



## What's at Stake?

# Retirement, Fair Wages & Safe Staffing!

Our key proposals for safe staffing at all times, fair pay based on regional parity, and many other needed improvements have been ignored or flat out rejected. UC executives are pushing major takeaways, including a two-tier pension, an overhaul of retiree health benefits, replacing vacation/sick time with "PTO," bringing back mandatory overtime, major restrictions on the use of education leave, and more. (See below and other side for details)

Support our bargaining team. Stand together and demand a fair contract that will recruit and retain nurses, with improvements in staffing and patient care!

### UC Rejects Safe Staffing Proposals

#### *UC has rejected CNA's proposals for:*

- ▶ DEDICATED BREAK RELIEF staff for ratio compliance at all times
- ▶ STAFFING BASED ON PATIENT ACUITY, not budget
- ▶ CHARGE RNS free of patient assignment at all times
- ▶ BREAK NURSES free of primary patient assignment until all nurses on the unit have had their breaks.
- ▶ TRANSPORT TEAMS for patient safety
- ▶ LIFT TEAMS for patient and RN safety
- ▶ END TO DAILY CANCELLATIONS (assign alternative work instead)
- ▶ END TO MANDATORY SHIFT ROTATION
- ▶ Mandatory TRAINING to be conducted during a regular shift while relieved of all patient assignment

### UC Pushes Two-Tier Pension and Two-Tier Retiree Health

#### *UC wants to implement a "two-tier" pension with lesser benefits for new nurses that would force nurses to work longer and retire with less, including:*

- Increase in retirement age: 60 to 65
- Higher contributions, lower benefits
- Independent report shows Two-Tier is not economically necessary
- Would create division amongst nurses and drastically affect recruitment and retention
- A second tier of Retiree Health benefit for all new hires beginning July 1, 2013 and many, many current UC nurses who do not make the "rule of 50"
- Nurses in the new tier would not be eligible for any retiree health care until age 56 (currently age 50) and the benefit would be cut from 50% to 5% after 10 years of service at age 56

(Over for more information)

### UC Demands "PTO" to replace Vacation and Sick Leave

UC's plan would force medical center nurses to use vacation when sick and discourages nurses from taking time off when sick. And UC would be able to reduce accruals or make other changes at any time.

#### *UC nurses say "NO to PTO!"*

### UC Threatens Mandatory Overtime

UC proposes to delete the prohibition against mandatory OT in CNA contract.

**UC nurses fought to eliminate this unsafe practice years ago.**

### UC's Proposals Would Mean Pay Cuts for UC RNs

#### *UC has rejected CNA's proposals for:*

- ▶ Regional Parity among Northern and Southern CA UC facilities
- ▶ \$5/hr float diff between facilities
- ▶ 50% on-call pay statewide

#### *UC is proposing the following takeaways:*

- ▶ Increase in pension contributions with no commensurate increase in salary
- ▶ Elimination of shift differential for vacation, sick and other paid leaves
- ▶ Elimination of pay for mandatory certifications (BLS, ACLS, PALS, etc)
- ▶ 4-year wage freeze for all per diems
- ▶ 4-year wage freeze for Student Health RNs at Berkeley, Santa Cruz, Merced, Santa Barbara and Riverside
- ▶ Elimination of overtime pay for Nurse Practitioners and CN4s
- ▶ Changes in Health Plans such as UC's requested waiver on premiums and the unilateral elimination of 4 health plans
- ▶ Increases in parking rates
- ▶ Vacation takeaways through PTO that would force nurses to use vacation time when sick

*How can you help get a good contract?*  
**Pledge to stand together and take action!**

OVER for more  
information

## A Voice for Nurses. A Vision for Healthcare.

# UC's plan for 2-Tier Pension & 2-Tier Retiree Health... Bad for Nurses, Bad for Patient Care!

UC is proposing sweeping changes to the pension and retiree health benefit systems, including a lesser 'Second-Tier' of benefits for almost half of all current nurses and all incoming nurses. CNA opposes the two-tier pension and retiree health plans and we are fighting to maintain a single standard of benefits – a plan that ensures security in retirement for all UC nurses.

### UC's proposed changes to pension plan

**For RNs hired on or after 7/1/13:**

- **Increase retirement age from 60 to 65 years old**
- **Increase retirement eligibility age from 50 to 55 years old**  
(see the 'age factor' chart below)
- Require a 7% contribution (retroactive to 7/1/13)
- Eliminate cost-of-living adjustment if nurse leaves before retiring
- Eliminate automatic survivor benefit
- Eliminate the cash-out option

**For RNs hired before 7/1/13:**

- Increase employee contributions with no commensurate increase in salary from 5% to 8% over the next two years (6.5% retroactive to 7/1/13; 8% as of 7/1/14)

### Why a single tier pension and retiree health is important

- Especially for RNs, changing the retirement age from 60 to 65 is an undue hardship. Nurses have the highest rate of spinal and musculoskeletal injuries of any profession, higher than even the workers in the construction industry, and need the protection of a pension to retire at or near 60 years old.
- It is very important to fight for the next generation of nurses, who will be caring for all of us.
- New RNs would pay for UC's mistake while having lesser benefits.
- Having two tiers of pension creates division and inequity. Over time, a majority of nurses will be on the lesser tier, and it may be harder to maintain unity for benefits, staffing and contract gains.

**A Nurse who retires at 60 under the new tier would receive 28% less** retirement pay than under the current plan. For example, if a nurse were eligible to receive \$3,000/mo under the current benefits, her benefits would be slashed to \$2,160/mo under the new tier.

Pension Formula for Monthly Benefits = Years of Service x "Age Factor" x Highest Ave. Salary (over 36 consecutive months)																
UC's proposal would change the "Age Factor." This chart reflects how it impacts RNs at different ages.																
AGE at Retirement	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65
Current "Age Factor" before 7/1/13	.0110	.0124	.0138	.0152	.0166	.0180	.0194	.0208	.0222	.0236	.0250	.0250	.0250	.0250	.0250	.0250
New "Age Factor" 7/1/13 & later	0	0	0	0	0	.0110	.0124	.0138	.0152	.0166	.0180	.0194	.0208	.0222	.0236	.0250

## UC's proposed changes to Retiree Health

**A new reduced tier of retiree health benefits would mean huge premium increases & higher eligibility age for HALF of all current nurses & ALL new nurses!**

**Costs would double for some retirees and coverage would be simply unavailable for many others. Increases eligibility age for 100% coverage from 50 to 65 years old. Increases minimum eligibility age from 50 to 56 years old.**

Example: Coverage for a 60 year old retired RN w/20 yrs of service would be cut from 100% to 50%

Example: Coverage for a 56 year old retired RN w/10 yrs of service would be cut from 50% to 5%.

Example: Coverage for a 50-55 year old retired RN would be 0%, regardless of years of service.

**Nurses will lose current retiree health care benefits if any of the following apply:**

- Nurse does not have 5 years of service credit ('vested') as of 6/30/13
- Nurse does not meet the "Rule of 50" as of June 30, 2013:  
Years of service credit + Age = 50 or more
- All nurses hired on/after 7/1/13

**12,000 UC RNs Will Be Heard!**

## Is Two-Tier Financially Necessary?

**Experts say "No!"**

UC made no contributions to the pension plan for over 20 years (1990-2010), relying solely on market gains to fund the plan. This was an irresponsible mistake, and UC should not shift the burden to employees in the form of lesser benefits.

A study by an independent actuarial firm found the UC pension system to be solvent and "among the better funded plans in the country." Over a 20 year projection, it showed that the fund would remain strong if all new employees were kept on the current pension and retiree health plans.