

Understanding Your New Contract: *What We Won and Why It's Important*

WHAT WE WON



WHY ITS IMPORTANT

Agreement

Outlines the terms and coverage of the agreement.

Outlines the scope, duration, and legal structure of the contract, ensuring stability and enforceability.

Preamble

Standard opening with a short no strike for duration of the agreement in exchange for no lockouts during the agreement. We may strike after the expiration of the agreement. Additionally, the employer formally agrees to continued collaborative communications.

Sets the tone and shared commitments of the agreement, making clear that both parties are entering a collaborative, professional partnership.

Recognition and Membership

Hospitalists must join the union as a requirement for working at our hospitals and dues will be taken out of paychecks once authorized by the Hospitalist.

Defines who is in the bargaining unit and guarantees the right to union representation, ensuring everyone covered by the contract has a voice.

Union Rights

Union Reps have access to the facility. Hospitalists at the facilities are allowed to orient new hospitalists and Hospitalists can conduct union business while working. Union Representatives can get time off to attending trainings and Union Conferences.

Protects the union's ability to operate, communicate, and support members at work, critical for enforcing the contract and resolving issues.

Management Rights

Management has the right to manage the hospital but the contract constrains what they can do. Also management agrees to solicit input from Hospitalists on changes at work. Subcontracting can only be done to augment staff and not replace, and all Legacy Policies are subject to the grievance procedure.

Clarifies what management can and cannot do, preventing unilateral changes and ensuring provider input on workplace decisions.

Corrective Action

Discipline can only be for just cause.

Requires just cause for discipline, protecting hospitalists from unfair or arbitrary actions.

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Employment Status

All hospitalists will have new Individual Employment Agreements that conform to the Collective Bargaining Agreement. New Hires will have a 1 year probationary period in which they will not be covered by the just cause standard. A process for changing a Hospitalist's FTE will be in place that is subject to the grievance procedure if not done properly.

Standardizes employment agreements, FTE changes, and probation rules, creating fairness and transparency across the unit.

Seniority, Layoff and Recall

Time in a Legacy GME Residency program counts for seniority, and layoffs will be by seniority. Recall by seniority with most senior laid off being the first recalled. A severance of 3 months salary and 3 months worth of cash for Health Insurance would be paid out in lieu of retaining recall rights.

Ensures layoffs and recalls occur fairly and transparently, with strong protections and severance for affected hospitalists.

Work Expectations and Hours of Work

A full 1.0 FTE is defined as 2080 hours per year, allocated as 520 hours per quarter, FTE pro-rated. Work expectations and differentials are outlined separately by classification to ensure clarity and consistency across roles.

Defines what constitutes a full workload and how hours are credited, preventing overwork and ensuring compensation is tied to clear standards.

Pediatric Work Expectations

Differentials	Nursery Differentials
Weekday: 1.0	Weekday: 1.0
Weekend: 1.3	Weekend: 1.3
Nights: 1.3	Holidays: 1.3
Holidays: 1.3	Call from home: 0.25
Call from home: 0.25	Callback: Clinical rate + differentials
Backup: 2-hr credit per 12-hr shift	
Callback: Clinical rate + differentials	

Creates clear and safe workload standards for pediatric hospitalists, preventing overload and protecting patient care.

LIMS Work Expectations

Secured clear, enforceable workload expectations, including an 11-14 patient range for day rounders and defined admitting/crossover ratios to prevent overload. Won strong surge-census protections, requiring backup coverage once the average census reaches 13.51+ (14.51+ at Salmon Creek) and guaranteeing additional backup once each backup physician reaches 10 patients. We also created a safe, flexible model where physicians can "flex up" only with compensation and built-in escalation once anyone reaches 15-16+ patients (16-17 at Salmon Creek), ensuring no one carries unsafe volumes.

Establishes enforceable census limits, backup rules, and staffing triggers to guarantee safe workloads for adult hospitalists.

OB Work Expectations

A way to negotiate a formal backup system if needed.

Provides clear expectations and backup processes for OB hospitalists, ensuring safety and coverage during high-acuity periods.

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Pediatric Compensation

Sets guaranteed experience-based salaries with built-in 2.4% raises in 2026 and 2027 plus a \$4,000 ratification bonus. It secures premium supplemental pay at 15% above the 9-12 year rate and ensures all extra work is voluntary with paid options at the hourly rate or PTO with differentials. It also guarantees stable quality and citizenship incentives and automatic advancement through transparent experience tiers.

Guarantees base pay, raises, and bonuses.

Years of Experience	Base Salary	4% Quality	Citizenship	TCC
Start	\$212,500	\$10,000	\$3,120	\$225,620
3-6 years	\$225,000	\$10,000	\$3,120	\$238,120
6-9 years	\$237,500	\$10,000	\$3,120	\$250,620
9-12 years	\$250,000	\$10,000	\$3,120	\$263,120
12-15 years	\$262,500	\$10,000	\$3,120	\$275,120
15+ years	\$275,000	\$10,000	\$3,120	\$288,120

LIMS Compensation

Guaranteed automatic annual step increases and 2.4% raises in both 2026 and 2027, plus a \$4,000 ratification bonus. It also locks in premium pay, including 15% above-base supplemental rates, 10% excess-shift pay, and boosted night and backup shift credits. Additionally, it guarantees stable quality and citizenship incentives.

Guarantees base pay, raises, and bonuses.

Years of Experience*	Base Salary	5% Quality	Citizenship	TCC
Start	\$311,805	\$16,575	\$3,120	\$331,500
1 year	\$312,805	\$16,575	\$3,120	\$332,500
2 years	\$313,805	\$16,575	\$3,120	\$333,500
3 years	\$314,805	\$16,575	\$3,120	\$334,500
4 years	\$315,805	\$16,575	\$3,120	\$335,500
5 years	\$316,805	\$16,575	\$3,120	\$336,500
6 years	\$317,805	\$16,575	\$3,120	\$337,500
7 years	\$318,805	\$16,575	\$3,120	\$338,500
8 years	\$319,805	\$16,575	\$3,120	\$339,500
9 years	\$320,805	\$16,575	\$3,120	\$340,500
10+ years	\$321,805	\$16,575	\$3,120	\$341,500

OB Compensation

Secures an annual raises of 2.4% in both 2026 and 2027, with management allowed to increase salaries further but not reduce them. It also establishes premium pay, including a 15% uplift for supplementals and a \$200/hour excess-shift rate.

Guarantees base pay, raises, and bonuses.

Locks in a \$25,000 intensity stipend at RCH, a citizenship bonus, and a \$4,000 ratification bonus.

	RCH	SC/MH
Base Salary	\$ 370,000	\$ 370,000
Intensity Stipend	\$ 25,000	
Citizenship	\$ 3,120	\$ 3,120
TCC	\$ 398,120	\$ 373,120

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PTO

This article guarantees a frontloaded PTO bank each fiscal year, with generous annual awards up to 312 hours and a 420-hour bank maximum. It ensures PTO is always paid at the regular base rate, applies proportionally across clinical and administrative FTE, and preserves full awards for those returning from protected leave. It also adds a paid Cultural Recognition Day for every hospitalist each year.

Secures frontloaded paid time off and protects the right to use it, supporting rest, health, and work-life balance.

Months of Service	Annual Award	Bank Maximum
0 to 60 months	216 hours	420 hours
61 to 120 months	256 hours	420 hours
121 to 180 months	288 hours	420 hours
181 to 240 months	304 hours	420 hours
241 months or more	312 hours	420 hours

PEPTO for LIMS

This appendix increases flexibility by allowing PTO to be banked up to 420 hours and permitting quarterly PEPTO elections, including expanded use in the fourth quarter. It guarantees all PTO, PEPTO, CME, and CRD hours are paid at the regular rate and clarifies that excess-shift eligibility is based only on worked hours. Beginning April 1, 2026, PTO is allocated by clinical and non-clinical FTE, with clear rules for proration and use at resignation.

Provides flexibility by allowing PTO payout when staffing prevents time off, ensuring hospitalists don't lose earned benefits.

Malpractice

This article guarantees employer-paid malpractice coverage with \$1M / \$3M limits at no cost to hospitalists. It ensures full protection for all work performed within the scope of employment, including approved volunteer and Good Samaritan activities.

Guarantees employer-paid malpractice insurance, ensuring hospitalists are fully protected while providing patient care.

Leaves of Absence

This article guarantees full access to all applicable federal and state protected leaves. It ensures hospitalists may choose to use PTO during protected leave. It also allows PTO to supplement Paid Leave benefits up to full pay.

Clear leave language guarantees you can take time off for medical, family, or personal needs without risking your position, and prevents arbitrary or unequal decisions by management.

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Health and Welfare

Secured continued core benefits. Health insurance, retirement, and disability coverage will remain fully aligned with our physician colleagues, and bargaining unit members will also continue to receive life insurance valued at one year of salary. Maintained these protections for every provider in our unit.

Maintains health insurance, retirement, and other benefits equal to similarly situated physicians, protecting economic stability.

Grievance Procedure

This article guarantees a clear, formal grievance process with defined timelines, written responses, and a required meeting with decision-makers. It also provides a second-step appeal for high-stakes cases and allows optional mediation before arbitration.

Creates a formal, enforceable process for resolving disputes and holding management accountable to the contract.

Arbitration

If a Hospitalist has a second job that is outside of the bargaining unit, if they commit a very serious violation of policy they could lose, under certain circumstances, both the bargaining unit job and the other job.

Provides a neutral, final decision-maker when disputes cannot be resolved, ensuring fairness and enforceability.

Equal Employment Opportunity

The union and employer do not have to bargain things that were covered in this agreement. However, if a need for changes arises for issue that did not come up in bargaining, we could bargain.

Protects hospitalists from discrimination and ensures equitable treatment under all workplace policies.

Professional Development and Education

Protects all existing professional development and CME policies and guarantees hospitalists .6 FTE and above receive a \$4,000 annual CME allowance with prorated time off. It also ensures the employer can only change these benefits by increasing them and must notify the Union of any improvements.

Guarantees CME allowances and time off, supporting continued learning and high-quality patient care.

Health and Safety

Guarantees employer-provided safety equipment, PPE, and testing/treatment after high-risk workplace exposures at no cost to hospitalists. It creates formal pathways for hospitalists to raise safety concerns and requires real-time communication of threats. It also secures an annual union-security meeting where hospitalists can review Code Gray/Silver procedures and recommend improvements.

Guarantees PPE, exposure treatment, and a voice in workplace safety procedures, ensuring a safe environment for hospitalists and patients.

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Savings and Separability

If a portion of the contract is found to be illegal it will not cause the entire contract to be voided.

Protects the rest of the contract if one section is found unlawful, ensuring the agreement stays intact.

Drug and Alcohol Policy

Agreed to maintain current policy.

Ensures the current policy remains consistent and fair, preventing arbitrary changes.

Successors

The employer will inform any new buyers of the existence of this CBA and provide a copy to them.

Requires Legacy to notify the new owners of the contract if the hospital is sold or reorganized.

Labor Management Committee

Secured a standing Labor-Management Committee that guarantees quarterly meetings with equal representation and co-chairs from both the Union and management. Creates a formal, ongoing space where issues and contract interpretations must be addressed proactively.

The LMC ensures your voices shape decisions that directly affect patient care, workflow, and clinical resources. It also gives the union consistent leverage and transparency, preventing management from unilaterally changing practices or ignoring concerns.

Working outside of the Bargaining Unit

If a Hospitalist has a second job that is outside of the bargaining unit, if they commit a very serious violation of policy they could lose, under certain circumstances, both the bargaining unit job and the other job.

Clarifies how outside employment interacts with this agreement, ensuring hospitalists understand their protections.

Complete agreement

The union and employer do not have to bargain things that were covered in this agreement. However, if a need for changes arises for issue that did not come up in bargaining, we could bargain.

Prevents management from adding or removing terms outside the contract, protecting every negotiated gain.