



A Manager's Guide to the 2015 National Agreement

Dennis Dabney, Senior VP, National Labor Relations and Office of Labor Management Partnership

Deanna Dudley, Executive Director, National Labor Relations, Strategy

Henry Diaz, Executive Director, National Labor Relations, Operations

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The Power of Partnership

Welcome



Dennis Dabney,
Senior VP, National
Labor Relations and
Office of Labor
Management
Partnership



Deanna Dudley,
Executive Director,
National Labor
Relations, Strategy



Henry Diaz,
Executive
Director,
National Labor
Relations,
Operations



Penelope Whitney,
Director,
Labor Management
Partnership
Communications

Today's Agenda

- Bargaining goals
- Key dates and deliverables
- Benefits and economics
- Operations and partnership
- Work of the future
- Total health and workplace safety
- Where we go from here
- For more information

Bargaining Goals

We entered bargaining with a few key goals:

- Retain basics of 2012 National Agreement
- Minimize future liabilities
- Increase flexibility in partnership
- Prepare the organization for change
- Prepare the workforce for the future
- Enhance workplace health and safety



Interest-based bargaining works

“I love how this process works. We negotiate and still come out with great personal and working relationships. I tell people, ‘This is what it truly means to be in partnership. I get it now.’”

– Casper Yu, director of Dental Sales and Marketing, Northwest



Selected Timelines

- National Agreement effective dates: Oct. 1, 2015 – Sept. 30, 2018
- Local collective bargaining agreements roll over three years from their current expiration dates
- Wage and benefit increases take effect: Oct. 1, 2015
- Joint guidelines and policies for flu vaccination: Oct. 1, 2015
- Updated UBT targets and assessment process: Jan. 1, 2016
- Changes to Total Health Incentive Plan: Jan. 1, 2016

Across-the-board wage increases

	OCT. 1, 2015	OCT. 1, 2016	OCT. 1, 2017	SEPT. 1, 2018
ROCs	+2%	+2%	+2%	+1%
California	+3%	+3%	+4%	n/a



Active employee benefit changes include:

- Co-pays for ER visits (\$50 in California and Northwest; \$100 all other regions)
- Agreement to study pensions over life of the contract
- Dental maximum increased to \$1,500 per year
- Lifetime orthodontia increased to \$1,500 (per child)
- Life insurance increased to \$50,000



Retiree medical benefits: A long-term solution

- Plan provides retirement benefits while reducing future liabilities
- Future retirees and their spouses will enroll in a KP Senior Advantage individual plan, and KP will provide premium subsidies
- Health Reimbursement Accounts will cover most out-of-pocket expenses
- Changes for California retirees take effect no sooner than 2028; changes for ROC retirees effective 2017
- Permanent structure agreed to for post-retiree medical benefits

Operations and Partnership



“Day-to-day changes in our medical centers are a fact of life. We're working together to be able to respond, and ensure the quality of care, the work experience and the Kaiser brand.”

– Ron Groepper, Senior VP/Area Manager,
San Francisco Medical Center

Flexibility

- Joint commitment to increase flexibility in partnership to meet patient needs
- Regional LMP Council subgroups to work on flexibility-related issues
- Issues to be taken to LMP Executive Committee as needed





Raising the bar on partnership performance

- New UBT performance goals and assessment process
- In-person UBT assessments to ensure accurate ratings
- Scorecard to measure partnership performance at the facility and regional level
- Partnership structures extended to Shared Services and national functions
- UBTs of Future program to pilot new team models

Year	Level 4 & 5 UBTs
2016	75 percent
2017	80 percent
2018	85 percent
2019	87 percent

New dispute resolution process to address issues more quickly, at the lowest appropriate level



“To prepare our workforce for the future, we need to align staffing with current care delivery transformation, innovation and new technologies that meet the evolving needs of our members.”

- Zeth Ajemian, director of Workforce Planning and Development for Southern California and Hawaii



More resources for worker training

- Contributions to Ben Hudnall Trust Fund and SEIU Joint Employer Education Fund increased 33 percent (from 0.3 percent to 0.4 percent of gross annual payroll of participating employees)
- Additional \$1 million per year to each fund to support and train employees going through redeployment
- Tuition reimbursement raised to \$3,000 per year, to assist workers who have had to put up money in advance



Remove barriers to career development and mobility



- Regions will work with unions to identify training opportunities to help employees meet minimum experience requirements
- Collaborative, transparent redeployment process
- Preceptor programs and mentorships
- Joint system to capture core competencies, skills, education, licensure, certification and work experience

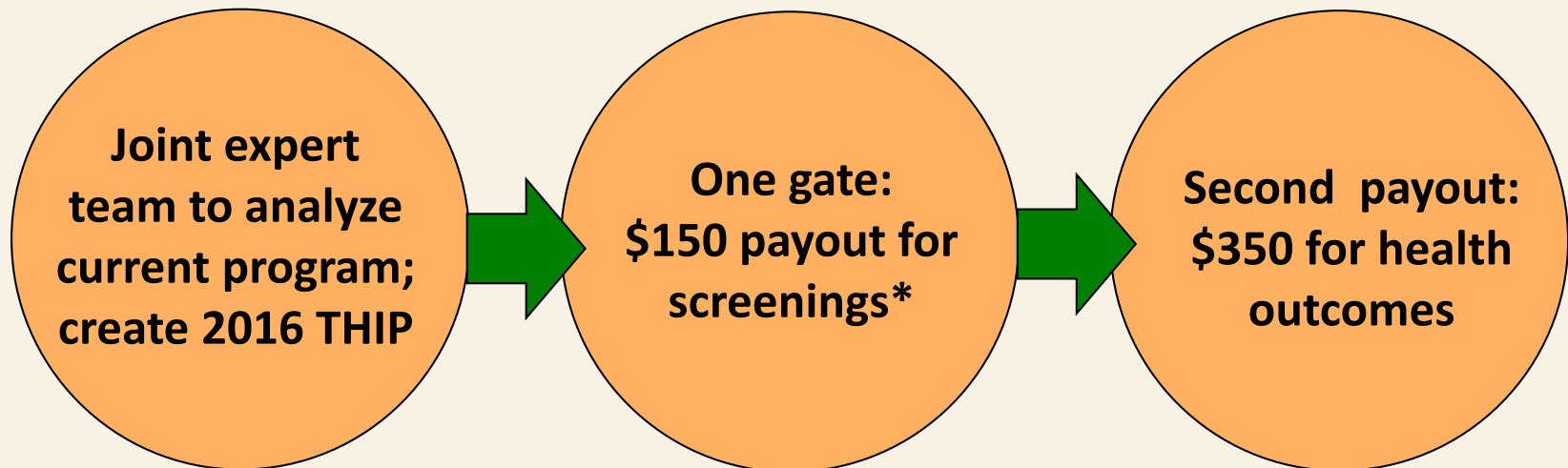
Total Health and Workplace Safety

“We can’t provide quality, affordable care to our members and communities unless we first provide a safe and respectful environment that promotes the collective health of our workforce.”

– Kathy Gerwig, VP, employee safety, health and wellness



Total Health Incentive Plan



*Total Health Assessment (THA) being phased out starting in 2016. Biometric screenings to include BMI, blood pressure, cancer screenings, smoking



Reduce workplace injuries and violence

- Assess current workplace safety investments and guidelines for regional and local implementation
- Enhance tracking of safety hazards
- Jointly prepare for emergencies
- Organization-wide workplace violence analysis and prevention efforts
- Evaluate the effectiveness and implementation of the IDM program, with the goal of keeping people working
- Engage unions in Community Benefit programs



Patient Safety: Flu Prevention



As of October 1, 2015, workers required to get seasonal flu vaccine or wear a surgical mask during flu season while working in patient care areas

Where We Go from Here

“We can impact all of KP. We have the chance to make a lasting change—that's what we're here to do.”

– Elizabeth Oyekan, VP, Operations and Quality, Colorado Region



For More Information

Download this webcast's slides, listen to the webcast recording, and learn more about the 2015 National Agreement:

Bargaining2015.org/webcast-whats-new-in-national-agreement/

Learn more about our Labor Management Partnership:

LMPartnership.org

For questions on the National Agreement, or to request a visit by National Labor Relations leaders, please contact:

Laurie.Spoon@kp.org