

Jan. 31 Insurance Deadline Approaching

Anyone who currently has or had the PPO health insurance plan any time from 2009 through the present, should have received money owed to them. If you did not, contact Union Representative Judith Serlin.



If you used your PPO plan at any time from 2009 up to and including the present, Prime may owe you money. If this is the case, talk directly with Human Resources Director Barbara Back. Please bring copies of your bills, co-payments made, deductibles, out-of-pocket costs, etc. and she will help facilitate payment of anything owed. **Remember, the deadline to collect money owed you is January 31, 2012.**

Why is this happening? In 2010, our Union won an arbitration concerning the rates, deductibles, co-pays, etc., that Prime charged RNs who chose the PPO health insurance. This is finally being resolved and January 31, 2012 is our final deadline to resolve any issues.

EPO Insurance

If you are having problems getting your claims paid, contact our Union Representative and HR Manager Barbara Back as soon as possible so that your concerns can be addressed immediately. When you speak to a representative from Keenan or other insurance representatives, remember to take notes during your conversation. In the event that your claim is denied, it is always helpful to have written down with whom you spoke, the date and time, and what the representative told you.

Bargaining Update

Our Bargaining Team met with management on January 17 and tentatively agreed to language regarding holidays. The hospital has now agreed to exchange President's day for the day after Thanksgiving. Instead of receiving \$3 an hour, RNs will be paid the premium rate of time and one half.

Our Union also addressed longstanding concerns about Floating and IHR shifts and are close to settling our differences with management. Our Union is continuing to address concerns, most notably floating to the ER – the Critical Care float cluster – and basic issues of fairness concerning floating and IHR shifts. We have proposed that an IHR RN can not cause a regularly scheduled RN to float.

The good news is that the hospital has agreed that all other floating will be on a voluntary basis except in an emergency. Better still, the hospital has heard the concerns of ICU RNs and proposed the following language: "RNs who volunteer to float will be oriented to the unit to which she/he is floating and shall meet theoretical and clinical competencies. RNs who float within their cluster shall be assigned to the Unit in which they are orientating for a consecutive period of four weeks. Additional orientation shall be determined by feedback given by peers and the orientee to the Director. Downtime during the Rapid Response assignment shall be spent in additional orientation to the assigned unit."

The hospital also agreed to our proposal that RNs working extra shifts will not bump IHR shifts unless an RN has signed up a minimum of 24 hours in advance of the start of a shift.