

Meeting with Union Committee, Management Committee, and Mediators

(first meeting with mediators present)

7/9/2007 – 10:45 am

Coffey Hall 125

Present for Union: Kelly Alghamdi Zimmerscheid, Patty Pals, Greg Knoblauch, Rita McCue, Chris Koehler, Barb Bezat, Kelly Ahern, Tammy Thompson, Cindy Prange, Denise Osterholm, Brad Sigal, Joyce Carlson, Gladys McKenzie, Cherrene Horazuk, Jody Ebert, Rhonda Jennen, Polly Peterson, Phyllis Walker, Ginger Nohl, Kay Berzak, Kelly Ryan, Krista Gallagher, Ron Kubic

Present for Management: Martha Hoppe, Linda, Leslee Mason, Molly Gage, Sue Elm, Judith, Bob Altman, Hosea Ojwang, Aminah

Present for Mediators: Jan Johnson, Mike Stockstead

Bob: We have a couple members who are late that may join us.

JJ: We'll get started. First, introductions. I'm Jan Johnson from BMS.

Mike: I'm Mike Stockstead, also BMS.

[went around room for introductions]

JJ: Welcome to all of you. Lets talk about timelines today. Do you work til dark? Into the night?

GM: Normally til 4:30, 5:00

BA: We come in expecting regular work day.

[scheduling talk continues]

JJ: Some have been in mediation before. Are there those that have not been in mediation ever?

JJ: So we'll talk about what mediation is – confidential, voluntary process. Very important, identify open issues – we don't want to come back with more issues on the table. Very important in this joint session get out all the open issues. We talked with Gladys, Bob and Joyce about that, identifying all open issues in joint meeting. Then we'll break into our groups. We'll take notes, what you tell us is confidential – we wont divulge to other side unless you give us the ok. It's confidential unless you say we can share it with management, and likewise. Questions?

GM: That doesn't prohibit us from meeting full committees face to face?

JJ: Definitely not, there are times it will be to benefit, face to face.

GM: Still early enough in process, still enough open, we'll have a need for face to face discussion.

JJ: That's your prerogative, anytime to give a face to face, definitely.

JJ: We don't make decisions. No decisions being made by the bureau – decisions made by parties in mediation. Any questions about what mediation is or isn't? Any questions?

GM: We had questions about timelines on our side. Not that we want to go there at all, but we don't understand relation between number of days in mediation, impasse.

JJ: In mediation 45 days. Bureau does not ever declare impasse. We always believe there's room for settlement, it's up to parties. We received it on July 2nd.

BA: After 45 days, that would give the union the right to strike?

JJ: to file a strike notice. Then there's a 10 day 'cooling off period' where we do everything we can to make a settlement.

BA: Let's do our best to make sure that's just an academic piece of information.

JJ: Another part of mediation, if and when it happens, Mike & I may call out people from both sides, and typically we'll call out the BA's and the chief negotiator for the university. If that's not ok we need to know.

GM: It's not. Because of the size of our committee and the different locals represented, we have a fairly sizeable co-chairs group we'd like to have in a caucus unless it's procedural issues, then it's the four of us you saw this morning. Raise your hands.

JJ: So there are 11.

GM: Yes.

JJ: You've probably heard that your BA is out there cutting deals. That's not how I do it. But that's fine, we'll respect how you run it.

BA: From the U side I wouldn't be coming alone either.

JJ: Questions so far? Ok. These 3 petitions were filed by the U, so we're gonna turn to you first to identify open issues, then to Gladys and Joyce next to see if you agree with the open issues Bob has identified, and then if there are others you identify hem.

BA: I don't have a presentation, I mentioned to Jan earlier. We can jointly do this. I think pretty much everything is open except we've agreed on a couple and dropped a couple. Everything else is open.

GM: Your characterization of it is accurate; I think we have an interest in going through it to make sure we're on the same page.

BA: I haven't done that so we can go back to our room to do that.

GM: We're prepared to do that.

BA: I'm comfortable with that.

JJ: Bob do you have a list for Mike & I?

BA: I do have a packet in my briefcase – the union proposals, management proposals and the 3 contracts. The proposals have come in different packages. The one piece you don't have and nobody has is the U's insurance proposal. We would like to present about 1:30 this afternoon about insurance. Other than that I do have one packet with all the docs of the proposals.

GM: We have our proposals and contracts right here for you.

BA: I'll go get you ours.

[Bob leaves to get them]

GM: We do have one committee member missing – Ken Holm, chief steward from the tech workers. Also Sandi Sherman will join us for the health insurance discussion.

[Bob Altman returns]

BA: I can explain the layout of the props we put forward. From management you should have 6 actual different packages of props. We had a wage proposal for each of the 3 groups, and non-wage proposals for each of the 3 groups, so those are the 6 props from management.

GM: I thought I would start with union language proposals. I'll give you the # and tell you if it's open or dropped; you'll get substance of it later. So if you're following our doc of May 31, 2007 –

Union 1 is open

Union 2 is open

Union 3 is open, except that we have a sentence that says “co-habitor replaces significant other” in health care contract, we are dropping that.

BA: I thought we had agreed on that.

GM: We had proposed that language as a package and it wasn't accepted so we are dropping it.

JJ: Just the sentence?

GM: right. We are maintaining the language in the health care contract.

UNION 5 drop

Union 6 open

Union 7 open

Union 8 open

Union 9 open

Union 10 open

Union 11 open

Union 12, 13, 14 open

Union 15 we had requested a meeting with the U's class & comp person, Mary Luther, those are open.

Union 16, 17 are open

BA: Can we go back to 15 Gladys? We responded that we would....did I not do that last session?

GM: I thought you were open to it.

BA: I thought we were agreeing to that, to have a task force and have some folks from comp.

GM: We were proposing to do that during the negotiate process with the hope that we could find a way to work through these proposals.

BA: That really wasn't what I understood, so I think we're looking at having a group of people examine this but not necessarily prior to reaching agreement on contract. Now that I understand where you want to go I'll check.

GM: Union 18 open

Union 19 open

Union 20, 21 open

Union 22 dropped

Union 23 open

Union 24 open

And then we have an additional proposal which you could refer to as union 25, for tuition remission.

JJ: Union 25?

GM: Sure. Bob do you want to deal with your language proposals?

BA: I don't think we dropped anything, I think there were a couple things agreed to, I can't list them off now, we can do it later.

GM: I can continue with that, if you are in disagreement let me know.

On [management's] clerical doc, May 31, 2007 we agreed to 1 A and C.

The pages I believe go beyond what is identified here but the understanding is that appendix D would no longer exist.

And we had also agreed to 2 – we'll have new negotiated salary schedules in a new appendix D.

For the technical proposal, May 31, 2007, we had agreed to the technical change in number 2.

And then moving to the health care proposal, May 31, 2007, we had agreed to number 3, 7, and you were going to check on the statute number, but we agreed that we wanted it to be correct.

And that's it on the language.

JJ: that is the right statute.

BA: The part after the decimal, is that correct?

JJ: That's not right.

GM: Our guess is we can resolve this one, maybe more quickly with your help.

JJ: Yeah.

BA: On number 3 on the technical, we think there might have been agreement on it. This was a typo I think.

GM: I think you're right about that.

GM: And as of now, I believe that all of your salary proposals are open.

And I'm just gonna quickly go thru ours. This is also dated 5/31/07, wage proposals union.

Union w 1 – employee’s less than 12 months paid over 12 months - open
Union w2 – we want to establish for the UMD interpreters increases for additional certifications. Similar to what was established in the twin cities.
Union w3 – 5 consecutive work days work assigned, temp augment or 2 step perm pay adjustment, for clericals.
Union w4 – increase shift differential
Union w5 – on call pay to \$3
Union w6 – uniform allowance to 200
Tech contract –
Union w 7 – delete successor requirement for progression steps on Oct 1 for everybody.
General wage adjustment proposal for everyone, union w8 – 10% 6/11/2007, 7.5% 6/9/2008.
And we have been very clear in saying that our top 3 priorities are wages.

We have a health insurance proposal that we’ve presented, I’m sending around a preface to the proposal that we did share w/ the employer.

Union insurance 1 – fitness center discount on all campuses
Union insurance 2- cap employee share of premiums at base level plan for all employees in our union.
Union insurance 3 – roll back to \$500 ind/\$1000
Union insurance 4 – grant health insurance to all employee’s laid off after passing initial probation
Union insurance 5 – raise annual cap on dental to 2000
Union insurance 6 – info request – how inclusive durable medical equipment is, and we’re still looking at that.

JJ: Have you gotten that info?

GM: We think we have. It’s a really long list, we have a couple of volunteers wading through it.

All of that is open.

BA: It’s possible that some of the insurance issues will be addressed this afternoon. We’ll also be presenting this afternoon, and some of them we may be looking at the same thing.

JJ: So the U has not made an insurance proposal at all?

BA: No that will be coming this afternoon.

JJ: Bob did you want to go through your wage proposal?

BA: Gladys summarized it, it’s still open. There might have been some of those that looked similar. Parts of the wage proposal, the parts that might be agreeable on there I don’t think are problematic. We crossed out some lump sums in our proposal that

expired in 2006; while we haven't reached agreement on that I don't think really that's where our dispute is going to lie.

JJ: Anything else?

GM: I just want to let Bob know we're going to do our presentation for the mediators, if you want to sit in on that.

BA: Your wage proposal?

GM: So if you want to be here for that I wanted to offer that.

BA: I appreciate that. When do you want to do it?

GM: Now.

BA: I'm comfortable with that.

GM: Wait, we don't want to do it now. 15 minutes.

Maybe we should do it after lunch, before insurance.

BA: Dann is coming at 1:30 for health care proposal, maybe a little before.

GM: We could do our presentation at 1:00, that's plenty of time.

END OF THIS SESSION AT 11:30 AM.

7/9/2007 – 1:45 – Management Health Insurance Proposal
Notes by Chris Koehler

MANAGEMENT ENTERED THE ROOM

Bob Altman: We've got a couple of people that have joined our committee. For this presentation I should do some introductions, Patti Dion, she's the director of labor relations and wanted to sit in on this presentation and Dann Chapman is here to present our insurance proposal, many know him from Benefits Advisory Committee, Dann will make some opening remarks about the insurance plan and once we've had a chance to present we can do some questions at the end, ok?

Gladys: Yes.

Bob: With that, Dann can give his opening comments.

Dann Chapman: Good afternoon, we have been stating publicly for a number of years particularly when we do Uplan updates to the regents of the University that it's been a goal of this administration not to shift costs but to manage costs through the use of best practices, planned management and such strategies we have had success in achieving this goal. In this and recent years we are holding the line in the value of these benefits to employees at no reduction to the employer in the cost of coverage, no increase in the copay and maximum out of pocket that will mean four years running without even an inflation factor being applied to Uplan. We will propose to retain the current reduced copay for generic drugs, this change to \$8 reflects the success in the formulary as well as the response of the Uplan participants to that incentive, more are taking advantage of that copay to their personal benefit and the plan's benefit and as a result our generic utilization has increased dramatically, in 2005 it was 50.4% were generic as opposed to brand names and this year through May we've hit 63.4% scripts being filled as generic and just as an illustration of how big a change that is in 14 months we've moved from the bottom of the Big Ten schools to the top in terms of generic utilization, the value is that it helps to slow our pharmacy trend which is significant compared of medical trend. We said to the regents that this has a \$2.5 million cost avoidance for us it's put our pharmacy trend to 8% compared to a range of 10-12% for other employers and of this \$2.5 million we are returning \$430,000 directly to the employees in that copay amount. While we're not ready to show the 2008 plan rates they are in development, we've made projections and I can tell you with the lower pharmacy trend and other aspects in the plan design we are seeing a better trend overall and we expect to have rates in early August. We continue to offer the same medical and dental plans that we are currently offering and we have achieved <MISSED NUMBER> reduction in rates for optional life due to bidding process. We are proposing benefit enhancements that we hope will be received positively and in some areas you'll find we're thinking along the same lines. And we are proposing limited reductions and in effect the changes are designed to enhance our competitiveness in the marketplace as we seek to retain employees. Thank you for being on Benefits Advisory Committee, you are an important voice on the forum it's proven to be a real value to the management of benefits and it's valuable to have all representatives of all employee groups there.

With that here are the specific proposals. <handout> While those are getting around I will apologize that this is a handwritten copy, we will get you a typed version of what you see in my handwriting, I hope it's OK but I thought it would be useful in following the points as we work through them. We'll also have language to bring forward; these are bullet points covering the general sense of the proposals that we're making and not specific contract language.

Number 1 - is to reduce the generic copay from \$10 to \$8, this is a benefit enhancement that has already been implemented through an MOU, we want to share cost benefit to the employees to use, thank you for your willingness to agree to change outside of negotiations and I will also reiterate as those present at the Benefits Advisory Committee know, an apology for the manner in which this was brought forward we viewed it as positive and believed it would be received as such and we wanted to get it announced as

soon as possible, unfortunately that led us to schedule the announcement mailing at a time that it could not be pulled back before the BAC had time to review and revise and we should've perceived how that would be received and we did not. We regret putting you in a difficult situation and want to assure you that we'll be more careful in the future and would propose that it would be effective immediately so there's no break.

Number 2 is to change dental enrollment frequency from every year instead of every other year, it has already been implemented and was in effect for the open enrollment for this period and appreciate your willingness to make this change outside negotiating process.

Number 3 is to increase the annual dental benefit for \$1500 for all plans, currently dental plans Uchoice and Healthpartners Choice already have \$1500, we propose to include Delta Dental Premium and PPO and Healthpartners Dental Choice, currently at \$1250, the proposal is to move them to \$1500. It is a change reviewed by the Benefits Advisory Committee and we view it as an affordable enhancement to begin effective 1/1/2008.

Number 4 is a change to the initial effective date of the employers' contribution to cost of coverage moving to the first day of month following first day of work currently it's 30 days after the first day of the month after the first day of work, shortening the wait for employer contribution by 28 days, it's standard practice and would help with recruitment. Effective for employees hired on or after 1/1/2008.

The next two are tied together, I'll describe them first.

Number 5 , we propose to change the date medical coverage terminates to the end of the month following last day of work, currently the coverage terminates in the end of the month in which the last pay period is, this is outside of industry standards and adds cost, we would make the implementation as soon as administratively possible, it does require significant programming to change so we cannot name starting date.

Number 6 proposes a change of dental and life coverage from the end of the last day of work to the same termination date as the number 5 proposal. This would be a benefit enhancement for most employees bringing us in line with industry practice and bring consistency with the Uplan with those coverages ending at same time. It would be effective as soon as administratively possible as soon as the contract is settled. We are not willing to make the enhancement of number 6 without the reduction on number 5.

Number 7 we are proposing to offer only standard Cobra-like benefits to ex-spouses and ex-same sex domestic partners following a divorce or separation in the case of same sex domestic partners. Currently we allow exes to remain on medical and dental without payment as long as there are shared children and the employee has tier 4 coverage, when the spouse gets Cobra individually in some cases they are treated better than the employee. The proposal is to give them simply the standard amount of 36 months of coverage at full cost to the ex once the divorce is final and would only apply to future ex-spouses or ex-same sex domestic partners not anyone that's currently outstanding. We would make the change as soon as administratively possible and not later than 1/1/2008

we would apply to divorces and separations that would occur on or that date of termination. The proposal change is for several reasons, it's very far outside standard practice and angers many employees in that it forces contact with the ex that providing that causes and it adds significant cost to the Uplan. For illustrative purposes only, if we could implement the change for all covered ex an it would save \$413,0000 on an annual basis we need to do it only prospectively savings would be \$5500 per year per ex-spouse.

Number 8 proposal is to remove student status from dependent eligibility, change the definition of eligibility such that otherwise students under age of 25 are included regardless of student status, the legislature has made this a requirement for all, we propose to make this enhancement for several reasons, this would help in the goal that all Minnesotans have coverage, and from what we can ascertain it will become a standard practice although the state employee group is going to be maintaining the requirement. While it's not possible to predict cost implications, the advance does suggest that the implementation will be relatively low especially in plan like ours that has different tiers of coverage, that has the effect of reducing impact, the impact is bigger where there is only one tier of family coverage, it would reduce an administrative burden as it's frustrating for us to administer as well as employees by providing evidence of student status, it would be effective 1/1/2008.

Number 9 regards voluntary short and long term disability and what we're proposing is to change the benefit amount from how it's currently offered, purchasing in \$100 increments to a certain set of percents of pay, right now employees purchase in increments of \$100 with a minimum of \$300 and maximum of \$5000 total or 2/3 of gross pay, we want to change to percent of pay, it's industry standard and Hartford tells us that only the state and us has this rather odd means of offering in \$100 increments. An important advantage is that it builds in an inflation factor for employees who have the coverage, it's standard practice and makes our business more desirable when we go out for competitive bid and would reduce administrative complexity. We're not certain what percents we would offer but as an example we've talked about percents increments of 33, 50, 60, and 67 percent and what we're trying to offer is percentages near the lower end to have employees who have not purchased before have lower amounts and near the maximum, two thirds replacement value of income and some options in between. The effective date is 1/2009 or perhaps later, there are a number of significant programming requirements that would be involved in getting this achieved, the resources are not there so we're looking for permissive language that allows us to get as soon as possible but would look to do before January 2009, if agreed to we would offer open enrollment for standard disability.

Proposal number 10 is to offer an incentive through employee wellness for regular participation, we're pleased to see that we're in agreement about adding this incentive, an awful lot of employees and vendors such as Medica and Healthpartners have put this in place as a competitive advantage in the marketplace and did so without hard numbers that there would be a real return on investment on it. As administrators of a self insurer we felt we had fiscal responsibility not to add cost to the plan with negative impact without evidence that it would really make a difference, and studies by Medica and

Healthpartners indicate that it is at least highly likely--not how I want to say--indicates that there is at least a one to one return on investment when you offer across a wide employee spectrum and potentially significantly higher rewards in the case that it actually motivates a relatively inactive employee to become more active. There are a significant number of details to administer, don't have the numbers we would want to offer to current plan medical plan vendors who already have the mechanism to do it, it would be costly to add our own. To qualify a member would have to visit a minimum number of times per visit, Healthpartners requires 12 visits, Medica 8 visits we're checking to see if we can or want to make a uniform number, incentive would be \$20 per month as a credit against the health club fee on the second month following the completion of the required visits this is simply how that mechanism works in those plans for example if you made the visits in January, there would be a credit of \$20 to offset the March fee. There's also a difference between Medica and Healthpartners in the number of family members, Healthpartners will pay incentive twice in a month when both covered and employee and spouse both meet the required number of visits, Medica only plays once per family unit could be family or spouse but it's set up only for one person. We're talking with them whether to make this uniform for Uplan but I have to tell you it looks unlikely. There is also a difference between the club networks, we do have agreement that rec sports can be added we're talking to them about the other University of Minnesota facilities, a qualification is that the center has to have the ability to track and report the number of member visits back to the medical plan administrator for this to work. Due to those difficulties and the other unknowns we have in putting this offer together we would need to keep the contract language flexible enough to fit what we can administer.

Number 11 we propose to change the copay for contraceptives from one 90 day supply and two copays for 30 day supply for mail order to one copay for 30 day and two per 90 day supply, I may have written this wrong and may be speaking badly. What we're proposing to change is one copay per 30 day supply at retail and two 90 day at mail order we've made this in the past, we feel this change that needs to be made in cost and equity per this adds <MISSED NUMBER> cost to Uplan negatively impacting the university and employees, this is not an industry standard practice and discriminatory and giving a benefit to a subset of employees based in age and this is only one where benefit is given, proposed effective 1/1/2008 .

Number 12 is one time limited enrollment for optional life this would be \$25,000 offered for all employees who have not previously been declined coverage, the only limit that applies is that the current \$1 million policy maximum, the additional limit if they're already at \$1 million they don't get an additional \$25,000. There are only 138 U employees that have ever been declined we're working to find out how many are still working at the U, we don't know if they're currently employed and figure out how many are bargaining unit employees and as soon as we know we'll get you statistics.

Number 13 simply notes to make updates regarding language, date references and those sorts of things in the insurance article and with that I'm open to questions.

Gladys: There is a question about whether the contraceptives are at generic.

Dan: Contraceptives are at, there are contraceptive drugs at each of the three copay levels but the vast majority are at the generic plus level and generic also there are a lot of them there.

Gladys: A question about whether Harris Health Trends will be involved with number 10 in determining whether people are qualified for the incentive.

Dan: No, the mechanism is simply that the health club keeps track however they do, swipe cards, how many times a member has visited in given month, at the close of the month they assemble reports and transfer records to the health plan vendor. We don't get involved at all it starts with the member going to the club and saying 'Hey starting in January my health plan will provide an incentive' and they'll take your card and know which plan you belong to and vendor to send this, so they send to Healthpartners or Medica and the plan vendor just does a check against eligibility to make sure that you are a currently covered participant in the Uplan and if you are then you qualify and then the payment is sent to the club to be applied.

Gladys: And my understanding of what you're telling us about premiums is that you're not looking at any change in the employer share.

Dan: Yes.

Gladys: But you don't have numbers for us?

Dan: We don't have the rates built yet to be made public.

Gladys: And you won't have those until?

Dan: Early August, first few days in August.

Gladys: There's a question about a fitness center that has an annual fee as opposed to a monthly payment.

Dan: Good question, I'm not familiar, I'll find out, that was not something I'd heard about as this was described to me, I'll check into that and get back to you.

Gladys: I probably should remember this from BAC although I haven't been to every single meeting, has there been a projection about what the premium increases are anticipated to be.

Dan: No, there hasn't, the, give me a second and I will look at a number.

Gladys: I can read questions while you look.

Dan: OK. I think the best I can say at this point and time is that the overall medical trend for the Uplan is going to be single digit, it will not be above 10 percent.

Gladys: And I have a question that I think is clarification on the coverage for children now under 25 who are not students - whether that will cover current employees?

Dan: Yes it would, all the other usual qualifiers will stay in place who is an eligible dependent, we'll just take that out of mix, we'll no longer look at student eligibility.

Gladys: Have you looked at how the paperwork will be handled for rec sports, going back to number 10.

Dan: We expect it to be handled as any other health club they would track use and report back.

Gladys: I don't know whose question...

Tammy: It's mine, short-term care is that the Standard?

Dan: Yes.

Tammy: Would they remain the carrier?

Dan: Yes.

Tammy Thompson: Open enrollment, if you want to increase would you need proof of your insurability?

Dan: Good question, not for the \$25,000, the open enrollment for \$25,000 would include.

Tammy: For short-term disability coverage?

Dan: I'm sorry?

Tammy: I'm talking about the short-term disability coverage and do you have submit proof of insurability?

Dan: Yes at this point. If we implement the change--I'm going to stop talking because I'm unsure of the answer to that. The open enrollment that I spoke to regarding short term disability is far enough out there and details have not been nailed down so I don't want to say for sure in terms of open enrollment, how much or anything, it's uncertain at this point in time.

Gladys: Bob, Dann, I'm not sure who to address, in terms of the insurance [negotiations],

will Dann be available?

Bob: I don't think we've got a plan for Dann to come in again set up, if we think it's a help we could work with Dann's schedule, it may be that I can answer if they're questions I could just communicate back to Dann, as far as having another date where we plan to focus on insurance we haven't talked about that, no.

Gladys: We'll assume that we can talk about Dann being here, if we need to.

Bob: If that's something we see as a helpful way to proceed I can talk to Dann to see what works.

Gladys: My thinking is that we've had a pretty thorough presentation of the proposals and we would like some time to chew on them and will have a response and it seems reasonable to us that we'd want a contact for questions.

Bob: You'd want Dan or Theresa Roberts.

Gladys: Right, the person making presentation to us.

Bob: We'll figure out how we want to proceed.

Jan: Anymore questions?

Gladys: No.

Jan: Bob, are you ready?

Bob: Yes, I don't know if Dann or Patti wants to stay.

Jan: Is that a no Patti?

Patti Dion and Dann Chapman left the room.

7/9/2007 – 2:35 – Management responding to union language proposals
Notes by Brad Sigal

BA: I'm going to deal w/issues I have something new to say about. I'm looking at union proposal #2 – all employees would have right to take floating holiday at their discretion. This is about non-Twin Cities campuses, specifically at Duluth. Request that a personal holiday be on the ballot when Duluth folks vote on which holidays will be the holidays. It's my understanding that personal holiday has been on the ballot in Duluth the past few years, and in fact it was a holiday the employees had the right to vote on and received the fewest votes. I don't think we have any intention of taking that out of the mix of things on the ballot.

GM: Bob we haven't seen the paper work you've described

BA: We'll get that for you.

BA: Union #6 the emergency holiday – I mean emergency closing. The practice regarding AFSCME is the same as all other employee groups. I understand what the concern is, it's not something that comes up often in the Twin Cities, maybe more in the other campuses that are prone to more snow storms than the Twin Cities, I'm still taking a look at that.

I'm going to back up just a bit to union 3, immediate family definition. I guess I misunderstood the union proposal, that it was a group that we had to agree to all of it, because I thought we agreed that we'd be ok with switching to cohabitor. We're still looking, and I think the concept of having a consistent definition of family. That doesn't mean that on union 4 we're looking to switch the time limits.

GM: Just to be very clear about union 3, I just want you to know that we are wanting to stay with the dissimilar language in the health care contract with regard to this particular word.

BA: regardless of whether we reach agreement on entire package?

GM: That's correct.

BA: Even if we agree on the whole thing, you've decided you want the term significant other instead of cohabitor?

GM: Yes

BA: That's important because I didn't interpret the response that way.

BA: I think I may have touché don the other day the MA – CA issue when we talked about wages. I think 6 yrs ago the unit 4 contract was changed in that the class used to be Certified Medical Assistant. No change in salary scale, just 'certified' removed from title. Job description changed a little, added could be certified or registered, so 'certified' didn't seem like appropriate term for title, but still requirement for just unless you're registered. People still needed to be certified to be in classification. To add 'certified' back into title is not something we see as helpful, nor does it make sense to change the wage scale for that group.

The next item, union 15-17, I think I may have misunderstood. This is the info tech specialist position. I talked with comp dept, the union seems to think there are two levels of work, I'm not sure our comp dept thinks so, but I'm certainly willing to sit and talk about that, I didn't specify that we should have these talks before end of negotiations, and I will go do that.

Union 22 and 23, I understand union 22 was dropped so there's no issue with that. Union 23, the last time we talked, I indicated that section 5 of contract, I thought addressed the ability to set up a campus wide committee, and that is the interpretation that we have of this, so everything needed to set up campus wide committee is already in section 5, we already may be in agreement with that. My understanding is you'd be ok as long as that is the interpretation.

With regard to union number 24, we are still looking into the implications of allowing somebody to bump someone at a higher FTE status. ... that's something we're still looking into and we'll talk about at a later date.

The only proposal we haven't talked about is the tuition remission proposal. Everyone knows this is being talked about in another setting. Union has used senate faculty proposal as basis with some minor changes, you said 6 years instead of 4?

GM: No. Our proposal is so long as the student is in a degree program, with the promise that we would push our children to get done.

BA: That's an issue that I'm not sure how alive it is on this campus but has got the attention of the admin and not something that I'm now in a position to make agreement on at this table while discussion is going on elsewhere. At this point the U's response is no.

The other item I think we talked about last time was that there are members of our payroll dept that would be willing to sit down and talk about AFSCME folks about the pitfalls and problems with the 9 over 12, I know your proposal was not 9 over 12, it was something less than 12 over 12, and I think that's all the u has to respond to at this time.

GM: Did you have a suggested date for that discussion.

BA: I don't know who are the folks from the U who would be involved, id be happy to set it up.

GM: That would be great

BA: What timeframe are you looking at Gladys?

GM: We'd like to see it as part of the agreement; I think this is simpler than the other discussion.

BA: I hope I haven't underestimated some of the complexities associated with the 9 over 12 especially with the fair labor standards act, but I will work with talking to our payroll folks about when we can get this meeting set up.

GM: I m sure they'll be happy to talk to us about the complexities of it.

BA: Oh yea, they'll certainly do that.

Jan: While everyone is still here, the number before was in the 1798.18(1), 179A.19(12)

[talk about future negotiation dates]

Session ends 2:55 pm.
