



Collective Bargaining Agreement

Between

Maimonides Medical Center

Committee of Interns and Residents/SEIU

November 1st 2025 – October 31st, 2028

Committee of Interns and Residents (CIR)

National Affiliate of Service Employees International Union (SEIU)

The Committee of Interns and Residents/SEIU (CIR/SEIU) represents over 40,000 resident physicians in New York, New Jersey, Washington D.C., Florida, Massachusetts, California, New Mexico, Illinois, Vermont, Pennsylvania, Washington, Rhode Island, Delaware, Minneapolis Collective bargaining agreements covering both public and private sector hospitals.

Founded in 1957, CIR/SEIU is affiliated with the Service Employees International Union (SEIU), a 2.1-million-member union in the U.S., Puerto Rico and Canada including 1,000,000 members in the healthcare field.

This collective bargaining agreement, negotiated by CIR/SEIU members at Maimonides Medical Center, provides for salaries, leave time, a due process procedure in disciplinary cases, a grievance procedure, and other issues of concern to Housestaff.

Know your rights and benefits – read your CIR contract!

Committee of Interns and Residents/SEIU

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Maimonides CBA November 1, 2025 – October 31, 2028

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Article 1:

Recognition

The Medical Center recognizes the CIR/SEIU as the exclusive bargaining representative for the full time and regular part-time interns, residents, chief residents and fellows employed by Maimonides Medical Center at its facilities at 4802 Tenth Avenue, Brooklyn, N.Y., excluding all other employees including guards and supervisors as defined in Section (11) of the Act.

Article 2:

Salaries

1. The appointment of a House Staff Officer shall be based on the House Staff Officer's appropriate Post Graduate Year (hereinafter "PGY"), which shall be determined as follows:

(a) A House Staff Officer who has not completed at least one year of service in an ACGME-ADA-AOA-APMA accredited training program shall be placed at the PGY-1 level.

(b) A House Staff Officer who has completed one or more years of service in an ACGME-ADA-AOA-APMA accredited training program shall be placed at the PGY level which equals the number of such years of service plus one (e.g. a House Staff Officer who has completed two years of service in such training program shall be placed at a PGY-3). A House Staff Officer required to spend a prerequisite period of service in an ACGME-ADA-AOA-APMA training program in a specialty other than that in which the House Staff Officer is serving shall be classified on the basis of cumulative years of such service, up to the required prerequisite number of years.

(c) In the event a House Staff Officer changes his/her specialty, he/she shall receive a maximum credit of two years for prior service in a Maimonides residency program.

2. A year of service in a training program as herein referred to shall mean a year of service in a training program that has been certified as having been satisfactorily completed by the appropriate Hospital authority.

3. A House Staff Officer who, during the term of this Agreement, successfully completes his/her services for a year in a Maimonides residency program and is reappointed to serve for an additional year shall be advanced to the next higher PGY.

4. Effective **November 1, 2025**, each House Staff Officer shall receive a **4%** increase and PGY base rates shall be adjusted accordingly

Effective **November 1, 2026** each House Staff Officer shall receive a **4%** increase and PGY base rates shall be adjusted accordingly

Effective **November 1, 2027**, each House Staff Officer shall receive a **4%** increase and PGY base rates shall be adjusted accordingly

	11/1/24	11/1/25	11/1/26	11/1/27
PGY Year	Salary	4%	4%	4%
1	\$83,089.79	\$86,413.38	\$89,869.92	\$93,464.71
2	\$88,970.50	\$92,529.32	\$96,230.49	\$100,079.71
3	\$93,696.04	\$97,443.88	\$101,341.64	\$105,395.30
4	\$96,666.16	\$100,532.81	\$104,554.12	\$108,736.28
5	\$100,090.03	\$104,093.63	\$108,257.38	\$112,587.67
6	\$102,060.99	\$106,143.43	\$110,389.17	\$114,804.73
7	\$104,326.10	\$108,499.14	\$112,839.11	\$117,352.67
8	\$106,574.54	\$110,837.52	\$115,271.02	\$119,881.86
9	\$108,895.62	\$113,251.44	\$117,781.50	\$122,492.76
10	\$111,228.61	\$115,677.75	\$120,304.86	\$125,117.06

5. Effective **November 1, 2025**, the Chief Resident differential shall increase to **\$5,000**

6. The parties recognize that they have shared interests in ensuring effectiveness and efficiency in the delivery of patient care, meeting and exceeding ACGME regulations and in improving clinical outcomes and patient satisfaction. The parties also recognize the important role that residents play in many of the processes that contribute to these shared interests. Therefore, the parties agree to an incentive program to meet the needs of improving medical education and patient care at Maimonides Hospital.

The Hospital will contribute an aggregate of \$180,000 for the term of the CBA to be used by the Hospital's Resident Quality Council to assist in the engagement of House Staff Officers in the work of the Council relating to ACGME CLER and/or Hospital wide Quality and Safety priorities. The Council will make detailed written proposal(s) as to how funds will be utilized and the hospital leadership and CIR must jointly approve the intended use of the funds. CIR residents from each department of the hospital will be given the opportunity to submit project proposals to this committee.

The Hospital will fund a Fellowship position to focus on hospital based clinical and administrative issues, ACGME CLER priorities, systems based practice, and performance improvement. The position will assist with the achievement of the above- mentioned goals. The fellowship will be named, "Maimonides/CIR Fellow for Quality Improvement and Patient Safety."

The Hospital will dedicate current staff resources to assist with the achievement of the above-mentioned goals.

Effective 7/1/26 The Hospital shall allocate twenty thousand dollars (\$20,000) annually to support Resident Quality Council initiatives. The Resident Quality Council will make detailed proposals as to how the funds will be utilized and Hospital leadership and CIR must jointly approve the use of the funds.

Requests shall be submitted to the Designated Institutional Officer and/or Graduate Medical Education Office for approval. Requests shall not be unreasonably denied.

Article 3:

Health Insurance and Legal Benefits

1. The Employer shall make monthly contributions for the purpose of providing health and welfare benefits for each House Staff Officer employed within the CIR/SEIU bargaining unit and their eligible dependents to the Voluntary Hospitals House Staff Benefits Plan (VHHSBP) on the first day of each month. The contributions shall be made for the purpose of providing each House Staff Officer and their eligible dependents with hospital, medical, major medical, dental, life (participant and spouse only) dismemberment (participant only), disability (participant only) coverage and legal services (through the CIR Legal Services Plan) and any other benefit as defined in the Summary Plan Description to participants in the VHHSBP, and the VHHSBP shall thereupon provide such benefits ("the covered benefits").
2. Effective on the dates noted below, the Employer shall contribute the specified monthly sums to the VHHSBP for each House Staff Officer for the purpose of providing the covered benefits to the House Staff Officer and their eligible dependents in the VHHSBP.

Effective Date	Applicable Monthly Contribution Rate
1/1/2026	\$1,470.00
1/1/2027	\$1,568.00
1/1/2028	\$1,667.00

In addition to the foregoing, the Trustees of VHHSBP will conduct on-going reviews of the financial status of the Plan. The Trustees of the VHHSBP shall be empowered to increase the monthly contribution rate to the VHHSBP, if necessary, in order to maintain current covered benefits and an appropriate reserve. The Trustees of the VHHSBP shall have the authority to determine whether and to what extent an increase in the monthly contribution rate is necessary to maintain current covered benefits and an appropriate

reserve in accordance with the Trust Agreement and applicable laws.

3. The dependents of the participant shall be as defined in the VHHSBP Summary Plan Description.

4. The Employer shall furnish VHHSBP with lists of incoming and terminating residents prior to June 1 of each Plan Year. In addition, the employer shall also furnish VHHSBP with a full list of all House Staff Officers employed by the hospital twice a year (on or before August 1 and February 1 of each year). The Plan Year is the period from July 1 through June 30. For residents starting or terminating at times other than the Plan Year, lists of newly hired or terminated residents are to be made to VHHSBP within 30 days from the date the resident is added to the payroll or terminated. The Plan shall have the right to audit the employment records of the Employer, upon reasonable notice, to confirm any information necessary for the proper administration of the Plan and to ensure that the Employer is remitting the appropriate contributions.

5. The Employer shall provide these lists (cited above in paragraph 4) to CIR in an Excel-compatible spreadsheet, either via email or on a disk. The excel spreadsheet template shall be as follows:

Last Name (family name)

First Name

Middle Name (if any)

Social Security #

Current PGY Level

Date of Hire

Department

Street Address (multiple lines separated by semicolon ";")

City

State

Zip Code

Email

Home Phone #

Member/Agency Fee Payer (M for member, A for agency fee payer)

Family status (S for single and F for family)

Date of Birth

The list should include a total of all bargaining unit members.

6. The Employer shall make monthly payments to the VHHSBP on the first of the month for which contributions are due. In the event that any required contributions are not paid when due, the Fund shall be entitled to recover interest on such unpaid contributions at the rate of 18% per annum as well as such other amounts and remedies as are available to employee benefit funds under the Employee Retirement Income Security Act, including the recovery of liquidated damages equal to 20% of unpaid contributions.

Effective January 1, 2017, for any VHHSBP benefits that require a tax on imputed income to be withheld, the Medical Center shall apply these tax withholdings on a bi-weekly basis

Article 4:

Meals

Each CIR House Staff Officer employed by the Hospital shall receive **\$1,750** per year loaded on a meal card at the commencement of each academic year effective July 1, 2026. The parties agree to meet in labor-management meetings to discuss any issues in the implementation of this system, including but not limited to the expansion of outside vendors.

Article 5:

Parking and Transportation

1. All House Staff Officers shall be entitled to the same parking privileges and rates afforded to all other employees excluding administrators and managers of the hospital while working at all hospital facilities. The hospital shall provide notice of any changes to parking privileges and rates that affect House Staff Officers to CIR/SEIU 60 days prior to implementation.
2. The MMC shall provide, at the Hospital's discretion and expense, shuttle service between the MMC and the various facilities used by the House Staff Officers for outside rotations
3. The MMC shall provide access to a designated **rideshare or** car service account **including but not limited to Lyft, Uber, or comparable services** for use by House Staff officers for the following transportation:
 - a. When the House Staff Officer is required by MMC to return to MMC from a required rotation site and shuttle service is unavailable (either within a reasonable timeframe or at all).
 - b. Transportation after 7:30 PM from an MMC clinic to his or her place of residence
 - c. Transportation overnight between the hours of 10:00PM and 5:30 AM from MMC or required rotation site to his or her place of residence
 - d. **Each department shall maintain a written fatigue mitigation policy that includes a clear process for House Staff Officers to access appropriate transportation following twenty four hour shifts, extended shifts, overnight work, or other fatigue mitigation circumstances recognized by departmental policy or ACGME requirements upon discussion with their faculty with no undue burden to the House Staff Officer.**
 - e. **Requests for fatigue mitigation transportation shall not be unreasonably denied.**

4. House Staff Officers must make reasonable efforts to use other appropriate means of transportation that are available to them and, make efforts to use car service efficiently (e.g. ride sharing, use of car pools etc.) and qualifying transportation shall not exceed \$25 per trip.
5. The MMC will reimburse the House Staff Officers on required rotations for parking expenses at MMC when the House Staff Officer is required by MMC to return to MMC during the course of a regular workday or overnight call. Requests for reimbursement must be submitted to the MMC, with a paid receipt and written explanation, within thirty (30) days of the date of the receipt. The House Staff Officer shall receive such reimbursement within a reasonable period of time.
7. All HSOs who use the parking garage shall receive 12 parking vouchers per month.
8. Parking and transportation problems will be discussed at the labor management committee.

Article 6:

Medical Educational Benefits

1. Request for time off with pay to a maximum of three (3) days from July 1st to June 30th, to take Board Reviews, licensure, specialty, immigration or other examinations related to the training program, will not be unreasonably denied by the respective Chairperson or designee.
2. Effective July 1, 2026, the Hospital shall make monthly contributions of one hundred and five (\$146.00) dollars for the purpose of providing each HSO with a professional education allowance to the Voluntary Hospitals House Staff Benefits Plan of the Committee of Interns and Residents ("VHHSBP"). The monthly contribution shall be due to the VHHSBP within 30 days of the end of each month for which contributions are due. The VHHSBP will provide a \$1750 educational benefit per eligible HSO per VHHSBP plan year, which is July 1 to June 30. \$250 of the benefit shall be intended to cover a portion of personal cell phone usage for work related purposes and it is understood that House Staff Officers will follow all appropriate policies around appropriate use of patient data and HIPAA, including associated security requirements. Any unused portion of an individual HSO's fund balance will be rolled over to the following plan year for house staff officers continuing their training at the Sponsor. The hospital shall not cite this provision as a justification for the reduction of any benefit provided by the Hospital or any benefit provided by an individual residency program. Individual departments shall not be precluded from offering money for conferences beyond what is provided through PEB.

3. All House Staff Officers including Fellows in their final year will be entitled to receive for educational conference and/or Board Review, leave time of up to three (3) additional paid days subject to the approval of the department. It is understood that the House Staff Officers including Fellows taking educational and or Board Review leave time shall be responsible for arranging coverage with the approval of the Chairperson or its designee. Leave time for educational conference and/or Board Reviews shall not be unreasonably denied.
4. Individual departments in their discretion may provide greater benefits than those provided above.
5. **Nothing in this Article shall be interpreted to reduce or limit any educational benefit currently provided by a department or program.**

Article 7:

Leave Time

1. Sick Leave

(a) Effective the first day of employment and on each annual anniversary date thereafter, each House Staff Officer shall be credited with twelve (12) paid sick days (which may be accumulated to forty-eight (48) paid days). If a House Staff Officer's appointment includes a portion of a year, then the sick leave shall be pro-rated for that portion of the year.

Consistent with NY state law, sick days may be used for medical and mental health appointments. For necessary medical and mental health appointments, House Staff Officers will make their best effort to provide two weeks' notice to their program (excluding emergency sick visits). Upon receiving written notice, their program will find coverage. Such requests will not be unreasonably denied.

(b) House Staff Officers who have been employed for at least three months shall be eligible for medical leave without pay to a maximum of six (6) months. The House Staff Officer's Program Director or designee shall approve medical leave. Such approval shall not be unreasonably denied.

(c) House Staff Officers will not be required to make up on-calls missed while on sick leave.

(d) At no time shall House Staff Officers be required to make up contractually guaranteed sick time unless necessitated by appropriate specialty board to meet graduation requirements.

(e) **Such approval shall not be unreasonably denied.**

2. Bereavement Leave

(a) In the event of death of a House Staff Officer's mother, father, spouse, domestic partner, brother, sister, child, or other member of the House Staff Officer's immediate family, the House Staff Officer is entitled to receive five (5) paid working days leave without loss of pay for the purpose of attending the funeral services or arranging for burial.

(b) In the event of death of a House Staff Officer's grandparent, the House Staff Officer is entitled to receive three (3) paid working days leave without loss of pay for the purpose of attending the funeral services or arranging for burial.

(c) Upon request and with the approval of his or her Program Director or designee, a House Staff Officer shall be eligible to receive up to two additional weeks of unpaid leave, including the use of his/her accrued but unused paid leave (vacation, holiday, personal) if available, in the event travel is required out of the country or a minimum of 500 miles. Length of leave will be agreed prior to House Staff Officer's departure. Days for bereavement leave shall be used consecutively and proof of death and or relationship may be required.

(d) House Staff Officers will not be required to make up on-calls missed while on bereavement leave.

3. Personal Days

Effective with the first day of employment and on each annual anniversary date thereafter, each House Staff Officer shall be credited with two (2) personal day off with pay. The House Staff Officer's Program Director or designee shall approve personal days. Such approval shall not be unreasonably denied. Personal days cannot be accrued from year to year.

4. Miscellaneous Leave Time

(a) House Staff Officers are eligible for unpaid personal leave for a period of up to six (6) months. The House Staff Officer's Chairperson or designee must approve the unpaid personal leave; such approval shall not be unreasonably denied.

(b) House Staff Officers are eligible for unpaid educational leave for a period of up to six (6) months. The House Staff Officer's Chairperson or designee must approve the unpaid educational leave; such approval shall not be unreasonably denied.

(c) House Staff Officer shall be eligible for military leave in accordance with the applicable Law.

(d) Release time shall be granted for periodic labor-management meetings and up to six (6) CIR Representatives to attend the annual CIR convention provided it does not interfere with the number of training days needed to graduate.

Residents utilizing Convention leave shall provide reasonable advance notice and cooperate with departments regarding coverage arrangements. Approval shall not be unreasonably denied.

5. Family and Medical Leave

Consistent with the Family and Medical Leave Act of 1993, eligible House Staff Officers upon at least thirty (30) calendar days notice (or if not possible, as soon as practical) may be entitled to up to twelve (12) weeks of unpaid medical leave for a serious health condition, or the serious health condition of said person's spouse, parent, legal guardian, or child, and up to twelve (12) weeks of unpaid leave for the birth or care of a child under the age of one (1) year. The parties shall be subject to all the rights and obligations contained in the Family and Medical Leave Act. House Staff Officer returning from family leave may be required to complete missed rotations in order to become board-eligible. Should a department require a House Staff Officer to complete missed rotations, the Medical Center shall compensate the House Staff Officer at his/her current PGY level and provide malpractice coverage and all other applicable hospital benefits. House Staff Officers may elect to or the Medical Center may require the House Staff Officer to utilize any accrued but unused sick days, vacation days, holidays and personal days as part of this twelve-week leave. In addition to the Family Medical Leave Benefits described above the following shall apply concurrently if applicable:

Maternity Leave and Accommodation: Upon presentation of proper documentation, House Staff Officers shall be eligible for up to six months unpaid maternity leave.

Upon request, a House Staff Officer who is pregnant shall be assigned electives and rotations appropriate to their condition, to the extent possible, and relieved of a reasonable and limited amount of night call and exposure to diseases, radiation, and chemicals, which may be harmful to the fetus and mother, and be allowed to schedule personal medical visits as appropriate. Such requested changes shall be in conformity with the rules of the House Staff Officer's specialty board and within the constraints of the program.

New Baby Care Leave: A House Staff Officer after sixty (60) days employment will be eligible to receive a one (1) day paid leave of absence at the employee's regular compensation rate, in the event of the birth of a child to his/her spouse or domestic partner or the adoption of an infant child by their family. Proof of birth or adoption may be requested.

6. Marriage Leave: A House Staff Officer shall be paid his/her regular pay for three (3) working days absence for marriage leave provided that reasonable notice is given and that the days are taken consecutively and at the time of marriage. Proof of marriage

may be requested.

7. Holidays

(a) House Staff Officers shall receive twelve (12) holidays off per year with pay. The following days shall be considered holidays with pay:

1. New Year's Day
2. Martin Luther King, Jr. Day
3. President's Day
4. First Day of Passover
5. Memorial Day
6. Juneteenth
7. Independence Day
8. Labor Day
9. First Day of Rosh Hashanah
10. Yom Kippur
11. Thanksgiving Day
12. Christmas Day

Holiday pay date will be defined as the actual calendar day on which the holiday falls.

(b) House Staff Officers scheduled to work on a hospital holiday six (6) hours or more are to receive an alternate day off with pay within one hundred and twenty (120) days, to be taken before or after the worked holiday, or receive a day's pay. The program director will consider the House Staff officer's preference, but whether the House Staff officer receives a day off or a day's pay in lieu of time off shall be at the sole discretion of the hospital. House Staff Officers scheduled to work on a hospital holiday off service or on an out rotation will receive a day's pay. Requests for payment of a day's pay in lieu of an alternate day off must be submitted to Academic Affairs within 120 days of the day worked with appropriate signatures.

(c) The hospital will designate prior to January 1 of each year, the exact date of celebration of each of the above specified holidays.

8. A House Staff Officer taking leave of absence for any reason is to confer with his/her program director about the impact of the leave of absence on satisfying the criteria for completion of the residency program, and is to obtain information relating to access to eligibility for certification by the relevant certifying board. The Program Director is to advise the House Staff Officer of the impact of the leave on his/her completion of the program and eligibility for certification by the relevant certifying board and is to further put said advisement in writing. The House Staff Officer is to review and sign off on the advisement, which is to be placed in his/her file.

9. Paid Family Leave

(a) Eligible employees will be entitled to Paid Family Leave: (i) To care for a family member (child, stepchild, parent, stepparent, parent-in-law, grandparent, grandchild,

spouse or domestic partner) with a “serious health condition.” A “serious health condition” is an illness, injury, impairment, or physical or mental condition that involves inpatient care in a hospital, hospice, or residential health care facility, or continuing treatment or continuing supervision by a health care provider. (ii) To bond with a child during the first twelve (12) months after birth or placement for adoption or foster care. PFL begins after the birth of a child and is not available for prenatal care. or (iii) Because of any qualifying exigency arising from the fact that an employee’s spouse, domestic partner, child or parent is on active duty (or has been notified of an impending call or order to active duty) in the armed forces of the United States.

(b) Leave under the PFL may be taken in consecutive blocks of time or on an intermittent basis (in increments of no less than one day).

(c) Employees are entitled to participate in Paid Family Leave after completing twenty-six (26) consecutive weeks of employment.

(d) Time spent on paid vacation, sick, or personal days shall be counted toward an employee’s eligibility determination. An unpaid leave of absence period does not count toward the minimum work time.

(e) An employee must provide at least 30 days’ notice before leave is to begin if the qualifying reason for leave is foreseeable. When not foreseeable, an employee must provide notice as soon as practicable.

(f) An eligible employee who wishes to take PFL must submit his/her application to the appropriate insurance carrier and comply with applicable certification requirements of the need for the leave. Additional documentation (such as military orders) may also be required, as permitted by law. The Employer will complete the employer portion of the PFL application.

(g) Employees taking PFL on an intermittent basis (e.g., on certain days, as opposed to a consecutive block of time) must provide notice as soon as practicable before each day of intermittent leave (or as otherwise agreed to between the employee and employer.)

(h) If an employee’s application for Paid Family Leave is approved, PFL benefits will be paid by the insurer. The Paid Family Leave law provides for PFL benefits and leave duration to phase in over the next few years as follows:

Effective Date	Maximum Length of PFL	Amount of PFL benefits (% of the employees average weekly wage)	Maximum amount of PFL Benefits Payable (% of the New York average weekly wage)

January 1, 2020	10 weeks	60%	60%
January 1, 2021	12 weeks	67%	67%

Intermittent PFL must be taken in full day increments, as required by law.

If the grounds for an employee's leave under the PFL is to bond with a child during the first twelve (12) months after birth or placement for adoption or foster care, the employee may choose to supplement their PFL with accrued vacation time at a rate of $\frac{1}{3}$ vacation day for each day of Paid Family Leave for up to six weeks, so that the employee receives full pay while on the leave during that period.

The Employer may choose to seek reimbursement from its PFL insurance carrier for the paid leave benefits it provides under its policies during any period of PFL leave, to the extent permitted by applicable law. While on Paid Family Leave, employees will not continue to accrue sick or vacation time.

Relationship with Other Types of Leave

If the grounds for an employee's leave under the PFL also qualify for leave under the Family and Medical Leave Act (FMLA) (and the employee's leave is designated as FMLA leave), PFL will run concurrently with designated FMLA leave. Eligible employees must then apply for both PFL and FMLA.

Where PFL and FMLA run concurrently, employees will be required to apply their available paid time off in accordance with the Employer's FMLA policy and applicable law.

Employees may not receive short term disability and Paid Family Leave benefits at the same time. Employee may not take more than twenty-six (26) combined weeks of short term disability and Paid Family Leave in a fifty-two (52) week period.

If an employee is unable to work and qualify for Worker's Compensation Benefits, the employee is not eligible to receive Paid Family Leave benefits at the same time the employee is receiving Workers' Compensation benefits.

- (i) In accordance with the Family Paid Leave Law, PFL benefits are funded through payroll deductions at a prescribed amount from each eligible employee.
- (j) If an employee works in a state where the Family Paid Leave Law is greater than the one defined above, that benefit will be given to that employee.

In order to comply with ACGME guidelines, up to six weeks paid leave for medical, parental and caregiver leave shall run concurrent with other periods of leave. At the

conclusion of the leave, at least one week of PTO shall be preserved.

Article 8:

Vacation

1. The annual vacation allowance for House Staff Officers employed for a twelve (12) month period shall be four (4) weeks effective the start of his/her residency year. House Staff Officers may be permitted to split vacation time or use it as a whole unit subject to the approval of his/her Program Director, or designee. The Medical Center will reasonably honor scheduling requests, based on operational needs.
2. When, due to the needs of a given service, it is necessary to limit vacations, they may be limited to the extent of one week only per House Staff Officer at the discretion of his/her Program Director or designee and pay for lost vacation shall be granted. When appropriate Specialty Boards require lesser vacation time, House Staff Officers will be paid for lost vacation time by the end of the academic year.
3. Vacations must be taken during the residency year that they are earned.

Article 9:

Uniforms and Laundry

1. The Medical Center shall provide free long laboratory coats and scrubs to House Staff Officers and laundering free of charge.
2. The Medical Center shall provide all House Staff Officers access to clean long lab coats and scrubs twenty-four (24) hours a day, seven (7) days a week.

Article 10:

Dues

1. It shall be a condition of employment that all House Staff Officers covered by this Agreement who are members of the Union in good standing on the effective date of this Agreement shall remain members in good standing and those who are not members on the effective date of this Agreement shall on or by the 31st day following the effective date of this Agreement, whichever may be later, become and remain members in good standing of the Union. It shall also be a condition of employment that all House Staff Officers covered by this Agreement and hired on or after its effective date or the execution thereof, whichever may be later, shall on or after the 31st day following the

beginning of such employment become and remain members in good standing of the Union. For the purpose of this Agreement, "good standing" shall consist of the payment of periodic dues as uniformly required by the Union as a condition of membership, or pay an agency fee to the Union.

2. No discrimination or reprisal shall be taken against any House Staff Officer by either party based upon membership or non-membership in the CIR/SEIU. Every House Staff Officer shall have the right to determine his/her financial obligation to the CIR/SEIU free of interference, restraint or coercion.

3. CIR/SEIU shall have the right to the check off and transmittal of dues or the appropriate sum equivalent on behalf of each House Staff Officer in the bargaining unit, who has signed a dues check off authorization card, which has been forwarded to the Medical Center. Such sums to be deducted monthly from the paycheck of each House Staff Officer, in such amounts as CIR/SEIU shall establish. The Medical Center agrees to forward such sums by the 20th day of the month after they are collected. It is specifically agreed that the Medical Center assumes no obligation, financial or otherwise arising out of the provisions of this Article, and the CIR/SEIU agrees that it will indemnify and hold the Medical Center harmless for any claims, judgments, actions or proceedings made by any House Staff Officer arising from deductions made by the Medical Center pursuant to this Article. After deductions are remitted to the CIR/SEIU the disposition there of shall be the sole and exclusive obligation and responsibility of CIR/SEIU.

Article 11:

Non-Physician Obligations

1. No House Staff Officer shall be regularly and recurrently assigned to duties not appropriate to a House Staff Officer as the Accreditation Council for Graduate Medical Education (ACGME) and/or the applicable Residency Review Committee (RRC) defines those duties.

2. An annual survey may be conducted by the Medical Center and the Medical Center will provide the CIR/SEIU with a sample of the survey thirty (30) days prior to conducting the survey, and with a summation of the results forty-five (45) days after the Medical Center tabulates the results.

Article 12:

On-Call Rooms

1. The Medical Center shall provide and maintain safe sleep/rest quarters in conformance with ACGME requirements. The Medical Center shall notify the CIR/SEIU of any changes in the location of on-call rooms thirty (30) days prior to the

implementation. On call rooms shall be cleaned daily, including weekends and holidays; furniture shall be cleaned regularly and replaced when in disrepair. Phones, computers, air conditioning and heat shall be in working order. If something is not in working order, it will be a priority of the hospital to fix these things within 48 hours. The Hospital shall provide and post phone numbers for the appropriate person to contact in order to fix such problems.

In the event that on call rooms are unavailable or unusable for more than forty eight (48) hours, the Hospital shall provide reasonable alternative accommodations for affected House Staff Officers and notify CIR of the anticipated timeline for resolution.

The Medical Center will work with the CIR/SEIU to resolve issues around the on-call rooms should they occur. **Disputes regarding compliance with this Article shall be subject to the Grievance and Arbitration procedure. On-call rooms shall remain accessible as needed for patient care and safety. Facilities must meet ACGME standards.**

2. The hospital agrees to make best efforts to provide coffee, tea, juice and healthy snacks (to include fruit, sandwiches, and an assortment of healthy pre-packaged food such as yogurt, breakfast bars, granola bars, cereal) to designated lounge space once daily after 4 PM for House Staff on overnight and call shifts.

3. Reporting, Maintenance, and Enforcement

(a) The Medical Center shall maintain on-call rooms in a clean, safe, secure, and functional condition consistent with ACGME standards.

(b) The Medical Center shall establish and maintain a clear process for House Staff Officers to report problems with on call rooms, including but not limited to issues related to cleanliness, security, temperature, noise, furniture, lighting, plumbing, or general habitability. The Hospital shall post clear contact information for reporting on call room issues.

(c) Reports may be made by a House Staff Officer or by CIR on behalf of House Staff Officers. The Medical Center shall acknowledge receipt of such reports within one (1) business day.

(d) The Medical Center shall make reasonable efforts to correct reported issues promptly, and in no event later than:

(1) Twenty four (24) hours for urgent health, safety, or security issues; and

(2) Five (5) business days for non urgent maintenance or habitability issues, unless circumstances beyond the Medical Center's control require additional time, in which case the Medical Center shall notify CIR of the reason for the delay and the expected timeline for correction.

(e) If an on-call room is unusable due to unresolved health, safety, or habitability issues, the Medical Center shall provide an alternative on-call room or comparable rest space until the issue is resolved.

(f) The Medical Center shall not retaliate against any House Staff Officer for reporting concerns regarding on call rooms.

(g) Disputes regarding compliance with this Article, including failures to address reported issues within the timeframes above, shall be subject to the Grievance and Arbitration procedure.

Article 13:

Library and Computers

1. The MMC shall provide a Medical Library in a convenient location. The library shall generally be open and staffed from 8:00 AM to 9:00 PM Monday through Thursday, and 8:00 AM to 7:00 PM on Fridays. The library shall be opened from 1:00 PM to 5:00 PM on Saturdays and 1:00 PM to 5:00 PM on Sundays. If a House Staff Officer needs access to the Medical Library at other times, for urgent patient care needs the House Staff Officer shall contact a Security Officer who will make the necessary arrangements to open the library and allow the House Staff Officer to remove the material they need or copy in accordance with policy MedLib001. The House Staff Officer will be required to sign the material out.
2. The MMC will endeavor to provide 24-hour on-line Intranet access to a core library of full-text journals, textbooks, and manuals convenient to resident work areas.
3. Residents shall have 24 hour access to working printers strategically located in the MMC.
4. The MMC will endeavor to provide 24-hour intranet access to the Library's database.
5. The MMC shall maintain copy machines in the library and House Staff Officers shall be entitled to a reasonable number of free copies of items available in the medical library in accordance with policy MedLib001.
6. The MMC agrees to discuss additional hours and access issues in labor management committee meetings.

Article 14:

Access to Files

1. All House Staff Officers shall have the right to receive free copies of all documents placed in their files during the term of their appointment if requested, excluding pre-employment references.

2. House Staff Officers shall have the right to review any evaluation with the Program Director, or designee, of his or her program.
3. House Staff Officers shall be notified when any evaluation, complaint or disciplinary notice is placed in their file. House Staff Officers shall have the right to review all materials placed in their file, both by appointment and at regularly or specifically scheduled evaluation or counseling sessions with program faculty. The House Staff Officer may place in his/her file a response, to any file entries or report, within 90 (ninety) days of their being notified of its placement in their file. In the event a House Staff Officer was not notified that a specific document was placed in their file, the hearing officer at any disciplinary hearing shall take such fact into consideration.
4. Written evaluations and/or composite evaluations of House Staff Officers will be performed regularly after each rotation, by an Attending Physician who had direct, contact with the House Staff Officer. Evaluations shall be conducted in a timeframe and format acceptable to the RRC, specialty board or other accredited body and disclosed in advance to the House Staff Officer. A copy of any evaluation will be shown to the House Staff Officer and placed in his/her file within 45 (forty five) days after completion of rotation if possible.
5. Requests for letters of evaluation of a House Staff Officer will not be unreasonably denied by the Program Director or designee.

Article 15:

Labor Management Meetings

1. In the interest of fostering sound labor relations, CIR/SEIU and the Medical Center will form a Labor-Management Committee made up of three (3) members of the House Staff selected by the members of the House Staff and a representative from the CIR/SEIU, and four (4) management representatives. The Labor Management Committee shall meet monthly for the first six (6) months after signing a contract then quarterly or as otherwise mutually agreed to discuss any issues or concerns in any one or more of the following subjects:
 - (a) Training issues.
 - (b) Recommendation of institution policies and procedures that serve to enhance the quality of residential life and promote an outstanding academic experience.
 - (c) Improvement of patient care.

None of the above subjects shall be subject to grievance or arbitration.

2. The goal of the committee is also to resolve issues arising out of the implementation and interpretation of this Agreement, and where possible to avoid or eliminate grievances. The Labor/Management Committee is not intended to replace resolution of problems at the Department level.
3. An agenda for the meeting must be distributed to the members of the Committee at least ten (10) days prior to the scheduled date of the meeting.
4. The Labor/Management Committee will consider possible space within the Medical Center that may be available for a staff lounge for the exclusive use of House Staff Officers. Its recommendation shall be forwarded to the Medical Center's Space Committee.

Article 16:

Grievance Procedure

The purpose of this procedure is to assure prompt, fair and equitable resolution of disputes concerning the implementation and the administration of this agreement by providing a procedure set forth in this Article for adjusting and settling grievances. Notwithstanding this procedure, the parties agree to encourage open communications between House Staff Officers and the Medical Center so that resort to this procedure will not normally be necessary.

1. A grievance shall be defined as a dispute regarding the interpretation or application of the terms of this written Agreement, other than for adverse actions, and the regular and recurrent assignment of House Staff Officers to duties not appropriate for House Staff Officers. Adverse actions shall be appealed pursuant to the procedures set forth in Article 17 (Adverse Action). Any violations of the adverse action procedure set forth in Article 17 are subject to the grievance procedure (Article 16 Grievance Procedure). Grievances may be brought by an individual House Staff Officer with the assistance of the CIR/SEIU, and shall be undertaken as follows:

(a) First Step: The House Staff Officer and CIR/SEIU shall present the grievance in writing with the Program Director or Administrator, or his/her designated representative, who took or failed to take the action which gave rise to the grievance. Grievances must be presented within ten (10) business days after the House Staff Officer knew of the alleged violation leading to the grievance. The Program Director or Administrator, designee, shall give his/her answer in writing to the House Staff Officer and the CIR within seven (7) business days thereafter.

(b) Second Step: If no satisfactory settlement is reached at the First Step, the House Staff Officer may present the grievance in writing to the Vice President- Human Resources or his/her designated representative within seven (7) business days after House Staff Officer receives the First Step answer from the Program Director or designee.

The Vice President for Human Resources or his/her representative will meet with the House Staff Officer and a representative of the CIR/SEIU within ten (10) business days after receipt of the written grievance and shall give his/her answer in writing to the written grievance within seven (7) business days after he/she meets with the House Staff Officer and CIR representative.

(c) Third Step: If any grievance is not satisfactorily resolved in the foregoing procedure, the CIR/SEIU may within thirty (30) calendar days after it receives the Vice President of Human Resources, or his/her representative's answer at the Second Step, the CIR/SEIU may file a notice of arbitration with the American Arbitration Association, under its Voluntary Labor Arbitration Rules and Procedure, with a copy to the Vice President of Human Resources.

2. The award of the arbitrator shall be final and binding upon the Medical Center, the CIR/SEIU, and the House Staff Officers. The arbitrator shall have jurisdiction only over disputes arising out of grievances, as defined above, and shall have no power to add to, subtract from or modify in any way any of the terms of the Agreement. The fees and the expenses of the American Arbitration Association and the arbitrator shall be borne equally by the parties.

3. Failure by the Medical Center to respond within the time limits prescribed shall be deemed a denial of the grievance.

Article 17:

Adverse Action

This procedure shall govern adverse actions that can be taken against House Staff Officers. Adverse Actions are defined as probation, suspensions (with or without pay), terminations, withholding of residency credit for the year, non-promotion, withholding permission to take specialty boards and non-reappointment. Conditional non-renewals are not adverse actions and are not subject to the appeals process.

1. The Medical Center may take adverse action against a House Staff Officer who violates federal, state, or local laws, regulations, accreditation standards or guidelines, Medical Center or Department policies or procedures, the House Staff Officers' contract, or who fails to meet performance standards.

2. Adverse Actions based solely on the House Staff Officer's violation of

MEDRCDS.4 (Incomplete Record and Suspension Procedure) shall not entitle the House Staff Officer to the due process procedure set forth below. In addition, negative performance evaluations and/or Remediation Plans do not entitle the House Staff Officer to the due process procedure set forth below.

3. Notification of any adverse action must be in writing and presented to the House Staff Officer. This notification shall state the reason for the action. The notice will be accompanied with a copy of this Adverse Action procedure so that the House Staff Officer is fully informed of his/her right to appeal. No adverse action shall be taken without good and sufficient reason(s).

4. Within ten (10) calendar days of receipt of such written statement the House Staff Officer may appeal the action to the Senior Vice President of Clinical Integration and Affiliations of the Medical Center by making a written request. The Senior Vice President, or designee, shall meet with the Resident and the CIR representative if requested by the House Staff Officer.

5. The decision of the Senior Vice President, or designee, shall be sent in writing to the House Staff Officer within ten (10) business days of the meeting with the House Staff Officer. In the event the Senior Vice President denies the appeal of the Adverse Action, he/she shall notify the House Staff Officer in writing that he/she has ten (10) business days from receipt of the notification in which to request a hearing or arbitration.

6. The House Staff Officer shall give written notice at the time the request for hearing is made that counsel or a CIR/SEIU Representative will be representing the House Staff Officer. Counsel for the Medical Center may also be present at such hearing with the right to question witnesses or make statements. The Chairperson or Program Director imposing the adverse action or his/her designee shall present his/her position and any witnesses in support followed by the House Staff Officer's position statement and witnesses to be called or recalled for purposes of rebuttal.

7. An Adverse Action to withhold residency credit for the year, withhold permission to take specialty boards and the decision to not reappoint a House Staff Officer may not be appealed to arbitration, but instead may be appealed to the Hearing Committee. An Adverse action to place a House Staff Officer on probation, or to suspend (with or without Pay) or terminate a House Staff Officer for reasons based upon clinical competence or clinical misconduct may not be appealed to arbitration but instead may be appealed to the Hearing Committee. All other adverse actions to place a House Staff Officer on probation, suspend or terminate a House Staff Officer may be appealed to arbitration.

8. The House Staff Officer may request a hearing before the Hearing Committee or, arbitration pursuant to paragraph 6, as applicable, by sending a written notice to the Associate Vice President of Academic Affairs. The House Staff Officer's failure to timely request a hearing or arbitration within ten (10) business days from receipt of the Senior Vice President's decision, shall be deemed a waiver of the House Staff Officer's right to such appeal, and an acceptance of the adverse action.

9. If the Appeal of the adverse action is one that shall be heard by the Hearing Committee pursuant to Paragraph 6, then a Hearing Committee shall be appointed upon receipt of a timely request for a hearing.

(a) The Hearing Committee shall be comprised of three Program Directors and one House Staff Officer, all of who shall have the right to participate in the deliberations, and each of who shall have one vote. The Associate Vice President of Academic Affairs shall select three Program Directors, who are not directly involved in the adverse action nor have actively participated in such action, to be members of the Hearing Committee. The House Staff Officer shall be selected by CIR/SEIU to serve on the Hearing Committee. The Associate Vice President of Academic Affairs shall Chair the Committee but have no vote. In the event the Associate Vice President of Academic Affairs feels there would be a conflict of interest if he/she presides at the Hearing Committee or selected its members, the President shall select three Program Directors to serve on the Hearing Committee.

(b) The Hearing Committee shall investigate and collect all data it deems relevant to the Adverse Action and shall hold a hearing within twenty (20) business days of receipt of a timely request for a hearing. The House Staff Officer shall have at least seven (7) business days' notice in writing of the date of the hearing. At least three (3) days before the hearing, lists of witnesses shall be exchanged and copies provided to the Hearing Committee. House Staff Officers shall be given access to all charts and other records relevant to the subject matter of the hearing.

(c) The House Staff Officer and the Medical Center shall each be entitled to no more than one postponement of the hearing. Each such postponement shall not, unless mutually agreed, exceed a period of ten (10) business days from the date of the originally scheduled hearing. No further extensions shall be granted except for unusual and extraordinary circumstances at the sole discretion of the Chairperson of the Hearing Committee.

(d) The presence of the House Staff Officer for whom the meeting has been scheduled is required. A House Staff Officer who fails without good cause to appear at such hearing shall be deemed to have waived any right to a hearing or appeal and to have accepted the adverse action.

(e) The House Staff Officer, his/her counsel or representative, and the Chairperson or Program Director shall be permitted to be present at all times during the hearing. All other witnesses shall be present only during their testimony unless otherwise requested by the Committee.

(f) At the Hearing, The House Staff Officer or his/her counsel (or a CIR Representative or CIR Counsel on behalf of the resident, if the House Staff Officer chooses CIR representation) may present any evidence and witnesses on his/her behalf and make opening and closing statements. The Committee may ask questions of the

House Staff Officer or witnesses and request the presence of witnesses not called by either party. The Committee may exclude evidence and witnesses that it determines are not relevant or which it determines is redundant. Ruling with respect to evidence and witnesses may be made by the Chairperson of the Committee unless two members of the Committee vote to override the Chairperson. The Hearing will be conducted as a fact-finding proceeding, and not as an adversarial proceeding.

(g) The Hearing Committee's decision will be by majority vote. The Hearing Committee shall render a written decision within ten (10) business days of the conclusion of the hearing setting forth the Committee's decision for or against the Adverse Action and the basis for the decision. In the event of a 2-2 tie, each side may present its written position to the President for final decision. A copy of the decision shall be delivered personally or mailed to the House Staff Officer. A copy shall also be sent to the Program Director or Department Chairman, the President, the Associate Vice President of Academic Affairs, the Office of the General Counsel, and CIR/SEIU.

(h) The decision of the Hearing Committee shall be submitted to the President for final approval. The President will consider the record and may, in his/her sole discretion, review documents or consult persons involved in the adverse action including the House Staff Officer. The President may accept, reject or modify the decision of the Hearing Committee. The President's decision shall be final as of the date of notification to the House Staff Officer.

10. If the appeal of the adverse action is one that shall be heard by an arbitrator pursuant to paragraph 6, then a notice shall be filed and an arbitrator shall be selected pursuant to the Voluntary Labor Arbitration Rules of the American Arbitration Association. A copy of the notice shall be sent to the Associate Vice President of Academic Affairs and to the Vice President of Human Resources. The fees and expenses of the American Arbitration Association and the arbitrator shall be born equally by the CIR/SEIU and the Medical Center. The arbitrator shall be authorized to accept or reject the charges, in whole or in part, and to accept, reject or modify the disciplinary action and determine an appropriate remedy. The arbitrator shall have no power to add to, subtract from or modify in any way of the terms of the Agreement. The determination or award of the arbitrator shall be final and binding upon the Medical Center, CIR/SEIU and the House Staff Officer.

11. The House Staff Officer shall have no right to a hearing and appeal proceeding as set forth above in the event that termination or non-reappointment is for revocation or surrender of New York State License, New York State limited permit, New York State drug license or ECFMG Certificates, or for disaccreditation of the residency program or reduction in the number of positions in the residency program by the Residency Review Committee.

12. Any of the time limits in this Article may be extended by mutual written agreement of the parties.

Article 18:

Individual Contracts/Renewal Notice

1. Each House Staff Officer prior to his/her employment at the Hospital, shall receive a written contract not inconsistent with any of the provisions herein, that shall set forth the Medical Center's commitments to such House Staff Officers in the following areas: (a) maintenance of electives; (b) rotational schedule and (c) PGY level and wages appropriate to that PGY level.

The House Staff Officer shall have until March 1st to sign and return the contract.

The Hospital shall consider reasonable extensions for House Staff Officers on leave, vacation, awaiting match results, or facing other extenuating circumstances.

The parties shall meet and discuss implementation concerns through the Labor Management Committee if necessary.

2. The form of individual contract presently used by the Medical Center shall be furnished to the CIR/SEIU, and if changed, a copy of any such changes shall be furnished to the CIR/SEIU prior to its use.

3. First-year House Staff Officers with annual contracts shall be notified in writing at least six and one-half (6 ½) months prior to the expiration of their contracts if their contract is to be conditionally non-renewed. In each subsequent year, House Staff Officers shall be notified at least seven (7) months prior to the expiration of their contract if their contract is to be conditionally non-renewed. House Staff Officers with contracts for less than twelve (12) months shall be given notice of conditional non-renewal by the first day after expiration of one-half (1/2) of the duration of such contract. Conditional non-renewals shall be by recommendation of each department's Clinical Competency Committee or other similar departmental committee.

4. In cases of conditional non-renewals, where a House Staff Officer has not been notified of their renewal or non-renewal by the dates set above (in paragraph 3), they shall be notified of their renewal status by February 15, for the year beginning July 1st.

5. No individual waiver by a House Staff Officer of his/her rights under this Agreement shall be effective unless consented to in writing by the CIR/SEIU.

6. Notice of non-renewal shall be in writing and shall set forth the reasons for such non-renewal. House Staff Officers shall have the right to appeal non-renewals pursuant to the hearing procedures described in Article 17 (Adverse Action).

Article 19:

Prohibition Against Discrimination

The Hospital shall not discriminate against any House Staff Officer on account of race, creed, color, national origin, sex, age, disability, marital status, sexual orientation or citizenship status or any other applicable legally protected status.

Article 20:

Employee's Security

1. An incumbent House Staff Officer shall not be prevented from completing his/her residency program because of the Medical Center's decision, for budgetary reasons to reduce the number of House Staff Officers in the program or to make the program, if it is pyramidal in structure, more pyramidal. The foregoing provision shall not be construed to affect existing rights of the parties regarding renewal of appointments.
2. The Medical Center will notify each House Staff Officer affected and the CIR/SEIU.
 - (a) As soon as possible, but no later than ten (10) days after a final decision to discontinue any training program for any reason has been made.
 - (b) As soon as possible, but no later than ten (10) days upon receipt from ACGME, ADA, AOA, or APMA of any written notification regarding non-accreditation or probation or similar change in the professional status of any training program.
 - (c) As soon as possible, but no later than ten (10) days after a final decision of a merger, closure, or change in number of beds which has a substantial impact on any training program has been made.
3. In the event of a termination, transfer or reduction in size of a residency program the Medical Center will make its best efforts to place affected House Staff Officers in other accredited residency programs of the same specialty. In addition, at the time the Medical Center informs residents of a termination, transfer or reduction of residency program, the Medical Center shall provide a list of resources including contact names, addresses, and phone numbers which may be helpful in a House Staff Officer's search for placement. In such event, the Hospital shall continue to pay the salaries of displaced House Staff Officers for the remainder of the residency year or until said House Staff Officers are placed in other salaried and accredited residency programs at other facility, whichever occurs first.
4. For House Staff Officers continuing in a program for which it has been determined that accreditation will be lost, the Medical Center will to the best of its ability maintain levels of training and continue to provide rotations required for certification for the remainder of the House Staff Officer's contract year. The Medical Center shall balance the service needs of the department with the professional goals of the House Staff Officers involved.

Article 21:

Representation on Medical Center Committees

House Staff Officers selected jointly by the CIR/SEIU and the Associate Vice President of Academic Affairs, shall continue to participate in their current committees and shall serve on additional committees that the Medical Center determines are relevant to their specialties and education and that relate to patient care review activities.

1. House Staff Officers who serve on any of this Medical Center Committee shall be notified of the date, time and place of the committee meeting in advance.
2. House Staff Officers shall also be selected as alternates to sit on those Medical Center committees which allow alternates to attend when the regular member is unavailable. The presence of an alternate will ensure continuity of House Staff Officer's involvement and participation.

Article 22:

Work Schedules

1. The parties recognize that excessive work hours for House Staff Officers are inconsistent with optimum patient care and high standards of training and will make every effort to resolve problems in furtherance of these principles. House Staff Officer's work hours shall be consistent with the New York State Department 405 standards, and ACGME requirements.
2. No changes in a work schedule during a House Staff Officer's contract term shall be made unless reasonable prior notice to the affected House Staff Officer is provided, dependent upon the circumstances involved or in an emergency.
3. The Medical Center will notify and provide documentation of its policy regarding compliance with the New York State Department of Health 405 regulations to all persons supervising and/or scheduling House Staff Officers at work sites outside the MMC including but not limited to clinics, faculty practice offices, and other hospitals.
4. After the first year, moonlighting may be permitted on a case-by-case basis with the written permission of the Program Director or designee.

5. On Call Coverage:

If a House Staff Officer, who would otherwise not be in the hospital, is called in to provide backup coverage for another scheduled House Staff Officer, the House Staff

Officer providing backup call will be given equivalent time off by the House Staff Officer who was covered. Scheduling of equivalent time off will be made within two calendar weeks, where practicable.

Article 23:

Political Action Check-off

Upon receipt of written authorization from a House Staff Officer in the form submitted by the CIR/SEIU the Medical Center shall; pursuant to such authorization deduct from the wages due of the House Staff Officer once a month the sum specified in said authorization. The Medical Center will remit the authorized amount to a fund established pursuant to applicable law, to receive contributions to be used for political purposes. It is specifically agreed that the Medical Center assumes no obligation, financial or otherwise, arising out of compliance with the provisions of this Article, and the CIR/SEIU agrees that it will indemnify and hold the Medical Center harmless from any claims, actions or proceedings by any House Staff Officer arising from deductions made by the Medical Center hereunder. The CIR/SEIU further indemnifies and holds the Medical Center harmless from any claims, actions or proceedings by any government agency or by any groups arising from employee deductions made by the Medical Center for the Political Action Fund, so long as such groups are not funded by the Medical Center. Once the funds are remitted to the CIR/SEIU their disposition thereafter shall be the sole and exclusive obligation and responsibility of the CIR/SEIU.

Article 24:

Issuance of Certificates

The Medical Center shall issue the appropriate certification, including academic affiliation, within a month of each House Staff Officer's satisfactory completion of their training program or part thereof.

Article 25:

Malpractice Insurance

1. The Medical Center will maintain malpractice coverage for House Staff Officers equal to that provided to its employed physician staff and under the same terms and conditions.
2. Upon request, the Medical Center shall provide CIR/SEIU a copy of the professional liability insurance certificate evidencing insurance coverage for residents and fellows.
3. The Medical Center will promptly notify CIR/SEIU of any notice of cancellation or lapse in professional liability insurance coverage applicable to House Staff Officers.

To the extent it is reasonably possible, the Medical Center shall notify CIR/SEIU at least sixty (60) days in advance of any prospective change in the amount of the professional liability coverage.

Article 26:

Safety and Security

The Medical Center will provide a healthy and safe work environment for the House Staff Officers and comply with city, state and federal health and safety laws. To achieve these goals the residents will be:

1. Integrated into the Medical Center's infection and control program. The literature, seminars, and other educational tools prepared by this program, when appropriate for the House Staff Officers, shall be made available to them. The protocols for blood borne pathogens, developed by the infections and control program, shall be given to the House Staff Officers.
2. Appropriate personal protection equipment shall be available to each House Staff Officer as necessary.

Article 27:

Successorship

In the event that the MMC is sold, merged or acquired by another entity, the Medical Center will give the CIR/SEIU 90 days notice in advance of such sale, merger or acquisition.

Article 28:

Separability

In the event that any provision of this Agreement is found to be in contravention of any Federal, State or City law or regulation or found by any court of competent jurisdiction to be invalid, such invalidity shall not impair the validity and enforceability of the remaining provisions of this Agreement.

Article 29:

Renewal of Contract

The CIR/MMC CBA, as modified by this CIR/MMC MOA, shall be in full force and effect from November 1, 2025 through October 31, 2028 and shall continue in full force and effect for the CIR Unit until (a) October 31, 2028 or, (b) if earlier, the date upon which NYC Health + Hospitals ("H+H") becomes the employer of the employees in the CIR Unit (pursuant to the terms of the June 27, 2026 MOA by and between CIR and H+H - the "CIR/H+H MOA").

In the event that the employees in the CIR Unit become employees of H+H, the MMC CBA shall be suspended with no bargaining unit employees unless and until NYC Physician Practice, P.C. ("PC") becomes the employer of future employees in a newly formed CIR bargaining unit subject to the terms of the June 27, 2026 MOA by and between CIR, H+H and PC (the "CIR/H+H/PC MOA").

Article 30:

Miscellaneous

1. **Interpreters:**
The Medical Center will provide over-the-phone interpreter services and video remote interpretation for foreign language interpretation.
2. **Bulletin Boards:**
The Medical Center will provide one bulletin board for use by CIR/SEIU in a location to be agreed upon.
3. **Beepers:**
Sufficient and functioning beepers will be made available for residents while on duty.
4. **Pay for Orientation:**
Incoming House Staff Officers shall be paid at their regular rate of pay for five (5) days of orientation, which takes place prior to July 1st of their first year in the Medical Center.
5. **New House Staff Officer lists and termination list:**
The Medical Center shall provide the CIR/SEIU with a list of all new House Staff Officers at the beginning of the academic year. Also the Medical Center shall provide the CIR/SEIU a termination list at the end of the academic year of all House Staff Officers who have finished with their program and/or will return for the following year.
6. **Vaccines:**
All vaccines, required for employment shall be provided to House Staff Officers, upon request without charge.
7. **House Staff Officer Orientation on CIR:**
To enable the CIR/SEIU to disseminate information concerning the CIR/SEIU and its benefits to the new House Staff Officers, the MMC shall allot reasonable time to the CIR/SEIU during their orientation process.
8. **Inspections and Reports:**
The MMC shall notify the CIR/SEIU of the date of inspections by the JCAHO, and the RRC. The MMC will make available to the CIR/SEIU the final reports by JCAHO and RRC. The MMC will provide the CIR/SEIU the reports from the State Department of Health with respect to House Staff Officer working hours.
9. **The JQIA contributions of \$20,000 per contract year will be re-allocated based on**

the language in Article 2, section 6 (Resident Quality Council).

10. The parties agree to form a committee to meet and discuss issues related to space at the hospital for the purposes of a gym and a resident lounge. The committee discussions must reach a conclusion within six months of contract ratification. The timeframe may be extended by mutual agreement.

Article 31:

Lockers

The Medical Center shall provide each House Staff Officer with access to a 1/2 length locker within a reasonable proximity to their working stations in MMC. The Medical Center assumes no responsibility for any items left in a locker. All lockers are subject to inspection by representatives of the MMC at any time, so long as the inspection is not arbitrary or capricious.

Article 32:

Electives/Rotations

The Medical Center may allow outside electives only if required by Program's RRC requirements and if adequate training experience is not available at Medical Center or within the New York City Metropolitan statistical area. Outside rotations must be approved per hospital policy and such approval will not be unreasonably denied.

The Medical Center agrees to discuss the issue of outside electives at Labor Management Committee meetings.

Article 33:

Pandemic/Epidemic Preparation and Safety

The Medical Center and CIR agree that their shared commitments to ensuring the health and safety of employees, responding to the community's needs, and providing the highest level of quality care are best fulfilled with meaningful input from frontline employees. In furtherance of these mutual objectives, the Medical Center and CIR agree to the following preparedness and safety measures to address current and future epidemics or pandemics. The Medical Center and CIR will work collaboratively in Labor Management meetings on all matters related to this Section, and will be guided by the

condition issued by the U.S. Center for Disease Control (“CDC”) or the New York State Department of Health (NYSDOH”). For the life of this Agreement, agenda items related to this section will be included at Labor Management on an as needed basis, with the understanding that we may need to convey more frequently than normally scheduled based on needs and CDC and NYSDOH guidance.

A. Employee Communication

1. The Medical Center recognizes that frequent communication with employees and CIR regarding pertinent information is essential to effectively responding to an Epidemic/Pandemic.
2. At Labor Management CIR will make recommendations to the Medical Center regarding the best communication methods with House Staff Officers during pandemic/epidemic emergency periods. The parties will meet more frequently at Labor Management during pandemic/epidemic emergency periods, no less frequently than biweekly, and more frequently on an ad hoc basis upon request of the Union or Medical Center, to share information and feedback in real time.

B. Epidemic/Pandemic Leave

1. The Medical Center will provide leave during an Epidemic/Pandemic to eligible employees consistent with Applicable Law and the collective bargaining agreement, taking into consideration infection control practices as well as employee, visitor, and patient safety. In no event shall House Staff Officers be required to use vacation time for quarantine or pandemic-related illness.
2. If any employees are unable to use their holiday, vacation, or personal time during an Epidemic/Pandemic, then the Medical Center, upon request, will meet and confer with CIR potential measures to enable affected House Staff Officers to use their accrued time off. The intent is to provide employees with a reasonable opportunity to utilize paid time off. In the event that it is not practicable to grant leave, the parties shall meet and confer in regards to compensating House Staff Officers for unutilized time..

C. Staffing During an Epidemic/Pandemic

1. Staffing will be discussed at the labor management committee, including potential modified assignments for House Staff Members with underlying medical conditions that may present a high risk during an Epidemic/Pandemic, or issues with compensation

Article 34:

Management Rights

All Management rights that the hospital possessed prior to this Agreement are retained by the hospital except as limited by this written Agreement, or by law. These rights include but are not limited to the right to plan, direct and control operations; determine the number of House Staff Officers; to assign work; to schedule, hire and fire transfer House Staff Officers; to discipline or discharge House Staff Officers; to promulgate rules and regulations; to transfer, relocate, contract out, curtail, suspend, abandon, cease or expand operations; to determine whether, and the methods and means by which operations are to be carried on, expanded, contracted, reduced or terminated in whole or in part; and to operate the hospital and conduct its business as presently operated, including the use of all persons; whether or not in the bargaining unit.

Article 35:

No Strike/No Lockout

1. No employee shall engage in any primary or sympathy strike, sit-down, sit-in, slow-down, cessation or stoppage or interruption of work, boycott or other interference with the operations of the Employer.
2. The Union, its officers, agents, representatives and members, shall not in any way, directly or indirectly, authorize, assist, encourage, participate in or sanction any primary or sympathy strike, sit-down, sit-in, slow-down, cessation or stoppage or interruption of work, boycott, or other interference with the operations of the Employer, or ratify, condone or lend support to any such conduct or action.
3. In addition to any other liability, remedy or right provided by applicable law, or statute, should a strike primary or sympathy, sit-down, sit-in, slow-down, cessation or stoppage or interruption of work, boycott, or other interference with the operations of the Employer occur, the Union, within twenty-four hours of a request by the Employer shall:
 - Publicly disavow such action by the Employees.
 - Advise the Employer in writing that such action by Employees has not been called or sanctioned by the Union.
 - Notify Employees of its disapproval of such action and instruct such Employees to cease such action and return to work immediately.
 - Post notices at Union Bulletin Boards advising that it disapproves such action, and instructing Employees to return to work immediately.
4. The Employer agrees that it will not lock out Employees during the term of this Agreement.

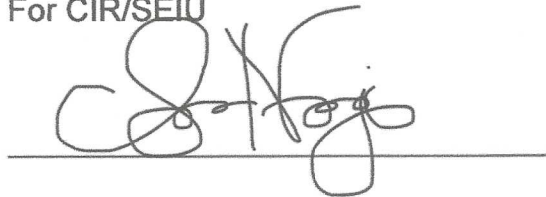
IN WITNESS WHEREOF, the Maimonides Medical Center and the Committee of Interns and Residents, have caused this Agreement to be signed by their duly authorized representatives as of:

Committee of Interns and Residents

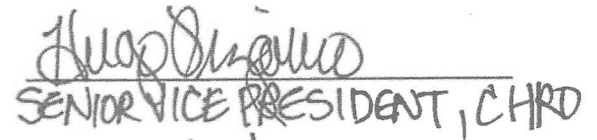
Maimonides Medical Center

For CIR/SEIU

For Maimonides Medical Center



Date: 8/31/2026



SENIOR VICE PRESIDENT, CHRO

Date: 08/24/26



Committee of Interns & Residents/SEIU

National Office

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