We Propose Better Insurance and Pensions for Nurses

Following the lead of our brother and sister nurses at Providence Portland Medical Center (PPMC) we proposed better health insurance and pension benefits for nurses at Providence Home Care Services (PHCS) at our first negotiations meeting with administration Oct. 24. Our current contract expires at the end of the year. While our bargaining survey results have not been finalized, we’ve heard from some nurses at PHCS and at other Providence facilities that they’re struggling with the high out-of-pocket costs in our current medical benefits plan, and we’ve heard the same thing from many of you personally.

Specifically, we proposed that Providence increase the amount of money they contribute to our health reimbursement account (HRA) or...

(Continued on page 2)
We Propose Better Insurance and Pensions for Nurses  (continued from page 1)

health savings account (HSA) by $450 per year for an individual, and by $700 per year for those covering dependents.

**We think this is fair.** Under this arrangement, nurses would still pay up to $1,850 per year in out-of-pocket expenses, as well as co-pays for medical visits and prescription drugs, plus our share of the monthly premium.

We’re concerned that a non-profit health services company with nearly $6 billion in unrestricted cash reserves would continue to provide outside customers a better deal on insurance than they provide to their own employees. Bus drivers with the Amalgamated Transit Union, classified school employees and rural teachers at Oregon Education Association and Oregon School Employees Association, Service Employees International Union (SEIU) 503 members who are state employees, and other groups on those plans all get a better deal from Providence Health Plans.

We also know that some of our nurses who have provided significant service to Providence would like to retire but haven’t built up the kind of retirement benefits that would allow them to do so. We’d like to make it easier for all of our nurses to retire when the time is right for them.

We also proposed that Providence improve our retirement plan by shortening the length of time it takes to get to the higher contribution rate levels in the Service Plan. Under the current Service Plan, Providence contributes an amount equal to 3% of each nurse’s earnings into a retirement fund. That amount increases to 5% after 10 years and to 6% after 15 years. We agreed with nurses at PPMC that this level of funding would not provide a reliable post-employment income for nurse, given the volatility of the stock market and rising cost of health care. We proposed that nurses begin to receive 5% after 5 years and 6% after 10 years.

**Service Plan Retirement Contribution Rates**

<table>
<thead>
<tr>
<th>Current</th>
<th>Proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-9 years = 3%</td>
<td>0-4 years = 3%</td>
</tr>
<tr>
<td>10-15 years = 5%</td>
<td>5-9 years = 5%</td>
</tr>
<tr>
<td>Over 15 years = 6%</td>
<td>Over 10 years = 6%</td>
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</tbody>
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To see all of the proposals made by our ONA/PHHH bargaining team, [click here.](#)

**Nurse Survey Comments**

“It’s not the cost per pay period that bothers me, it’s the cost of actual care that ends up being ridiculous. We need better coverage with less out of pocket costs, especially when we’re going to our own Providence hospitals. Our current benefits package is shameful.”

“We are health care providers and we should have the very best insurance coverage since we work with people that are extremely ill.”

**TAKE THE BARGAINING SURVEY**

Click here to take our nurse bargaining survey. It takes about 30 minutes to complete.
Nurse Practitioners of Oregon Presents: The Invisible Patients

Date: 11/16/2016  Time: 6:30 p.m.
Location: ONA Office, Tualatin, Oregon

The Invisible Patients is documentary film about life at the edges of the healthcare system. The Invisible Patients pulls back the curtain on a hidden population of nearly 5 million homebound and home-limited individuals who are unable to access the healthcare system due to a combination of functional impairment, chronic illness and poverty. An official selection at the 2016 Heartland Film Festival and Cucolorus Film Festival, and winner of the Audience Choice Award at the 2016 Indy Film Fest, this movie is of special interest to home health and hospice nurses. “The Invisible Patients is a powerful film that brings into the light challenges faced by the frail homebound and the heroic work they, their families, and health care providers perform to preserve their humanity.” Bruce Leff, MD, Professor of Medicine, Johns Hopkins University School of Medicine

This is a free screening and an opportunity for ONA/PHHH nurses to meet, socialize and see a great film documenting many of the serious health care issues our patients face every day.

Productivity and Caseloads

We made important proposals designed to make caseloads and productivity requirements realistic at PHCS. We’ve heard from some of you that large caseloads make it impossible to do anything more than put out fires for our patients and important aspects of caregiving, such as patient and family education, hygiene, and psychosocial support sometimes are overlooked. Some nurses tell us they work overtime, or even off the clock to complete rafts of paperwork related to caring for so many patients. We made proposals at the bargaining table designed to address these issues.

First, we proposed caseload limits for nurses. The limits would be prorated for part-time nurses. Caseloads will be adjusted for acuity. The professional nursing care committee (PNCC) would develop acuity based caseload limits in conjunction with employer representatives. No full-time nurse would be assigned a caseload of greater than the following:

- home health nurses - 22 patients
- hospice nurses - 12 patients
- mental health nurses – 21 patients
- palliative care nurse – 15 patients

Second, we proposed that the productivity requirements would take into consideration the acuity and complexity of the patients assigned, including the amount of required paperwork and charting, the travel time involved, and any unanticipated events documented by the nurse. PHCS would meet with the PNCC at least monthly to establish a productivity scoring system that accounts for all of these factors.

SAVE THE DATE: 2017 ONA NURSE LOBBY DAY

ONA invites you to join nurses and nursing students from around Oregon to lobby on important nursing and health policy issues and meet with your legislators.

Hundreds of nurses will rally at the Oregon State Capitol in Salem on Tuesday, February 14, 2017 to advocate for our patients and advance Oregon nurses’ practice. It’s vital that we have nurses represented in the key decisions that are made about our priorities and key bills that will come up in the 2017 session.
Oregon Nurses Association (ONA) is proud to endorse Measure 97 this November – the ballot measure that would hold some of the largest corporations accountable to working Oregonians. Measure 97 asks some of Oregon’s largest companies – including the likes of Comcast, Wal-mart and Monsanto -- to invest in Oregon’s communities by changing the tax code to ensure that C-corporations with over $25 million in in-state sales pay their fair share in corporate taxes.

By law, the estimated $6 billion in revenue Measure 97 would generate would be allocated to public education, senior services and health care. Part of this funding will help fill the anticipated gap in Medicaid funding to keep thousands of Oregonians on the Oregon Health Plan, extend care to uninsured children across the state, and help provide Oregonians with health services like school nurses and basic public health programs.

In advocating for our patients, nurses understand that Oregon schools should be fully funded, all seniors should have services to stay safe and independent, and everyone should have access to quality, affordable health care. But none of that can happen when Oregon has the lowest corporate tax rate in the country.

To learn more and get involved in the Yes on 97 campaign, contact ONA’s political organizer Chris at Hewitt@oregonrn.org or by calling 503-293-0011.

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### 2017 ONA Statewide Election Positions Open

**Vice President/ANA Delegate**

**Treasurer**

**Director (4)**

**Cabinet on Health Policy (4)**

**Cabinet on Education (3)**

**Cabinet on Nursing Practice & Research (2)**

**Cabinet on Human Rights & Ethics (1)**

**Cabinet on Economic & General Welfare (1)**

**Nominating Committee (3)**

**ANA Delegate Alternate (2)**

**NFN Delegate (3)**

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January 20, 2017 is the deadline to self-announce candidacy for the statewide ONA elections.

If you are interested in running for one of the open leadership positions, please complete the Talent Bank & Consent to Serve Form here.

For more information, please contact Kathy Gannett at 503-293-0011 or 800-634-3552 ext. 309.