the employee and the Hospital.

(ii) Short Term – Mandatory.

(A) If at the time of reductions in staffing, the Hospital expects the reduction to be for fourteen (14) calendar days or less, and there are insufficient volunteers available to work reduced hours, mandatory reductions shall proceed in the order listed below, from least senior to most senior, by shift within each affected area (See Appendix A) provided the retained employee can perform the work that the Hospital determines is required. This determination will be subject to the grievance procedure (Section 22).

PHARMACY	LABORATORY
1. Register	1. Per diems
2. Per diem	2. Full-Time Extra Shift
3. Full-Time Extra Shift	3. Part-Time Extra Shift
4. Part-Time Extra Shift	4. Probationary (per section 2-e)
5. Probationary (per Section 2-e)	5. Regular Techs
6. Regular	6. Lead Techs

(B) The above-referenced order applies to short term reduction only. In the Pharmacy, shifts are defined as Nights, P.M.'s, and Rotational.

(C) In the Laboratory, in cases where an employee works in more than one area on a regular basis, his/her home area shall be the area where he/she has worked the most hours during the past six months.

(D) Regular employees who have ETO time available may, at their option, use this time or unpaid time during the temporary reduction time.

(E) A regular employee who is scheduled to work and reports to work, but is sent home in accordance with the language of Section 20.A.2 shall be guaranteed pay for one-half of his/her scheduled shift.

(F) The Hospital further agrees that this provision for temporary reduction in staff shall not be used to circumvent the long-term reduction procedures as set forth in Section 20.A.4.

(iii) Mutually Agreed Upon Reduction in Hours.

(A) In the event of a temporary reduction of Hospital operations, resulting in the need to reduce staffing of employees for a more intermediate period, affected staff may elect, by mutual agreement between the Hospital and the Union, to work on a reduced hours basis for a specified period of time.

(B) The parties shall identify the number of affected employees, hours and duration of the reduction, and the method of assigning the mandatory reduction in a Letter of Agreement which may be renewed or canceled in 30-day increments.

(C) Any temporary involuntary reduction in a regular employee's scheduled hours of work shall be considered a reduction in force (partial layoff).

(D) The Hospital further agrees that this provision for temporary reduction staff shall not be used to circumvent the long-term reduction procedures as set forth in Section 20.A.4

(iv) Notice of Long Term/Permanent Reduction in Staffing.

(A) If a long term or permanent curtailment of operations or reduction of Regular Employee position(s) is needed, the reductions will be accomplished in accordance with this subsection.

(B) When the Hospital determines that permanent or indefinite reduction of Regular Employee positions is imminent, it shall give the Union advance notice of not less than fourteen (14) calendar days or, if such notice is not given to the Union, ten (10) days pay will be paid, only to employees permanently laid off.

(b) Order of Reduction.

(i) Pharmacy.

(A) In the Pharmacy department when reductions are necessary, the Hospital will identify the number and status of regular employee positions which will remain. The Hospital will offer these positions in seniority order to the employees by classification, provided he/she is qualified (per Section 18c) for the position with no more than eighty (80) hours of orientation: The Hospital's determination of "qualified" shall be subject to the grievance procedure. Pharmacy classifications are Clinical Pharmacists and Pharmacy Technicians.

(B) The Hospital will make reasonable effort to contact employees who are on vacation or leaves of absence at the time of notice. If after reasonable effort the Hospital is unsuccessful, this issue will be subject to Meet and Confer.

(ii) Laboratory.

(A) In the Laboratory Department, the Hospital shall designate the area(s) (see Appendix G) where reductions are to occur and the number and status of regular employee positions which will remain. The Hospital will offer these positions in seniority order to the employees in this area. Clinical Laboratory Scientist, Sr. Laboratory Scientist and Lead Scientist shall be considered one classification.

(B) The Hospital will make reasonable effort to contact employees who are on vacation or Leaves of Absence at the time of notice. If after reasonable effort the Hospital is unsuccessful, this issue will be subject to meet and confer.

(iii) Therapy Department

(A) With respect to Therapists, the order of reduction will be by department (i.e. OT, PT, Lymphedema and speech) and job classification.

(B) In the Therapy Department when reductions are necessary, the Hospital will identify the number and status of regular employee positions which will remain. The Hospital will offer these positions in seniority order by job classification.

(C) The Hospital will make reasonable effort to contact employees who are on vacation or leaves of absence at the time of notice. If after reasonable effort the Hospital is unsuccessful, this issue will be subject to Meet and Confer.

(iv) An employee who is not offered a position of at least the same status hours under the procedure outlined in paragraph 2 will be offered the opportunity to displace the least senior employee in any work area in the department with at least the same status hours, provided he/she is qualified (per Section 19c) for the position with no more than eighty (80) hours of orientation. The Hospital's determination of "qualified" shall be subject to the grievance procedure.

(v) An employee who is not offered a position under the procedure outlined in paragraph 4 will be offered an opportunity to displace the least senior employee in the department who has less status hours, provided he/she is qualified (per Section 19c) for the position with no more than eighty (80) hours of orientation. The Hospital's determination of "qualified" shall be subject to the grievance procedure.

(vi) An employee who does not accept a position offered under the procedure outlined in paragraphs 1 through 5 or who is not offered a position will be laid off. Employees on layoff status will not accrue benefits during the period of layoff.

(A) Placement Alternative to Reduction. Employees selected for layoff may apply for posted, vacant positions in accordance with Section 2.

(B) Intermittent Work Offers.

1. An employee who is in a long term/permanent layoff status shall be placed, upon request, in order of seniority, on an intermittent work list for the first twelve months after separation. Employees on this list will be notified of casual per diem work for which they are qualified. These employees will be paid at regular rates (not per diem rates) for this work. The Hospital shall make good faith efforts to offer the opportunity to work intermittent shifts to qualified laid off employees before overtime of four (4) hours duration or more is offered.

2. If an employee who is on the intermittent work list works forty (40) hours or more in two consecutive pay periods, the Hospital will reimburse that employee for any COBRA payments (see paragraph g) he/she made for the month and he/she will accrue benefits for these hours.

(C) Severance. The Hospital will meet and confer with ESC/IFPTE regarding severance during the fourteen (14) days following any notice of long term/permanent reduction in force.

(D) Re-Employment.

1. Employees on lay-off will be given a notice of each position posting in his/her department.

2. Employees on layoff status have the responsibility of keeping the Hospital informed of their current address and telephone number. Failure to do so will constitute a waiver of rights under this Section. An employee who is laid off may use his/her seniority to bid on posted positions, provided they are qualified (per Section 18c) for the new position with no more than eighty (80) hours of orientation. The Hospital's determination of "qualified" will be subject to the grievance procedure. An employee on disciplinary probation may only bid on a posted position within his/her former area. These rehire rights will expire one year after the date of the lay-off

3. Those employees who are re-employed within 12 months, from the date of separation will have their start date adjusted for the time they were on layoff status.

(E) Continuation of Benefits. Employees separated under this provision have the option of purchasing health, dental and vision insurance at the COBRA rate available to the Hospital for a period of time provided by the Statute following the date of separation in accordance with COBRA. These premiums must be paid monthly by the employee, consistent with the Hospital's policy on COBRA benefits.

21. WORK CLOTHES

Required uniforms are furnished by the Hospital for all unit members covered by this Memorandum and are laundered by the Hospital. The Hospital shall provide each regular unit member with two (2) new laboratory coats per year. Each per diem unit member shall be provided

with one (1) new laboratory coat per year, once probationary period is passed. In the Pharmacy, Pharmacists may choose to wear scrubs in the ED; Central Pharmacy and Critical Care, subject to agreement with management on the color of the scrubs.

22. EMPLOYEE COMPLAINTS AND GRIEVANCES

Unit members shall be enabled to make their complaints known by orderly appeal up through successive levels of supervision and shall be assured of a prompt and fair hearing of the issues involved. The use of this employee complaint and grievance procedure shall not reflect unfavorably on the unit member or supervisors concerned. It shall be the responsibility of each supervisor and the Administrator to guarantee unit members under their jurisdiction freedom from restraint, discrimination or reprisal for using this procedure. The following review procedure shall cover all unit member complaints and grievances.

Step One:

If a unit member is dissatisfied with a decision or a condition affecting his/her employment, he/she shall first discuss the matter with his/her immediate supervisor or department head. The immediate supervisor or department head shall make a thorough investigation of the case and make a decision based on full and fair consideration of all the facts. Most complaints and grievances should be solved at this level.

Step Two:

If the grievance or complaint is not thus settled, the unit member and/or his/her authorized representative shall submit the grievance in writing and will then confer with the Administrator of the Hospital, or his/her designated representative, and attempt to settle the matter. The Administrator or designated representative shall reply within ten (10) calendar days.

Step Three:

(a) If any such grievance or complaint is not settled by the above procedures, either party may notify the other in writing within seven (7) calendar days of their intent to place the matter before an advisory committee. The two parties will then convene to appoint said committee which shall consist of two (2) representatives of the Hospital and two (2) representatives of the unit member. The committee will take up the matter within forty-eight (48) hours of its appointment. Any decision by a majority of three (3) members shall be the final decision of the committee, subject to provisions of Step Five. A record of the proceedings of the committee shall be kept.

(b) As an option to the Step Three Grievance Committee, the parties may mutually agree to mediation through the Federal Mediation and Conciliation Service (FMCS) utilizing the services of an agreed upon FMCS mediator to resolve the grievance.

(i) A request by either party for mediation must be made within fourteen (14) days of the Step 2 response.

- (ii) A grievance mediation meeting shall be scheduled within thirty (30) days of the request for mediation subject to the schedule of the mediator.
- (iii) Neither the Employer nor the Union will be bound by any recommendation of the mediator unless mutually agreed to otherwise by the parties.
- (iv) The costs of mediation, if any, shall be shared equally by the parties.
- (v) A grievance may proceed directly to arbitration upon mutual agreement of the parties.

Step Four:

If, within five (5) days after the committee begins its consideration of the matter as described in Step Three above, a decision has not been reached, then the committee shall unanimously select a fifth (5th) member who shall serve as impartial chairman of the committee. A decision by a majority of the committee (three members shall constitute a majority) shall be the final decision of, the committee, subject to provisions of Step Five. A record of the proceedings of the committee shall be kept. Any fees or expenses involved in this step of the procedure shall be borne equally by the Hospital and the unit member, or the unit member's representative, subject to the provisions of Step Five.

Step Five:

No later than thirty-two (32) days after the final decision of the committee, the Board of Directors of the District may, of its own motion, review the final decision of the committee made at Step Four, together with the entire record of the proceedings, the Board of Directors may affirm, modify or reverse the decision of the committee. Should the Board of Directors determine to reverse the decision, they shall reduce to writing their reasons for so doing and, in this case, the Hospital shall bear all costs of Step Four, if any. If the Board of Directors reverses the committee decision, the Union shall have seven (7) calendar days from said decision to appeal to Arbitration under Step Six.

Step Six:

If the grievance or complaint is not resolved in the above steps with the committee, or the mediation is not successful or otherwise rendered binding, then either party may provide written notice to the other party requesting selection of an arbitrator within ten (10) days after the committee renders its decision or declares a deadlock or after the mediation ends.

The parties shall then mutually agree upon an arbitrator to render a decision on the grievance. A hearing shall be scheduled on a mutually agreed upon date for all parties to present evidence and testimony to the arbitrator. A decision by the arbitrator shall be final and binding.

A record of the arbitration proceedings shall be kept. Any fees or expenses involved in this step of the procedure shall be borne equally by the Hospital and the unit member or the unit member's representative.

Notwithstanding any of the above procedures, no grievance or complaint shall be considered unless it has been first presented within thirty (30) days of the alleged occurrence thereof or is not processed within the time limits set forth in the grievance procedure. In the event the grievance concerns discharge of a unit member, a grievance must be presented within seven (7) calendar days following discharge. Notwithstanding any of the above, the time limits included in this procedure may be modified by mutual consent of the parties concerned. Unless expressly stated otherwise, all time limits in this Section are calculated by calendar days.

23. EMPLOYEE REPRESENTATIVES (STEWARDS)

(a) The Union may appoint two (2) unit member representatives and two (2) alternates for each department, who will act only in the absence of the named representatives. The appointments shall be made in such manner as the Union determines, and the Hospital will be notified in writing of such appointments.

(b) The unit member representatives shall only deal with the representatives of the Hospital designated to handle grievances.

(c) The primary function of the unit member representatives shall be to represent their coworkers' concerns in the workplace and process grievances of unit members through the grievance procedure.

(d) The unit member representatives shall not direct any unit member how to perform or not perform his/her work, shall not countermand the order of any supervisor, shall not interfere with the normal operations of the Hospital or any other unit member. His/her activities as a unit member representative shall in no way interfere with his/her assigned duties as a Hospital employee.

(e) No unit member representative shall be involved in any way in the handling of grievances other than in the department in which he works. The Hospital's designated representative is only required to meet with one unit member representative on any grievance.

(f) During contract negotiations, only one (1) unit member representative per department shall be paid at their straight time hourly rate if negotiating during their normal working hours.

24. LABOR-MANAGEMENT COMMITTEE

(a) The Hospital recognizes the concern of the unit members with respect to professional developments in the field and recognizes further that unit members may provide positive professional assistance towards achieving effective and efficient operations and high professional standards which are the Hospital's obligations to the community.

(b) To this end, a Labor-Management Committee with representatives for each department will be established at the Hospital. The Committee shall be comprised of one (1) unit member appointed by the union per department, the ESC union representative, the directors of each department and other representatives of the Hospital to be designated by management.

- (c) The functions of the Committee shall be:
- (i) To study developments in methods and technology and to recommend ways in which unit members may be trained to perform new professional assignments.
 - (ii) To consider constructively methods of improving the practice of Clinical Laboratory Science, Rehabilitation, Pharmacy, Social Work/Case Management, Utilization Review, and Clinical Dietitians in the Hospital.
 - (iii) To consider constructively staffing and scheduling patterns in the departments and to make recommendations thereon.
- (d) The Committee may schedule meetings as they deem necessary, but at least monthly unless agreed to otherwise. Representatives shall be entitled to a maximum of one (1) hour of pay monthly at their straight time hourly rate of pay for the purpose of attending Committee meetings providing that time spent at any meeting shall not constitute time worked for any purpose under this Memorandum.
- (e) Meetings will be scheduled so as not to interfere with the work of the departments. These meetings will not be part of the meet and confer process nor will they be construed to constitute grievance meetings, unless otherwise mutually agreed to by the parties in advance.
- (f) Meetings of the Labor-Management Committee will be chaired by the appropriate Hospital representative who will appoint a member of the Committee to prepare minutes. Agendas will be exchanged a week in advance of any meeting.
- (g) Recommendations adopted by the Committee are advisory to management and will not be subject to the grievance procedure.
- (h) The ultimate goal of the Committee is to work together to foster constructive working relationships, mutually enforce/interpret the contract, and openly work to resolve any issues and concerns between the parties.

25. EMPLOYEE SAFETY AND HEALTH

The Hospital shall continue its best efforts to ensure the safety and health of unit members in the work environment.

26. MEETING AND CONFERRING OBLIGATIONS

It is acknowledged that during meeting and conferring which resulted in this Memorandum, the Association had the unlimited right and opportunity to make demands and proposals with respect to all proper aspects of meeting and conferring. Therefore, for the period of this Memorandum, the Association agrees that the Hospital shall not be obligated to meet and confer with respect to any subject or matter not specifically referred to or covered in this Memorandum.

27. CONTRACTING LANGUAGE

In the event the Hospital intends to sub-contract work historically performed by employees covered by this agreement, or permanently close a department of the Hospital that employs employees covered by this agreement or sell the Hospital, the Hospital shall so notify the union, at least 30 days in advance of such intended action on its part, and the parties shall meet and confer on the impact of such action upon employees then working under this agreement. Such meeting and conferring will include, but not be limited to, alternative employment of any employee who loses his/her job as a result of the change and the impact of the change on patient care.

28. DISASTER PLAN

(a) In the event of a disaster requiring the activation of the Hospital Emergency Activation Plan, employees may: (1) be required to perform duties not covered by this Agreement while persons not part of the bargaining unit may perform work that is covered by this Agreement; and (2) be assigned mandatory overtime and schedules different from their normal shifts. This section is not intended to prevent an employee from attempting to contact his/her family by phone in the event of a natural disaster.

(b) Bargaining unit employees will be assigned to perform their primary duties where, in the discretion of the Hospital, it is feasible and appropriate for them to do so and will be compensated at no less than their regular rate of pay regardless of the work performed.

29. TERM OF MEMORANDUM

Union and Hospital agree to current contract language with new contract dates: February 1, 2024 through January 31, 2027.

Except as provided below, and as otherwise provided herein, this Memorandum shall become operative upon adoption by the board of Directors of Washington Township Health Care District and shall continue in effect without change, addition or amendment through January 31, 2027. Salaries as provided for in Sections 8 shall become effective on the dates noted in those sections.

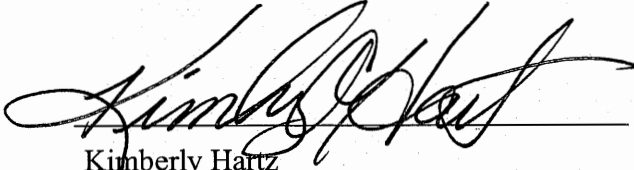
This Memorandum shall be automatically renewed or extended from year to year after January 31, 2027, unless either party serves notice in writing on the other party at least ninety (90) days prior to the expiration date of this Memorandum. If a new Memorandum is not reached prior to February 1, 2027, or any subsequent anniversary date thereafter, the parties may, by mutual consent, extend the existing Memorandum.

In the event there is new legislation regarding health care that negatively impacts the employer or the employees, this agreement may be reopened at the request of either party.

All terms and conditions in this Memorandum represent a joint recommendation to the Washington Health Board of Directors on behalf of the signatories below.


[SIGNATURE PAGE FOLLOWING]

WASHINGTON HEALTH DESIGNATED
REPRESENTATIVE



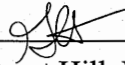
Kimberly Hartz
CHIEF EXECUTIVE OFFICER

ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE, LOCAL
20 (AFL-CIO CLC)



03/02/2026

John Mader, ESC Local 20 President



Grant Hill, Union Representative

Lina Nguyen

Grace Ching

Katrina Ramirez

Raj Sandhu

Krushang Patel

Maichi Ho

Rowena Suizo

Date: _____

Date: May 11, 2026

LETTER OF AGREEMENT

**BETWEEN WASHINGTON HEALTH AND THE
ENGINEERS AND SCIENTISTS OF CALIFORNIA**

Reopen MOU for Wage Negotiation

If the parties mutually agree in writing that the wage scales set forth herein require modifications, this MOU may be opened prior to the expiration date set forth in Section 30 for the sole purpose of negotiating appropriate wage adjustments.

**WASHINGTON HEALTH DESIGNATED
REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Per Diem Issues

The Professional Practices Committee of each department shall designate a Per Diem Subcommittee ("PDS") comprised of three Union members and three management members.

The PDS shall begin consideration of all issues pertaining to scheduling and per diem employees raised by the Union during negotiations within one month of the ratification of the Memorandum of Understanding ("MOU"). The issues raised by the Union shall serve as guiding principles.

The Committee shall meet at least twice per month. Union members shall be entitled to a maximum of three (3) hours' pay monthly at their straight time hourly rate of pay for attending the meetings, but the time spent in the meetings shall not be considered hours worked for overtime purposes.

The Union and the Hospital shall meet and confer over the recommendations of the PDS. Any agreement ultimately reached shall be subject to ratification by both parties. If no agreement is reached within eight months of the date the MOU is ratified, the parties shall, upon the request of either party, re-open applicable sections of the MOU and recommence negotiations in an attempt to resolve any outstanding issues.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Spousal Waiver Credit

Washington Hospital Healthcare System (the "Hospital") and IFPTE Local 20 unit of Engineers and Scientists of California (the "Union") agree that bargaining unit members will be eligible to voluntarily elect to receive a spousal waiver credit as follows:

- 1) All newly hired employees who voluntarily choose to waive coverage in any of the Hospital's health plans for their eligible spouse or domestic partner will receive a waiver credit of \$75.00 per pay period.
- 2) As soon as practicable following ratification of the MOU by the Hospital's Board of Directors, any employee whose eligible spouse or domestic partner is currently covered by any of the Hospital's health plans may voluntarily elect to waive coverage for the employee's spouse or domestic partner under the Hospital's health plan for the new benefits period in exchange for receipt of a waiver credit of \$75.00 per pay period.
- 3) In order to be eligible for the waiver credit, the employee must provide proof to the Hospital that the employee's spouse or domestic partner is covered by alternative medical coverage.
- 4) Any eligible spouse or domestic partner who an employee voluntarily elects to waive from coverage under the Hospital's health plan may continue to participate in the Hospital's dental and vision plans.
- 5) If at any time an employee elects to revoke the waiver and enroll his or her eligible spouse or domestic partner in one of the Hospital's health plans due to a loss of alternative medical coverage, the employee may do so and will no longer receive payment of the waiver credit.

**WASHINGTON HEALTH DESIGNATED
REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Scrubs for Therapists

Washington Hospital Healthcare System (the "Hospital") and IFPTE Local 20 unit of Engineers and Scientists of California (the "Union") understand and agree that during the term of the Memorandum of Understanding effective February 1, 2024 through January 31, 2027, the Hospital will continue to provide scrubs to bargaining unit Therapists in accordance with current practice. Specifically, the Hospital will provide all full-time Therapists with up to five (5) pairs of scrubs per year and all per diem Therapists with up to three (3) pairs of scrubs per year. Therapists may choose to provide their own scrubs as long as the color of the scrubs are charcoal gray.

WASHINGTON HEALTH DESIGNATED REPRESENTATIVE:

ENGINEERS & SCIENTISTS OF NORTHERN CALIFORNIA, IFPTE, LOCAL 20 (AFL-CIO CLC):

Date: _____

Date: _____

APPENDIX A

LABORATORY

CLINICAL LABORATORY SCIENTISTS

MEDICAL LABORATORY TECHNICIANS

APPENDIX A – LABORATORY

SECTION A7: JOB CLASSIFICATIONS

A. Minimum Qualifications for a Clinical Laboratory Scientist

1. Possession of a valid California Scientists license.
2. Ability to perform routine procedures in all laboratory divisions, or the ability to perform both routine and difficult procedures in one laboratory division.

B. Minimum Qualifications for a Senior Clinical Laboratory Scientist

1. Possession of a valid California Scientists license.
2. Minimum of three (3) years' continuous experience as a licensed Clinical Laboratory Scientist with Washington Health, or a combination of prior experience and Washington Health experience totaling three years. Equivalency will be determined by the Laboratory Director and the Personnel office staff.
3. The ability to perform with minimum supervision, all routine procedures and the most advanced procedures in one laboratory division, or all of the routine and difficult procedures in all laboratory divisions.

C. Minimum Qualifications for a Lead Clinical Laboratory Scientist

1. Possession of a valid California Scientist's license.
2. Minimum of three (3) years continuous experience as a Senior Clinical Laboratory Scientist or Supervisor with Washington Health.
3. The ability to perform all procedures in area assigned without supervision.
4. A comprehensive knowledge of the methodologies employed and the equipment utilized in the assigned area.
5. Strong communication and leadership skills.

D. Promotion from Scientist to Senior Scientist

The minimum requirements for promotion from Scientist to Senior Scientist shall be:

1. Fulfillment of the tenure requirements set forth above.
2. The specifications for Senior Scientist and,
3. The demonstrated abilities to perform the duties of the classifications as evidenced by the quality of work as a Laboratory Scientist.

The Hospital shall be sole judge of the Scientist's abilities to so perform, but advancement under these provisions shall not be unreasonably denied.

E. Promotion from Senior Clinical Laboratory Scientist to Lead Clinical Laboratory Scientist

The minimum requirements for promotion from Senior Scientist to Lead Scientist shall be:

1. Fulfillment of the minimum qualifications set forth above.
2. The demonstrated abilities to perform the duties of the position as demonstrated by the quality of work as a Senior Laboratory Scientist or Supervisor.

The Director of Laboratory Services shall be the sole judge of the Scientist's abilities to so perform, but advancement under these provisions shall not be unreasonably denied. Advancement is not based solely on tenure, but on the filling of a vacancy or creation of a new area. The Hospital shall determine how many lead positions will be established or maintained.

All present Supervisors with experience as a Scientist and Supervisor at Washington Health will be able to use Hospital Seniority in filling these positions.

F. Relief in Higher Classification

1. A Scientist shall be assigned as an Acting Supervisor when neither a Supervisor nor a Lead Scientist is on duty. The manager shall first attempt to obtain a volunteer to serve as Acting Supervisor among qualified unit members on duty. In the event no one volunteers to serve as Acting Supervisor then the manager shall assign the responsibilities of Acting Supervisor to unit members on a rotational basis in seniority order (beginning with the least senior Benefited Senior CLS) and provided the following payments are made such an assignment may not be refused.
2. A Scientist shall be assigned as an Acting Lead when a Lead Scientist is otherwise scheduled but is not on duty. The manager shall first attempt to obtain a volunteer to serve as Acting Lead among qualified unit member on duty. In the event no one volunteers to serve as Acting Lead then the manager shall assign the responsibilities to serve as Acting Lead to unit members on a rotational basis in seniority order (beginning with the least senior Benefited Senior CLS) and provided the following payments are made, such an assignment may not be refused.
 - a. A Scientist assigned responsibility in the absence of a Supervisor or Lead Scientist shall receive relief premium at the rate of \$3.30 per hour in addition or regular compensation.
 - b. A Scientist assigned responsibility in the absence of a Supervisor (and/or a Lead Scientist on a weekend or holiday) and who works for at least two hours shall receive a pro rata relief premium.
3. The Hospital will use its best efforts to fill vacant positions on a permanent basis.

G. Experience Credit

Initial placement for the purposes of tenure credit for all unit members will be established by the Hospital and implemented by the appropriate Director and the Personnel Office. Any employees at a lower or same step at the time of a hiring change will be appropriately adjusted.

Experience credit will be based on experience gained at a hospital, clinical laboratory, or home health care agency accredited by the Joint Commission or Medicare accreditation. Credit for previous experience may also include military or civilian hospitals operated by the Federal government. For the classifications of Clinical Laboratory Scientist or Clinical Pharmacist experience must be as a licensed or certified position.

H. Medical Laboratory Technician

1. Minimum Qualifications for a Medical Laboratory Technician

- a. Possession of a valid California Medical Laboratory Technician license.
- b. Ability to perform technical procedures working with direct supervision of a licensed Clinical Laboratory Scientist in specified areas of the clinical laboratory.

SECTION A8: COMPENSATION – LABORATORY

A. Pay Rates

The following rates of pay shall apply on the effective date shown below:

Effective the first pay period beginning on or after February 1, 2024, all Laboratory employees in the job classifications of Clinical Lab Scientist and Lead Clinical Lab Scientist will receive a one-time 3.0% equity adjustment, and all Laboratory employees shall receive a 5.5% across the board increase to their base rate of pay as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year	Year	Year	Year	Year	Year	Year	Year	Year
	1	2	3	4	5	10	15	20	25
Medical Lab Tech	54.32	55.14	55.97	56.80	57.65	59.67	60.58	61.73	61.73
Clinical Lab Scientist	69.52	72.60	75.69	76.81	77.94	80.69	81.92	83.56	84.77
Lead Clinical Lab Scientist	80.09	82.47	84.98	86.28	87.56	90.66	91.95	93.82	95.24
Point of Care Coordinator	67.59	70.59	73.60	74.68	75.78	78.46	79.65	81.25	82.43

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Laboratory employees shall receive a 5.0% across the board increase to their base rate of pay as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year	Year	Year	Year	Year	Year	Year	Year	Year
	1	2	3	4	5	10	15	20	25
Medical Lab Tech	57.04	57.90	58.77	59.64	60.53	62.65	63.61	64.82	64.82
Clinical Lab Scientist	73.00	76.23	79.47	80.65	81.84	84.72	86.02	87.74	89.01
Lead Clinical Lab Scientist	84.09	86.59	89.23	90.59	91.94	95.19	96.55	98.51	100.00
Point of Care Coordinator	70.97	74.12	77.28	78.41	79.57	82.38	83.63	85.31	86.55

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Laboratory employees shall receive a 5.0% across the board increase to their base rate of pay as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year	Year	Year	Year	Year	Year	Year	Year	Year
	1	2	3	4	5	10	15	20	25
Medical Lab Tech	59.89	60.80	61.71	62.62	63.56	65.78	66.79	68.06	68.06
Clinical Lab Scientist	76.65	80.04	83.44	84.68	85.93	88.96	90.32	92.13	93.46
Lead Clinical Lab Scientist	88.29	90.92	93.69	95.12	96.54	99.95	101.38	103.44	105.00
Point of Care Coordinator	74.52	77.83	81.14	82.33	83.55	86.50	87.81	89.58	90.88

To be eligible for payment, the employee must be employed on the date payment is made.

Advancement to the 2nd year rate (step 2) shall occur only if the employee has completed 1 year of eligible service in the 1st Year (Step 1) and at least 1,000 hours.

Advancement to the 3rd year rate (step 3) shall occur only if the employee has completed 1 year of eligible service in the 2nd Year (Step 2) and at least 1,000 hours.

Advancement to the 4th year rate (step 4) shall occur only if the employee has completed 1 year of eligible service in the 3rd Year (Step 3) and at least 1,000 hours.

Advancement to the 5th year rate (Step 5) shall occur only if the employee has completed 1 year of eligible service in the 4th Year (Step 4) and at least 1,000 hours.

Advancement to the 10th year rate (Step 6) shall occur only if the employee has completed 5 years of eligible service in the 5th Year (Step 5) and at least 5,000 hours.

Advancement to the 15th year rate (Step 7) shall occur only if the employee has completed 5 years of eligible service in the 10th Year (Step 6) and at least 5,000 hours

Advancement to the 20th year rate (Step 8) shall occur only if the employee has completed 5 years of eligible service in the 15th Year (Step 7) and at least 5,000 hours.

Advancement to the 25th year rate (Step 9) shall occur only if the employee has completed 5 years of eligible service in the 20th Year (Step 8) and at least 5,000 hours.

"Eligible Service" means years of service in the bargaining unit at Washington Health.

If hired at a step other than Step 1, future step progression would be as if the employee had reached that higher step through tenure.

B. Shift Premium – Laboratory

Scientists

Evening Shift Differential:	\$4.75
Night Shift Differential:	\$7.50
Medical Laboratory Technicians	
Evening Shift Differential:	\$ 4.25
Night Shift Differential:	\$ 6.50

1. The Hospital will use its best efforts to ensure that Scientists are regularly scheduled for one shift only. In the event that a day shift Scientist must be scheduled to work two shifts, except in emergencies of one week's duration or less, the Scientist shall receive shift differential for all days worked while so scheduled; however, a Scientist normally assigned to PM or night shift who works a day shift for the convenience of the Hospital shall receive shift differential for such day shifts worked.

C. Called-Back Compensation

1. Regular full-time, regular part-time and per diem unit members as defined in Section 9 below shall have an unbroken rest period of twelve (12) hours between any eight- (8) hour shift. All hours worked within the twelve (12) hour rest period shall be paid at the rate of time and one-half (1-1/2). This provision may be waived upon the written request of the employee and with the agreement of the Supervisor. Time for which any premium pay is paid shall count as rest time for purposes of this paragraph.
2. Regularly scheduled unit members who are asked by the Hospital to change their schedule either by coming in earlier than scheduled or later than scheduled with fewer than twenty four (24) hours' notice and who agree to do so will receive a premium of one (1) hours pay at regular straight time rates of pay.

D. Weekend Work

1. Full-time Laboratory Scientists (and benefited part-time Laboratory Scientists hired before 2/1/78) will be scheduled to work no more than one weekend in three without the individual Scientist's consent, except in the case of an emergency. Full-time Laboratory Scientists hired after February 1, 1998, may be required to work a fixed schedule which requires him/her to work every other weekend.
2. Benefited part-time Laboratory Scientists hired after February 1, 1978, may be hired to work a fixed schedule which includes a greater number of weekends worked than those noted above.
3. A weekend differential of 5% of the employee's current base hourly rate will be paid for all hours worked in a shift when the majority of the hours of that shift fall during the hours of 11:00 PM Friday until 11:00 PM Sunday.

E. Per Diem Differential

Per Diem Clinical Laboratory Scientists and Per Diem Medical Laboratory Technicians receive no benefits, including paid sick leave. A 12.5% increase of their base wage per hour will be paid to Per Diem Clinical Laboratory Scientists and Per Diem Medical Laboratory Technicians in lieu thereof.

SECTION A10: WORK SCHEDULES AND HOURS OF WORK

- A. The unit member's work week shall be designated by the Hospital and shall be a consecutive period of seven (7) days. Straight time hourly rates shall apply up to a maximum of forty (40) hours per week, eight (8) hours per day, five (5) days per week. All work in excess of eight (8) hours per day or five (5) days per week shall be paid for at the rate of one and one-half (1-1/2) times the basic straight time hourly rate including applicable differentials. All work in excess of twelve (12) hours in one day shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials. All work on the unit member's seventh (7th) consecutive day of the week shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials.
- B. The Hospital shall attempt to schedule two (2) consecutive days off each week but in the event it is unable to do so, no penalty pay shall be due. No unit member shall be required to work on his day off except in case of emergency. Notwithstanding the foregoing, a group of unit members may, by mutual agreement, institute for rotation purposes, a schedule of work not to exceed eighty (80) straight time hours over a two-week period.
- C. A schedule shall be posted on the bulletin board available to all unit members listing starting and quitting times and days off four (4) weeks in advance. After the schedule is posted, an employee who, for his or her own benefit, wishes to initiate a schedule change on any shift or for any pay period must find a qualified replacement. The replacement must not cause any additional overtime to the Hospital, and the proposed replacement must be pre-approved by the Hospital. When a schedule change is required because of illness, bona fide emergency or other circumstance beyond the control of the employee, management will be responsible for obtaining a replacement and communicating with all affected employees. If this schedule is changed without mutual consent within two (2) weeks of the date to be worked, the unit member will have immediate access to Step 2 of the Grievance Procedure.
- D. The Hospital will make its best efforts to provide adequate relief staffing so that the scheduling of vacation, holiday and educational leave will not be unreasonably denied. When vacation requests cover the weekend a Clinical Lab Scientist is regularly scheduled to work, the weekend will be included in the time off approval.
- E. During the term of this Memorandum of Understanding, the Hospital and the Union agree to discuss the implementation of additional shifts at ten (10) hours a day and/or twelve (12) hours a day. If the Hospital and the Union mutually agree that such shifts may be initiated, they will memorialize their discussion in a Side Letter of Understanding to this Memorandum.
- F. No unit member shall be required to work two shifts within a period of twenty-four (24) hours except in case of emergency.
- G. Definition of Shifts

1. A day shift is any shift in which the majority of the regularly assigned hours are worked between 7:00 a.m. and 3:00 p.m.
2. A p.m. shift is any shift in which the majority of the regularly assigned hours are worked between 3:00 p.m. and 11:00 p.m.
3. A night shift is any shift in which the majority of the regularly assigned hours are worked between 11:00 p.m. and 7:00 a.m. A unit member who is asked to cover night shift on a temporary basis will receive the applicable night shift premium for all hours actually worked outside his or her regular schedule between 11:00 pm and 7:00 am.

H. Reduced Shifts

Employees who have attained at least three (3) years' seniority with the Hospital may request that their full time schedule be reduced to 4/5 (.8) time. For the two most senior employees making such a written request to the Department manager and to Human Resources, the Hospital will use reasonable efforts based upon business necessity to make this accommodation within 60 days of the request. No more than one employee in any one classification will be allowed to be on such a reduced schedule at any one time. The employee shall retain the right to apply for an available posted full time position upon written request.

The Hospital may post positions that include a regularly scheduled 3 shift week. Such positions shall be compensated based on the hours worked.

Management will make an effort to allow an employee exercising this option two (2) consecutive shifts off each week.

Lead positions shall always be full time positions.

APPENDIX A – APPLICABLE LETTERS OF AGREEMENT

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

**Call-Back Pay for Clinical Laboratory Scientists When
Subpoenaed to Testify as Witness Concerning Blood Draw**

The parties of this Letter agree that when a Clinical Laboratory Scientist is subpoenaed to appear as a witness to testify concerning a blood draw that was made as part of his/her job responsibilities, the time spent as a witness, if outside their normal work time, will be counted as call back pay as outlined in section 8C3 of the memorandum of understanding and will, therefore, be paid at one and one-half (1-1/2) time the straight time rate for a minimum of four (4) hours. In addition, the Clinical Laboratory Scientist will have his/her work schedule adjusted as appropriate. On the day shift, the supervisor will first ask for volunteers to draw these patients to try to accommodate those employees who might have a hardship appearing as a witness because they live so far away.

**WASHINGTON HEALTH DESIGNATED
REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Personnel files, Documentation, Investigations

The parties to this Letter of Agreement agree to the following:

1. Hospital employees have the right during normal business hours (although not while in paid status) to review the contents of their personnel file and to receive a photocopy of any: document in their personnel file, with the exception of confidential letters of reference and testing keys or instruments, if any. The Hospital shall maintain employee personnel files in the Human Resources Department and only documents contained in that personnel file shall be considered valid for disciplinary or promotional purposes.

2. Hospital employees shall be given a photocopy of any formal performance evaluation, written disciplinary warning, or any other document of a disciplinary or derogatory nature, prior to such material being placed in the employee's personnel file. The employee shall sign and date such material only as proof of receipt. All disciplinary actions shall be taken in a professional, respectful, and timely manner. Discipline shall be handled as confidentially as possible.

3. Hospital employees in the ESC bargaining unit have the right, upon request, to have union representation in any investigatory meeting that could lead to disciplinary action. When a unit member requests representation for such an investigatory meeting, supervisors shall delay the meeting for up to forty-eight (48) hours to enable the unit member to arrange for a union representative. Nothing in this Letter of Agreement shall restrict the Hospital's right to place an employee on administrative leave, prior to the investigatory meeting, as warranted by the circumstances.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Use of Laboratory Technicians

Under normal operating situations, the Hospital agrees that the Lab will limit its use of technicians to one per each discipline area in the Lab (Hematology, Chemistry, and Microbiology) as well as to the PM shift and Night shift. The Hospital agrees to use good faith efforts to ensure that Scientists are given the first opportunity to relieve for absent Scientists. In the event sufficient Scientists are unavailable to cover unanticipated shortages in staffing as determined by Lab management, the Hospital may use an additional technician to relieve in each discipline area or specified shift, consistent with the responsibilities that may be lawfully assigned to such technicians. On-going or other issues regarding the use of lab technicians will be referred to the PPC for discussion during the term of this Memorandum of Understanding.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Use of Medical Laboratory Technicians

It is the intent of Washington Health to utilize the MLT classification in compliance with California Business and Professions Code Section 1260-1275.

No existing Clinical Laboratory Scientist will be laid-off or have their hours reduced as a direct result of the implementation of the MLT classification.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

APPENDIX B

PHARMACY

CLINICAL PHARMACISTS
PHARMACY TECHNICIANS

APPENDIX B – PHARMACY

SECTION B7: JOB CLASSIFICATIONS

A. Minimum Qualifications for a Clinical Pharmacist

1. Possession of a current license as a registered pharmacist in the State of California.
2. Ability to process and review physician medication orders, prepare and dispense medication, interact with other healthcare professionals, and direct the work of pharmacy technicians.

B. Minimum Qualifications for a Pharmacy Technician

1. Possession of a high school diploma or equivalent.
2. Graduate of a pharmacy technician training program or a minimum of one (1) year hospital pharmacy experience.
3. Ability to receive, review, sort, and process drug and supply orders, assist in maintaining drug inventories, and processing of outpatient and inpatient orders, prepare admixtures, answer telephone, and perform clerical functions.
4. Certificate of registration from the State Board of Pharmacy (employees hired after 2/1/94).

C. Experience Credit

1. Initial placement for the purposes of tenure credit for all unit members will be established by the Hospital and implemented by the appropriate Director and the Personnel Office. Any employees at a lower or same step at the time of a hiring change will be appropriately adjusted.
2. Experience credit will be based on experience gained at a hospital, clinical laboratory, or home health care agency accredited by the Joint Commission or Medicare accreditation. Credit for previous experience may also include military or civilian hospitals operated by the Federal government. For the classifications of Clinical Laboratory Scientist or Clinical Pharmacist experience must be as a licensed or certified position.
3. Clinical pharmacists who have at least 2 years inpatient experience or 1 year of hospital residency can be hired into the year 3 step.

D. Pharmacy Technician II

The Union and Hospital agree that the PPC shall meet within 60 days of ratification of this Agreement to establish the position of Pharmacy Technician II with the following parameters:

1. Limited to one person.
2. The Hospital shall have discretion to fill with the most qualified person.
3. Duties to be defined but to include serving as lead in absence of supervisor, providing training programs during the year, assisting with overall precepting and attending yearly professional development classes.
4. Qualifications to be determined, but shall include at a minimum five years of inpatient experience at WHHS and membership in a national professional organization.
5. The PPC shall also consider:
 - a. The appropriate pay level.
 - b. Whether the position will be posted annually.
 - c. Criteria for the position.

E. Relief In Higher Classification

1. A Pharmacy Technician shall be assigned as an Acting Pharmacy Buyer when the Pharmacy Buyer is not on duty. The manager shall first attempt to obtain a volunteer to serve as Acting Pharmacy Buyer among qualified unit members on duty. In the event no one volunteers to serve as Acting Pharmacy Buyer then the manager shall assign the responsibilities of Acting Pharmacy Buyer to unit members on a rotational basis in seniority order (beginning with the least senior Benefited Senior CLS) and provided the following payments are made such an assignment may not be refused.
2. The Hospital will use its best efforts to fill vacant positions on a permanent basis.
3. A pharmacy Technician assigned responsibility in the absence of a Pharmacy Buyer shall receive relief premium at the rate of \$3.30 per hour in addition to regular compensation.

SECTION B8: COMPENSATION – PHARMACY

A. Pay Rates

Effective the first pay period beginning on or after February 1, 2024, all Pharmacy employees shall receive a 5.5% across the board increase to their straight time base wages as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 4	Year 5	Year 7	Year 10	Year 15	Year 20	Year 25
Clinical Pharmacist	98.47	99.95	101.42	103.40	105.47	109.69	114.08	118.63	121.79
Pharmacy Technician	36.39	38.98	41.19	43.39	44.27	45.12	46.03	46.96	47.65
Pharm Tech - Training	17.05								

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning on or after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Pharmacy employees shall receive a 5.0% across the board increase to their straight time base wages as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 4	Year 5	Year 7	Year 10	Year 15	Year 20	Year 25
Clinical Pharmacist	103.39	104.95	106.49	108.57	110.74	115.17	119.78	124.56	127.88
Pharmacy Technician	38.21	40.93	43.25	45.56	46.48	47.38	48.33	49.31	50.03
Pharm Tech - Training	17.90								

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Pharmacy employees shall receive a 5.0% across the board increase to their straight time base wages as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 4	Year 5	Year 7	Year 10	Year 15	Year 20	Year 25
Clinical Pharmacist	108.56	110.20	111.81	114.00	116.28	120.93	125.77	130.79	134.27
Pharmacy Technician	40.12	42.98	45.41	47.84	48.80	49.75	50.75	51.78	52.53
Pharm Tech - Training	18.80								

To be eligible for payment, the employee must be employed on the date payment is made.

Advancement to the 2nd year rate (Step 2) shall occur only if the employee has completed 1 year of eligible service in the 1st Year (Step 1) and at least 1,000 hours.

Advancement to the 4th year rate (Step 3) shall occur only if the employee has completed 2 years of eligible service in the 2nd Year (Step 2) and at least 2,000 hours.

Advancement to the 5th year rate (Step 4) shall occur only if the employee has completed 1 years of eligible service in the 4th Year (Step 3) and at least 1,000 hours.

Advancement to the 7th year rate (Step 5) shall occur only if the employee has completed 2 years of eligible service in the 5th Year (Step 4) and at least 2,000 hours.

Advancement to the 10th year rate (Step 6) shall occur only if the employee has completed 3 years of eligible service in the 7th Year (Step 5) and at least 3,000 hours.

Advancement to the 15th year rate (Step 7) shall occur only if the employee has completed 5 years of eligible service in the 10th Year (Step 6) and at least 5,000 hours

Advancement to the 20th year rate (Step 8) shall occur only if the employee has completed 5 years of eligible service in the 15th Year (Step 7) and at least 5,000 hours.

Advancement to the 25th year rate (Step 9) shall occur only if the employee has completed 5 years of eligible service in the 20th Year (Step 8) and at least 5,000 hours.

"Eligible Service" means years of service in the bargaining unit at Washington Health.

If hired at a step other than Step 1, future step progression would be as if the employee had reached that higher step through tenure.

B. Shift Premium – Pharmacy

Clinical Pharmacists

Evening Shift Differential: \$ 7.50
Night Shift Differential: \$11.25

Pharmacy Technicians

Evening Shift Differential: \$ 3.00
Night Shift Differential: \$ 4.50

1. The Hospital will use its best efforts to ensure that Scientists are regularly scheduled for one shift only. In the event that a day shift Scientist must be scheduled to work two shifts, except in emergencies of one week's duration or less, the Scientist shall receive shift differential for all days worked while so scheduled; however, a Scientist normally assigned to PM or night shift who works a day shift for the convenience of the Hospital shall receive shift differential for such day shifts worked
2. In the event that a unit member, who is normally scheduled to work the evening or night shift, voluntarily requests a day or evening shift, the member will receive the applicable rate of pay of the actual shift worked.

C. Called-Back Compensation

1. Regular full-time, regular part-time and per diem unit members as defined in Section 9 below shall have an unbroken rest period of twelve (12) hours between any eight (8) hour shift. All hours worked within the twelve (12) hour rest period shall be paid at the rate of time and one-half (1-1/2). This provision may be waived upon the written request of the employee and with the agreement of the Supervisor.

Time for which any premium pay is paid shall count as rest time for purposes of this paragraph.

2. Regularly scheduled unit members who are asked by the Hospital to change their schedule either by coming in earlier than scheduled or later than scheduled with fewer than twenty four (24) hours notice and who agree to do so will receive a premium of one (1) hours pay at regular straight time rates of pay.

D. Weekend Work:

1. Every effort will be made to schedule full-time and part-time benefited Pharmacy Technicians to work no more than one weekend in three. Full-time and part-time benefited Pharmacy Technicians will not be scheduled to work more than one weekend in two without the individual Technicians consent, except in the case of an emergency.
2. Full-time and part-time benefited Clinical Pharmacists will be scheduled to work no more than one weekend in two without the individual Pharmacists consent, except in the case of an emergency.
3. A weekend differential of 5% of the employee's current base hourly rate will be paid for all hours worked in a shift when the majority of the hours of that shift fall during the hours of 11:00 PM Friday until 11:00 PM Sunday.

E. Per Diem Differential

Per Diem Clinical Pharmacists and Per Diem Pharmacy Technicians receive no benefits, including paid sick leave. A 12.5% increase of their base wage per hour will be paid to Per Diem Clinical Pharmacists and Per Diem Pharmacy Technicians in lieu thereof.

SECTION B10: WORK SCHEDULES AND HOURS OF WORK

- A. The unit member's work week shall be designated by the Hospital and shall be a consecutive period of seven (7) days. Straight time hourly rates shall apply up to a maximum of forty (40) hours per week, eight (8) hours per day, five (5) days per week. All work in excess of eight (8) hours per day or five (5) days per week shall be paid for at the rate of one and one-half (1-1/2) times the basic straight time hourly rate including applicable differentials. All work in excess of twelve (12) hours in one day shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials. All work on the unit member's seventh (7th) consecutive day of the week shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials.
- B. The Hospital shall attempt to schedule two (2) consecutive days off each week but in the event it is unable to do so, no penalty pay shall be due. No unit member shall be required to work on his day off except in case of emergency. Notwithstanding the foregoing, a group of unit members may, by mutual agreement, institute for rotation purposes, a schedule of work not to exceed eighty (80) straight time hours over a two-week period.
- C. A schedule shall be posted on the bulletin board available to all unit members listing starting and quitting times and days off four (4) weeks in advance. After the schedule is posted, an employee who, for his or her own benefit, wishes to initiate a schedule change on any shift or for any pay period must find a qualified replacement. The replacement must not cause any additional overtime to the Hospital, and the proposed replacement must be pre-approved by the Hospital. When a schedule change is required because of illness, bona fide emergency or other circumstance beyond the control of the employee, management will be responsible for obtaining a replacement and communicating with all affected employees. If this schedule is changed without mutual consent within two (2) weeks of the date to be worked, the unit member will have immediate access to Step 2 of the Grievance Procedure.
1. The Hospital will make its best efforts to provide adequate relief staffing so that the scheduling of vacation, holiday and educational leave will not be unreasonably denied.
 2. If the Hospital determines that it needs to establish ten (10) hour shifts to staff the Pharmacy night shift it will be done in the following manner:
 - a. A regular workday shall be no more than ten (10) hours worked. A workweek shall be no more than forty (40) hours.
 - b. The appropriate shift differential will be night shift differential.
 - c. Overtime of time and one-half (1-1/2) shall be paid for all hours worked in excess of (10) hours in one work day and/or forty (40) hours in one work week.

- d. A day's ETO or ESL pay shall be for ten (10) hours and those hours would be subtracted from accumulated balances.
 3. When unit members who regularly work eight-hour shifts are rotated into a ten-hour shift for three days or less in a workweek, they will be paid an overtime premium for all hours worked over eight in a shift, so long as there is no pyramiding of overtime.
- D. During the term of this Memorandum of Understanding, the Hospital and the Union agree to discuss the implementation of additional shifts at ten (10) hours a day and/or twelve (12) hours a day. If the Hospital and the Union mutually agree that such shifts may be initiated, they will memorialize their discussion in a Side Letter of Understanding to this Memorandum.
- E. Pharmacy staffing will continue in its present practices which are as follows:
1. Regular shifts will be staffed on a rotational basis except night shift.
 2. Relief for day and evening shifts will be on a volunteer basis ordinarily being offered from most senior to least senior in a rotational basis. If no volunteer is available, the assignment will be offered to a per diem employee. If no per diem is available, the assignment will be rotated among all employees starting with the least senior employee. Relief is defined as coverage whenever the shift is temporarily unfilled. For unit members hired prior to 3/1/90, relief shall be on a voluntary basis for the night shift, however, in the Pharmacy, when the Hospital has fully staffed all night shift-positions and has hired night shift relief positions, and a night shift is unfilled because of an emergency, then Clinical Pharmacists may be assigned night shift relief on a rotational basis starting with the least senior.
 3. The Clinical Pharmacists and Pharmacy Technicians will be scheduled for the same days off for each weekend assignment whenever possible, but in the event this is not possible no penalty pay shall be due.
- F. No unit member shall be required to work two shifts within a period of twenty-four (24) hours except in case of emergency.
- G. Definition of Shifts
1. A day shift is any shift in which the majority of the regularly assigned hours are worked between 7:00 a.m. and 3:00 p.m.
 2. A p.m. shift is any shift in which the majority of the regularly assigned hours are worked between 3:00 p.m. and 11:00 p.m.
 3. A night shift is any shift in which the majority of the regularly assigned hours are worked between 11:00 p.m. and 7:00 a.m. A unit member who is asked to cover night shift on a temporary basis will receive the applicable night shift premium for

all hours actually worked outside his or her regular schedule between 11:00 pm and 7:00 am.

H. Reduced Shifts

Employees who have attained at least three (3) years' seniority with the Hospital may request that their full time schedule be reduced to 4/5 (.8) time. For the two most senior employees making such a written request to the Department manager and to Human Resources, the Hospital will use reasonable efforts based upon business necessity to make this accommodation within 60 days of the request. In the Pharmacy Department, no more than one employee in any one classification will be allowed to be on such a reduced schedule at any one time. The employee shall retain the right to apply for an available posted full time position upon written request. The Hospital may post positions that include a regularly scheduled 3 shift week. Such positions shall be compensated based on the hours worked.

Management will make an effort to allow an employee exercising this option two (2) consecutive shifts off each week.

Lead positions shall always be full time positions.

APPENDIX C
THERAPISTS

APPENDIX C – THERAPISTS

SECTION C7: JOB CLASSIFICATIONS

A. Minimum Qualification for a Speech Language Pathologist

1. Holds Master's degree in Communication Disorders/Speech Language Pathology.
2. Holds current California License issued by the State of California Department of Consumer Affairs, Speech Pathology and Audiology Examining Committee.
3. Holds Certificate of Clinical Competence issued by the American Speech Language Hearing Association (ASHA).
4. Maintains current Basic Life Support Provider Certificate from the American Heart Association.
5. Successful completion of Clinical Fellowship Year.
6. 1-2 years of experience in an acute care setting is desired.
7. Knowledge of the principles and practices of Speech Pathology.
8. Familiar with standard Speech Pathology equipment.
9. Ability to analyze situations and take appropriate action.
10. Ability to express oneself clearly in speaking and writing.
11. Emotional stability, personal and professional integrity and interest in growth and learning.

B. Minimum Qualifications for an Occupational Therapist

1. Holds Bachelor's or Master's degree in Occupational Therapy from an accredited program of Occupational Therapy approved by the Council on Medical Education of the American Medical Association and The American Occupational Therapy Association.
2. Holds, or is eligible for, current certificate of registration to practice as an Occupational Therapist by the National Board of Certification in Occupational Therapy.
3. Holds licensure by the State of California.
4. Maintains current Basic Life Support Provider Certificate from the American Heart Association.

5. Membership in the American Occupational Therapy Association and in the Occupational Therapy Association of California is desired.
6. Successful completion of internship in a physical disabilities setting.
7. 1-2 years of experience as an entry level OT in a physical disabilities setting is desired.
8. Knowledge of the principles and practices of Occupational Therapy.
9. Familiar with standard Occupational Therapy modality and exercise equipment.
10. Ability to analyze situations and take appropriate action.
11. Ability to express oneself clearly in speaking and writing.
12. Emotional stability, personal and professional integrity and interest in growth and learning.

C. Minimum Qualifications for a Physical Therapist

1. Holds Bachelor's, Master's, or Clinical Doctorate degree in Physical Therapy from an accredited program of Physical Therapy approved by the council on Medical Education of the American Medical Association and the American Physical Therapy Association.
2. Holds, or is eligible for, current California license issued by the State of California Department of Consumer Affairs Physical Therapy Board.
3. Maintains current Basic Life Support Provider Certificate from the American Heart Association.
4. Successful completion of internship in physical disabilities setting.
5. 1-2 years of experience in an acute care setting is desired.
6. Knowledge of the principles and practices of Physical Therapy.
7. Familiar with standard Physical Therapy modality and exercise equipment.
8. Ability to analyze situations and take appropriate action.
9. Ability to express oneself clearly in speaking and writing.
10. Emotional stability, personal and professional integrity and interest in growth and learning.

D. Minimum Qualifications for a Physical Therapist Assistant

1. Graduate from an accredited program of Physical Therapy Assistants or training experience recognized by the Physical Therapy Board of California.
2. Holds, or is eligible for, current California license issued by the State of California Department of Consumer Affairs Physical Therapy Board.
3. Maintains current Basic Life Support Provider Certificate from the American Heart Association.
4. Successful completion of internship in physical disabilities setting.
5. 1-2 two years of experience in an acute care setting is desired.
6. Knowledge of the basic principles and practices of Physical Therapy.
7. Familiar with standard Physical Therapy modality and exercise equipment.
8. Ability to analyze situations and take appropriate action.
9. Ability to express oneself clearly in speaking and writing.
10. Emotional stability, personal and professional integrity and interest in growth and learning.

E. Minimum Qualification for Lymphedema Therapist I

1. Holds appropriate degree or equivalent for clinical specialty (Physical Therapist, Occupational Therapist or Physical Therapist Assistant).
2. Holds current certification from approved schools offering certification courses with at least 140 hours of instruction in lymphedema treatment.
3. Holds or is eligible for, current California license issued by the State of California in clinical specialty area.
4. Maintains current Basic Life Support Provider Certificate from the American Heart Association.
5. A Physical Therapy Assistant must work under the direction and supervision of a Physical Therapist.
6. 2-3 years of clinical experience in the medical setting.
7. Knowledge of the principles and practices of lymphedema treatment.
8. Ability to develop and maintain effective leadership and working relationships.

9. Ability to analyze situations and take appropriate action.
10. Ability to express oneself clearly in speaking and writing.
11. Emotional stability, personal and professional integrity and interest in growth and learning.

F. Minimum Qualifications for a Lymphedema Therapist II

1. Holds appropriate degree or equivalent for clinical specialty area (Physical Therapist, Occupational Therapist or Physical Therapist Assistant)
2. Holds current certification from approved schools offering certification courses with at least 140 hours of instruction in lymphedema treatment.
3. Holds, or is eligible for, current California license issued by the State of California in clinical specialty area.
4. Maintains current Basic Life Support Provider Certificate from the American Heart Association.
5. A Physical Therapy Assistant must work under the direction and supervision of a Physical Therapist.
6. 2-3 years of clinical experience in the medical setting.
7. 3-5 years of clinical experience in lymphedema treatment.
8. Knowledge of the principles and practices of lymphedema treatment.
9. Knowledge of supervisory principles and practices.
10. Ability to develop and maintain effective leadership and working relationships.
11. Ability to analyze situations and take appropriate action.
12. Ability to express oneself clearly in speaking and writing.
13. Emotional stability, personal and professional integrity and interest in growth and learning.

SECTION C8: COMPENSATION – THERAPISTS

Effective the first pay period beginning on or after February 1, 2024, all employees in the job classifications of Physical Therapist, Occupational Therapist, Speech Language Pathologist, and Lymphedema Therapist 1 and 2 will receive a one-time 3.0% equity adjustment, and all Therapists shall receive a 5.5% across the board increase to the straight time base rate of pay as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20
Lymphedema Therapist 1	55.94	56.97	57.99	59.03	60.07	65.23	70.38	75.57
Occupational Therapist	55.06	56.07	57.09	58.13	59.14	64.26	69.41	74.44
Physical Therapist	55.06	56.07	57.09	58.13	59.14	64.26	69.41	74.44
Lymphedema Therapist 2	58.74	59.85	60.93	62.08	63.17	68.73	74.24	79.32
Physical Therapy Assistant	37.15	37.81	38.48	39.18	39.88	43.36	46.82	50.21
Speech Language Pathologist	55.06	56.07	57.09	58.13	59.14	64.26	69.41	74.44

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Therapists shall receive a 5.0% across the board increase to the straight time base rate of pay as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20
Lymphedema Therapist 1	58.74	59.82	60.89	61.98	63.07	68.49	73.90	79.35
Occupational Therapist	57.81	58.87	59.94	61.04	62.10	67.47	72.88	78.16
Physical Therapist	57.81	58.87	59.94	61.04	62.10	67.47	72.88	78.16
Lymphedema Therapist 2	61.68	62.84	63.98	65.18	66.33	72.17	77.95	83.29
Physical Therapy Assistant	39.01	39.70	40.40	41.14	41.87	45.53	49.16	52.72
Speech Language Pathologist	57.81	58.87	59.94	61.04	62.10	67.47	72.88	78.16

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Therapists shall receive a 5.0% across the board increase to the straight time base rate of pay as follows:

Job Title	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20
Lymphedema Therapist 1	61.68	62.81	63.93	65.08	66.22	71.91	77.60	83.32
Occupational Therapist	60.70	61.81	62.94	64.09	65.21	70.84	76.52	82.07
Physical Therapist	60.70	61.81	62.94	64.09	65.21	70.84	76.52	82.07
Lymphedema Therapist 2	64.76	65.98	67.18	68.44	69.65	75.78	81.85	87.45
Physical Therapy Assistant	40.96	41.69	42.42	43.20	43.96	47.81	51.62	55.36
Speech Language Pathologist	60.70	61.81	62.94	64.09	65.21	70.84	76.52	82.07

To be eligible for payment, the employee must be employed on the date payment is made.

Advancement to the 2nd year rate (step 2) shall occur only if the employee has completed 1 year of eligible service in the 1st Year (Step 1) and at least 1,000 hours.

Advancement to the 3rd year rate (step 3) shall occur only if the employee has completed 1 year of eligible service in the 2nd Year (Step 2) and at least 1,000 hours.

Advancement to the 4th year rate (step 4) shall occur only if the employee has completed 1 year of eligible service in the 3rd Year (Step 3) and at least 1,000 hours.

Advancement to the 5th year rate (Step 5) shall occur only if the employee has completed 1 year of eligible service in the 4th Year (Step 4) and at least 1,000 hours.

Advancement to the 10th year rate (Step 6) shall occur only if the employee has completed 5 years of eligible service in the 5th Year (Step 5) and at least 5,000 hours.

Advancement to the 15th year rate (Step 7) shall occur only if the employee has completed 5 years of eligible service in the 10th Year (Step 6) and at least 5,000 hours.

Advancement to the 20th year rate (Step 8) shall occur only if the employee has completed 5 years of eligible service in the 15th Year (Step 7) and at least 5,000 hours.

"Eligible Service" means years of service in the bargaining unit at Washington Health.

If hired at a step other than Step 1, future step progression would be as if the employee had reached that higher step through tenure.

A. Shift Premium – Therapists

Evening Shift \$3.25

B. Called-back Compensation

1. Regular full-time, regular part-time and per diem unit members as defined in Section 9 below shall have an unbroken rest period of twelve (12) hours between any eight (8) hour shift. All hours worked within the twelve (12) hour rest period shall be paid at the rate of time and one-half (1-1/2). This provision may be waived upon the written request of the employee and with the agreement of the Supervisor. Time for which any premium pay is paid shall count as rest time for purposes of this paragraph.
2. Regularly scheduled unit-members who are asked by the Hospital to change their schedule either by coming in earlier than scheduled or later than scheduled with fewer than twenty four (24) hours' notice and who agree to do so will receive a premium of one (1) hours pay at regular straight time rates of pay.

C. Weekend Work

A weekend differential of 5% of the Employee's current base hourly rate will be paid for all hours worked in a shift when the majority of the hours of that shift fall during the hours of 11:00 PM Fridays until 1:00 PM Sundays.

D. Relief in Higher Classification

Therapists will not be required to do work in a higher classification.

E. Experience Credit

Initial placement for the purposes of tenure credit for all unit members will be established by the Hospital and implemented by the appropriate Director and the Personnel Office. Any employees at a lower or same step at the time of a hiring change will be appropriately adjusted.

Experience credit will be based on experience gained at a hospital, clinical laboratory, or home health care agency accredited by the Joint Commission or Medicare accreditation. Credit for previous experience may also include military or civilian hospitals operated by the Federal government.

F. Per Diem Differential

Per Diem Speech Language Pathologists, Occupational Therapists, Lymphedema Therapists, Physical Therapists, and Physical Therapy Assistants receive no benefits, including paid sick leave. A 20% increase of their base wage per hour will be paid to Per Diem Speech Language Pathologists, Occupational Therapists, Lymphedema Therapists, Physical Therapists, and Physical Therapy Assistants in lieu thereof.

SECTION C10: WORK SCHEDULES AND HOURS OF WORK

- A. The unit member's work week shall be designated by the Hospital and shall be a consecutive period of seven (7) days. Straight time hourly rates shall apply up to a maximum of forty (40) hours per week, eight (8) hours per day, five (5) days per week. All work in excess of eight (8) hours per day or five (5) days per week shall be paid for at the rate of one and one-half (1-1/2) times the basic straight time hourly rate including applicable differentials. All work in excess of twelve (12) hours in one day shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials. All work on the unit member's seventh (7th) consecutive day of the week shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials.
- B. The Hospital shall attempt to schedule two (2) consecutive days off each week but in the event it is unable to do so, no penalty pay shall be due. No unit member shall be required to work on his day off except in case of emergency. Notwithstanding the foregoing, a group of unit members may, by mutual agreement, institute for rotation purposes, a schedule of work not to exceed eighty (80) straight time hours over a two-week period.
- C. A schedule shall be posted on the bulletin board available to all unit members listing starting and quitting times and days off two (2) weeks in advance. After the schedule is posted, an employee who, for his or her own benefit, wishes to initiate a schedule change on any shift or for any pay period must find a qualified replacement. The replacement must not cause any additional overtime to the Hospital, and the proposed replacement must be pre-approved by the Hospital. When a schedule change is required because of illness, bona fide emergency or other circumstance beyond the control of the employee, management will be responsible for obtaining a replacement and communicating with all affected employees. If this schedule is changed without mutual consent within two (2) weeks of the date to be worked, the unit member will have immediate access to Step 2 of the Grievance Procedure.
- D. The Hospital will make its best efforts to provide adequate relief staffing so that the scheduling of vacation, holiday and educational leave will not be unreasonably denied.
- E. If the Hospital determines that it needs to establish ten (10) hour shifts to staff the Therapy Department it will be done in the following manner:
1. A regular workday shall be no more than ten (10) hours worked. A workweek shall be no more than forty (40) hours.
 2. Overtime of time and one-half (1-1/2) shall be paid for all hours worked in excess of ten (10) hours in one work day and/or forty (40) hours in one work week.
 3. A day's ETO or ESL pay shall be for ten (10) hours and those hours would be subtracted from accumulated balances.

4. When unit members who regularly work eight-hour shifts are rotated into a ten-hour shift for three days or less in a workweek, they will be paid an overtime premium for all hours worked over eight in a shift, so long as there is no pyramiding of overtime.

F. Definition of Shifts

1. A day shift is any shift in which the majority of the regularly assigned hours are worked between 7:00 a.m. and 3:00 p.m.
2. A p.m. shift is any shift in which the majority of the regularly assigned hours are worked between 3:00 p.m. and 11:00 p.m.

APPENDIX C – APPLICABLE LETTERS OF AGREEMENT

LETTER AGREEMENT

BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Eligible Service for Clinical Pharmacists and Pharmacy Technicians

The MOU between the parties provides in Section 8 "Compensation", that advancement to the 9th, 11th, or 15th rate may only occur when the requisite number of hours of "eligible service" is achieved in the "bargaining unit" at Washington Health: The parties recognize that the Clinical Pharmacists and Pharmacy Technicians were added to the bargaining unit in 1992. Therefore, it is agreed that for the Clinical Pharmacists and Pharmacy Technicians who were Hospital employees in 1992 and were added to the bargaining unit in 1992 their "eligible service" hours for purposes of Section 8 compensation only, will include all hours worked for Washington Health, not just hours in the bargaining unit.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Personnel Files, Documents, Investigations

The parties to this Letter of Agreement agree to the following:

1. Hospital employees have the right during normal business hours (although not while in paid status) to review the contents of their personnel file and to receive a photocopy of any: document in their personnel file, with the exception of confidential letters of reference and testing keys or instruments, if any. The Hospital shall maintain employee personnel files in the Human Resources Department and only documents contained in that personnel file shall be considered valid for disciplinary or promotional purposes.

2. Hospital employees shall be given a photocopy of any formal performance evaluation, written disciplinary warning, or any other document of a disciplinary or derogatory nature, prior to such material being placed in the employee's personnel file. The employee shall sign and date such material only as proof of receipt. All disciplinary actions shall be taken in a professional, respectful, and timely manner. Discipline shall be handled as confidentially as possible.

3. Hospital employees in the ESC bargaining unit have the right, upon request, to have union representation in any investigatory meeting that could lead to disciplinary action. When a unit member requests representation for such an investigatory meeting, supervisors shall delay the meeting for up to forty-eight (48) hours to enable the unit member to arrange for a union representative. Nothing in this Letter of Agreement shall restrict the Hospital's right to place an employee on administrative leave, prior to the investigatory meeting, as warranted by the circumstances.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Pharmacy Scheduling Committee

The parties to this Side Letter of Agreement do hereby agree to form a committee in the Pharmacy Department for the purpose of consulting on the development of work schedules for Clinical Pharmacists and Pharmacy Technicians. The committee shall be comprised of two (2) Clinical Pharmacists selected by the bargaining unit, two (2) Pharmacy Technicians selected by the bargaining unit, and two (2) managers selected by the Hospital. The purpose of the committee is to make recommendations to the Pharmacy Department concerning changes to the scheduling templates used to schedule Clinical Pharmacists and Pharmacy Technicians within sixty (60) days following the ratification of the Memorandum of Understanding between the parties. The parties agree to pursue the objective of establishing regular schedules for Clinical Pharmacists and Pharmacy Technicians, in the absence of emergencies or changes in the composition of the bargaining unit. The parties further agree that in the event of an emergency or a change in the composition of the bargaining unit necessitates a change for the schedule, the committee will be reconvened to discuss ways of effectuating such changes. Coverage for unit member absences, when a replacement cannot be obtained, shall be distributed equitably among qualified unit members so that the hardship on any individual unit member is minimized. The Hospital agrees to use good faith efforts to obtain replacements to minimize the effects on the regular schedule.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

LETTER OF AGREEMENT
BETWEEN WASHINGTON HEALTH
AND THE ENGINEERS AND SCIENTISTS OF CALIFORNIA

Vacancies On Night Shift

The parties of this Letter agree to the following:

During the current situation in the Pharmacy regarding vacancies on the night shift, the parties agree to the following temporary solution:

- A. Night Shift staffing can be covered by 12 hour shifts.
- B. The 12 hour shift option will be voluntary.
- C. The Night Shift differential will apply.
- D. The work schedule will consist of 3 consecutive 12-hour shift worked in one week.
- E. A work day shall be no more than twelve (12) hours within twelve and one-half (12 1/2) hours.
- F. Employees who work twelve (12) hour shifts shall be paid at 1.111 times their applicable rate, including differentials, in the Memorandum of Understanding, but shall not be entitled to time and one-half for work over 8 hours per day.
- G. Employees will receive three (3) fifteen (15) minute paid breaks and one (1) thirty (30) minute unpaid meal break.

**WASHINGTON HEALTH
DESIGNATED REPRESENTATIVE:**

**ENGINEERS & SCIENTISTS OF
NORTHERN CALIFORNIA, IFPTE,
LOCAL 20 (AFL-CIO CLC):**

Date: _____

Date: _____

APPENDIX D
CLINICAL DIETITIANS

APPENDIX D – CLINICAL DIETITIANS

SECTION D7: JOB CLASSIFICATIONS

A. Minimum Qualification for a Clinical Dietitians

1. Holds Bachelor's Degree in dietetics, food and nutrition, or related area by an accredited college or university.
2. Active status as Registered Dietitian with the Commission on Dietetic Registration with the Academy of Nutrition and Dietetics.
3. Comprehensive knowledge and application of nutrition services and medical nutrition therapy.
4. Ability to communicate effectively in both written and verbal form to patients, public, and the health care team.
5. Ability to function independently on assigned patient care units.
6. Ability to counsel and educate others.
7. General knowledge of nutrient analysis, word processing, and spreadsheet software.

SECTION D8: COMPENSATION – CLINICAL DIETITIANS

Effective the first pay period beginning on or after February 1, 2024, all Clinical Dietitians will receive a one-time 5.0% equity adjustment, and all Clinical Dietitians shall receive a 5.5% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20
Clinical Dietitian	45.85	46.70	47.55	48.42	49.26	53.52	57.80	61.90

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Clinical Dietitians shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20
Clinical Dietitian	48.14	49.04	49.93	50.84	51.72	56.20	60.69	65.00

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Clinical Dietitians shall receive a 5.0% across the board increase to the straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20
Clinical Dietitian	50.55	51.49	52.43	53.38	54.31	59.01	63.72	68.25

To be eligible for payment, the employee must be employed on the date payment is made.

Advancement to the 2nd year rate (Step 2) shall occur only if the employee has completed 1 year of eligible service in the 1st Year (Step 1) and at least 1,000 hours.

Advancement to the 3rd year rate (Step 3) shall occur only if the employee has completed 1 year of eligible service in the 2nd Year (Step 2) and at least 1,000 hours.

Advancement to the 4th year rate (Step 4) shall occur only if the employee has completed 1 year of eligible service in the 3rd Year (Step 3) and at least 1,000 hours.

Advancement to the 5th year rate (Step 5) shall occur only if the employee has completed 1 year of eligible service in the 4th Year (Step 4) and at least 1,000 hours.

Advancement to the 10th year rate (Step 6) shall occur only if the employee has completed 5 years of eligible service in the 5th Year (Step 5) and at least 5,000 hours.

Advancement to the 15th year rate (Step 7) shall occur only if the employee has completed 5 years of eligible service in the 10th Year (Step 6) and at least 5,000 hours

Advancement to the 20th year rate (Step 8) shall occur only if the employee has completed 5 years of eligible service in the 15th Year (Step 7) and at least 5,000 hours.

"Eligible Service" means years of service in the bargaining unit at Washington Health.

If hired at a step other than Step 1, future step progression would be as if the employee had reached that higher step through tenure.

A. Scheduling and Compensation

1. Clinical Dietitians shall be non-exempt employees.
2. Per Diem Clinical Dietitians receive no benefits, including paid sick leave. A 10% increase of their base wage per hour will be paid in lieu thereof.
3. Called-Back Compensation
 - a. Regular full-time, regular part-time and per diem unit Clinical Dietitians shall have an unbroken rest period of twelve (12) hours between any eight (8) hour shift. All hours worked within the twelve (12) hour rest period shall be paid at the rate of time and one-half (1-1/2). This provision may be waived upon the written request of the employee and with the agreement of the Supervisor.
 - b. Regularly scheduled Clinical Dietitians who are asked by the Hospital to change their schedule either by coming in earlier than scheduled or later than scheduled with fewer than twenty four (24) hours' notice and who agree to do so will receive a premium of one (1) hours pay at regular straight time rates of pay.

4. Special Duty Differential

When a Clinical Dietitian is assigned to perform administrative and special duties in the absence of the Clinical Nutrition Manager, including scheduling clinical nutrition staff, the Clinical Dietitian will be paid a special duty differential of \$2.00 per hour on top of the employee's straight time hourly rate for each hour spent performing those assigned managerial duties. Assignments to perform special duties under this section shall not be considered bargaining unit work.

5. Weekend Work

For all hours worked on a Saturday or Sunday, a weekend differential of 5% of the Employee's current base hourly rate will be paid. This weekend differential shall apply to Per Diem Clinical Dietitians.

6. Experience Credit

- a. Initial placement for the purposes of tenure credit for all Clinical Dietitians will be established by the Hospital and implemented by the appropriate Director and Human Resources. Any employees at a lower or same step at the time of a hiring change will be appropriately adjusted.
- b. Experience credit will be based on experience gained at a hospital accredited by the Joint Commission or Medicare accreditation. Credit for previous experience may also include military or civilian hospitals operated by the Federal government.

7. Clinical Dietitians shall be provided access to meals in accordance with past practice.

SECTION D10: WORK SCHEDULES AND HOURS OF WORK

- A. The Clinical Dietitian's work week shall be designated by the Hospital and shall be a consecutive period of seven (7) days. Straight time hourly rates shall apply up to a maximum of forty (40) hours per week, eight (8) hours per day, five (5) days per week.

All work in excess of eight (8) hours per day or five (5) days per week shall be paid for at the rate of one and one-half (1-1/2) times the basic straight time hourly rate including applicable differentials.

All work in excess of twelve (12) hours in one day shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials. All work on the Clinical Dietitian's seventh (7th) consecutive day of the week shall be paid for at the rate of two (2) times the basic straight time hourly rate including applicable differentials.

- B. The Hospital shall attempt to schedule two (2) consecutive days off each week but in the event it is unable to do so, no penalty pay shall be due. No Clinical Dietitian shall be required to work on the Clinical Dietitian's day off except in case of emergency. Notwithstanding the foregoing, a group of Clinical Dietitians may, by mutual agreement, institute for rotation purposes, a schedule of work not to exceed eighty (80) straight time hours over a two-week period.

- C. A schedule shall be posted on the bulletin board available to all Clinical Dietitians listing starting and quitting times and days off four (4) weeks in advance. After the schedule is posted, an employee who, for his or her own benefit, wishes to initiate a schedule change on any shift or for any pay period must find a qualified replacement. The replacement must not cause any additional overtime to the Hospital, and the proposed replacement must be pre-approved by the Hospital. When a schedule change is required because of illness, bona fide emergency or other circumstance beyond the control of the employee, management will be responsible for obtaining a replacement and communicating with all affected employees. If this schedule is changed without mutual consent within two (2) weeks of the date to be worked, the unit member will have immediate access to Step 2 of the Grievance Procedure.

- D. The Hospital will make its best efforts to provide adequate relief staffing so that the scheduling of vacation, holiday and educational leave will not be unreasonably denied.

E. Definition of Shifts

1. A Day shift is any shift in which the majority of the regularly assigned hours are worked between 7:00 a.m. and 3:00 p.m.
2. A P.M. shift is any shift in which the majority of the regularly assigned hours are worked between 3:00 p.m. and 11:00 p.m.

APPENDIX E

CASE MANAGERS AND SOCIAL WORKERS

APPENDIX E – CASE MANAGERS AND SOCIAL WORKERS

SECTION E7: JOB CLASSIFICATIONS

A. Minimum Qualifications for a Registered Nurse Case Manager

1. Bachelor of Science in Nursing or other health related Bachelor Degree required.
2. California Registered Nurse License and BLS Certification required.
3. Comprehensive knowledge of reimbursement requirements, level of care and Clinical Criteria.
4. Basic computer skills, including knowledge of basic computer software programs.
5. Establishes skill in planning, organizing and managing.
6. Demonstrates effective interpersonal and communication skills, in written and verbal form, with coworkers and with patients.
7. Establishes ability to swiftly and efficiently adapt to changing priorities and conditions.
8. Establishes ability and awareness to prioritize assignments and engages in effective time-management.
9. Detail oriented.
10. Committed to patient advocacy.
11. Two years of acute care experience as a Registered Nurse is preferred.
12. One year of experience in Case Management is preferred.

B. Minimum Qualifications for a Senior Case Manager

1. California Registered Nurse License and BLS Certification required.
2. Comprehensive knowledge of reimbursement requirements, level of care and Clinical Criteria.
3. Demonstrates effective interpersonal and communication skills, in written and verbal form, with coworkers and with patients.
4. Ability to anticipate barriers / challenges and develop plans to overcome barriers / challenges.
5. Ability to prepare oral and written reports.

6. Ability to extract data from medical records and enter data into a case management software program.
7. Basic computer skills, including knowledge of basic computer software programs.
8. Establishes ability to swiftly and efficiently adapt to changing priorities and conditions.
9. Demonstrates excellent customer relations.
10. Bachelor of Science in Nursing or other health related Bachelor Degree required.
11. Masters of Science in Nursing Case Management is preferred.
12. Two years of clinical experience as a Registered Nurse is preferred.
13. One to Three years of experience in Utilization, Case Management and Discharge Planning is preferred.
14. Criteria Care Guideline knowledge is preferred.
15. Acute Case Management (ACM) Certification is preferred.

C. Minimum Qualifications for a Medical Social Worker

1. Masters' Degree in Social Work required.
2. Minimum three to five years of work experience in a health care setting—acute hospital experience is preferred.
3. Comprehensive knowledge of post-acute care community resources and referrals.
4. Comprehensive knowledge of medical terminology.
5. Basic computer skills, including knowledge of basic computer software programs.
6. Establishes skill in planning, organizing and managing.
7. Demonstrates effective interpersonal and communication skills, in written and verbal form, with coworkers and with patients.
8. Establishes ability to swiftly and efficiently adapt to changing priorities and conditions.
9. Establishes ability and awareness to prioritize assignments and engages in effective time-management.
10. Demonstrates basic knowledge of clinical and psychosocial aspects of patient care.

11. Detail oriented.
12. Committed to patient advocacy.
13. California Clinical Social Worker License is preferred, but not required.

D. Minimum Qualifications for an Emergency Department Social Worker

1. Masters' Degree in Social Work required.
2. Minimum three to five years of work experience in a health care setting—acute hospital experience is preferred.
3. Comprehensive knowledge of post-acute care community resources and referrals.
4. Comprehensive knowledge of medical terminology.
5. Basic computer skills, including knowledge of basic computer software programs.
6. Establishes skill in planning, organizing and managing.
7. Demonstrates effective interpersonal and communication skills, in written and verbal form, with coworkers and with patients.
8. Establishes ability to swiftly and efficiently adapt to changing priorities and conditions.
9. Establishes ability and awareness to prioritize assignments and engages in effective time-management.
10. Demonstrates basic knowledge of clinical and psychosocial aspects of patient care.
11. Detail oriented.
12. Committed to patient advocacy.
13. California Clinical Social Worker License is preferred, but not required.

SECTION E8: COMPENSATION

A. Case Managers

Effective the first pay period beginning on or after February 1, 2024, all Case Managers shall receive a 5.5% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Case Manager	81.78	84.97	88.27	91.69	95.25	98.97	102.81	106.81	110.42

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Case Managers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Case Manager	85.87	89.22	92.68	96.27	100.01	103.92	107.95	112.15	115.94

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Case Managers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Case Manager	90.16	93.68	97.31	101.08	105.01	109.12	113.35	117.76	121.74

To be eligible for payment, the employee must be employed on the date payment is made.

B. Senior Case Managers

Effective the first pay period beginning on or after February 1, 2024, all Senior Case Managers shall receive a 5.5% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25

Senior Case Managers	90.17	93.69	97.33	101.14	105.08	109.18	113.44	117.86	121.74
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The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Senior Case Managers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Senior Case Managers	94.68	98.37	102.20	106.20	110.33	114.64	119.11	123.75	127.83

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Senior Case Managers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Senior Case Managers	99.41	103.29	107.31	111.51	115.85	120.37	125.07	129.94	134.22

To be eligible for payment, the employee must be employed on the date payment is made.

C. Licensed Social Workers

Effective the first pay period beginning on or after February 1, 2024, all Licensed Social Workers shall receive a 5.5% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Licensed Social Workers	58.11	60.39	62.72	65.17	67.71	70.35	73.07	75.92	78.46

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Licensed Social Workers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Licensed Social Workers	61.02	63.41	65.86	68.43	71.10	73.87	76.72	79.72	82.38

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Licensed Social Workers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Licensed Social Workers	64.07	66.58	69.15	71.85	74.66	77.56	80.56	83.71	86.50

To be eligible for payment, the employee must be employed on the date payment is made.

D. Unlicensed Social Workers

Effective the first pay period beginning on or after February 1, 2024, all Unlicensed Social Workers shall receive a 5.5% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Unlicensed Social Workers	51.41	53.43	55.49	57.67	59.90	62.25	64.68	67.19	69.40

The retroactive amount due for hours worked on base rate of pay from the effective date will be paid no later than the end of the second full pay period beginning after the date of ratification of the MOU by the Washington Health Board of Directors. To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Unlicensed Social Workers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Unlicensed Social Workers	53.98	56.10	58.26	60.55	62.90	65.36	67.91	70.55	72.87

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Unlicensed Social Workers shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Unlicensed Social Workers	56.68	58.91	61.17	63.58	66.05	68.63	71.31	74.08	76.51

To be eligible for payment, the employee must be employed on the date payment is made.

E. Compensation For Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers

Advancement to the 2nd year rate (Step 2) shall occur only if the employee has completed 1 year of eligible service in the 1st Year (Step 1) and at least 1,000 hours.

Advancement to the 3rd year rate (Step 3) shall occur only if the employee has completed 1 year of eligible service in the 2nd Year (Step 2) and at least 1,000 hours.

Advancement to the 4th year rate (Step 4) shall occur only if the employee has completed 1 year of eligible service in the 3rd Year (Step 3) and at least 1,000 hours.

Advancement to the 5th year rate (Step 5) shall occur only if the employee has completed 1 year of eligible service in the 4th Year (Step 4) and at least 1,000 hours.

Advancement to the 10th year rate (Step 6) shall occur only if the employee has completed 5 years of eligible service in the 5th Year (Step 5) and at least 5,000 hours.

Advancement to the 15th year rate (Step 7) shall occur only if the employee has completed 5 years of eligible service in the 10th Year (Step 6) and at least 5,000 hours

Advancement to the 20th year rate (Step 8) shall occur only if the employee has completed 5 years of eligible service in the 15th Year (Step 7) and at least 5,000 hours.

Advancement to the 25th year rate (Step 9) shall occur only if the employee has completed 5 years of eligible service in the 20th Year (Step 8) and at least 5,000 hours.

"Eligible Service" means years of service in the bargaining unit at Washington Health.

If hired at a step other than Step 1, future step progression would be as if the employee had reached that higher step through tenure.

F. Shift Premium – Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers

PM Shift - \$7.05 differential per hour will be paid to Employees working a PM shift. A P.M. shift is any shift in which the majority of the regularly assigned hours are worked between 3:00 p.m. and 11:00 p.m.

G. Scheduling and Compensation

1. Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers shall be non-exempt employees, moved to an hourly, straight-time base rate of pay effective the first full pay period following January 1, 2023.
2. Per Diem Case Managers, Per Diem Senior Case Managers, Per Diem Licensed Social Workers and Per Diem Unlicensed Social Workers shall be non-exempt employees.
3. Per Diem Case Managers and Per Diem Senior Case Managers receive no benefits, including paid sick leave. A 12% increase of their base wage per hour will be paid to Per Diem Case Managers and Per Diem Senior Case Managers in lieu thereof.
4. Per Diem Licensed Social Workers and Per Diem Unlicensed Social Workers receive no benefits, including paid sick leave. A 12% increase of their base wage per hour will be paid to Per Diem Licensed Social Workers and Per Diem Unlicensed Social Workers in lieu thereof.
5. Weekend Work

For all hours worked on a Saturday or Sunday, a weekend differential of 5% of the Employee's current base hourly rate will be paid. This weekend differential shall apply to all Per Diem and benefited employees.

Those working PM shifts on weekends are entitled to the PM shift differential in addition to the weekend differential.

Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers will be scheduled for no more than two (2) weekends in a four week schedule.

6. Experience Credit

Initial placement for the purposes of tenure credit for all Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers will be established by the Hospital and implemented by the appropriate Director and Human Resources. Any employees at a lower or same step at the time of a hiring change will be appropriately adjusted.

Experience credit will be based on experience gained at a hospital accredited by the Joint Commission or Medicare accreditation. Credit for previous experience may also include military or civilian hospitals operated by the Federal government.

SECTION E10: WORK SCHEDULES AND HOURS OF WORK

- A. The Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers' work weeks shall be designated by the Hospital and shall be a consecutive period of seven (7) days. Upon mutual agreement between the Hospital and the Union, all Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers shall be scheduled to work four (4) days per week for 10 hours per day.
- B. The Hospital shall attempt to schedule two (2) consecutive days off each week but in the event it is unable to do so, no penalty pay shall be due. No Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers shall be required to work on the Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers' day off except in case of emergency.
- C. A schedule shall be posted on the bulletin board available to all Case Managers, Senior Case Managers, Licensed Social Workers and Unlicensed Social Workers listing starting and quitting times and days off three (3) weeks in advance. After the schedule is posted, an employee who, for his or her own benefit, wishes to initiate a schedule change on any shift or for any pay period must find a qualified replacement. The replacement must not cause any additional overtime to the Hospital, and the proposed replacement must be pre-approved by the Hospital. When a schedule change is required because of illness, bona fide emergency or other circumstance beyond the control of the employee, management will be responsible for obtaining a replacement and communicating with all affected employees. If this schedule is changed without mutual consent within one (1) weeks of the date to be worked, the unit member will have immediate access to Step 2 of the Grievance Procedure.
- D. The Hospital will make its best efforts to provide adequate relief staffing so that the scheduling of vacation, holiday and educational leave will not be unreasonably denied.
- E. The Hospital shall continue to use Travelers as necessary to fulfill staffing requirements.
- F. Definition of Shifts
1. 10 Hour Shifts:

Case Managers, Senior Case Managers and Medical Social Workers shall be scheduled for a day shift, from 7:00 a.m. to 5:30 p.m.

Emergency Department Social Workers shall be scheduled for a day shift, from 7:00 a.m. to 5:30 p.m., or a PM shift, from 5:00 p.m. to 3:30 a.m.
 2. 8 Hour Shifts:

Case Managers, Senior Case Managers and Medical Social Workers shall be scheduled for a day shift, from 8:00 a.m. to 4:00 p.m.

3. Weekend Shifts:

A weekend shift shall be any shift where the majority of hours worked during that shift fall between 11:00 p.m. Friday until 11:00 p.m. Sunday.

APPENDIX F
UTILIZATION REVIEW

APPENDIX F – UTILIZATION REVIEW

SECTION F7: JOB CLASSIFICATIONS

A. Minimum Qualifications for Utilization Review Coordinator

1. Bachelor of Science in Nursing
2. California Registered Nurse License and BLS Certification required
3. Two years of acute care experience in a hospital setting preferred
4. One year of experience as a utilization review nurse preferred
5. Case Management Certification preferred
6. Computer literate: Proficiency in Epic, MCG, Microsoft Word, Excel and Power Point required
7. Current knowledge of reimbursement requirements, level of care criteria, SI/IS criteria, GLOS knowledge, DRGs, MCG guidelines required.
8. Demonstrates effective interpersonal and communication skills
9. Demonstrates flexibility via an ability to adapt to changing priorities
10. Demonstrates good customer relations
11. Ability to prioritize assignments and effective time-management skills
12. Basic knowledge of clinical and psychological aspects of patient care
13. Must be detail oriented, flexible, and committed to patient advocacy
14. Demonstrates skills in planning, organizing, and managing multiple functions and complex processes
15. Excellent verbal and written communication skills required
16. Knowledge of basic computer software programs

B. Minimum Qualifications for a Portal of Entry Coordinator

1. Bachelor of Science in Nursing
2. California Registered Nurse License and BLS Certification required
3. Two years of acute care experience in a hospital setting preferred

4. One year of experience as a utilization review nurse preferred
5. Case Management Certification preferred
6. Strong computer skills
7. Demonstrates effective interpersonal and communication skills
8. Demonstrates flexibility via an ability to adapt to changing priorities
9. Demonstrates good customer relations
10. Ability to prioritize assignments and effective time-management skills
11. Basic knowledge of clinical and psychological aspects of patient care
12. Must be detail oriented, flexible, and committed to patient advocacy
13. Demonstrates skills in planning, organizing, and managing multiple functions and complex processes
14. Excellent verbal and written communication skills required
15. Knowledge of basic computer software programs
16. Knowledge of area community resources and referrals

C. Minimum Qualifications for a Denials and Appeals Coordinator

1. Bachelor of Science in Nursing
2. California Registered Nurse License and BLS Certification required
3. Four years clinical experience as a Registered Nurse
4. Three years with progressive experience in Utilization Review
5. Knowledge of payors and WHHS Managed Care contracts
6. Basic computer skills required
7. Demonstrates effective interpersonal and communication skills
8. Demonstrates flexibility via an ability to adapt to changing priorities
9. Demonstrates good customer relations
10. Ability to prioritize assignments and effective time-management skills

11. Must be detail oriented, flexible, and committed to patient advocacy
12. Demonstrates skills in planning, organizing, and managing multiple functions and complex processes
13. Excellent verbal and written communication skills required
14. Knowledge of basic computer software programs

SECTION F8: COMPENSATION¹

A. Pay Rates

Effective the first full pay period beginning after the date of ratification by the Washington Health Board of Directors of this Appendix F, all Utilization Review unit members shall be placed on the below wage scale based on the employee’s experience and qualifications, subject to the agreed upon wage increases.

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Utilization Review Coordinator	\$77.52	\$80.54	\$83.67	\$86.91	\$90.28	\$93.81	\$97.45	\$101.24	\$104.66
Portal of Entry Coordinator	\$77.52	\$80.54	\$83.67	\$86.91	\$90.28	\$93.81	\$97.45	\$101.24	\$104.66
Denials and Appeals Coordinator	\$77.52	\$80.54	\$83.67	\$86.91	\$90.28	\$93.81	\$97.45	\$101.24	\$104.66

Effective the first full pay period beginning after the date of ratification by the Washington Health Board of Directors of this Appendix F, all Utilization Review unit members shall receive a 5.5% across the board increase to their applicable straight time base rate of pay from the above pay scale as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Utilization Review Coordinator	81.78	84.97	88.27	91.69	95.25	98.97	102.81	106.81	110.42
Portal of Entry Coordinator	81.78	84.97	88.27	91.69	95.25	98.97	102.81	106.81	110.42
Denials and Appeals Coordinator	81.78	84.97	88.27	91.69	95.25	98.97	102.81	106.81	110.42

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2025, all Utilization Review unit members shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

¹ No unit member shall receive a decrease in their current rate of pay as a result of this compensation article.

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Utilization Review Coordinator	85.87	89.22	92.68	96.27	100.01	103.92	107.95	112.15	115.94
Portal of Entry Coordinator	85.87	89.22	92.68	96.27	100.01	103.92	107.95	112.15	115.94
Denials and Appeals Coordinator	85.87	89.22	92.68	96.27	100.01	103.92	107.95	112.15	115.94

To be eligible for payment, the employee must be employed on the date payment is made.

Effective the first pay period beginning on or after February 1, 2026, all Utilization Review unit members shall receive a 5.0% across the board increase to their straight time base rate of pay as follows:

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 10	Year 15	Year 20	Year 25
Utilization Review Coordinator	90.16	93.68	97.31	101.08	105.01	109.12	113.35	117.76	121.74
Portal of Entry Coordinator	90.16	93.68	97.31	101.08	105.01	109.12	113.35	117.76	121.74
Denials and Appeals Coordinator	90.16	93.68	97.31	101.08	105.01	109.12	113.35	117.76	121.74

To be eligible for payment of any across the board wage increases, the employee must be employed on the date payment is made.

Advancement to the 2nd year rate (Step 2) shall occur only if the employee has completed 1 year of eligible service in the 1st Year (Step 1) and at least 1,000 hours.

Advancement to the 3rd year rate (Step 3) shall occur only if the employee has completed 1 year of eligible service in the 2nd Year (Step 2) and at least 1,000 hours.

Advancement to the 4th year rate (Step 4) shall occur only if the employee has completed 1 year of eligible service in the 3rd Year (Step 3) and at least 1,000 hours.

Advancement to the 5th year rate (Step 5) shall occur only if the employee has completed 1 year of eligible service in the 4th Year (Step 4) and at least 1,000 hours.

Advancement to the 10th year rate (Step 6) shall occur only if the employee has completed 5 years of eligible service in the 5th Year (Step 5) and at least 5,000 hours.

Advancement to the 15th year rate (Step 7) shall occur only if the employee has completed 5 years of eligible service in the 10th Year (Step 6) and at least 5,000 hours

Advancement to the 20th year rate (Step 8) shall occur only if the employee has completed 5 years of eligible service in the 15th Year (Step 7) and at least 5,000 hours.

Advancement to the 25th year rate (Step 9) shall occur only if the employee has completed 5 years of eligible service in the 20th Year (Step 8) and at least 5,000 hours.

"Eligible Service" means years of service in the bargaining unit at Washington Health.

If hired at a step other than Step 1, future step progression would be as if the employee had reached that higher step through tenure.

B. Scheduling and Compensation

1. Utilization Review Coordinators, Portal of Entry Coordinators, and Denials and Appeals Coordinators shall be non-exempt employees, moved to an hourly, straight-time base rate of pay effective the first full pay period beginning after the date of ratification by the Washington Health Board of Directors of this Appendix F.
2. Per Diem Utilization Review Coordinators, Per Diem Portal of Entry Coordinators, and Per Diem Denials and Appeals Coordinators shall be non-exempt employees.
3. Per Diem Utilization Review Coordinators, Per Diem Portal of Entry Coordinators, and Per Diem Denials and Appeals Coordinators receive no benefits, including paid sick leave. A 12% increase of their base wage per hour will be paid to Per Diem Utilization Review Coordinators, Per Diem Portal of Entry Coordinators, and Per Diem Denials and Appeals Coordinators in lieu thereof.

C. Experience Credit

Initial placement for the purposes of tenure credit for all Utilization Review Coordinators, Portal of Entry Coordinators, and Denials and Appeals Coordinators will be established by the Hospital and implemented by the appropriate Director and Human Resources. Any employees at a lower or same step at the time of a hiring change will be appropriately adjusted.

Experience credit will be based on experience gained at a hospital, SNF, and/or Health Plan accredited by the Joint Commission, NCQA, URAC or Medicare accreditation. Credit for previous experience may also include military or civilian hospitals operated by the Federal government.

SECTION F10: WORK SCHEDULES AND HOURS OF WORK

- A. Utilization Review Coordinators, Portal of Entry Coordinators, and Denials and Appeals Coordinators work weeks shall be designated by the Hospital and shall be a consecutive period of seven (7) days. Upon mutual agreement between the Hospital and the Union, all Portal of Entry Coordinators shall be scheduled to work four (4) days per week for 10 hours per day.
- B. A schedule shall be posted on the bulletin board available to all Utilization Review Coordinators, Portal of Entry Coordinators, and Denials and Appeals Coordinators listing starting and quitting times and days off three (3) weeks in advance. After the schedule is posted, an employee who, for his or her own benefit, wishes to initiate a schedule change on any shift or for any pay period must find a qualified replacement. The replacement must not cause any additional overtime to the Hospital, and the proposed replacement must be pre-approved by the Hospital. When a schedule change is required because of illness, bona fide emergency or other circumstance beyond the control of the employee, management will be responsible for obtaining a replacement and communicating with all affected employees. If this schedule is changed without mutual consent within one (1) weeks of the date to be worked, the unit member will have immediate access to Step 2 of the Grievance Procedure.
- C. The Hospital will make its best efforts to provide adequate relief staffing so that the scheduling of vacation, holiday and educational leave will not be unreasonably denied.
- D. The Hospital shall continue to use Travelers as necessary to fulfill staffing requirements.
- E. Definition of Shifts
1. 10 Hour Shifts:
- Portal of Entry Coordinators shall be scheduled for a 10-hour day shift, from 8:00 a.m. to 6:30 p.m. or from 12:00 p.m. to 10:30 p.m.
2. 8 Hour Shifts:
- Utilization Review Coordinators and Denials and Appeals Coordinators shall be scheduled for an 8-hour day shift, from 8:00 a.m. to 4:30 p.m.
- F. Hybrid/Remote Work: To the extent that a hybrid or remote work schedule is voluntarily agreed to between the Hospital and any Utilization Review Coordinators, Portal of Entry Coordinators, or Denials and Appeals Coordinators, the Hospital will not provide such unit members with or reimburse them for equipment or office furnishings for their home offices.

APPENDIX G – LABORATORY

Area I:
Microbiology day shift

Area II:
Hematology day shift

Area III:
Chemistry day shift

Area IV:
Evenings/Nights

APPENDIX H – WASHINGTON HOSPITAL CORE CHOICE PPO PLAN

Washington Hospital Core Choice PPO Plan
Effective January 1, 2025 – MOU End Date

Medical Plan Benefits
Deductible
Out-of-pocket max (annual)
Professional Fees (Office Visit Co-pay)
Specialist Fees (Office Visit Co-pay)
Diagnostic Test
CT / PET Scans / MRI
Chiropractic
Emergency Room
Urgent Care
Ambulance
Co-Pay % Inpatient
Co-Pay % Outpatient
MHSA (In-Patient)
MHSA (Office Visit Co-pay)
Maternity (In-Patient)
Maternity (Office Visit Co-pay)
Durable Medical Equipment (orthopedic shoes)
Home Healthcare
Rehabilitation
Skilled Nursing Care
Hospice Services
Hearing Aids
Telehealth (General Medicine and Behavioral Health thru Teladoc)
Wellness Program
PRESCRIPTION DRUGS
Retail - 34 day supply
Mail Order - up to 90 day supply

Washington Hospital Core Choice PPO		
Tier 1 WTMF Providers/Washington Hospital	Tier 2 Blue Shield of CA PPO Network	Tier 3 Non-Preferred Providers/Non Participating Providers
None	\$750 ind \$1,500 fam	\$3,000 ind \$6,000 fam
\$500 ind \$1,000 fam	\$2,500 ind \$5,000 fam	\$6,000 ind \$12,000 fam
\$10 co-pay	20% co-pay	50% co-pay
\$20 co-pay	20% co-pay	50% co-pay
No Charge	20%	50%
No Charge	20%	50%
\$20 co-pay	20% (25 visits/cal yr)	50% (15 visits/cal yr)
\$175 (Waived if admitted)		
\$20 copay	\$50	50%
n/a	20% (ded waived)	
No Charge	20% (facility) 20% (physician)	50% up to \$1,000 per day max benefit (facility) 50% (physician)
Covered 100%	20% co-pay	50% co-pay up to \$1,000 per day max benefit
No Charge	20% (facility) 20% (physician)	50% up to \$1,000 per day max benefit (facility) 50% (physician)
No Charge	20%	50% up to \$1,000 per day max benefit (facility) 50% (physician)
No Charge	20% (facility) 20% (physician)	50% up to \$1,000 per day max benefit (facility) 50% (physician)
No Charge	20%	50%
No Cost (Specialty Footwear)	20%	not covered
No Charge	20%	20% w/ preauth
No Charge	20%	50%
No Charge	20%	50% up to \$1,500 per day max benefit (facility) 10% (freestanding)
n/a	20%	20% w/ preauth
n/a	50% (limited to \$1,000 per 24-month period)	not covered
\$15 copay		not covered
Included		
Tier 1 / Tier 2 / Tier 3 / Specialty		
\$3 / \$20 / \$35 / 20% up to \$150	\$8 / \$30 / \$60 / 20% up to \$250	\$8 + 50% / \$30 + 50% / \$60 + 50% / Not Covered
\$6 / \$40 / \$70 / Not Covered	\$16 / \$60 / \$120 / Not Covered	Not Covered

BiWeekly Cost (Full-time)
Employee Only
Employee + Spouse
Employee + Child
Employee + Family

EE Contribution (BiWeekly)
\$0.00
\$15.00
\$13.00
\$29.00

BiWeekly Cost (Part-time)
Employee Only
Employee + Spouse
Employee + Child
Employee + Family

EE Contribution (BiWeekly)
\$0.00
\$18.00
\$16.00
\$35.00

Appendix I

Therapy Unit Member that entered the bargaining unit on the same date shall use their hire date at Washington Health as the tie breaker for their seniority date.