1199/LVHH
Memorandum of Agreement
June 30, 2026

1. This Memorandum of Agreement ("MOA") shall apply to the collective bargaining agreements currently in effect between (a) the League of Voluntary Hospitals and Homes of New York ("League") and 1199SEIU Healthcare Workers East ("Union"), covering the Employers listed in Schedule A ("League multi-employer CBA"), (b) the Employers listed in Schedule B and the Union ("Other CBAs") and (c) the League and the RN Division of the Union covering the Employers listed in Schedule C ("League/RN CBAs"), hereinafter collectively referred to as ("the CBA(s)").

2. **Effective Date, Duration and Agreements**

   A. Term: 10/1/26 – 9/30/29.

   B. All CBAs shall remain in full force and effect including all side letters, exhibits, stipulations and attachments thereto, except as modified in this MOA.

   C. The parties' current CBA shall continue to be in effect through 9/30/26.

   D. The Other CBAs shall be incorporated into the League multi-employer CBA, subject to the provisions of paragraph 18 (Other CBAs).

   E. The League/RN Division Employers shall continue to collectively constitute a wholly independent bargaining group with the individual Employer agreements preserved.

3. **General Wage Increases, Increases to Minimum Rates, Steps and Lump Sum Wage Payments**

   A. Wage increases and corresponding adjustments shall be as follows:

Date	Increase
10/1/26	4%
10/1/27	4%
10/1/28	2%
4/1/29	2%

B. **Lump Sum Ratification Bonus November 1, 2026**

1. Effective with the first payroll period following November 1, 2026, each full-time Employee on the payroll on that date and who was employed ninety (90) days prior to that date, shall receive a lump sum bonus of $1,000, paid for through NBF diversions. The payment shall be prorated for part-time Employees based on the average hours actually worked during the foregoing ninety (90) day period (or the ninety (90) day period referred to in paragraph 3.B.3 below, where applicable).

2. The lump sum bonus shall not be considered as pay for any purpose, including payment of contributions to, or benefits provided by, the Union Funds, or for purposes of overtime, shift or other differentials or any form of premium pay.

3. The term "employed" as used in this Section 3.B shall include (i) all periods of paid leave and (ii) for this Section 3.B only: (x) a period for which the Employee is entitled to receipt of disability or workers compensation payments from the NBF or other insurance paid for by the Employer, or (y) a period of authorized unpaid leave of absence or layoff, if but only if the individuals who were on an authorized unpaid leave of absence or layoff (with recall rights) on the first pay period following November 1, 2026 return to work to a regular full-time or regular part-time position at the end of the leave, or, in the case of layoff, before their recall rights have expired, and work for a period of ninety (90) days following such return.

4. The lump sum bonus shall be in a separate payment. Withholding shall be based on the most favorable tax treatment for the Employees permitted by law.

C. The probationary rate in Art. X(2)(d) will be eliminated effective July 1, 2027.

4. 1199SEIU National Pension Fund ("NPF")

A. The parties agree that as of 10/1/26, the employer pension contribution rate shall be 10.75%.

B. Retirees will receive one lump sum bonus, equal to 4% of annual pension benefit, by December 18, 2026, on a date to be agreed upon between the parties. The cost of the bonus shall be funded by NBF diversions.

5. Employment Security Protected Status

As of 1/1/27, employees hired prior to 1/1/17 are subject to the employment security provisions of Article IXA.

6. 1199SEIU National Benefit Fund (NBF)

A. Effective as of the following dates the NBF required contribution rate for League Hospitals shall be as follows:

	WC I (PMPY)	WC II/III (% of Gross Wages)
10/1/2026	$26,241	41.07%
10/1/2027	$28,378	42.45%
10/1/2028	$30,520	43.88%

B. Effective as of the following dates the NBF required contribution rate for League Nursing Homes shall be as follows:

	WC I (PMPY)	WC II/III (% of Gross Wages)*
10/1/2026	$23,614	41.07%
10/1/2027	$25,520	42.45%
10/1/2028	$27,441	43.88%

*Nursing Home employers will exclude overtime wages from any contributions made for employees in Wage Classes II and III.

The NBF contribution methodology defined in the March 21, 2024 Development of Contribution Methodologies Memorandum shall be amended to reflect the assumptions and methodology underlying the above contribution rates.

C. NBF Contributions of Employers who receive grants as a result of this MOA shall be adjusted to reflect those funds (no net increase or decrease in contributions otherwise due).

D. Amend the NBF plan to provide new cost containment initiatives and other reductions of approximately $150 million, over the term of the agreement. These initiatives/reductions will not include co-pays, premiums, deductibles or co-insurance.

7. Funding for the Training and Upgrading Fund (TUF), Job Security Fund (JSF), Child Care Fund (CCF), and Labor Management Initiatives, Inc. (LMI) (collectively Small Funds)

Contributions for the TUF, JSF, and CCF shall remain at the current contribution levels (percentages).

The Union and League agree to increase the CCF budget by an additional five million dollars ($5,000,000) each year to be used to expand access to and/or the benefits provided by the CCF. The CCF Trustees, in consultation with CCF staff, will determine how the additional monies shall be spent.

In addition, up to $120 million dollars will be made available from NBF diversions to the TUF, JSF, CCF, LMI, Healthcare Education Project (HEP) and the Contract Administrator/Delegate Training Program. The parties agree to add one (1) Delegate Training day to the Delegate Training Program for a total of six (6) days during the term of the CBA. The final amount needed to maintain the programs under applicable criteria will be calculated by Fund staff and approved by the parties. A schedule of diversions will be developed and approved by CIPC. Disputes at CIPC under this paragraph shall not be subject to arbitration.

8. Immigration Legal Defense Fund

The parties agree to take all steps necessary and appropriate to establish a jointly administered Taft – Hartley Immigration Legal Defense Fund (the "Fund"). The purpose of the Fund shall be to provide immigration legal counsel to League employees who have issues concerning their work authorization status or related immigration issues. The Fund shall be funded by a sum of $2 million for the life of the collective bargaining agreement, through diversions from the NBF surplus. The Fund shall sunset at the expiration of the CBA unless extended by the parties without any further financial or legal obligation to any party.

9. Reports

Monitoring and Dispute Resolution reports under Article XI (8) and Article XXVII (4)

shall be provided in Excel unless otherwise agreed. The Article XXVII (4) reports shall be provided on March 15 and September 15 each year.

10. Committee on Outdated and Obsolete Contract Terms

The parties agree to convene a committee to identify and remove outdated or obsolete language (e.g., Article XXVII(4)(g)) from the CBA.

11. Safety and Health Committees

The Safety and Health Committee(s) in Art. XXXIX (3) shall be convened within 60 days after ratification to discuss the workplace violence prevention programs required under state law to properly address safety and violence prevention issues that put employees, patients and visitors at risk.

12. Check Cashing

The parties agree to clarify that pursuant to Article XI Section 6, only employees who are paid with physical checks will be afforded reasonable time during which to cash pay checks.

13. Article X(2)(b)

The Union and the Hospitals, Homes and other League institutions agree to meet to discuss in local Labor Management Committee meetings whether titles are comparable to the titles listed in Article X(2)(b).

14. Agency Issues

Within 60 days of ratification, the parties shall proceed to CIPC mediation (but not binding arbitration) to attempt to voluntarily resolve their respective issues regarding the use of agency employees. This mediation is without prejudice to either parties' rights or defenses regarding this subject under the contract.

15. Pro/Tech Issues

A. **Preceptor Pay – Art. X(14)(2)(B)**

1. Employees in Professional/Technical titles assigned in writing by management to instruct and/or teach other employees, students or residents, in a new modality, technique, or in the use of new technology, shall be paid an additional $2.00/hour for the hours they actually spend precepting. "New" means new to the person being trained (the "preceptee").

2. At the culmination of the assigned precepting, the preceptor shall provide an opinion to the Employer that the preceptee is clinically competent to perform job duties in the modality, technique, or technology. Such opinion shall, at the Employer's request, be placed in writing.

3. For clarity, an Employer who requires an employee to instruct and/or teach and provide an opinion on competency as described above but purposefully avoids having the assignment in writing or asking the employee to render an opinion, but the employee otherwise performs the duties in paragraph 15(A)(i), shall be in violation of this section.

4. Orientation and Onboarding of new employees, students or residents to existing non-clinical work procedures and processes without the preceptor duties identified above (including but not limited to sign-in, how to make a phone call, mail a letter, *etc.*) that do not pertain to the employee's clinical work duties or clinical competency, shall not be deemed precepting.

5. Hours during which an employee is being shadowed by another employee, student or resident, where the requirements set forth in paragraph (1) are not met, are not eligible for preceptor pay.

6. Preceptor pay shall apply to Lead and Senior classifications.

B. **Article XL(A)(3)**

1. The purpose of the PTPC will be to improve communications, facilitate discussion and make recommendations concerning professional practice issues, including the development of career ladders, documentation time, and clinical supervision time, that arise from time to time.

C. **Pro/Tech Issues Committee (X (14)(4)**

1. The parties agree to the following process to address a variety of professional/technical ("pro/tech") issues that were raised in League bargaining including:

   A. Reclassification of service titles to technical titles with commensurate adjustments in benefits. Considerations may include job requirements, duties and responsibilities; comparisons to other League institutions; NLRB criteria; and the relationship to other bargaining unit titles under the League Agreement. Within 60 Days after receipt of the information in paragraph 2(A) below, the Union shall provide a list of the titles the Union seeks to reclassify and the rationale for reclassification.

   B. Establishing/expanding experience steps. Within 60 Days after receipt of the information in paragraph 2(A) below, the Union shall provide a list of the titles the Union seeks to discuss.

   C. Compensation issues for PAs.

2. The agreed to process is as follows:

   A. Within sixty (60) days of ratification of the CBA, each Employer shall provide to the Union's Professional Technical department in Excel a listing of all bargaining unit titles and rates of pay, and a current payroll run and/or other documents from each Employer that includes for each Employee the following information: name, title, date of hire, rate of pay, hours of work, shift worked, experience steps and industry experience, if available.

   B. Within thirty (30) days of the Union's request, the League shall schedule a meeting with the Union representatives and members concerning the Union's proposals above. The League and the Union shall use their best efforts to resolve their differences within thirty (30) days of the first scheduled meeting. All agreements shall be reduced to writing and included in the CBA.

   C. In the event that the parties cannot reach agreement on some or all of the issues, then the outstanding issues shall become issues for local bargaining. The Union and each Employer shall use their best efforts to complete local bargaining within ninety (90) days of the

Union's request for local bargaining, with the first meeting to be scheduled within twenty (20) days of the Union's request.

D. In the event that local bargaining does not result in the resolution of outstanding issues, either the Union or the Employer may submit the dispute to CIPC within sixty (60) days after providing written notice to the other party of its desire to submit the issue(s) to CIPC, which will consider the matter without recourse to CIPC arbitration, except for issue number 1(A), which may proceed to arbitration.

D. **Pharmacy Techs**

1. This process applies only to pharmacy techs who are registered and/or certified to compound and regularly perform compounding as part of their duties.

2. The Employer and the Union shall negotiate over the minimum rate for these employees for a period of 60 days following ratification.

3. In the absence of agreement, the parties shall submit the dispute to the CIPC process.

4. In the event the matter proceeds to CIPC arbitration, the CIPC arbitrator will be obligated to select a minimum wage rate including or between the current rate at that institution and $35.00 an hour as adjusted by any contractual wage increases.

5. Any increase in wages determined by the CIPC arbitrator shall be phased in in equal annual amounts over the duration of the contract. The first increase, if any, shall be effective no earlier than January 1, 2027.

6. This process is only for this title and for this round of bargaining. This is the exclusive mechanism for securing a rate adjustment for this title during the term of this Agreement.

E. **Pro/Tech Council**

The Pro/Tech Council agreed to between the parties in 2025 shall continue. There shall be ten (10) meetings of the Council per year. Between one and six Pro/Tech

representatives per League facility, depending on facility size, will be eligible for paid release for each meeting, subject to each facility's operational needs. Each facility will be reimbursed for the cost of releasing members out of NBF Diversions.

16. Registered Nurses

A. **Longevity Pay**

Effective April 1, 2027, the following amounts shall be added to each step of each Hospital's RN longevity scale, beginning with the first step following an RN's first year of employment:

Years 1 – 20: $1300 per step
Years 21 and up: $2500 per step

B. **Section F**

All RN unit Employers that have not yet done so will adopt the Section F collective bargaining language contained in the League MOA 5/7/04 paragraph 8(f), and League MOA 7/16/18 paragraph 11(3). In addition to providing such data to the local staffing committee, each RN unit Employer shall provide monthly, in electronic format, Section F data to a centralized 1199 email address.

C. **RN Local Bargaining Process**

The parties agree to the process below to address the following RN-specific issues that were raised in League bargaining:

1. There shall be a one-time allocation of 1% of total annualized base pay (i.e., exclusive of differentials and any other element of compensation besides base rates) as of 6/30/26 for all Registered Nurses in the bargaining unit at each Employer, for employees working as Registered Nurses, including those working in other RN titles represented by the Union in the bargaining unit, that shall be used by the parties to address all remaining compensation issues through local bargaining (hereinafter "the Additional RN Compensation"), to be implemented effective as of January 1, 2027. The Additional RN Compensation may be used to

improve any category of compensation as proposed by 1199 and its RN bargaining unit and determined through the process set forth below.

2. The parties shall utilize the discounting methodology that the parties previously have employed with respect to "11(a)(1)" and "11(a)(2)" monies in previous local bargaining as set forth in the RN Costing Memoranda dated November 30, 2021 and October 26, 2018, where applicable. In the event of a dispute, the question of whether an improvement proposed by 1199 is subject to discounting shall be resolved pursuant to paragraph 16(C)(5) below.

   The agreed to process is as follows:

3. Within 60 days of ratification of the League MOA, each Employer shall provide the Union an Excel document listing the following for each RN bargaining unit member:

   A. Hourly rates of pay, including all differentials received (e.g., education, on call, inside & outside experience, certification, preceptor, in charge pay, on call, shift, etc.), charge/lead pay, float pay, and FTE status;
   B. Current experience step (inside & outside, if applicable) for each employee;
   C. For each institution, a list of current amounts of differentials in effect for the bargaining unit: e.g., education, outside/inside experience, certification, preceptor, on call, charge/lead pay, float pay; shift, etc.
   D. Total On call hours worked year to date in 2026;
   E. Current regularly scheduled hours of work.

4. Within 30 days of the Union's request for local bargaining, the Employer shall meet with the Union's representatives and members concerning the Union's proposals for institution-specific adjustments. The Union and each Employer shall use their best efforts to complete local bargaining within ninety (90) days of the Union's request for local bargaining, which period may be extended by mutual agreement. All agreements shall be reduced to writing and included in a Memorandum of Understanding signed by the local bargaining parties.

5. In the event local bargaining does not result in agreement, either the Union or the Employer may submit the dispute to CIPC within thirty (30) days after providing written notice to the other party of its intent to submit the issue(s) to CIPC.

6. CIPC shall have no authority to add to or subtract from the amounts of Additional RN Compensation specified in paragraph 1 or the methodology in paragraph 2 hereof.

17. Article XVII

Add a new footnote at the end of the first sentence in paragraph 1:

Notwithstanding the foregoing, Employers must comply with the upfront sick time requirements of the New York City Protected Time Off Law (f/k/a the New York City Earned Safe and Sick Act) for Employees working in NYC. See Side Letter regarding the NYC Protected Time Off Law and New York State Paid Sick Leave Law. (page ___).

Modify footnote 19 to the following:

Under the New York City Protected Time Off Law and the New York State Paid Sick Leave Law (together, the "Acts"), Employees can use paid sick leave for family illness to care for a family member as defined above, and other family members defined under the Acts which, as of the date of this Agreement, are: child who is a legal ward of the Employee; child of an Employee standing in loco parentis; grandchild; domestic partner; child or parent of an Employee's spouse or domestic partner; and sibling (including a half, adopted or step sibling). In addition, under the New York City Protected Time Off Law, Employees working in the five boroughs of New York City can also use paid sick leave for family illness to care for any other individual related by blood to the Employee and any other individual whose close association with the Employee is the equivalent of a family relationship. Also, under the Acts, Employees can use paid sick leave for safe time and for other statutory purposes. See Side Letter regarding the NYC Protected Time Off Law and New York State Paid Sick Leave Law. (page ___).

18. Other CBAs

All terms and conditions in the Other CBAs for the Employers and new bargaining units set forth in Schedule B shall remain in full force and effect and shall be deemed local agreements to the 2026-2029 League Multi-Employer Collective Bargaining Agreement,

unless expressly modified during the course of these negotiations and incorporated into this MOA.

19. This MOA is subject to ratification by (a) the Union membership and the League Members in Schedules A and B as a multi-employer group, and (b) the Union members of the RN Division voting as a single group and the League RN Employers in Schedule C, voting as a single group. Both parties shall use their best efforts to ratify the Agreement within thirty (30) days.

AGREED:

LEAGUE OF VOLUNTARY HOSPITALS AND HOMES OF NEW YORK

(On behalf of Schedule A & B Employers)

By:_____

Marc Z. Kramer, President

Date: July 7, 2026

LEAGUE OF VOLUNTARY HOSPITALS AND HOMES OF NEW YORK

(On behalf of Schedule C Employers)

By:_____

Daniel F. Murphy, Jr., Counsel

Date: July 7, 2026

1199SEIU UNITED HEALTHCARE WORKERS EAST

By:_____

Yvonne Armstrong, President

Date: July 7, 2026

By:_____

Benson Mathew

Executive Vice President, RN Division

Date: July 7, 2026

By:_____

Veronica Turner-Biggs, Secretary/Treasurer

Date: July 7, 2026

SCHEDULE A

MEMBER INSTITUTIONS OF THE LEAGUE OF VOLUNTARY HOSPITALS AND HOMES OF NEW YORK, A MULTI-EMPLOYER BARGAINING UNIT, COVERED BY THIS AGREEMENT

ANDRUS ON HUDSON

ARAMARK

ARCH CARE

- Carmel Richmond Healthcare and Rehabilitation Center
- Eger Health Care & Rehabilitation Center
- Eger Harbor House, Inc.
- Ferncliff Nursing Home Co., Inc.
- Mary Manning Walsh Home
- Providence Rest Nursing Home and Rehabilitation Center
- St. Vincent DePaul Residence
- Terence Cardinal Cooke Health Care Center

BON SECOURS COMMUNITY HOSPITAL

BRONXCARE HEALTH SYSTEM

BRONXCARE SPECIAL CARE CENTER

BROOKDALE HOSPITAL MEDICAL CENTER

- Schulman & Schachne Institute for Nursing & Rehabilitation
- Arlene and David Schlang Pavilion

THE BROOKLYN HOSPITAL CENTER

CABRINI OF WESTCHESTER

COHEN CHILDREN'S MEDICAL CENTER

EPISCOPAL HEALTH SERVICES, INC.
St. John's Episcopal Hospital South Shore
Episcopal Health Services South Shore Billing

FLUSHING HOSPITAL MEDICAL CENTER

GOOD SAMARITAN HOSPITAL

INTERFAITH MEDICAL CENTER

JAMAICA HOSPITAL MEDICAL CENTER
Jamaica Hospital DTC
Jamaica Hospital Nursing Home

KINGSBROOK JEWISH MEDICAL CENTER
Rutland Nursing Home, Inc.

LENOX HILL HOSPITAL

LONG ISLAND JEWISH FOREST HILLS

LONG ISLAND JEWISH MEDICAL CENTER

LONG ISLAND JEWISH VALLEY STREAM

MAIMONIDES MEDICAL CENTER

MAIMONIDES MIDWOOD COMMUNITY HOSPITAL

MANHATTAN EYE EAR & THROAT HOSPITAL

MID-HUDSON VALLEY STAFFCO., LLC

MJHS

Menorah Center for Rehabilitation and Nursing Care

Adult Day Health Center

MONTEFIORE HEALTH SYSTEM

- MONTEFIORE MOUNT VERNON HOSPITAL
- MONTEFIORE NEW ROCHELLE
- MONTEFIORE SCHAEFFER EXTENDED CARE FACILITY
- MONTEFIORE MEDICAL CENTER
  - Jack D. Weiler Hospital on the Einstein Campus
  - Montefiore Wakefield Campus
  - Montefiore Westchester Square
  - Moses Campus

MOUNT SINAI HEALTH SYSTEM

- THE MOUNT SINAI HOSPITAL
  - Mount Sinai Hospital
  - Mount Sinai Queens
- BETH ISRAEL MEDICAL CENTER (including Mount Sinai Brooklyn)
- ST LUKE'S ROOSEVELT HOSPITAL CENTER
  - Mount Sinai Morningside
  - Mount Sinai West
- NEW YORK EYE & EAR INFIRMARY OF MOUNT SINAI
- QUEENS HOSPITAL CENTER (Affiliation)
- ELMHURST HOSPITAL CENTER (Affiliation)

THE NEW JEWISH HOME

- Manhattan Division

NEWYORK-PRESBYTERIAN BROOKLYN METHODIST

NEWYORK-PRESBYTERIAN HOSPITAL/COLUMBIA UNIVERSITY MEDICAL CENTER

NEWYORK-PRESBYTERIAN/LOWER MANHATTAN

NEWYORK-PRESBYTERIAN QUEENS

NEWYORK-PRESBYTERIAN WESTCHESTER

NORTHWELL HEALTH, AMBULATORY SERVICES

NYU Langone Health
- Tisch Hospital and Kimmel Pavilion
- NYU Langone Orthopedic Hospital
- NYU Langone Hospital-Brooklyn
- NYU Langone Hospital-Long Island
- Family Health Centers at NYU Langone
- Bellevue Hospital (Affiliation)
- Gouverneur Diagnostic Treatment Center (Affiliation)
- Woodhull Medical and Mental Health Center (Affiliation)
- Cumberland Diagnostic and Treatment Center (Affiliation)

PARKER JEWISH INSTITUTE FOR HEALTH CARE AND REHABILITATION

PLAINVIEW HOSPITAL

REBEKAH REHAB & EXTENDED CARE CENTER

RICHMOND UNIVERSITY MEDICAL CENTER

RIVERSIDE HEALTH CARE SYSTEM, INC.
- St. John's Riverside Hospital
  - Andrus Pavilion
  - Dobbs Ferry Pavilion
  - Park Care Pavilion

SBH HEALTH SYSTEM

SILVERCREST CENTER FOR NURSING AND REHABILITATION

SOUTH OAKS HOSPITAL

SOUTH SHORE UNIVERSITY HOSPITAL

ST. MARY'S CENTER INC.

ST. VINCENT CATHOLIC MEDICAL CENTER

STAFFCO OF BROOKLYN dba EASTERN LONG ISLAND HOSPITAL PEO (ELI PEO)

STATEN ISLAND UNIVERSITY HOSPITAL
- Staten Island University Hospital – North Site
- Staten Island University Hospital – South Site

STONY BROOK SOUTHAMPTON PEO

SYOSSET HOSPITAL

UNION COMMUNITY HEALTH CENTER

UNITED HEBREW OF NEW ROCHELLE

WYCKOFF HEIGHTS MEDICAL CENTER

ZUCKER HILLSIDE HOSPITAL

SCHEDULE B

NEW LEAGUE MEMBERS AND EXISTING MEMBER INSTITUTIONS WITH COLLECTIVE BARGAINING AGREEMENTS WHO JOINED SINCE MARCH 9th, 2023

NYU LANGONE HOSPITAL – SUFFOLK

NORTHWELL HEALTH LABORATORIES – CORE LAB

NORTHWELL HEALTH LABORATORIES – LITTLE NECK PARKWAY LAB

PHELPS HOSPITAL

SCHEDULE C

LEAGUE OF VOLUNTARY HOSPITALS AND HOMES OF NEW YORK

1199 RN INSTITUTIONS AND AFFILIATES

BON SECOURS HOSPITAL

BROOKDALE HOSPITAL MEDICAL CENTER
Schulman & Schachne Institute for Nursing & Rehab
Arlene and David Schlang Pavilion

EPISCOPAL HEALTH SERVICES, INC.
St. John's Episcopal Hospital South Shore

LONG ISLAND JEWISH FOREST HILLS

GOOD SAMARITAN HOSPITAL

JAMAICA HOSPITAL MEDICAL CENTER
Jamaica Hospital Nursing Home

MAIMONIDES MIDWOOD COMMUNITY HOSPITAL

MID-HUDSON VALLEY STAFFCO., LLC

MONTEFIORE MEDICAL CENTER
Montefiore Wakefield Campus

THE MOUNT SINAI HOSPITAL

Mount Sinai Queens

BETH ISRAEL MEDICAL CENTER (including Mount Sinai Brooklyn)

NEWYORK-PRESBYTERIAN QUEENS

NYU LANGONE HEALTH
NYU Langone Orthopedic Hospital

PHELPS HOSPITAL

RIVERSIDE HEALTH CARE SYSTEM, INC.
St. John's Riverside Hospital
Park Care Pavilion

SBH HEALTH SYSTEM

SOUTH SHORE UNIVERSITY HOSPITAL

SOUTH OAKS HOSPITAL

STAFFCO OF BROOKLYN LLC dba EASTERN LONG ISLAND HOSPITAL PEO (ELI PEO)

STONY BROOK SOUTHAMPTON PEO

Side Letter on Immigration and Work Status Issues

Whereas: The parties recognize that Immigration and Work Status Issues (collectively "Immigration Issues") potentially raise significant concerns for bargaining unit members ("Members") and League employers; and,

Whereas: Immigration Issues arise in an ever-evolving legal landscape that guides and constrains how the parties may address those issues.

The Parties agree as follows:

Within 90 days of ratification, a League-wide Committee on Immigration and Work Status Issues ("the Immigration Issues Committee") shall be established consisting of eight members selected by the League and eight members selected by the Union (as may be enlarged by the parties by mutual consent on an ad hoc basis). The Committee shall meet no less than quarterly, unless there are significant legal changes regarding immigration or work status that require an additional meeting(s), to analyze, discuss and make recommendations for consideration designed to address labor and employment matters impacting Members resulting from immigration and work status issues.

Subjects to be discussed by the Committee include, the following: Reverification circumstances, procedures and notice; employment status during the reverification process; the use (if any) of unpaid time to obtain, cure or renew work authorization; potential return to work issues arising out of the successful resolution of immigration or work authorization issues; the payment (if any) of accrued but unpaid vacation or personal time in the event immigration or work authorization issues are not successfully resolved; and any other subject relevant to the Committee's mandate that the Committee agrees.

In addition to establishing the League-wide Committee above, the Parties agree that:

1. Employees who have work authorization may, while employed, use accrued time off to attend to their work authorization issues in accordance with and subject to the institution's regular time off policies.

2. Employees who lose work authorization may, upon separation from employment, receive their accrued balances, if any, in accordance with and subject to the institution's regular separation practices.

This side letter shall permit local labor management discussions to address immigration related issues at each institution. Any such agreements regarding such issues will be reduced to writing and shared with the League-wide Committee to assist with their work.

Side Letter on Technology, Artificial Intelligence and the Future of Healthcare Jobs

Whereas: League Employers have the right to implement Technology including AI and other types of Technology and the Union has the duty to protect bargaining unit members ("Members") and bargaining unit jobs ("Jobs") and,

Whereas: Technology including Artificial Intelligence ("AI"), Automation, Computer software, Robotics, and other types of technology (all of which are hereinafter referred to as "Technology") has the potential to impact Members and Jobs, including by eliminating roles entirely.

The Parties agree as follows:

Within 90 days of ratification, a League-wide Committee on Artificial Intelligence and the Future of Healthcare Jobs ("the Committee") shall be established consisting of eight (8) members selected by the League and eight (8) members selected by the Union (as may be enlarged by the parties by mutual consent on an ad hoc basis). The Committee shall meet no less than quarterly to analyze, discuss and make recommendations for consideration designed to ensure that Member displacement resulting from Technology is addressed through collaboration and retraining.

Subjects to be discussed by the Committee include the following:

- Human in the loop and human override protocols concerning Jobs, where appropriate;
- Type of Technology likely to have an impact on Members and Jobs;
- Jobs that are most vulnerable to impact by Technology;
- Information necessary for the Committee to perform its analysis;
- Services that can help address Member displacement;
- Policies best suited to address Member displacement;
- Member input necessary and appropriate for the Committee to perform its responsibilities, and the best way to secure that input;
- Best manner to coordinate with LMI and TUF resources to assist in upskilling and, where appropriate, placing Members impacted by displacement;
- Impact of AI on those Employees who exercise clinical judgment, if any;
- Any other subject relevant to the Committee's mandate that the Committee agrees.

It is further agreed that:
- To the extent possible, the Committee shall direct the TUF and the LMI to create programming aimed at upskilling Members in Jobs that are most vulnerable to impact by Technology.
- The Committee shall commission an expert report, paid for by the LMI, on best practices regarding the integration of AI into healthcare.
-Employees authorized to perform clinical services with a reasonable belief that a machine generated clinical course of action is inconsistent with the standard of care, shall follow, and shall not be retaliated against for following the Employer's policies and procedures for escalating clinical concerns.

Agreement Regarding Funds for Contract Administrators

Agreement between the League of Voluntary Hospitals and Homes of New York (League), as agent on behalf of its members (Members(s)), and 1199SEIU United Healthcare Workers East (Union) (collectively the parties) modifying the collective bargaining agreement between the League and the Union in effect for the period October 1, 2026 through September 30, 2029 (CBA):

The Contract Administrators Program (CAP) shall be extended for the period October 1, 2026 to September 30, 2029 and total costs shall not exceed $17.6 million. The program will continue under the same terms and conditions as described in the July 30, 2002 agreement and 2001 - 2005, 2004 - 2008, 2007-2011, 2011-2015, 2015-2018, 2018-2021, and 2021-2024 League multi-employer CBA side letters, and subsequent written agreements adjusted to reflect the duration of this Agreement.

Funding shall be from the National Benefit Fund (NBF) surplus by way of credits to Employer contributions that would otherwise be due to the NBF (CAP Contribution Deductions); and

Whereas, the parties wish to specify the manner and timing of CAP Contribution Deductions;

NOW THEREFORE, the following shall constitute an amendment of the CBA:

Each Member shall take its CAP Contribution Deductions to fund the CAP for the periods during the monthly National Benefit Fund Contributions specified below.

PERIOD	MONTH OF NBF CONTRIBUTION DEDUCTION
October 1, 2026 - March 31, 2028 (18 months)	March 2028
April 1, 2028 - September 30, 2029 (18 months)	September 2029

IN WITNESS WHEREOF, the League and the Union have executed this Agreement.

League of Voluntary Hospitals and Homes

By _____
Marc Z. Kramer, President

Date: July 7, 2026

1199SEIU United Healthcare Workers East

By _____
Yvonne Armstrong, President

Date: July 7, 2026

July 7, 2026

Yvonne Armstrong, President
1199SEIU United Healthcare Workers East
498 Seventh Avenue
New York, N.Y. 10018

Re: 1199-League 2026 - 2029 MOA
Contract Administrator Program/Delegate Training Program

Dear Yvonne:

This letter memorializes the parties' intent to fully fund both the Contract Administrators and Delegate Training Programs ("Programs") through the 2026 – 2029 agreement.

The parties agree to extend the Programs and project that for the period of October 1, 2026 through September 30, 2029, the expenses for both Programs will not exceed $20 million. The total funding allocated for the Delegate Training Program is estimated to be $2.4 million and the reimbursement amounts in Article V, Section 7 for delegate training days are to be $436 per day for Guild members and $780 per day for RNs. The Contract Administration side letter will be updated accordingly. The total funding allocated to the Contract Administrator program during the October 1, 2026 to September 30, 2029 period is estimated to be $17.6 million.

Any disputes regarding the funding of the Programs, the specific amounts of funding or the specific sources of funding shall be submitted to CIPC for resolution.

If the forgoing accurately reflects our understanding, please sign and return an executed copy for our files.

Very truly yours,
League of Voluntary Hospitals and Homes

Marc Z. Kramer, President

Accepted and Agreed to by:

1199SEIU United Healthcare Workers East

Yvonne Armstrong, President

SIDE LETTER RE: NEW YORK CITY PROTECTED TIME OFF LAW AND NEW YORK STATE PAID SICK LEAVE LAW

July 7, 2026

Yvonne Armstrong, President
1199SEIU United Healthcare Workers East
498 Seventh Avenue
New York, NY 10018

Dear Ms. Armstrong:

This letter sets forth our updated agreement regarding the New York City Protected Time Off Law (formerly known as the NYC Earned Safe and Sick Time Act) and our agreement regarding the New York State Paid Sick Leave Law. Our agreement is as follows:

The Union accepts all comparable benefits (including, but not limited to, vacation time, sick time, and holiday time at premium rates) under the Collective Bargaining Agreement in lieu of any other benefits that may be available under the New York City Protected Time Off Law, (formerly known as the NYC Earned Safe and Sick Time Law) and the New York State Paid Leave Law ("NYSPLL," Labor Law 196-b) (together, the "Acts") and expressly waives the provisions of the Acts, except that this waiver does not apply to: (1) the Acts' prohibitions on Employer retaliation against Employees for use of sick leave, including, with respect to the New York Protected Time Off Law, discipline under a point or occurrence system, but not including discipline for fraud, misuse or abuse of sick leave, or use of sick leave for purposes other than those described in the Acts; (2) the Acts' provisions for use of sick leave for all purposes under the Acts, which shall, to the extent permitted by law, run concurrently with sick leave provided under Article XVII of the Collective Bargaining Agreement; (3) the NYC Protected Time Off Law's requirement that all Employees working in NYC are entitled to at least thirty-two (32) hours of protected time off in accordance with the law at the time of hire and at the start of each sick leave year; (4) the Acts' requirement that Employees receive twenty (20) hours of paid prenatal leave, in addition to other paid time off and (5) the Acts' requirements to provide employees with information including NYC Protected Time Off Law's requirement in each pay period to state how much protected Safe and Sick Time Employees have used and how much they have left.

As of the date of this side letter, the Acts provide for the use of paid sick time for the following purposes:

(a) To care for a family member as defined by the Acts; or
(b) For safe time for the reasons set forth in the Acts when an Employee or a family member has been the victim of a domestic violence, a family offense matter, sexual offense, stalking, or human trafficking.

Additionally, as of the date of this side letter, the NYC Protected Time Off Law provides for the use of sick leave by Employees working in NYC for the following purposes:

(a) For safe time for the reasons set forth in the Act when an Employee or a family member has been the victim of workplace violence;
(b) The closure of the Employer or the closure (or restricted in-person operations) of Employee's child's school due to public health emergency or public disaster;
(c) When an Employee is prevented from reporting to their work location due to a directive by a public official to remain indoors or avoid travel during a public disaster;
(d) To care for a family or household member with a disability or a minor child; or
(e) For certain purposes relating to attending housing and public benefits hearings and appointments.

If you are in agreement with these modifications, please sign below and return an executed copy for our files.

Very truly yours,

League of Voluntary Hospitals and Homes

Marc Z. Kramer, President

Accepted and Agreed to by:

1199SEIU United Healthcare Workers East

Yvonne Armstrong, President

Side Letter between Westchester Medical Center (WMC) and 1199SEIU (the Union)

Ninety (90) days after the ratification of the collective bargaining agreement, representatives from WMC and the Union will meet to discuss the issue of retirement benefits for the following bargaining units: (1) Mid-Hudson Regional Hospital RN and service units, (2) Good Samaritan Hospital professional unit, and (3) Bon Secours Community Hospital professional and business office clerical units. The parties will at that time establish a schedule for future meetings. In the event the parties do not meet as a result of the Employers' decision not to meet, the Union shall have the right to grieve and arbitrate the Employer's refusal to meet.

At such meetings, the Parties will explore issues related to improving retirement benefits for bargaining unit members who are not currently covered by the 1199 PF including but not limited to benchmarks for Employer participation in the 1199 PF, and potential enhancements to the Employer's existing retirement benefits for bargaining unit members.

WMC shall provide the Union with information that it is entitled to under the NLRA to aid in these discussions. The Union will use its best efforts to secure new additional funding for the Employer to aid the discussion of the retirement benefits issue. The Parties are committed to this process and will continue to engage in good faith discussions of the retirement benefits issue.

Notwithstanding the foregoing, the Parties agree that the provisions of Article XXX of the CBA shall continue to apply. In the event the Union and WMC are unable to reach resolution regarding retirement benefits for bargaining unit members, either party may request non-binding mediation before CIPC arbitrator Martin F. Scheinman.

Westchester Medical Center

By_____
John O'Dea

Date: July 7, 2026

1199SEIU United Healthcare Workers East

By_____
Yvonne Armstrong, President

Date: July 7, 2026