COLLECTIVE BARGAINING AGREEMENT

Professional Agreement

between

Oregon Nurses Association
&
Amedisys Oregon, L.L.C.

April 1, 2021 until March 31, 2024
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>ARTICLE</th>
<th>TITLE</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PURPOSE</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>RECOGNITION</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>DEFINITIONS</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>EQUAL EMPLOYMENT OPPORTUNITY/HARASSMENT FREE WORKPLACE</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>EMPLOYMENT STATUS</td>
<td>4</td>
</tr>
<tr>
<td>6</td>
<td>SALARIES AND COMPENSATION</td>
<td>7</td>
</tr>
<tr>
<td>7</td>
<td>TRANSPORTATION AND OTHER ALLOWANCES</td>
<td>9</td>
</tr>
<tr>
<td>8</td>
<td>HOURS OF WORK AND OVERTIME PAY</td>
<td>10</td>
</tr>
<tr>
<td>9</td>
<td>PAID TIME OFF (“PTO”) AND HOLIDAYS</td>
<td>14</td>
</tr>
<tr>
<td>10</td>
<td>HEALTH AND SAFETY</td>
<td>16</td>
</tr>
<tr>
<td>11</td>
<td>PERSONNEL RECORDS</td>
<td>17</td>
</tr>
<tr>
<td>12</td>
<td>PHYSICAL EXAMINATION</td>
<td>18</td>
</tr>
<tr>
<td>13</td>
<td>INSURANCE AND RELATED BENEFIT PLANS</td>
<td>18</td>
</tr>
<tr>
<td>14</td>
<td>401(K) RETIREMENT PROGRAM</td>
<td>20</td>
</tr>
<tr>
<td>15</td>
<td>LEAVES OF ABSENCE</td>
<td>21</td>
</tr>
<tr>
<td>16</td>
<td>PROFESSIONAL ACTIVITIES AND CIVIC POLITICAL AFFAIRS</td>
<td>25</td>
</tr>
<tr>
<td>17</td>
<td>GRIEVANCE PROCEDURE</td>
<td>27</td>
</tr>
<tr>
<td>18</td>
<td>SENIORITY, LAYOFF AND RECALL</td>
<td>30</td>
</tr>
<tr>
<td>19</td>
<td>PROFESSIONAL NURSE PRACTICE COMMITTEE</td>
<td>33</td>
</tr>
<tr>
<td>20</td>
<td>ON-CALL DUTY/24 HOUR AVAILABILITY</td>
<td>35</td>
</tr>
<tr>
<td>21</td>
<td>ASSOCIATION AND BARGAINING UNIT REPRESENTATIVES</td>
<td>37</td>
</tr>
<tr>
<td>22</td>
<td>ALCOHOL AND SUBSTANCE ABUSE</td>
<td>38</td>
</tr>
<tr>
<td>23</td>
<td>SEPARABILITY</td>
<td>39</td>
</tr>
<tr>
<td>24</td>
<td>DRESS CODE</td>
<td>39</td>
</tr>
<tr>
<td>25</td>
<td>STRIKES AND LOCKOUTS</td>
<td>39</td>
</tr>
<tr>
<td>26</td>
<td>ORIENTATION AND PRECEPTORSHIP</td>
<td>40</td>
</tr>
<tr>
<td>27</td>
<td>MANAGEMENT RIGHTS</td>
<td>41</td>
</tr>
<tr>
<td>28</td>
<td>ATTENDANCE</td>
<td>43</td>
</tr>
<tr>
<td>29</td>
<td>CONFIDENTIALITY</td>
<td>44</td>
</tr>
<tr>
<td>30</td>
<td>CONFLICT OF INTEREST</td>
<td>45</td>
</tr>
<tr>
<td>31</td>
<td>DURATION AND TERMINATION OF AGREEMENT</td>
<td>45</td>
</tr>
<tr>
<td>A</td>
<td>PRODUCTIVITY STANDARDS</td>
<td>47</td>
</tr>
</tbody>
</table>
ARTICLE 1 – PURPOSE
The purpose of this Agreement is to maintain equitable employment conditions and an orderly system of employer-employee relations which will facilitate joint discussions and cooperative solutions of mutual problems by the management of the Employer and the professional nursing staff, to the end that the dedicated common objective of superior patient care may be harmoniously and consistently maintained in the most efficient and cost-effective manner.

ARTICLE 2 – RECOGNITION
Amedisys, Oregon, LLC, a wholly owned subsidiary of Amedisys Holding, LLC (“Employer”) recognizes the Oregon Nurses Association (“Association”) as the exclusive representative for the bargaining unit composed of all registered, professional nurses employed by the Employer for the purpose of collective bargaining with respect to wages, hours of work and other conditions of employment, excluding licensed practical nurses, nurses serving as (removal of the "coordinator" positions) supervisors as defined in the Act, confidential employees and all other employees. The parties agree that this provision may be bargained at the request of either party for the successor Agreement.

ARTICLE 3 – DEFINITIONS
A. Nurse – A registered nurse covered by this Agreement. Recognition of relevant professional nursing experience shall be recognized in salary level placement as specified in Article 6.

B. Regular Full-Time Nurse – A full-time nurse is regularly scheduled to work a full workweek of forty (40) hours (thirty-two (32) hours or more for nurses hired prior to September 1, 2007, and who has continued to work such a schedule on a continuous basis) and is classified as such.

C. Regular Part-Time Nurse – A part-time nurse is regularly scheduled to work a minimum of twenty (20) hours each week but less than the hours required to attain “regular full-time” status. This does not include per diem nurses (who are excluded from the bargaining unit).
D. **PRN (Per Diem) Nurse** – A nurse who is not assigned an FTE status and is not regularly scheduled for any designated number of hours per pay period.

E. **Temporary Nurse** – A temporary nurse is one who is hired for a limited period of time always less than six (6) months. Temporary nurses (e.g. agency or traveler) may be utilized provided no bargaining unit nurse is available.

F. **Years Of Service** – Nurses who worked for IntegriCare, Inc. and were hired by the Employer on September 1, 2007, without a break in service, shall have their seniority and years of service recognized under this Agreement from their date of hire (or adjusted date of hire) as a nurse with the Legacy Visiting Nurses Association, Option Care or IntegriCare. This recognition shall apply to all benefit accrual and seniority provisions of this contract.

G. **Non-Admit** – An encounter with a patient that does not result in admission or treatment for reasons beyond the nurse's control including, but not limited to: the potential patient is not home bound, there is no need for a skilled nurse, another agency is involved, the patient refuses care or is an inappropriate patient for the Agency (for example, does not meet Medicare Standards for Home Health). A qualifying Non-Admit is potentially relevant only to the Productivity Standards in Schedule A of this Agreement.

H. **Baylor Nurse** – A nurse who is hired to fill a weekend schedule (Friday, Saturday, Sunday and/or Monday) consisting of up to ten (10) hours per day and an average 21 to 25-point workweek. Baylor nurses are not required to participate in the on-call rotations system, except for the Holiday on-call rotation.

I. **On-Call** – An assignment used to provide patients, caregivers, and family access to clinical information, support, and skilled services after business hours. On-call nurses will consult with the triage nurse for appropriateness of urgent visit need for each On-Call assignment. Disagreements regarding urgency shall be escalated to the Administrator On-Call.
J. **Weekend Work** – Work scheduled from 8:00 a.m. Saturday morning until 8:00 a.m. Monday.

K. **Weekend On-Call** – This duty runs from Saturday at 8:00 a.m. until the following Monday at 8:00 a.m. and may be scheduled in multiple shifts if staffing allows. In accordance with Article 20.A.3 of this Agreement, on-call hours will be equitably distributed in/for each office according to the number of on-call hours required and the number of nurses in that office authorized to take call.

**ARTICLE 4 – EQUAL EMPLOYMENT OPPORTUNITY/HARASSMENT FREE WORKPLACE**

The parties will not unlawfully discriminate in hiring, promotion, salary determination or other terms of employment on the basis of race, color, religion, ancestry, age, sex, national origin, physical or mental disability, genetic information, marital or veteran status, on-the-job injuries, sexual orientation, gender identity, or any other legally protected status. The parties further agree that conditions of employment shall be consistent with applicable laws requiring that all employees be provided with a working environment free from all forms of unlawful harassment.

Any nurse who is subjected to, witnesses, or suspects any violation of these commitments shall immediately report the matter directly to the care center’s Director of Operations, the Area Vice President, or any bargaining unit representative (who in turn shall promptly inform the Area Vice President of any problems or concerns), so that Employer can discharge its legal obligation to timely conduct an appropriate investigation and remedy any wrongful or unlawful conduct. Any nurse may bypass reporting the alleged violation through the perceived wrongdoer and may make the report directly to any Manager or Vice President in Corporate Human Resources.

Any nurse who believes that he/she has been discriminated or retaliated against in any way for bringing a question or complaint to Employer’s attention, for participating in any investigation, or otherwise engaging in protected activity, shall immediately report the matter directly to any Manager or Vice President in Corporate Human Resources, or any bargaining unit representative (who in turn
shall promptly inform any Manager or Vice President in Corporate Human Resources, so that Employer can similarly discharge its legal obligation to timely conduct an appropriate investigation and remedy any wrongful or unlawful conduct.

**ARTICLE 5 – EMPLOYMENT STATUS**

A. **Employer Rights** – The Employer reserves the right to hire, fire, promote, and transfer all members of the staff and to assign duties and responsibilities, provided that discipline of employees who have successfully completed the introductory period will not be imposed without just cause. The principles of progressive discipline shall apply to disciplinary actions except when the Employer must take a more immediate action where the safety, and/or security of employee, patient, and/or the Employer are involved, or in other circumstances constituting just cause.

B. **Introductory Status** – A nurse shall be in introductory status for the first ninety (90) calendar days of employment and may be terminated without prior notice and without cause during that time, in keeping with Article 6.A.2. Further, such employees will not have access to grievance procedures related to discipline or discharge. The introductory period may be extended by mutual and written agreement between the Employer and the nurse for up to sixty (60) additional calendar days. If an extension is agreed upon, specific goals and objective criterion shall be established in writing between the nurse and his/her supervisor. Where the introductory period is extended, no wage increases otherwise due shall become effective until the nurse has satisfactorily completed the introductory period. The introductory period is automatically extended for the length of time during which a nurse is placed on a leave of absence or is placed in a modified duty assignment which does not include a majority of the nurse’s regular duties. If that leave or modified duty assignment is greater than two (2) weeks in duration, the anniversary date for salary purposes shall remain the date of hire for the nurse who satisfactorily completes an extended introductory period. The written extension agreement will note the nurse’s right to review the proposed extension with the bargaining representative, provided any Association involvement will not delay expiration or extension of the introductory period.
Upon the twelve- (12-) month anniversary of employment, the nurse shall be evaluated by his/her team manager or supervisor.

C. **Job Bidding** – Nurses who have successfully completed the introductory period shall be given preference in filling job vacancies in accordance with seniority. Advance notice of anticipated vacancies will be communicated to nurses via employer e-mail and posted on Employer's intranet site. Postings shall include the position's hours, classification (job title), status, required weekend and on-call work and shift. Vacancies will not be filled permanently until at least ten (10) calendar days after the opening has been posted. Although a position’s assignment area shall not be considered part of a position, such assignments when they become available shall be granted to senior qualified nurses by an internal notification process consisting of the same posting period and methods applied to vacated or new positions. In the event the Employer makes patient assignments to nurses based on travel from a regional office location more than thirty (30) miles from current location, the Association shall have the right to negotiate the impact of the assignments.

D. **Termination of Employment**

1. A nurse should give a minimum of fourteen (14) days written notice of intent to terminate employment. After receiving such notice, the Employer shall have the right to provide any combination of notice and/or pay in lieu of requiring the nurse to work the period of notice.

2. The Employer shall give non-introductory nurses fourteen (14) days written notice of termination or two (2) weeks’ pay in lieu thereof except where the nurse is terminated for performance and/or conduct problems that provide just cause for discharge (or in the Employer's sole discretion, some lesser form of discipline) on the first offense, including, but not limited to:

   2.1 Physical attacks (such as fighting);

   2.2 Any violation of any Employer Alcohol and Drug policy involving illegal drugs (including “medical” marijuana) or alcohol;
2.3 Severe incidents of unlawful discrimination or harassment;

2.4 Possessing firearms or other weapons, ammunition, explosives, fireworks, or knives (other than pocketknives) on Employer or patient premises or at Employer-sponsored events;

2.5 Insubordination, deliberate refusal to comply with reasonable supervisory instructions (such as to perform specific job tasks or assignments, refusing to cooperate or giving untruthful or misleading information in interviews, etc.);

2.6 Dishonesty, including, but not limited to intentional falsification, intentional misrepresentation, and/or intentional omission of information in interviews, investigations, and on Employer records (such as employment applications, timesheets, patient records, accounting and expense reports, etc.);

2.7 Theft, or possession without proper prior permission, of Employer property or the property of others;

2.8 Criminal conduct while on Employer property, Employer time or in other circumstances which might adversely reflect upon Employer’s operations;

2.9 Threatening, intimidating, or coercing, or abusive language or behavior directed to any person while in any job-related circumstance;

2.10 Disclosure of confidential (including HIPAA-protected) information relating to patients; and

2.11 Allowing non-employees to accompany staff to a patient home (except a student accompanying a nurse as part of an orientation program previously approved by employer and sponsored by a local technical school or college)
2.12 Conduct or behavior placing the safety, health and/or security of employees, patients, family members, or visitors at risk.

Non-introductory nurses shall nonetheless have the right to challenge any termination under Article 17 of this Agreement. If the Employer gives less than fourteen (14) days written notice of termination the difference between ten (10) working days and the number of working days of advance notice shall be paid the nurse at the regular rate of pay.

3. Employer may take whatever disciplinary action it deems appropriate for the violations identified in Subsections 2.1-2.12 above, including discharge, and the only issue reviewable through the grievance procedure will be whether the nurse committed the violation.

4. The reasons for termination by the Employer shall be included in the written notice, and a termination interview with the Director of Operations and Clinical Manager or their designee shall be granted at the request of the nurse. All nurses shall be requested to participate in an exit interview with a management representative.

ARTICLE 6 – SALARIES AND COMPENSATION

A. Wage Rates

1. Nurses will be paid pursuant to the wage scale under Schedule B attached hereto.

2. A newly hired nurse shall be hired at the Step that corresponds with their number of years of experience providing direct patient care during the immediately preceding five (5) years. The nurse will also be credited with one (1) additional year (beyond the up to five (5) years) for each additional year of actual home health experience. A year of experience under this section shall include any calendar year in which the nurse worked one thousand, five hundred and twenty (1,520) hours of the related work. A newly hired nurse who successfully completes the introductory period shall have thirty (30)
days in which to file a grievance challenging the nurse’s placement for pay purposes under this provision.

3. Nurses shall advance on the wage scale upon their anniversary date. The parties recognize that this Agreement contains the minimum standards of employment and wages, and that the Employer retains the discretion to increase nurse pay above those minimums, after discussion with the Association.

4. PRN staff will move up the seniority pay scale once they reach the full 1,520 hours threshold—whether it takes a year or three or five or more. They will be assigned a step upon hire based upon the process for doing so outlined in Article 6 and Schedule B of the CBA. They will be paid thereafter accordingly and will advance upon reaching the 1,520-hour threshold.

5. If Employer implements a policy of paying a differential for non-represented registered nurses at any Amedisys home health facility located in Oregon who obtain a recognized certification, the policy shall be extended to employees covered by this Agreement.

6. Nurses will receive a flat-rate incentive bonus for each “credited” visit made at twenty-five (25) and beyond “credited” visits per week, pursuant to the pay schedule set forth on Schedule C. “Credited” visits, for purposes of computing the incentive bonus payment, shall be calculated pursuant to the Productivity Standards set forth on Schedule A. Incentive bonus(es), to the extent earned, shall be measured and itemized daily for each visit that is timely synced in HomeCare and reported weekly, and shall be paid with the paycheck for the pay period in which they are earned. The terms contained in this paragraph (A.5) shall in no way modify the parties’ obligations as stated in Schedule A.
ARTICLE 7 – TRANSPORTATION AND OTHER ALLOWANCES

A. All nurses required by the Employer to use their personal automobiles shall receive a mileage reimbursement at a fifty-two cent ($0.52) mileage rate. In the event the Employer’s mileage rate is increased, this mileage reimbursement rate will automatically increase proportionally to the Employer’s increased mileage rate, provided that the rate shall not exceed the then current IRS maximum.

B. All nurses required by the Employer to use their personal automobiles shall provide proof of automobile collision liability coverage.

C. Reimbursable mileage means all mileage calculated for each on-duty segment based on the fastest route identified by Google Maps, less the mileage driven for a nurse’s daily commute. The Internal Revenue Service Code defines “daily commute” to mean “transportation between your home and your main or regular place of work.” If another route has to be taken because of a traffic accident, road closure, or other such incident outside of nurse’s control, then nurse should track extra mileage driven and report it to his/her Business Office Manager for a calculated mileage adjustment.

D. All costs of public transportation in the line of duty will be paid by the Employer.

E. Any employee, who drives a motor vehicle while on Employer business, whether the vehicle is owned or leased by Employer or the employee, has responsibility to operate the vehicle in accordance with all applicable laws, as well as a proper concern for safety. All parking charges (except those for illegal parking) in the line of duty shall be paid by the Employer, but all traffic and vehicular citations shall be the nurse’s responsibility.

F. Employer shall reimburse all full-time field nurses Thirty Dollars ($30.00) per month for cellular phone use, with Fifteen Dollars ($15.00) per month for part-time field nurses, and this amount shall be paid as an automatic reimbursement. Employer’s corporate cellular phone reimbursement rate as of the effective date of this Agreement shall not be reduced during its term and that nurses automatically will receive any increases in such rate. In lieu of the automatic
monthly cell phone reimbursement, nurses may voluntarily elect to submit an itemized copy of their business usage for reimbursement, up to a maximum of Sixty dollars ($60.00) per month. Employees are not to use cell phones while operating a motor vehicle without a hands-free device provided by the employee.

ARTICLE 8 – HOURS OF WORK AND OVERTIME PAY

A. Regular full-time and part-time Amedisys staff nurses will be scheduled to their FTE status prior to any contract nurse being offered hours. If the full-time or part-time nurse declines a visit, Employer reserves its right to offer the visit to any contract nurse. For any period of low census, any nurse may volunteer for a reduced visit load, PTO, or time off without pay if available.

1. The basic work week shall be forty (40) hours, starting and stopping to match the Employer's payroll cycle. Any change in the work week shall require thirty (30) days' written notice to the Association in advance of the change. The schedule for any Baylor Nurse positions will be as defined in Article 3 of this Agreement. The basic workday shall be eight (8) hours and could begin earlier or later than 8:00 a.m., plus a minimum thirty- (30-) minute meal period on the nurse's own time. The basic workday may be changed by the Employer, based on need, to eight (8) hours or less or ten (10) hours or less depending upon the shift hired for, and minus meals on the nurse's own unpaid time, as scheduled. In the event of such a basic workday schedule change, and the nurse has an objection to said change, nurse should initiate consultation with Clinical Manager or Director of Operations for guidance and discussion – including whether other nurses are available to assist to complete the rescheduled visit(s), whether the schedule change is necessary or whether nurses identifies other concerns. The Employer may provide employees with the opportunity to work a schedule consisting of ten- (10-) hour days. Seniority shall be the determining factor in awarding such hours. Hours of work shall be consecutive, except for the intervention of the meal period. Nurses are allowed up to fifteen (15) minutes of paid break for each four (4) hours worked with scheduling to be at the discretion of the individual nurse, subject to Oregon law. No nurse shall be required to work a scheduled
shift of other than eight (8) or ten (10) hours in duration, unless specifically hired for such different length shift.

2. Employer shall have a schedule posted by the 22\textsuperscript{nd} of each month or, if the 22\textsuperscript{nd} falls on a weekend or holiday, on the next regular business day. Adjustments to the schedule can only be made with the mutual agreement of the affected nurse or in extraordinary circumstances necessary to provide care.

3. In order to meet service needs at different times, the Employer may make longer-term changes to the start and stop times of existing length shifts and reassign nurses with prior mutual agreement from the affected nurse(s).

4. If available unfilled shift assignments are known, the Employer will identify and post them, whenever possible, in an effort to elicit volunteers prior to requiring a nurse to work an unfilled shift assignment.

B. **Overtime Pay Shall Be Compensated As Follows:**

1. **Pay** – Overtime compensation will be paid at one and one-half (1½) times the nurse’s regular straight-time hourly base rate of pay for all hours worked in excess of forty (40) hours within the workweek.

2. Employees shall not be required to work more than six (6) days in a row. Bargaining unit nurses shall not be required to work or be placed on call more than the equivalent of once every fourth weekend. (A nurse who was scheduled to work but work was not available shall be credited with having worked the weekend.) Nurses shall also not be required to be placed on-call for more than four (4) weeknights per month. These restrictions shall not apply to a nurse who has accepted a position for which the employer has posted a more frequent weekend and/or on-call work requirement, nor in extraordinary or emergency (i.e., high risk patient needs and/or unexpected events) circumstances when additional staff is needed to meet patient needs. The Employer will attempt to solicit volunteers and utilize PRN nurses prior to requiring a nurse to be placed on-call and/or to work night shifts in excess
four (4) weeknights per month. If the Employer is unsuccessful, duty will be
assigned in reverse seniority order, starting with the lowest seniority nurse,
and then rotating up the seniority list as any subsequent need arises. Nothing
in this Section 2 shall prevent any nurse from volunteering for more than six
(6) workdays in a row or four (4) weeknight on-call shifts per month.
Weekend work and weekend call will be assigned to a nurse during the same
weekend whenever possible if the nurse so desires.

C. **Authorization and Minimum Time** – All overtime must be authorized in
advance by the Employer, except that if the nurse notifies the Clinical Manager
or Director of Operations in advance by voicemail or email and such message is
not returned within thirty (30) minutes, the overtime worked by the nurse will be
considered as authorized until such time as any supervisory employee directs
the nurse to cease working.

D. In computing pay there shall be no pyramiding of premium pay (which under this
Agreement includes differentials) under the contract; that is, overtime will not
exceed one and one-half (1½) times straight-time base rates. On-call is not
treated as a differential and thus a nurse working overtime on the weekend will
receive on-call on top of overtime.

E. A nurse who is scheduled to work and reports to work without receiving prior
notice that a full shift of work is not available will, at the Employer’s option, either
be paid a minimum of two (2) hours or allowed to work as assigned by the
Employer for a minimum of two (2) hours. A nurse may waive the work and
reporting pay on a case-by-case basis. If any nurse is placed on temporary
reduction of force status, they must be notified by 5:00 p.m. the day prior or will
either be paid or assigned work, etc., as set forth above and shall not suffer a
reduction in benefits.

F. **Weekend Differential** – Nurses will receive a weekend differential of five dollars
($5.00) per hour based on hours worked that fall within the designated time
period from 8:00 a.m. Saturday to 8 a.m. Monday.
G. **Additional Shift Incentive** – Effective with the first pay period beginning after ratification of this Agreement, an eligible part-time nurse will be paid an additional shift incentive of thirteen and no/100 dollars ($13.00) per hour for working extra shift(s) at the request of the Employer, in excess of the number of the nurse’s regularly scheduled budgeted hours for the week.

1. To qualify for the additional shift incentive, the extra shift must be of at least four (4) hours in duration.

2. Hours worked as a result of trades or of being called in to work while on-call will not be included in determining eligibility for the additional shift incentive.

3. If a nurse’s budgeted hours are reduced at the nurse’s request, the nurse will not be eligible for this differential until after the completion of twenty-six full workweeks following the reduction in the nurse’s budgeted hours.

4. The additional shift incentive would not apply to hours that are worked at the overtime rate of pay.

H. **Night Shift Differential** – Effective with the first pay period beginning after ratification of this Agreement, a night shift differential of five and no/100 dollars ($5.00) shall apply to hours worked between 8:00 PM and 8:00 AM.

I. **PRN Hours of work & Overtime.**

1. Minimum hours of work per pay period – PRNs will not have a minimum number of hours of work per pay period.

2. Attendance at case conference when scheduled – PRNs will not be required to attend case conference when they are scheduled to work, although they are welcome and encouraged to do so.

J. **Minimum Amount of On-Call Shifts** – PRNs must work a minimum of one on-call weekend per month. The DOO and/or CM of the Care Center will consult with the PRNs regarding their preferences and limitations of the same.
K. **PRNS Will Be Scheduled to Work As Follows:**

1. Each PRN will provide the Care Center (the DOO and/or CM) with a monthly calendar of days he or she is anticipating availability to work.

2. The Care Center will call the PRN to schedule work shifts, where possible, a week in advance, using the calendar the PRN has submitted.

3. The Care Center will provide the PRN at least 24 hours advance notice if he or she is no longer needed for a scheduled shift. If that notice is shorter than 24 hours, the PRN will be paid for the equivalent of one third (1/3) their ordinary shift pay for the cancelled shift.

4. PRNs must call the Care Center at least two hours before their scheduled shifts to cancel due to illness or emergency.

5. The Care Center may contact PRNs to request same-day coverage for visits, which the PRN may decline or accept.

6. PRNs will provide weekend availability for on-call shift in their monthly availability submissions, with the requirement that they work one on-call weekend per month. It will be scheduled accordingly (with some necessary give and take, based on need, etc.). If the PRN calls off his or her scheduled on-call weekend, the or she must cover the nurse’s next on-call weekend who covered the weekend that the PRN missed.

**ARTICLE 9 – PAID TIME OFF (“PTO”) AND HOLIDAYS**

A. **PTO** – All eligible nurses will participate in the Employer’s paid time off (“PTO”) program as described in its current Policy Manual provided, however, that the substantive benefits provided in such plan shall not be modified during the term of this Agreement without mutual consent of the Employer and Association. Compensated hours shall be used for the pay period accruals. For clarification purposes, the following practices and interpretations apply:

1. Employees must qualify as “part-time,” i.e., regularly scheduled to work at least twenty (20) hours per week, to earn the accrual;
2. Nurses “grandfathered” at thirty-two (32) hours for purposes of “full-time” status (see Article 3) shall accrue PTO based on a full-time schedule. Eligible full-time employees are credited with a “Year of Service” for each calendar year in which the employee is compensated (for at least one thousand three hundred (1,300) hours);

3. Eligible employees who wish to borrow up to sixteen (16) hours of PTO (maximum per calendar year) must complete an appropriate request form which will also authorize a deduction from an employee’s paycheck or final paycheck should a separation from employment occur prior to “repayment” of the borrowed PTO. If sufficient funds are not available to cover the deficiency, the nurse shall cooperate in arranging a repayment schedule.

B. PTO Requests – Nurses will be notified of approval or denial of PTO request no later than three (3) business days after the request is properly submitted. The PTO calendar will be housed on SharePoint.

C. Holidays – All eligible nurses will participate in the Employer’s Holidays program as described in its current Policy Manual provided, however, that the substantive benefits provided in such plan shall not be modified during the term of this Agreement without mutual consent of the Employer and Association. Holidays are defined on the Holiday Calendar available through People Portal. Holiday’s not worked will be paid at straight time. Nurses who work on a holiday (other than the day after Thanksgiving and Christmas Eve) shall receive one and one half (1 ½) times the nurse’s regular hourly rate for the hours worked. Nurses will only be scheduled one holiday as on-call coverage once per year, unless otherwise required due to unexpected circumstances regarding coverage availability. Holiday schedules will be posted in advance no later than January 15th of the calendar year. All holidays with assigned coverage will be scheduled on a rotational basis, subject to change due to coverage availability. Employer will make every effort to ensure that no nurse works the same holiday each year unless the nurse volunteers for such assignment.
ARTICLE 10 – HEALTH AND SAFETY

A. The Employer agrees to make provisions reasonable for the safety and health of employees during the hours of their employment to promptly review unsafe conditions brought to its attention and to take whatever corrective action is necessary. The nurses acknowledge their responsibility to familiarize themselves with and to observe all safety procedures and policies established by the Employer. The Employer, the Association, and the nurses, recognize their obligations and/or rights under and shall abide by the federal and state laws with respect to safety and health. In the event a nurse believes an unsafe environmental condition exists, the nurse shall immediately bring the situation to the attention of his/her supervisor.

B. Inclement Weather Option

1. Nurses who are unable to report to work or are authorized to leave work early because of hazardous driving conditions will be given an opportunity, if possible, to make up the hours lost from work, within the workweek and when authorized by the Clinical Manager.

2. The nurse will be paid for actual hours worked. The employee may have the option to use paid time off accrued to cover any lost hours. It is expected that nurses who are required to have a car as part of their job will have it properly equipped for winter driving, including equipment such as chains, studded tires, snow tires, or other traction devices. Amedisys is committed to the safety of its employees, and any concerns a nurse has about driving in inclement weather should be raised to their Clinical Manager and/or Director of Operations.

C. Personal Protective Equipment – Amedisys will take all reasonable steps to ensure appropriate PPE is provided for all nurses including appropriate cleaning supplies. Upon extended absence of availability of appropriate PPE, the Employer or Association may request a meeting to negotiate a safe solution. Guidance regarding the use of PPE will be consistent with OSHA and CDC guidelines.
ARTICLE 11 – PERSONNEL RECORDS

A. Nurses who so request shall be permitted to review and receive a copy of their personnel records which are used or have been used to determine their qualifications for employment, promotion, additional compensation, or employment termination or other disciplinary action. Personnel records, however, do not include records of an individual relating to the conviction, arrest or investigation of conduct constituting a violation of criminal laws of any state or the United States, and/or confidential reports or references from previous employers, or any employee’s medical records (including those regarding any leave for or accommodation of an individual’s health condition). Some personnel records may be available on-site and some may be available from the official personnel file located in the corporate office, but request to review or receive a copy will in either event be granted within a reasonable period of time.

B. Records pertaining to an individual’s qualification, personnel actions, performance evaluation, warnings, or other disciplinary matters shall be contained in the personnel file. The Employer may not use any known prior documented information which the Employer regards as a disciplinary action regarding any employee unless that information is included in the individual’s personnel file.

C. Nurses shall receive a copy of all disciplinary notices placed in their personnel file and shall have the right to respond in writing and have the response attached to any such notice.

D. A warning, reprimand or other discipline or disciplinary document shall not be considered in subsequent disciplinary activity if there has been at least a twenty-four (24) month period since the last disciplinary action of a related nature. However, all prior discipline may be retained in the file but may only be considered by the Employer (or a labor arbitrator) for another three (3) years (five (5) years total) in evaluating an employee’s overall record for purposes of any suspension or termination.
ARTICLE 12 – PHYSICAL EXAMINATION

A. After being offered employment each nurse shall be required to submit to a TB skin test (PPD). Newly hired nurses with a history of positive TB skin testing are required to submit proof of negative chest x-ray or physician statement attesting to negative signs or symptoms of TB.

B. The Employer may use drug screens as a prerequisite for employment.

C. Nurses shall have a TB skin test each year after employment, which shall be provided by the Employer. Nurses with a history of positive TB skin test will complete a Screening questionnaire, titled “Annual Tuberculosis Screening Questionnaire.”

D. In the event of any unusual exposure to infection or contagious diseases during the performance of the nurse’s duties, a special examination, including any diagnostic test and immunization, at the expense of the Employer, shall be authorized by the Area Vice President and/or Director of Office Operations. Annually, Nurses who have to pay out-of-pocket for the flu vaccine will be reimbursed by Employer, unless they have been provided a voucher for flu vaccine by Employer. Nurses will be provided free of charge COVID-19 testing as required or otherwise covered by Employer or the nurse’s state and/or county.

ARTICLE 13 – INSURANCE AND RELATED BENEFIT PLANS

A. Description of Insurance Plans – Employer will provide Medical/Prescription Insurance, Dental Insurance, Vision Insurance, Long-Term Disability Insurance, Basic Life/AD&D Insurance, Healthcare Flexible Spending Accounts and Dependent Care Flexible Spending Account. These benefits shall be provided to eligible employees on the same basis and subject to the same terms, conditions, and changes as Amedisys employees and managers at this and Employer’s other facilities.

B. Cost of Premiums – Employer will continue to pay the same share of the cost of providing the insurance plans described in Section 13.A on the same basis
and subject to the same terms, conditions, and changes as other employees and managers. Employer will be obligated to make such payments as long as an employee receives compensation, including PTO, directly from the Employer for at least one hundred thirty (130) hours in a calendar month.

C. **Employee-Optional Insurance Plans** – Employer may provide supplemental or optional insurance plans or coverage for eligible employees at employee expense. Such plans may include Supplemental Life Insurance, Short-Term Disability, and Dependent Life Insurance, and Employer will offer such plans to eligible employees on the same basis and subject to the same terms, conditions, and changes as employees and managers at this and Employer’s other facilities.

D. **Notice of Changes** – Employer may make such changes in the insurance plans offered to eligible employees as it deems appropriate including, but not limited to, modifying or changing coverage, plans or carriers provided that any such changes or modifications shall apply to all affected employees and managers and provided further that Employer provides the Association with at least thirty (30) days of advance written notice to give the parties an opportunity to meet and discuss the changes. The Association may reopen Schedule B of the collective bargaining agreement thereafter if there are significant changes either to the plans offered or the cost of the plans to the employees. If the parties reach an impasse during these negotiations, then the provisions of Article 25, Strikes & Lockouts, will be waived, and the Association may take economic action in support of its position and the Employer may lock out or implement its proposals consistent with NLRB rules.

E. **Disputes** – All disputes, complaints, and questions, and any and all other issues arising out of or in any way connected with the underlying insurance policies or plan documents, and the interpretation or administration thereof, shall be exclusively resolved in accordance with the underlying plan procedures and ERISA and shall not be subject to Article 17 of this Agreement.

F. **Continuation of Benefits** – In compliance with the Consolidated Omnibus Budget Reconciliation Act, Employer will provide eligible nurses who lose the
insurance coverage provided under Section 13.A in qualifying circumstances the opportunity to purchase such continuation, conversation and/or portability rights as are granted by any applicable federal or state law or by the terms and conditions of the underlying contract(s).

G. **Health Care Legislation** – Because of the uncertainty surrounding the implementation of the federal Patient Protection and Affordable Care Act, Employer may use the procedure in paragraph D above if Employer's obligations or costs are significantly increased during the term of this Agreement, and Association may do so if employee contributions are significantly increased, or benefits are significantly decreased.

H. **This Article will not apply to PRN staff.**

**ARTICLE 14 – 401(K) RETIREMENT PROGRAM**

A. The Employer shall offer the Amedisys, Inc. 401(k) Plan ("Plan").

B. The eligibility requirements and Plan Summary will be provided to all new nurses during orientation.

C. The Employer may change the above Plan to a substantially similar Plan which will include the same or better contribution level, only after providing the Association at least thirty (30) days' prior written notice of the details of the plan changes.

D. Notwithstanding Section C, Employer may make any changes in the Plan required by law or any applicable regulations. In addition, any increase or reduction in benefits during the term of this Agreement which apply to all participating employees shall also apply to members of the bargaining unit, provided, however, that in the event of any reduction in benefits Employer agrees to provide Association with thirty (30) days' advance notice and, upon request, discuss the effect of change on participating bargaining unit employees. In the event of any reduction in the “match” Employer shall provide the Association with at least thirty (30) days’ advance notice to discuss the effects of
the reduction and Association shall then have thirty (30) days in which to request reopening of Schedule B. If the parties reach an impasse during these economic negotiations, the provisions of Article 25, Strikes and Lockouts, will be waived, and the Association may take economic action in support of its position and the Employer may lock out or implement its proposal consistent with NLRB rules.

E. Disputes – All disputes, complaints, and questions, and any and all other issues arising out of or in any way connected with the nurses’ participation in the Plan and its underlying policies or plan documents, or the interpretation and administration thereof, shall be exclusively resolved in accordance with the underlying Plan procedures and ERISA, and shall not be subject to Article 17. Compliance with Article 14, however, shall remain subject to Article 17.

ARTICLE 15 – LEAVES OF ABSENCE

A. The Employer and the Association agree to the following policies and rules on leaves of absence:

1. Witness and Jury Duty Leave – A nurse who is summoned for jury duty or as a witness in a judicial proceeding shall be granted a leave of absence for these purposes. The nurse must notify his or her supervisor immediately upon receipt of the notice or summons and provide a copy. Nurses who are regularly scheduled to work twenty (20) or more hours per week and comply with these requirements will receive regular pay for each normally scheduled day away from work at the normal rate of pay for up to two (2) weeks and thereafter may use PTO or take the leave as unpaid, but must reimburse the Employer for any payment received from the Court for these services. If a nurse is not required by the Court to be present for the full day, the nurse will return to work for the remainder of the day or may use PTO or take the remainder of the day as unpaid leave.

2. Military Leave – Military leave shall be granted in accordance with state and/or federal law.

3. Peace Corps and Humanitarian Relief Leave – Leave of absence for a nurse to serve in the Peace Corps or other humanitarian cause may be
granted, subject to the Employer’s operational demands. The duration of this leave will be determined at the time it is requested and approved. To be approved, however, such leave must be requested as far in advance as reasonably possible. During humanitarian relief leave a nurse must use available PTO and, if exhausted, may then take unpaid leave for the remainder of the approved time off.

4. **General Leave** – A nurse who has successfully completed the introductory period and has completed at least one (1) year of service with at least one thousand two hundred fifty (1,250) hours worked during that year may be eligible for up to four (4) weeks of general leave in a rolling twelve- (12-) month period. Such leave may be granted for personal or family reasons that do not qualify for other leaves of absences provided under this Article, including FMLA or OFLA leave.

A nurse on general leave must use any accrued PTO until it has been exhausted and then may take unpaid leave. The nurse will continue to accrue PTO as long as he or she remains on a paid status, and all other benefits will continue as long as the nurse continues to pay his or her portion of the required premium costs. Once the nurse is on unpaid status, the full cost of continued benefits will be the nurse’s responsibility without Employer contribution. Reinstatement following general leave will be subject to position availability unless otherwise required by law.

Leaves of absence for educational purposes may be granted by the Employer based on a predetermined mutual benefit that is likely to be derived from the leave. The length of the leave shall be at the Employer’s discretion, and PTO must be used until it has been exhausted and then the balance of the leave shall be unpaid. The nurse will continue to accrue PTO while on paid status, and while on leave the full cost of continued benefits will be the nurse’s responsibility, without Employer contribution. Upon completion of the educational leave, reinstatement rights shall be as mutually agreed by the Employer and nurse prior to the approval of the leave, including
assignment to the former, a substantially equivalent position, or to a position
the nurse is qualified to hold as a result of the education.

Leaves of absence shall be granted with or without pay for educational
purposes to attend conferences, seminars, briefing sessions, or other
functions of a similar nature that are intended to improve or upgrade the
nurse’s skill, maintain their license and/or further their professional ability,
subject to organizational needs. Requests for these educational leaves of
absence shall be reviewed and subject to approval by the Director of
Operations.

Expenses for educational programs, including tuition, books, manuals, tapes
or other training aids, shall be paid by the Employer if the training is
mandatory. Employer will also pay the nurses’ wages for all hours spent in
training required by the Employer, or when such pay has been approved by
the Employer in advance, whether or not the training time may count as
“hours worked” under applicable law.

5. **Family and Medical Leave** – Family and medical leave shall be in
accordance with the Employer’s policy and the applicable law(s) as well as
any provisions of this Agreement imposing greater requirements. PTO must
be used while on such leave. A nurse on such leave shall continue to accrue
PTO while on paid status, and all other benefits will continue as long as the
nurse continues to pay his or her portion of the required premium costs.
Reinstatement following the actual FMLA and/or OFLA leave shall be in
compliance with applicable law.

6. **Medical Leave** – Employer may grant medical leave for periods beyond the
statutory requirements under FMLA and/or OFLA, or to nurses who are not
eligible for such leave, due to a personal serious medical condition which
prevents the nurse from performing one or more of the essential functions of
the job. The length of such a leave will be at the Employer’s discretion, based
upon reasonableness and the Employer’s operational needs, and
reinstatement shall not be guaranteed unless required by law. Under no
circumstances will medical leave, including any leave time taken under FMLA and/or OFLA, exceed fifteen (15) months in a rolling fifteen- (15-) month period. The full cost of continued benefits will be the nurse’s responsibility, without Employer contribution.

6.A Nurses who are required to quarantine due to local, State, Federal or CDC guidelines or Employer’s policy may have paid, or unpaid quarantine leave pursuant to Employer’s company policy at the time of the quarantine. Nurses who have an adverse reaction from the COVID-19 vaccine will be paid for time lost pursuant to Employer’s policy.

7. Bereavement Leave – Bereavement leave shall be available for the death of a qualifying family member, as defined below. Leave shall be for the purpose of grieving, assisting in making arrangements and/or attending the memorial services. Requests for bereavement leave should be made to the supervisor as soon as it is feasible after learning of the possible need. The length of bereavement leave will be determined as soon as possible upon notice of its need, and the length requested by the nurse will be approved based on the circumstances. It is anticipated that bereavement leave will ordinarily be from two (2) to five (5) working days. Regular full-time nurses who have successfully completed the introductory period shall be eligible for pay for missed work time due to approved bereavement leave. Any additional time beyond the period approved for pay but nevertheless approved as legitimate bereavement leave, or any bereavement leave granted by the Employer following the death of someone who is not a qualified family member, is subject to advance approval and the nurse must use PTO. Paid bereavement leave shall be provided for up to three (3) days in the event of the death of a spouse, child or stepchild, parent, grandparent, sister, brother, daughter-in-law, son-in-law, father-in-law, mother-in-law, legal guardian, grandchild, or any integral household member. Upon written request within ninety (90) calendar days of the death, an eligible employee shall be entitled to an additional two (2) days’ pay.
B. The Employer and the Association agree that the Employer’s current Tuition Reimbursement and Seminar Approval policies as set forth in the Employer’s Policy Manual shall apply to all employees in the bargaining unit, including part-time nurses. As provided above, time off for approved seminars shall be compensated by the Employer as time worked.

C. No benefits shall accrue during unpaid leaves, including any leaves during which a nurse receives compensation through any form of time-loss program (including workers’ compensation) financed in whole or in part by the Employer, except as otherwise required by law.

D. **Workers’ Compensation** – PTO may be used to cover the three (3) day waiting period for workers’ compensation time loss coverage as soon as it is determined that the three (3) days are not otherwise covered by workers’ compensation. PTO benefits may also be used for missed shifts due to a workers’ compensation leave of absence, up to twenty percent (20%) of the RN’s FTE status (e.g., 1.6 PTO hours a day, eight (8) PTO hours a week for five (5) day, forty (40) hours a week, full-time RNs), after fourteen (14) days of workers’ compensation leave.

8. **This Article will not apply to PRN staff, whose leave entitlements will be determined by law and provided accordingly.**

**ARTICLE 16 – PROFESSIONAL ACTIVITIES AND CIVIC POLITICAL AFFAIRS**

A. Membership in the Association is voluntary, however, all nurses who have become members of the Association and have not delivered to the Association a letter of resignation from membership before the thirty (30) days after the date this Agreement is fully signed, all nurses who thereafter voluntarily become members, shall, as a condition of employment, maintain membership in good standing in the Association for the duration of this Agreement. It is the Association’s responsibility to notify Nurses of this contractual option.

B. Each nurse covered by this Agreement and who opts not to become a member of the Association shall, as a condition of employment, within thirty (30) days
after the nurse’s hire date or the full execution of this Agreement, whichever occurs later, make payment in lieu of dues to the Association for legally required services supplied by the Association on behalf of the bargaining unit.

C. The Employer will deduct from the bi-weekly paychecks of any nurse covered by this Agreement monthly dues for membership in the Association or Association fees provided that the Employer has first received written authorization from the nurse(s) in question to deduct the amount for the Association. Written authorization forms for such deduction shall be provided by the Association to the nurse(s), and each nurse may select other methods for paying their Association dues.

D. The Employer and the Association agree not to interfere with the rights of nurses to become members of the Association. The Employer and the Association further agree that there shall be no discrimination against any nurse as a result of an employee’s membership status or activity in the Association, provided that such activities do not interfere with the effectiveness of the Employer. The Employer shall make fifteen (15) minutes available to the Association during new employee orientation which will be paid time for both the newly hired RN and the RN providing the orientation.

E. Employer and Association agree to notify applicants for employment, prior to or in conjunction with an employment offer, that registered nurses are represented by ONA. The Association agrees to distribute to each nurse a copy of this Agreement.

F. The Employer shall furnish to the Association, in January and June, a current alphabetic listing of the names, home addresses, home email, telephone numbers, status (FT, PT), hire dates and pay steps of the employees in the bargaining unit. Additionally, this information for new hires and terminations shall be forwarded to the Association, if applicable, each month. The Employer shall provide this information electronically in a mutually agreed upon format and shall work with the Association to provide a unique identifier (such as the nurse’s license number) for each nurse. The Employer will also supply quarterly (to be
reported in January, April, July, and October for the prior quarter) a list showing
the names of each nurse whose employment has been terminated, who has
been hired, and who has completed his or her introductory period, including
addresses, hire dates, and pay, during the preceding quarter. The Employer will
also provide reasonable updates on this information during contract
negotiations.

G. At the discretion of the supervisor and the nurse, time off with pay may be
allowed for participation in professional organization activities, such as holding
office, etc.

H. Employer initiated meetings will be paid time.

I. The Employer recognizes the importance of continuing education. To the extent
possible, there will be a conscious effort to provide both in-service and outside
educational opportunities for staff members on Employer time.

J. The Association shall indemnify and save the Employer harmless against any
and all claims, damages, suits, or other forms of liability, including reasonable
attorneys’ fees and costs up to a maximum of ten thousand and no/100 Dollars
($10,000.00) per claim, which may arise out of any action taken or not taken by
the Employer for the purpose of complying with the provisions of this Article.

ARTICLE 17 – GRIEVANCE PROCEDURE

A. A grievance is defined as any dispute between the Union and the Employer, or
between a nurse who has successfully completed the introductory period and
the Employer over the Employer’s interpretation or application of the Agreement.
All grievances which arise during the term of this Agreement shall be resolved
as follows:

Step 1: The employee or the Association, on an employee’s or group of
employees’ behalf, shall present his/her grievance in writing on the “Official
Grievance Form,” or facsimile, to the Director of Operations within thirty (30)
days from the date of the occurrence or the date when the nurse should have
reasonably known of the occurrence. The written grievance statement shall
include:

a. The date the grievance occurred;

b. A description of the problem;

c. The contract provisions alleged to be violated; and

d. The remedy sought.

The Director of Operations or designee shall meet with the grievant within
days from the date of the occurrence or the date when the nurse should have
reasonably known of the occurrence. The written grievance statement shall
include:

a. The date the grievance occurred;

b. A description of the problem;

c. The contract provisions alleged to be violated; and

d. The remedy sought.

The Director of Operations or designee shall meet with the grievant within
fourteen (14) calendar days of receipt of the grievance. At this meeting,
every effort shall be made to find a mutually satisfactory solution to the
grievance. The Director of Operations or designee shall give a written
reply to the grievant with a copy to the Association within fourteen (14)
calendar days after the meeting.

**Step 2**: If the grievance is not settled at Step 1, the grievant or the grievant’s
representative may submit a written appeal that the grievance be heard by
the Area Vice President within fourteen (14) calendar days. After conferring
with the grievant and supervisor, the Area Vice President or designee will
recommend a solution in writing which shall be delivered to the grievant and
the Association within ten (10) calendar days.

If the grievance is not resolved at Step 2, either party may submit the issue to
arbitration by filing a written request with the other within fourteen (14)
calendar days from the time that the grievant’s representative receives the
proposed solution.

Employer and Association will attempt to agree on a neutral arbitrator to hear
the grievance, and with mutual agreement may submit multiple grievances to
the same arbitrator. If the parties are unable to reach agreement on an
arbitrator, the moving party will request a panel of seven (7) members of the
National Academy of Arbitrators with their principal place of residence in Oregon or Washington from the Federal Mediation & Conciliation Service provided, however, that the request must be mailed within fourteen (14) calendar days of the date of the Association request to refer the grievance to arbitration. The parties shall equally share the cost of the list. Within fourteen (14) calendar days of receiving the list, the parties will alternately strike names from the list, with the moving party to strike the first name, until one (1) name remains, and he/she shall serve as arbitrator. Either party may require that an official record of the proceedings be prepared by a professional reporter and that a copy be provided to the arbitrator. The parties will jointly request that the arbitrator render a decision within thirty (30) calendar days from receipt of any post hearing briefs filed by the parties.

The decision of the arbitrator shall be final and binding on the parties, and on all nurses subject to this Agreement, but the arbitrator will confine the decision to the interpretation and application of the specific provisions of this Agreement which have been placed in issue by the parties, and will have no authority to enlarge, diminish, alter, amend or in any way modify the terms of this Agreement.

Each party will bear its own costs and expenses in any such arbitration proceeding and the parties shall equally share all expenses related to any transcript requested by either party or other incidental expenses of the arbitration.

The parties may agree to use the mediation process in an attempt to resolve the grievance. Both parties must mutually agree to use mediation and neither party may require that any grievance be sent to mediation. Mediation shall not be considered a step in the grievance procedure. Should the grievance subsequently be pursued to arbitration, the Employer shall not be liable for any potential back pay liability for that period of time when the parties agreed to mediate until the parties terminate the mediation efforts.
B. The time limitation for filing a grievance and or proceeding through steps of grievance procedures are of the essence. Accordingly, a grievance or request for arbitration will be deemed untimely if the time limits set forth above for presentation to a step are not met, unless the parties agree in writing to extend such time limits. Failure to timely process a grievance and/or arbitration shall be deemed a waiver of such matter by the grievant or Association. A failure by the Employer to comply with the time limits set forth in the grievance and/or arbitration procedure, will be deemed an approval of the grievance. This Article shall supersede any other grievance and/or dispute resolution procedures available to Employer employees.

C. Grievance Meetings – Association representative(s) and grievants covered by this Agreement shall suffer no loss in their regular pay at straight time rates when attending meeting with Employer representatives regarding formal grievance steps. Pay is allowed only when the employee has been excused from duty by the responsible supervisor, the meeting is during the employee’s regularly scheduled working hours and the employee would have worked if he/she had not attended the meeting. The Employer reserves the right to limit the number of employees paid for attending a particular grievance meeting. Except as provided in this section, one (1) Association representative shall be paid for time, not to exceed two (2) hours per grievance, for investigating and processing a grievance. Time paid must have prior approval by employee’s Manager, and Association representatives shall not allow Association business to interfere with their regular duties.

ARTICLE 18 – SENIORITY, LAYOFF AND RECALL

A. Seniority shall be defined as the length of continuous employment and shall date back to the most recent date of hire for nurses who complete the introductory period. Nurses who leave the bargaining unit to accept management positions shall retain their seniority date less time served in the management position.

B. In case of a permanent reduction in force, seniority shall govern on an Employer-wide basis in layoff and recall procedures (i.e., least senior nurse shall
be laid off first and recalled last), provided that the remaining nurses are
qualified to perform the available work with appropriate orientation.

C. Layoffs will occur in the following order:

1. Nonscheduled staff.

2. Temporary employees.

3. Introductory nurses.

4. Regular full-time and part-time nurses in inverse order of seniority, provided
   that the nurses are qualified to perform the available work with appropriate
   orientation.

D. Nurses shall not be laid off permanently unless they have received written notice
   at least five (5) working days before their layoff date.

E. Seniority shall be broken, and employment shall be lost by:

1. Termination;

2. Layoff for lack of work which is continued for more than nine (9) consecutive
   months;

3. Failure to accept a recall to a substantially similar position within three
   working days after receipt of a written recall notice or seven (7) calendar
   days after mailing of the recall notice to the last address listed in the nurse’s
   personnel file, which will give the nurse at least two (2) weeks to report for
   work; however, a regular staff nurse will not lose seniority for refusing a
   twenty-four (24) hour availability position; or

4. Exceeding the maximum period available for a leave of absence.

Provided, however, that a nurse who is rehired within twelve (12) months of a
separation from employment shall have the former seniority date reinstated,
subject to adjustment for the duration of the separation, but shall not be
allowed to use the restored seniority to “bump” a junior nurse from existing
positions or schedules. In addition, a nurse who accepts a position outside of
the bargaining unit and returns to the unit within one (1) year shall suffer no
loss of seniority. A nurse who returns to the bargaining unit after one (1) year
shall receive an adjusted seniority date reflecting the time worked outside of
the bargaining unit in excess of one year.

F. No new nurse shall be hired by the Employer until all available qualified nurses
on layoff with recall rights have been offered reemployment in the positions
available.

G. A written recall notice shall be sent by registered or certified mail to the last
address which the nurse has given the personnel department of the Employer.
In order to preserve seniority, nurses must respond to recall within three (3)
working days of receiving the recall notice.

H. Nurses recalled from layoff shall not forfeit previously accumulated benefits up to
the date of layoff. No benefits shall accrue during layoffs of more than five (5)
working days.

I. In the event that the Employer needs to reduce staff on a temporary basis for a
full or partial day, flex time, the Employer shall first solicit volunteers. All nurses
working shall be offered the opportunity. If there are more volunteers than
necessary for temporary staff reductions, the opportunity shall be given to the
nurse with the least voluntary hours reduction in the previous six (6) months.

In the event there are no volunteers, or the number of volunteers is insufficient,
then the Employer shall reduce staff in the following order: 1) supplemental staff,
2) on-call staff, and 3) per diem staff. If further reductions are necessary, the
Employer shall follow a whole-day reduction rotation system beginning with the
least senior nurse in the affected cost center.
In all situations, patient care needs and continuity of care will be considered along with seniority. When nurses are flexed, nurses will have the choice to take such time as paid or unpaid leave time off.

Partial-day reductions will be conducted on a case-by-case basis according to staff schedules, productivity targets, and continuity of patient care and related patient-care needs.

J. This Article will not apply to PRN staff.

ARTICLE 19 – PROFESSIONAL NURSE PRACTICE COMMITTEE

A. Establishment and Composition – A Professional Nursing Practice Committee (PNPC) shall be maintained and shall include registered nurses covered by this Agreement. The Area Vice President and/or Director of Office Operations shall be notified in writing of the names of the PNPC representatives on the committee and any subsequent changes in representation on the Committee.

B. It is agreed that the fundamental purpose of the Committee shall be to promote communication and understanding regarding matters of professional concern of the bargaining unit to the Employer. The Employer recognizes the responsibility of the Committee to make written recommendations to the Employer, as well as its responsibility to seriously consider these recommendations for implementation. The Association understands that the Committee shall have no independent authority to implement any recommendation.

C. Other objectives of the PNPC will include the following activities:
   1. New developments in nursing practice through examination of various nursing models, especially as they relate to community health care settings.
   2. Improvement of patient care and nursing practice.
   3. Recommendations to the Employer of ways and means to improve patient care, as well as meeting the health needs of the community.
4. Recommendations of educational and training programs compatible with identified nursing care goals.

5. Identification of topics appropriate for research in nursing interventions and patient care activities and community health nursing.

6. Recommendations to the Employer regarding productivity issues.

D. The bargaining unit will select four (4) nurses to be members of the Committee for a term of at least two (2) years. The one (1) core management representative of the Committee will be appointed by the Employer for a term of at least two (2) years.

E. The Committee shall meet quarterly or more frequently by mutual agreement. The Director of Office Operations will be notified when meetings are scheduled and will be furnished a copy of the agenda. Committee members shall collectively be paid twenty-four (24) hours per calendar quarter for Committee work, which shall not be considered in calculating productivity.

F. The Employer shall give a detailed written response to each Committee recommendation submitted to the Employer within ten (10) working days or a mutually acceptable period of time. The Employer will give due consideration to the recommendation and will advise the Committee of action taken.

G. A limited portion of each scheduled Committee meeting shall be attended by the Director of Office Operations, or designee, for the purpose of exchanging agenda items, presenting practice concerns, and supplying relevant data and information related to issues being reviewed by the Committee. Although more extensive participation by the Area Vice President or other guests may be arranged at the Committee’s invitation or with their consent, the standing participation of the Director of Office Operations shall be limited to twenty-five percent (25%) of the meeting time. Committee agenda items may be submitted to the Committee chairperson by bargaining unit or supervisory nurses. The Chair, in consultation with Committee members, shall then set the agenda.
ARTICLE 20 – ON-CALL DUTY/24 HOUR AVAILABILITY

A. On-call pay covers hours when an RN is not on regular duty and is required to remain in contact with the Employer and be available for work within a maximum of fifteen (15) minutes telephone response time if required to report to work and drive to the location of care, nurses will have an additional thirty (30) minutes to do so. If the distance necessary to travel requires more time, a nurse may take up to ninety (90) minutes to reach the location of care. As always, nurses are expected to respond as quickly as possible.

1. The nurse is required to leave a telephone number where he/she can be contacted during a specific period of time while on call;

2. The nurse must be immediately prepared to commence full-time work if appropriate.

3. On-call hours will be equitably distributed in/for each office according to the number of on-call hours required and the number of nurses in that office authorized to take call, in accordance with Article 8.C.2.

B. On-call schedules will be posted at least four (4) weeks in advance except for instances of illness or emergencies. Schedules will be completed in accordance with contractual provisions of no more than one (1) weekend per month, no more than four (4) weeknights per month and will be assigned on a rotational basis except for instances of illness or emergencies. Employer shall make every effort to ensure that no nurse will be required to take emergency call more than once every two (2) months.

C. Nurses who have worked while on weekend on-call duty will be scheduled at least one (1) regular day off in the week following a weekend in which they worked while on-call, proportional to their FTE status. Use of PTO for this time will not be required. Nurses may volunteer to work the scheduled days off at their discretion.

D. After-hours weeknight call is a scheduled on-call assignment from 5:00 p.m. until 8:00 a.m. that is primarily intended to be activated for urgent visits with existing
patients. In the event nurse determines that documentation necessary to perform a visit is missing from the referral packet, nurse should initiate consultation with Clinical Manager or Director of Operations for guidance—including whether postponement is necessary—and whether deficiencies can be fixed before reaching the patient’s home (or within an hour, whichever is longer). After hours and weekend on-call responsibility will be assigned for at least three and one-half (3 1/2) hours unless negotiated and agreed upon by the staff nurse.

E. Except in the event of a bona-fide emergency, on-call duty shall not be transferred between the hours of 10:00 p.m. and 8:00 a.m.

F. A nurse scheduled for after-hours call during which there were multiple or lengthy calls and/or visits may request a delayed start time with a reduced assignment the day immediately following the on-call shift or to be fully taken off the schedule for that day. The Employer will make a reasonable effort to grant the nurse’s request. The nurse may choose to use PTO or take leave without pay and continue earning PTO in any pay period in which the nurse receives compensation directly from Employer, e.g., wages, PTO, etc.

G. In the event of the necessity of short notice assignment to after-hours call due to an illness or emergency, the employer agrees to contact all qualified nurses to elicit volunteers for this after-hours call assignment. If there are no volunteers, duty will be assigned in reverse seniority order, starting with the lowest seniority nurse, and then rotating up the seniority list as any subsequent need arises. Employer will make a reasonable effort to ensure no nurse will be required to cover this assignment more than once every 2 months. Nurses who volunteer to cover a short hour shift will not be assigned a mandatory short notice call shift in the same month.

H. When on on-call status, the individual will be paid $75.00 per weekday evening shift, from 5:00 p.m. to 8 a.m., and $125.00 per twenty-four hour on-call weekend or holiday shift, from 8:00 a.m. to 8:00 a.m.
I. All hours worked as on-call/call back, including telephone time will be paid at a rate of time and one-half (1.5) regular rate of pay including differentials. The nurse shall be paid one and one-half (1½) times their regular straight time for all call back time.

J. When an on-call after-hours weeknight nurse is called to perform work after 5:00 p.m., the nurse will be paid one and one-half (1½) times their regular straight time rate of pay for all hours worked.

K. This Article is affected only to allow the agreements made above concerning for PRNs on-call requirements. To clarify, there is no expectation or requirement that PRN staff work on-call shifts during weeknights.

ARTICLE 21 – ASSOCIATION AND BARGAINING UNIT REPRESENTATIVES

A. The Association will provide the Employer with a list of those ONA staff members designated as authorized representatives. Each representative shall have reasonable access to the premises of the Employer to conduct Association business and to assist in the processing of grievances under the terms of this Agreement provided, however, the Association representative furnishes advance notice to the Director of Office Operations or designee. Transaction of any business shall be conducted in an appropriate location and shall not interfere with the work of the Employer and its employees.

B. The Association may identify up to three (3) Bargaining Unit representatives intended for the Employer to utilize as primary contacts regarding contract issues. The Association shall notify the Employer Area Vice President of these names of the Bargaining Unit representatives and their successors. Bargaining Unit representatives shall be granted a reasonable amount of time to be excused from work, for which they will not be paid. The Bargaining Unit representative shall notify his/her supervisor prior to the performing of any of the permitted Bargaining Unit activities, the responsible supervisor(s) shall arrange in a timely fashion for a mutually satisfactory time to perform the requested activity.
C. The Employer shall provide a bulletin board at the place of work in a conspicuous place to allow the Association to post materials that relates to the Association’s internal affairs.

D. It is understood that the Employer will meet with the nursing workforce and support staff (when deemed appropriate by mutual agreement), to solicit their experiences and input on process improvements and efficiency.

ARTICLE 22 – ALCOHOL AND SUBSTANCE ABUSE

A. Employer is committed to maintaining a workplace that is safe, healthy, productive and free of drugs and alcohol. Consequently, no employee may possess, use, manufacture or distribute illegal drugs, alcohol, or legal drugs that are obtained, distributed or used illegally in the workplace, including marijuana, whether or not it is otherwise lawful under state law.

B. An employee’s use of legal drugs while working can impose a significant risk to the safety of the employee and others. The use of legally obtained drugs is allowed, except to the extent such use impairs employee’s work performance or has the potential to affect the safety of the employee, co-workers, patients, and others while the employee is working. This provision shall also apply to nurses who possess, use, test positive for or are impaired by marijuana while they are working, whether medical or recreational. Instances where the nurse’s exposure to marijuana was an unavoidable byproduct of a patient visit or other work requirement should be reported immediately by the nurse to his/her supervisor. If there is a federal change regarding the legal status of marijuana the Employer will agree to meet and negotiate with the Association regarding the marijuana provisions in Article 22.

C. The Employer and the Association agree that post-employment drug screening as set forth in the Employer's Drug and Alcohol Screening Policy shall apply to all employees in the bargaining unit. This drug and alcohol screening shall be limited to random, reasonable suspicion and post-accident or safety incident.
ARTICLE 23 – SEPARABILITY

In the event that any provision of this Agreement shall at any time be declared invalid by any Court of competent jurisdiction or through governmental regulation or decree, such decisions shall not invalidate the entire Agreement, it being an express intention of the parties hereto that all other provisions not declared invalid shall remain in full force and effect.

ARTICLE 24 – DRESS CODE

Employees are responsible for determining appropriate and acceptable work attire so long as the attire conveys a professional image that is appropriate and customary for home health nurses. Clothing which is not acceptable includes cut-off jeans or jeans with holes or that are frayed and off the shoulder tops or blouses. Employees will also maintain their hygiene and grooming. As such, hair, including beards and mustaches, should be neatly trimmed. Nails should be of appropriate length to accommodate therapeutic care and efficiency of glove use and heavy perfumes, after-shaves, or colognes should be avoided.

ARTICLE 25 – STRIKES AND LOCKOUTS

It is agreed by the Employer and the Association that the services performed by nurses covered by this Agreement are services essential to the public health, safety and welfare.

The Employer, therefore, agrees that during the term of this Agreement, the Employer shall not cause nor permit any lockout of nurses from their work. In the event a nurse is unable to perform their assigned duties because equipment or facilities are not available due to a strike, work stoppage or slowdown by any other employees, such inability to provide work shall not be deemed a lockout.

The Association, therefore, agrees that neither it, its officers, employees, or nurses covered by this Agreement will encourage, sanction, cause, support or engage in any primary, secondary or sympathy strike (defined to mean an employee’s refusal in concerted action with others to report for duty, or their willful absence from their position, or his/her stoppage of work, or their absence in whole or in part from the full, faithful or proper performance of their duties of employment), provided however,
that if at the expiration of this Agreement, the Employer and the Association have not reached agreement on a renewal, extension or new Agreement, the Association and its officers and nurses covered by the Agreement may engage in any type of strike activity which is not unlawful.

Upon notification, confirmed in writing by the Employer to the Association that certain bargaining unit nurses covered by this Agreement are engaging in activity in violation of this Article, the Association shall, upon receipt of a mailing list, advise such nurses in writing (with a copy to the Employer) that such action is inappropriate. Such notification to nurses covered by this Agreement by the Association shall be made solely at the request of the Employer.

Nurses covered by this Agreement who engage in activity prohibited by this Article will be subject to disciplinary action for misconduct.

ARTICLE 26 – ORIENTATION AND PRECEPTORSHIP

The Employer will maintain a comprehensive orientation and preceptor program. Each newly hired or transferred nurse shall receive sufficient orientation to assure that the nurse is safe to independently practice by demonstrating the competencies required for the nurse’s position and assignment. No nurse shall be given an assignment for which the nurse has not received adequate orientation for the delivery of safe patient care, or the nurse does not feel competent to perform. In the event that a nurse believes that the nurse is being given an inappropriate assignment, the nurse shall discuss the assignment and alternatives with the nurse’s immediate supervisor.

Preceptors are staff members who are asked by their manager or supervisor to orient or act as an instructor for a clinical staff member for a sustained session of 2 hours or more. Preceptorship can include, but is not limited to, review of methods of time management, demonstration of successful incorporation of documentation into workflow, and joint visits to patient homes for skills check off. Preceptorship shall not include limited, routine, or casual assistance provided to other nurses or care center staff.
As the need for preceptors arises, Employer agrees to elicit volunteers. In the event there are no volunteers, Employer, in their sole and reasonable discretion and considering equities, including but not limited to the location of the trainee and the balance of preceptorship assignments may request any nurse to accept an assignment.

A Preceptor has the right to refuse any assignment should the Preceptor reasonably expect that the assignment would cause an unreasonable hardship to the Preceptor and the Preceptor promptly communicates the grounds for refusing the assignment to Employer.

Nurses who qualify as peer mentors and have completed the associated training and are requested by the Employer to serve as preceptors shall receive compensation equal to five dollars and 00/100 ($5.00) per hour for preceptor services provided. Nurses who are requested to serve as Preceptors shall communicate their hours worked as Preceptors to the Director of Operations and shall record in Home Care Home Base (HCHB), if feasible.

ARTICLE 27 – MANAGEMENT RIGHTS

A. The Employer retains all the customary, usual, and exclusive rights, decision making prerogatives, functions and authority connected with or in any way incident to its responsibility to manage the business or any part of it.

B. The terms of this Agreement will prevail over any inconsistent Employer policy. However, unless specifically limited by the terms of this Agreement, the Employer shall control and supervise all operations including, but not limited to, the unilateral right to:

1. Direct and supervise nurses.

2. Hire, promote, transfer, assign and retain nurses.

3. Suspend, discharge, or take other proper disciplinary action against non-introductory nurses for cause, and introductory nurses without cause.
4. Reassign nurses.

5. Relieve nurses from duty because of a lack of work or other proper reasons.

6. Schedule, assign and distribute work.

7. Determine methods, means and personnel by which operations are to be conducted.

8. Determine staffing levels.

9. Determine the need for overtime.

10. Determine type of nursing care delivered while ensuring the nurse has adequate and up to date training per company policy which has been verified and documented. The nurse shall be responsible for taking and completing all assigned training.

11. In the event of emergency or a situation where services must be provided and no nurse within the bargaining unit is available, a supervisor or other qualified non-bargaining unit personnel may provide such services until such time a bargaining unit employee becomes available.

12. Establish work and safety policies, and rules (see Section C below).

The exercise of any management prerogative, function, or right which is not specifically modified by this Agreement is not subject to the grievance procedure, to arbitration, or to bargaining during the term of this Agreement.

C. Employer may from time to time establish, change and/or withdraw such work and safety policies and rules as it deems necessary or appropriate so long as the Employer provides the Association with copies of such policies and rules (or any changes) at least twenty (20) calendar days prior to implementation. Such notice will not be required whenever earlier implementation is mandated by
federal, state, or local legislation or regulations. In such event, Employer shall 
provide as much advance notice as reasonably practical. The Association may 
file a grievance at Step 2 of the Grievance Procedure if it believes any such 
policies, rules or changes are unreasonable, impose a substantial burden on the 
Association’s members or on the Association itself, or are inconsistent with any 
specific provision of this Agreement, but any such grievance must be filed no 
later than twenty-one (21) calendar days from the date the Association’s 
representative received notice from Employer of the change in policy.

ARTICLE 28 – ATTENDANCE

A. When an absence occurs, it will be classified as either planned or unplanned.

1. A planned absence is one that is requested at least forty-eight (48) hours in 
   advance and approved in writing by the employee’s supervisor. Planned 
   absences should be requested as soon as reasonably possible to allow for 
   scheduling changes.

2. An unplanned absence is an employee missing one or more consecutive full 
or partial days of work without advance notice and prior authorization, while a 
tardy is an employee arriving five (5) or more minutes, but less than two-
hours late to work and then being unable to work the number of hours the 
employee was scheduled for. Absences not requested and approved at least 
48 hours in advance will be considered unplanned incidents. An incident will 
be defined as work missed for a consecutive time period between one-half 
(1/2) of a day through three (3) days.

B. If an employee cannot report to work, the employee must notify the 
   Administrator on Call at least one-half (1/2) hours in advance of the scheduled 
   work shift except in an emergency. A message left with the Administrator on 
   Call, left on a voice mail or text message voice message is sufficient. The nurse 
   must notify the supervisor of the reason for the absence and the anticipated 
   return date. In emergencies, if the employee is unable to provide such timely 
   notification, the employee, or designee should do so as soon as possible.
C. Notification must be given to the supervisor for each day of an unplanned incident unless excused from doing so by the supervisor. A physician’s statement may be requested for an illness or injury that exceeds three (3) consecutive workdays. If the illness or injury is expected to have a prolonged duration, employee is expected to initiate a leave of absence under Article 15.

D. Unplanned incidents or tardiness not otherwise excused by the Employer or state, federal, or local law may result in disciplinary action up to and including termination of employment subject to Article 5, Section A and pursuant to progressive discipline.

E. For unplanned incidents – Three (3) unplanned incidents in a ninety- (90) day period warrant possible discipline, but Employer may discipline for two (2) when aggravating factors (e.g. absence was due to employee’s negligence) warrant discipline. If a nurse regularly experiences two (2) unplanned incidents every ninety (90) days, Employer may request information or supporting documentation of the reasons provided for such unplanned absence(s). For tardiness – More than one (1) instance of tardiness in a week, or more than three (3) instances of tardiness in a quarter is considered excessive. A continuous pattern of tardiness may be subject to the disciplinary action up to and including termination.

ARTICLE 29 – CONFIDENTIALITY

A. All Employer records, including but not limited to patient records, personnel files, computer files, electronic mail, policies and procedures, financial and tax records, as well as all other proprietary information, are the exclusive property of the Employer. Employee must maintain strict confidentiality regarding all Employer records and information at all times.

B. Employees are not to access patient identifiable healthcare information unless they have a need to know based on their job assignment.
C. Employees will protect the confidentiality of patients. Communication of information should be limited to necessary parties and in a manner that decreases the opportunity of being overheard.

D. Employees will return all Employer issued equipment to the Director of Operations within five (5) calendar days of their final day of work, including, but not limited to, their employer issued laptop and POC tablet.

ARTICLE 30 – CONFLICT OF INTEREST

All nurses shall be subject to Employer’s Conflict of Interest policy, and such policy shall be acknowledged by new employees at the time of hire and copies shall be available to any nurse upon request. Any changes in such policy during the term of this Agreement shall be subject to Article 27.C.

ARTICLE 31 – DURATION AND TERMINATION OF AGREEMENT

This Agreement shall become effective on April 1, 2021, and shall remain ineffect until March 31, 2024, and from year to year thereafter, unless either party notifies the other of its desire to alter, amend, modify, or terminate.

If either party desires to modify, amend or terminate any of the provisions of this Agreement, it shall give written notice to the other party not less than ninety (90) days in advance of April 1, 2024. This Agreement may be opened by mutual agreement of the parties at any time.

The parties recognize that financial problems may be created for the Employer when contract negotiations extend beyond the expiration date of the Agreement. Therefore, the parties will attempt to complete negotiations of the next contract by the expiration date of this Agreement as it is understood that neither party will expect retroactive increases during the next negotiations.
IN WITNESS WHEREOF the parties have hereunto executed this Agreement effective the 1st day of April 2021.

Oregon Nurses Association

Jammie Treon, RN
ONA

Christina Keeling, RN
ONA

Rebecca Abernathy, RN
ONA

Lana Shurygin
Lana Shurygin, RN
ONA

Desirea Rufino, RN
ONA

Susan Bruce
Susan Bruce,
ONA Labor Representative

Amedisys Oregon, LLC

Sheryl Chapin
Sheryl Chapin,
Director of Operations

Amy Hone
Amy Hone,
SS Area Vice President of Operations

Michelle Gee
Michelle Gee,
Vice President of Operations

Ashton Clabo
Ashton Clabo,
Corporate Counsel

Thomas Whitworth
Thomas Whitworth,
Senior Corporate Counsel
SCHEDULE A – PRODUCTIVITY STANDARDS

Full time nurses shall be required on average 21 to 25 credited visits each week, subject to proration for part-time nurses and grandfathered thirty-two (32) hour nurses. “Credited” visits shall be calculated pursuant to Employer’s Visit Points scale, as provided. In the event of a change by Employer to the Visit Points scale that impacts the Association’s members, Employer shall provide the Association with thirty (30) days’ advance written notice and the Association may request to bargain any such change.

The Employer agrees to take extenuating circumstances into account if productivity standards are not being met. However, the extenuating circumstances must be documented in the nurse’s daily log. This shall not prevent the Employer from requesting other documentation in appropriate circumstances (e.g. if the daily log shows time lost due to a flat tire or other vehicle problem, the Employer may request appropriate documentation of contact with AAA, a tow truck, or some other roadside assistance).
# SCHEDULE B – SALARY SCHEDULE

Cost of Living Adjustment (to be reflected in the schedule, below):

- Effective the first pay period after 4/1/21 – 3.5 percent
- Effective the first pay period after 4/1/22 – 3.5 percent
- Effective the first pay period after 4/1/23 – 3 percent

<table>
<thead>
<tr>
<th>Amedisys Wage Scale</th>
<th>Current</th>
<th>April 3 2021 3.5%</th>
<th>First Pay Period April 2022 3.5%</th>
<th>First Pay Period April 2023 3 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td>39.66</td>
<td>41.05</td>
<td>42.48</td>
<td>43.76</td>
</tr>
<tr>
<td>Step 2</td>
<td>41.08</td>
<td>42.52</td>
<td>44.01</td>
<td>45.33</td>
</tr>
<tr>
<td>Step 3</td>
<td>42.24</td>
<td>43.72</td>
<td>45.25</td>
<td>46.61</td>
</tr>
<tr>
<td>Step 4</td>
<td>43.99</td>
<td>45.53</td>
<td>47.12</td>
<td>48.54</td>
</tr>
<tr>
<td>Step 5</td>
<td>44.43</td>
<td>45.99</td>
<td>47.59</td>
<td>49.02</td>
</tr>
<tr>
<td>Step 6</td>
<td>45.09</td>
<td>46.67</td>
<td>48.30</td>
<td>49.75</td>
</tr>
<tr>
<td>Step 7</td>
<td>46.62</td>
<td>48.25</td>
<td>49.94</td>
<td>51.44</td>
</tr>
<tr>
<td>Step 8</td>
<td>47.06</td>
<td>48.71</td>
<td>50.41</td>
<td>51.92</td>
</tr>
<tr>
<td>Step 9</td>
<td>47.59</td>
<td>49.26</td>
<td>50.98</td>
<td>52.51</td>
</tr>
<tr>
<td>Step 10</td>
<td>48.11</td>
<td>49.79</td>
<td>51.54</td>
<td>53.08</td>
</tr>
<tr>
<td>Step 11</td>
<td>48.63</td>
<td>50.33</td>
<td>52.09</td>
<td>53.66</td>
</tr>
<tr>
<td>Step 12</td>
<td>49.21</td>
<td>50.93</td>
<td>52.71</td>
<td>54.30</td>
</tr>
<tr>
<td>Step 13</td>
<td>49.74</td>
<td>51.48</td>
<td>53.28</td>
<td>54.88</td>
</tr>
<tr>
<td>Step 14</td>
<td>50.28</td>
<td>52.04</td>
<td>53.86</td>
<td>55.48</td>
</tr>
<tr>
<td>Step 15</td>
<td>50.86</td>
<td>52.64</td>
<td>54.48</td>
<td>56.12</td>
</tr>
<tr>
<td>Step 16</td>
<td>51.40</td>
<td>53.20</td>
<td>55.06</td>
<td>56.71</td>
</tr>
<tr>
<td>Step 17</td>
<td>51.93</td>
<td>53.75</td>
<td>55.63</td>
<td>57.30</td>
</tr>
<tr>
<td>Step 18</td>
<td>52.54</td>
<td>54.38</td>
<td>56.28</td>
<td>57.97</td>
</tr>
<tr>
<td>Step 19</td>
<td>53.18</td>
<td>55.04</td>
<td>56.97</td>
<td>58.68</td>
</tr>
<tr>
<td>Step 20</td>
<td>54.21</td>
<td>56.11</td>
<td>58.07</td>
<td>59.81</td>
</tr>
<tr>
<td>Step 21</td>
<td>54.77</td>
<td>56.69</td>
<td>58.67</td>
<td>60.43</td>
</tr>
<tr>
<td>Step 22</td>
<td>55.32</td>
<td>57.26</td>
<td>59.26</td>
<td>61.04</td>
</tr>
<tr>
<td>Step 23</td>
<td>56.14</td>
<td>58.10</td>
<td>60.14</td>
<td>61.94</td>
</tr>
<tr>
<td>Step 24 starting 4/3/2021</td>
<td>56.98</td>
<td>58.98</td>
<td>61.04</td>
<td>62.87</td>
</tr>
<tr>
<td>Step 25 starting 4/3/2021</td>
<td>57.84</td>
<td>59.86</td>
<td>61.96</td>
<td>63.81</td>
</tr>
<tr>
<td>Credited’ Visit Point 25 visits and beyond</td>
<td>Amount of Incentive Bonus, Per Additional “Credited” Visit Point</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$52.50 (No cap)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CONTRACT RECEIPT FORM

(Please fill out neatly and completely.)

Return to Oregon Nurses Association,
18765 SW Boones Ferry Road Ste 200, Tualatin OR 97062-8498
or by Fax 503-293-0013.
Thank you.

Your Name: ____________________________________________________

I certify that I have received a copy of the ONA Collective Bargaining Agreement with Amedisys Oregon, L.L.C., April 1, 2021, until March 31, 2024.

Signature: ______________________________________________________

Today’s Date: ___________________________________________________

Your Mailing Address: ____________________________________________

Home Phone: ___________________________ Work Phone: ________________

Email: ________________________________

Unit: __________________________________________________________________

Shift: __________________________________________________________________