1199SEIU UNITED HEALTHCARE WORKERS EAST – GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION, THE EMPIRE STATE LABOR GROUP, AND THE INDEPENDENT FACILITIES

SUMMARY OF 2026-2029 MEMORANDUM OF AGREEMENT

The attached draft Memorandum of Agreement reflects the results of the Parties' negotiations which will be submitted to the principals of each Employer, the Union and the Union membership for approval, ratification, and signature within ten (10) days. This Summary may be signed in counterparts.

Dated: August 17, 2026

Michael Balboni

Robin Rosen

Henry Shapiro

Chris Valentino

Ari Weiss

Yvonne Armstrong

Veronica Turner-Biggs

Nadine Williamson

Daine Williams

Benson Mathew

Shaywaul Amin

2026-2029 MEMORANDUM OF AGREEMENT

BY AND BETWEEN

1199SEIU UNITED HEALTHCARE WORKERS EAST

AND

GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION, THE EMPIRE STATE LABOR GROUP, AND INDEPENDENT FACILITIES

WHEREAS, 1199SEIU United Healthcare Workers East ("1199" or "Union") and the Greater New York Health Care Facilities Association, the Empire State Labor Group, and the independent facilities listed on Attachment A ("Employers") are parties to Collective Bargaining Agreements and successor Memoranda of Agreement effective though September 30, 2026 (collectively "CBAs"); and

WHEREAS, the parties are desirous of maintaining an amicable collective bargaining relationship and maintaining the Employees' terms and conditions of employment.

NOW, THEREFORE, the parties agree as follows:

1. **Maintenance of current terms**:

All terms and conditions in the CBAs between 1199 and the Employers, including all side letters, exhibits, stipulations and attachments thereto, shall remain in full force and effect, except as modified by this Memorandum of Agreement ("MOA"). The parties shall consolidate the CBAs and this MOA into fully integrated 2026-29 CBAs.

2. **Duration**: Effective October 1, 2026, the CBAs shall be extended through and including September 30, 2029.

3. **Wages**:

a. Increase base weekly rates, minimum rates and steps as follows:

1. December 1, 2026: 4%.

2. December 1, 2027: 4%

3. December 1, 2028: 4%

4. Non-Master Facilities:

i. For Employees with nine or more years of service as of the respective date of each wage increase, the amount of each wage increase above shall be calculated on the wage rate applicable to Master Facility employees hired

on or before July 28, 2015, and such wage rates will be added to the minimum rates for the facility.

ii. For Employees with fewer than nine years of service as of the respective date of each wage increase, the amount of each wage increase above shall be calculated on the wage rate applicable to Master Facility employees based on years of service, and such wage rates will be added to the minimum rates for the facility.

b. Wage Parity – Non-Master Facilities

1. Effective June 1, 2027, Employees whose base wage rate is below the applicable Master Facility wage rate for their classification shall have their base wage rate increased to the applicable Master Facility wage rate or receive a $0.10 per hour supplemental wage increase, whichever is less.

2. Effective June 1, 2028, Employees whose base wage rate is below the applicable Master Facility wage rate for their classification shall have their base wage rate increased to the applicable Master Facility wage rate or receive a $0.10 per hour supplemental wage increase, whichever is less.

3. Effective June 1, 2029, Employees whose base wage rate is below the applicable Master Facility wage rate for their classification shall have their base wage rate increased to the applicable Master Facility wage rate or receive a $0.10 per hour supplemental wage increase, whichever is less.

4. Funds:

a. Benefit Fund:

1. The Employers shall continue to pay the actuarially determined contribution rate necessary to maintain the agreed upon plan of benefits and maintain a reserve equal to at least 2 months of total Benefit Fund costs.

2. As of October 1, 2026, the Master Rate of contribution shall continue to be 27.80% of gross payroll, which includes the rate reduction attributable to the Advanced Training Initiative ("ATI") funding from New York State for the term of the Agreement.

3. The ATI side letter and the funding assumptions and procedures set forth in that letter, as updated to reflect the extension of the CBA through September 30, 2029, shall remain in full force and effect.

b. Pension Fund:

1. The Employers shall continue to pay the actuarially determined contribution rate necessary to maintain the current plan of benefits as adjusted in this MOA.

2. As of October 1, 2026, the contribution rate shall continue to be 11.1% of gross payroll.

3. The Trustees are directed to amend the Plan so that effective January 1, 2027, the pension accrual rate for Employees in active, covered employment as of that date shall be increased from:

   i. $30 to $33.00 per year of service retroactive to the date of hire, for Employees with fewer than 10 years of service;

   ii. $37 to $40.00 per year of service for Employees after accruing 10 years of service, retroactive to the date of hire, for a maximum pension after 27 years of service of $1,080/month.

c. Education, Child Care, Worker Participation Funds and Long Term Care Advocacy Project: The Employers shall continue to contribute the amounts necessary to maintain the current level of benefits and programs.

1. The Employers shall continue to contribute to the Education and Child Care Funds at 0.5% of gross payroll for each Fund.

2. The Employers shall continue to contribute to the Worker Participation Fund ("WPF") and the Long Term Care Advocacy Project of the WPF at 0.25% of gross payroll for each.

3. The parties recommend the Trustees of the Child Care Fund explore increasing benefit expense in annual budgets.

4. 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.

d. Job Security: The Employers shall maintain Employees' job security by:

1. Continuing to contribute to the Job Security Fund at 0.25% of gross payroll; and

2. Updating the protected status date so that effective January 1, 2027, Employees hired on or before January 1, 2017 shall have protected status.

5. Sick Bank for New Hires:

All incumbent Employees, whose Employer is obligated to pay out Employees for accrued but unused sick leave on an annual basis, shall continue to receive such annual sick leave payout in accordance with their date of hire. For employees hired after ratification of this 2026-29 MOA at such Employers, there shall be no annual payout of accrued but unused sick time. Instead, Employees shall bank all accrued but unused sick time for use as needed and such sick time shall be paid out upon retirement, at the Employee's then-current rate. Accrued, used, and banked sick time shall be reported on the Employees' pay stubs, if

possible, and if not possible, shall be reported to the Union and the Employees on a quarterly basis.

6. **Safety & Health Committees**:

   The Safety and Health Committee at each Employer shall be convened within 90 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, residents and visitors at risk. The Safety and Health Committee at each Employer shall be made up of three (3) representatives of the Union and three (3) representatives of the Employer.

7. **Immigration and Work Status Issues**: see attached side letter.

8. **Artificial Intelligence and the Future of Healthcare Jobs**: see attached side letter.

9. **New York City Protected Time Off Law and New York State Paid Sick Leave Law**: see attached side letter.

10. **Subject to Ratification**: This Agreement is subject to ratification by the Union and its membership, and the respective Employers.

Dated: August 17, 2026

ACCEPTED AND AGREED:	ACCEPTED AND AGREED:
1199SEIU UNITED HEALTHCARE WORKERS EAST	_____
	Employer Name
_____	_____
Daine Williams	By: _____
1199SEIU Executive Vice President	Title:_____

Weiss

Affinity Skilled Living and Rehabilitation Center
Beach Terrace Care Center
Beacon Rehabilitation and Nursing Center
Bedford Center for Nursing and Rehabilitation
Berkshire Nursing & Rehabilitation Center
Bezalel Rehabilitation and Nursing Center
Bridge View Nursing Home
Bronx Center for Rehabilitation & Health Care
Brooklyn Center for Rehabilitation and Residential Health Care
Brooklyn-Queens Nursing Home (Service & Maintenance)
Caton Park Rehabilitation and Nursing Center
Concord Nursing and Rehabilitation Center
Cortlandt Healthcare
Crown Heights Center for Nursing and Rehabilitation (f/k/a Marcus Garvey)
Cypress Garden Center for Nursing and Rehabilitation
Fieldston Lodge Care Center
Fort Tryon Center for Rehabilitation and Nursing
Franklin Center for Rehabilitation and Nursing
Fulton Commons Care Center Inc.
Gold Crest Care Center
Grandell Rehabilitation and Nursing Center
Kings Harbor Multicare Center
Luxor Nursing and Rehabilitation at Mills Pond
Mayfair Care Center
Midway Nursing Home (Central Queens)
Morris Park Rehabilitation and Nursing Center
New Riverdale Rehab and Nursing
New Vanderbilt Rehab & Care Center
New York Congregational Nursing Center
Northern Metropolitan Residential Health Care Facility Inc.
Northern Riverview Health Care Center, Inc. (LPNs, Service & Maintenance)
Nyack Ridge Rehabilitation and Nursing Center f/k/a Nyack Manor Nursing Home
Oceanside Care Center Inc.
Ocean Gardens Care Center (Horizon Care Center)
Palm Gardens Center for Nursing and Rehabilitation
Parkview Care and Rehabilitation Center, Inc.
Regeis Care Center
Regency Extended Care Center
Rego Park Nursing Home
Rockaway Care Center
Sapphire Center for Rehabilitation and Nursing of Central Queens, LLC
SKY View Rehabilitation and Health Care Center, LLC
Split Rock Rehabilitation and Health Care Center
Staten Island Care Center

Tarrytown Rehabilitation and Nursing Center
The Enclave at Rye Rehabilitation and Nursing Center
The Grand Rehabilitation and Nursing at Queens (f/k/a Queens Center)
The Grand Rehabilitation & Nursing South Point (f/k/a South Point Plaza Nursing & Rehab Ctr)
The Heritage Rehabilitation and Health Care Center (f/k/a Palm Tree)
The Pavilion at Queens for Rehabilitation & Nursing
Throgs Neck Rehabilitation & Nursing Center
University Center for Rehabilitation and Nursing
Williamsbridge Center for Rehabilitation and Nursing f/k/a Williamsbridge Manor
Windsor Park Rehab & Nursing Center

Balboni/Rosen/Weiss

Eastchester Rehabilitation and Health Care Center
Forest Hills Care Center
Meadow Park Rehabilitation and Health Care Center LLC
Nassau Rehabilitation & Nursing Center f/k/a Nassau Extended

Balboni/Rosen (GNYHCFA Schedule A)

Atrium Center for Rehabilitation and Nursing (River Manor)
Fairview Nursing Care Center
Hillside Manor Rehabilitation and Extended Care Center
Hollis Park Manor Nursing Home
Huntington Hills Center for Health and Rehabilitation
Manhattanville Health Care Center
Meadowbrook Care Center
New Glen Oaks Nursing Home
New Vanderbilt Rehab & Care Center
Northern Manhattan Rehabilitation and Nursing Center
Park Gardens Rehabilitation and Nursing Center
Queens Nassau Rehabilitation and Nursing Center
Seacrest Nursing and Rehabilitation Center
Sheepshead Nursing and Rehabilitation Center
Shoreview Nursing and Rehabilitation Center
Sunharbor Manor
Union Plaza Care Center
Verrazano Nursing Home
Workmen's Circle Multicare Center

Balboni/Rosen (GNYHCFA Independents)

Brookhaven Rehabilitation & Health Care Center LLC (Far Rockaway)
Friedwald Center for Rehabilitation and Nursing, LLC
Golden Gate Rehabilitation & Health Care Center
Little Neck Care Center
Oceanview Nursing & Rehabilitation Center, LLC
Park Terrace Care Center

Premier Nursing & Rehab Center of Far Rockaway (Caring Family Nursing and Rehabilitation Center/New Surfside)
South Shore Rehabilitation and Nursing Center
Spring Creek Rehabilitation & Nursing Care Center
The Citadel Rehab and Nursing Center at Kingsbridge
Upper East Side Rehabilitation and Nursing Center
Waterview Nursing Care Center
White Plains Center for Nursing Care

Shapiro/ESLG/Valentino

Acadia Center for Nursing and Rehabilitation (f/k/a Riverhead Care Center)
Bronx Park Rehabilitation & Nursing Center
Carillon Nursing and Rehabilitation Center
Central Island Healthcare
Daleview Care Center
Fordham Nursing and Rehabilitation Center
Four Seasons Nursing and Rehabilitation Center
Glengariff Rehabilitation and Healthcare Center
Highfield Gardens Care Center of Great Neck (Wedgewood)
Laconia Nursing Home
Lawrence Nursing Care Center, Inc
Long Island Care Center Inc
Methodist Home for Nursing and Rehabilitation
New Carlton Rehab and Nursing Center, LLC
North Westchester Restorative Therapy and Nursing Center
Oasis Rehabilitation and Nursing, LLC
Oxford Nursing Home
Pelham Parkway Nursing Care and Rehabilitation Facility LLC
Promenade Rehabilitation and Health Care Center
Resort Nursing Home
Sands Point Center for Health and Rehabilitation
Sprain Brook Manor Rehab
St. James Rehabilitation & Healthcare Center
Sutton Park Center for Nursing and Rehabilitation
Water's Edge Rehab & Nursing Center at Port Jefferson
Westchester Center for Rehabilitation & Nursing

Side Letter on Immigration and Work Status Issues

August 17, 2026

Whereas: The Parties recognize that Immigration and Work Status Issues (collectively "Immigration Issues") potentially raise significant concerns for bargaining unit members ("Members") and the 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, the New Directions and Initiatives Committee ("NDIC") shall meet to discuss Immigration and Work Status Issues. The NDIC 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 NDIC 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 NDIC's mandate that the NDIC agrees. The Parties shall request that WFP, Ed Fund and JSF provide technical assistance and resources to the NDIC for this project.

In addition 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 Employer'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 NDIC to assist with their work.

Accepted and Agreed to by:

1199SEIU United Healthcare Workers East

_____

Daine Williams
1199SEIU Executive Vice President

Accepted and Agreed to by:

_____
Employer Name

_____
By: _____
Title:_____

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

August 17, 2026

Whereas: 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, the NDIC shall meet to discuss Artificial Intelligence and the Future of Healthcare Jobs. 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. The Parties shall request that WPF, Ed Fund and JSF provide technical assistance and resources to the NDIC for this project.

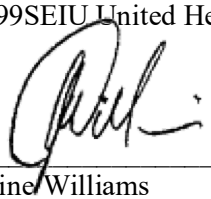
Subjects to be discussed by the NDIC include the following:

- 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 NDIC 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 NDIC to perform its responsibilities, and the best way to secure that input;
- Best manner to coordinate with WPF and Ed Fund 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 NDIC's mandate that the NDIC agrees.

It is further agreed that:
- To the extent possible, the NDIC shall direct the Ed Fund and the WPF to create programming aimed at upskilling Members in Jobs that are most vulnerable to impact by Technology.
- The NDIC shall commission an expert report in coordination with the QCC and the League, paid for by the WPF, 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.

Accepted and Agreed to by:

1199SEIU United Healthcare Workers East



_____
Daine Williams
1199SEIU Executive Vice President

Accepted and Agreed to by:

_____
Employer Name

_____
By: _____
Title:_____

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

August 17, 2026

Daine Williams, Executive Vice President
1199SEIU United Healthcare Workers East
498 Seventh Avenue
New York, NY 10018

Dear Mr. Williams:

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 Sick Leave Law ("NYSPSLL," 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 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,

_____
(Name of Employer)

_____
(Signature)

_____
(Name, Title)

Accepted and Agreed to by:

1199SEIU United Healthcare Workers East

_____
Daine Williams, 1199SEIU Executive Vice President

Side Letter to the 2026-29 Memorandum of Agreement
1199SEIU Greater New York Benefit Fund

This letter agreement is delivered simultaneously with the execution of the 2026-29 Memorandum of Agreement ("Agreement") between 1199SEIU United Healthcare Workers East (“1199”) and the Employers listed on Attachment A thereto.

1. The Minimum Rate of contribution to the Benefit Fund shall be 1.75% lower than the Master Rate of contribution; as of October 1, 2026, the Minimum Rate shall continue to be 26.05% of gross payroll, which includes the rate reduction attributable to the Advanced Training Initiative funding from New York State for the term of the Agreement. Any Employer paying below the Master Rate but above the Minimum Rate shall continue to pay the contribution rate adjusted by the same percentage points that the Master Rate was adjusted under the 2023-26 Memorandum of Agreement, up to the Master Rate.

2. Subject to the provisions of paragraph 4(a) of the MOA, the parties agree as follows:

   a) Employers shall not be obligated to make contribution payments to the Benefit Fund in December 2026 and December 2027 (based on the prior months’ payroll), provided they are timely paying monthly contributions in accordance with the Fund’s collections procedures and protocols.

   b) Employers shall not be obligated to make contribution payments to the Benefit Fund in December 2028 (based on the prior month’s payroll), provided that it does not reduce the Fund’s projected reserves as of September 30, 2029 below two months; and provided they are timely paying monthly contributions in accordance with the Fund’s collections procedures and protocols. Any dispute over the determination of whether a sufficient surplus exists will be submitted to the Impartial Chairman.

   c) The month in which contribution payments are not due as provided above may be modified to the extent necessary in accordance with the Fund’s cash flow.

3. The Fund’s Summary Plan Description shall be modified effective January 1, 2027 to eliminate geographic limitations under the current plan for Medicare-eligible retirees, and shall provide that all Medicare-eligible retirees who reside in the catchment area under the current 1199 Aetna MAPD plan (Continental United States, United States Virgin Islands, and Puerto Rico), or other provider that may be retained by the Fund, shall be eligible to enroll in the Fund's Medicare Advantage Program, provided such modification does not increase the required contribution rate.

4. There shall be an allocation of Benefit Fund contributions of up to $3.2 million to the 1199SEIU Greater New York Education, Job Security, and Worker Participation Funds (“TEF”). The timing of such allocation shall be as determined by the Executive Directors of the Benefit Fund and TEF according to the cash flow needs of the respective funds.

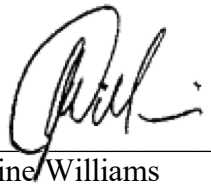
5. There shall be an allocation of Benefit Fund contributions of up to $500,000 to the industry-wide Immigration Legal Assistance Fund established by 1199 and the League of Voluntary Hospitals and Homes of New York ("League"). Any funding issues will be submitted to the Impartial Chairman for resolution.

6. Allocations pursuant to this side letter shall be administered internally by the Funds' Finance and other departments. The Fund's Executive Director is authorized to approve such procedures as are necessary to implement this side letter.

Dated: August 17, 2026

Accepted and Agreed to by:

1199SEIU United Healthcare Workers East



Daine Williams
1199SEIU Executive Vice President

Accepted and Agreed to by:

_____
(Employer Name)

_____
By: _____
Title:_____