A G R E E M E N T

between

OREGON FEDERATION OF NURSES AND HEALTH PROFESSIONALS

and

Mid-Columbia Medical Center dba Adventist Health Columbia Gorge

2025-2029

TABLE OF CONTENTS

Page

Article 1 - Recognition

The Hospital recognizes the Union as the collective bargaining representative with respect to rates of pay, hours of pay, hours of work, and other conditions of employment for a bargaining unit composed of all full-time, regular part-time, and per diem technical Employees employed at its acute care hospital located at 1700 E 19th Street, The Dalles, Oregon, including all diagnostic imaging technologists, respiratory therapists, EKG technologists, radiology technologists, CT technologists, MRI technologists, mammography technologists, nuclear medicine technologists, echo technologists, ultrasound technologists, sonographers, radiation therapists, surgical technologists, pharmacy technicians, pharmacy buyer, clinical lab assistants, physical therapy assistants, physical therapy aides, sterile processing technologists, and first assistant/surgical technologists, including Leads; but excluding all other nonprofessional employees, professional employees, physicians, registered nurses, business office clerical employees, skilled maintenance employees, managers, guards, and supervisors as defined by the Act.

Article 2 - Union Dues Deduction and Membership

A. Membership.

1. Hired on or before Ratification. Membership in or financial support of the Union will not be a condition of their employment. Bargaining unit Employees employed on the date of ratification have the right to join or financially support the Union, or to refrain from doing so.

2. Hired after Ratification. Membership in or financial support of the Union is not a required condition of continued employment. Bargaining unit members hired after the date of ratification will have 30 days from their first day of work to choose whether or not to join the Union. Bargaining unit members must provide written notice by mail or electronically of their intention. Such notice must be sent electronically or postmarked within 30 days of employment with a copy furnished to Human Resources. Any bargaining unit member hired after ratification who voluntarily joins the Union or fails to notify the Union of their intention shall be required, as a condition of continued employment, either to become a member of OFNHP or make a monthly fair share payment, in accordance with the OFNHP membership agreement.

3. Fair Share Payment. The monthly fair share payment shall be as established by the OFNHP in accordance with applicable law, but in no event shall be greater than the monthly dues paid by members of the OFNHP. Fair share payment shall be made to the OFNHP or, for persons with religious objections, to the Mid-Columbia Medical Center Foundation.

4. Dues Deduction. The Hospital will deduct OFNHP membership dues or fair share contributions from the wages of each bargaining unit member who voluntarily agrees to such deductions and who submits an appropriately written authorization form to the Hospital. Deductions shall be made per pay period and remitted to OFNHP together with the names of those authorizing deductions.

5. No Intimidation. The parties agree that neither will attempt to intimidate nor threaten any Employee in the exercise of their choice. Neither party will retaliate against any Employee for their choice.

Bargaining unit members will not be paid by the Hospital for time spent on union business, including meetings and bargaining.

B. The Union shall indemnify the Hospital and save it harmless against any and all suits, claims, demands, and liabilities that shall arise out of or by reason of any action that shall be taken by the Hospital for the purpose of complying with the provisions of this Article, or in reliance upon any assignment and authorization form, list, or information which shall have been furnished to the Hospital under such provisions.

Article 3 - List of Employees to Union

Within 15 days of the signing of this Agreement, and semiannually thereafter, the Hospital will provide the Union and the Local Union Representative or designee with an electronically sent list which will include the names, any license numbers, hospital Employee numbers, dates of hire, classification steps, units or Departments, personal email addresses (if the Employee has voluntarily provided in the electronic personnel file as part of "personal information"), home addresses, and personal phone numbers of Employees currently employed by the Hospital who are covered by this Agreement. The Hospital also will provide total monthly hours worked for part-time and per diem Employees only. On a monthly basis, the Hospital will provide the Union and Bargaining Unit Chair with a list of the names, home addresses, personal phone numbers, and any license numbers of Employees who have been hired or terminated during the prior month, as that information is reflected on Hospital records.

Article 4 - Union Access, Stewards, and Bulletin Boards

Union Access. Duly authorized representatives of the OFNHP will be permitted, at reasonable times, to enter the Hospital for the purpose of transacting Union business pertaining to contract negotiations or administration and observing conditions under which bargaining unit members are employed. Transaction of such business shall be conducted in an appropriate location subject to the general Hospital rules applicable to nonemployees, and shall not interfere with patient care, the work of other Employees, or any such Employee interviewed and shall be conducted during such Employee's lunch or rest period. A meeting room in the Hospital will be provided, subject to availability. Nonemployee OFNHP representatives will be subject to the same restrictions generally in place for all nonemployee visitors.

Union Stewards. OFNHP may designate a reasonable number of Union Officers, Delegates, and Stewards from within the bargaining unit. OFNHP shall provide the Hospital a list of all Union Stewards, Officers, or Delegates from the bargaining unit. OFNHP will update the list at least quarterly upon request of the Hospital. The transaction of Union business by Union Officers, Delegates, and Stewards shall be on the Employees' own time and shall not interfere with patient care or the work of other Employees.

Bulletin Boards. A Bulletin Board for the posting of appropriate matters pertaining to notices of Union elections and results, OFNHP meetings, and OFNHP educational information

will be provided by the Hospital at the Employee Information Center and in the break rooms of Departments represented by the OFNHP. All such Union notices shall be signed and dated by an authorized representative of the Union. Union Stewards and authorized representatives of the OFNHP may access breakrooms of the Departments represented by the OFNHP to assure compliance with this Article. When access is required by the Union Stewards and authorized OFNHP representatives, advance notice shall be provided to Human Resources. Access shall not be unreasonably denied.

Article 5 - New Hire Orientation

The Hospital agrees to provide a copy of the contract to each bargaining unit Employee as supplied by the Union and obtain the Contract Receipt Form from each Employee and submit it to the Union. The Hospital will provide, reasonably in advance, to the Union and its officers a calendar of dates and times for new Employee orientation for bargaining unit Employees. The Local Union Representative or designee may communicate with Human Resources within 24 hours prior to a previously scheduled day of orientation to verify whether there are any new hires into bargaining unit positions scheduled to undergo the pending new hire orientation. New bargaining unit hires will be provided with an invitation to attend a meeting sponsored by the Union during time that follows the end of the Hospital's orientation. The parties agree to discuss improvements to the New Hire Orientation process and scheduling at the Labor Management Committee meeting. New bargaining unit new hires will be paid for 15 minutes for this meeting. The meeting will be announced as nonmandatory, and the Union presenters will not be on time paid by the Hospital.

Article 6 - Management Rights

The Hospital reserves the exclusive right to exercise the customary functions of management, including but not limited to the right to administer and control the premises, utilities, equipment, and supplies; the right to select, hire, promote, demote, suspend, and dismiss; assign, reassign, supervise, and discipline Employees; to determine hours of employment; to transfer Employees within and between Departments; to formulate and modify job classifications and job evaluations; to determine and change the size, composition, and qualifications of the work force; to establish, change, modify, and abolish its policies, practices, rules, and regulations; to determine, modify, and change methods and means by which the Hospital operation is to be carried on; to determine the appropriate duties of Employees in meeting those needs and requirements; and to do those things necessary to carry out all ordinary functions of management, except as these matters are specifically referred to in this Agreement.

Article 7 - Equality of Employment Opportunity

The Hospital shall continue its present policy that age, gender, race, creed, color, sexual orientation, religion, national origin, gender identity, veteran status, disability subject to reasonable accommodation, or any other legally protected category shall not be considered in hiring, placement, promotion, salary determination, or other terms of employment of Employees employed in job classifications covered by this Agreement. There shall be no discrimination by the Hospital against any Employee on account of membership in or lawful activity on behalf of the Union, provided that it does not interfere with normal Hospital routine, the Employee's duties,

or those of other Hospital Employees consistent with the protection for union activity afforded by the National Labor Relations Act, as amended.

Article 8 - Employment Status

A. Discipline and Discharge. The Hospital shall discipline, demote, suspend or discharge an Employee for just cause.

B. Probationary Period. An Employee employed by the Hospital shall not become a regular Employee until continuously employed for a period of 90 days probationary period, which includes two or three weeks' orientation. An evaluation will be furnished by the Director or Executive under which the new Employee is working. During this time, if work is unsatisfactory, the Employee may be terminated. The Hospital may extend the probationary period up to an additional 60 days with written notice to the probationary Employee and a copy to the Union. If an Employee's probationary period is extended, a work plan shall be prepared before the end of the initial probationary period to help the Employee correct any deficiencies during the extension.

C. Notice of Resignation. All Employees regularly employed shall give the Hospital not less than 14 calendar days' written notice in the electronic personnel system of intended resignation.

D. Notice of Termination. The Hospital shall give Employees regularly employed 14 calendar days' notice of termination of employment or, if less notice shall be given, then the difference between the number of days' notice given and the number of working days of advance notice herein required shall be paid to the Employee at the Employee's regular rate of pay; provided, however, that no such advance notice or pay in lieu thereof shall be required for Employees who are discharged for just cause.

E. Grievance Possibility. A non-probationary Employee who feels they have been suspended, disciplined, or discharged without proper cause may present a grievance for consideration under the grievance procedure.

F. Exit Interview. An Employee shall, if they so request, be granted an exit interview upon the termination of the Employee's employment.

Article 9 - Employee Definitions

A. Regular Full-Time Employees. Regular full-time Employees are those bargaining unit Employees regularly scheduled to work as follows per week:

1. Five 8-hour shifts;

2. Four 10-hour shifts;

3. Four 9-hour shifts;

4. Three 12-hour shifts;

5. Any combination of shifts which results in 36 hours per week; or

6. Any combination of shifts which results in 40 hours per week.

Employees designated as regular full-time shall accumulate and receive all fringe benefits provided in this Agreement so long as they maintain their status as full-time Employees. For the purpose of establishing and maintaining status as a regular full-time Employee, each overtime hour shall count as one hour worked.

B. Regular Part-time Benefit-Eligible Employees. Regular part-time benefit-eligible Employees are those Employees who are regularly scheduled to work at least 40 hours in a 14-day pay period. For the purpose of establishing and maintaining status as a regular part-time benefit-eligible Employee, each overtime hour shall count as one hour worked. Regular part-time benefit-eligible status will not be affected by approved uncompensated time off, low census time which removes an Employee from a posted schedule, approved educational leave whether paid or unpaid, or other approved leave of absence.

C. Part-Time Non-Benefit-Eligible Employees. Part-time non-benefit-eligible Employees are those who are regularly scheduled at least one shift per week, but who work less than 40 hours in a pay period.

D. Per Diem Employees. Per Diem Employees are those Employees who work less than 24 hours in a 14-day period. Per Diem Employees shall receive 15% premium pay on their base wage rate in lieu of fringe benefits and other side benefits as provided in this Agreement.

To remain eligible employed as a per diem Employee and eligible for the 15% premium pay, per diem Employees shall make themselves available for four regular (non-call) shifts in each 28-day scheduling period. Per diem Employees may opt out of one schedule each calendar year without affecting their eligibility for premium pay. To remain employed as a per diem and eligible for premium pay, one shift each scheduling period must be scheduled or worked on a weekend, night, or holiday shift (for Departments on 24/7 operations).

One shift per year must be on a holiday. Winter holidays (Thanksgiving, Christmas Eve, Christmas, New Year's, and MLK Day) and summer holidays (Memorial Day, Fourth of July, and Labor Day) will be rotated. Per diem Employees must meet the Department's education requirements for the last year. If a per diem Employee does not meet the above requirements for a period of three months, they will be removed from per diem employment, unless the absence was a result of protected leave.

Article 10 - Grievance Procedure

Whenever an Employee believes the Hospital has violated or misapplied the provision(s) of this Agreement, that Employee may present a grievance in accordance with the procedures set forth below.

A. Employee Terminations. The termination of an Employee during the Employee's probationary period is not subject to the grievance procedure, although an Employee who has gained regular status may grieve a subsequent disciplinary probation.

A regular Employee grieving their termination may present the grievance directly to Step 2.

B. Grievances Impacting Multiple Employees (Class Action Grievances). Grievances involving a Hospital practice or procedure that the Union alleges violates a provision of this Agreement, and that affects two or more Employees, may be filed by a Union Officer directly at Step 2 of the Grievance procedure within 21 calendar days from the date of the occurrence. This does not include grievances over Employee discipline.

C. Procedure for Handling Grievances.

Step 1. If an Employee has a grievance, the matter shall be reduced to writing, indicating the Employee's statement of the dispute and identifying the provisions of the Agreement that have allegedly been violated. The grievance is waived unless it is presented to the Employee's Department Leader in writing within 21 calendar days after occurrence of the facts which are the basis of the grievance. Grievances relating to pay will be timely if received by the Department Leader within 21 calendar days after the payday for the period during which the grievance occurred. The Department Leader or designee shall meet with the grievant and, at the option of the grievant, one Union representative within seven calendar days of filing of the grievance. Together they shall attempt to resolve the grievance. The Department Leader shall give a written decision to the grievant with a copy to the Union within 14 calendar days of the meeting.

Grievances properly filed under Step 1 involving the same issue in more than one Department may be moved by the Department Leader to Step 2 without a Step 1 meeting by written notice from the Department Leader to the Union within seven days of filing of the grievance.

Step 2. If the grievance is not settled at Step 1, it may be appealed by delivery of written notice from the grievant or the Union to the impacted unit's Executive or Senior Leadership within 14 calendar days from receipt of the written decision referred to in Step 1. The Executive or Senior Leadership or designee shall meet with the grievant and, at the option of the grievant, a representative of the Union to attempt to resolve the grievance. The impacted units Executive or Senior Leadership or designee shall give a written decision to the grievant with a copy to the Union within 14 calendar days after the meeting. If the parties are unable to resolve the grievance upon receipt by the Union of the written decision, the decision may be appealed to arbitration in accordance with the below.

Arbitration. If a grievance processed in accordance with the above procedure is not resolved, the Union may present the grievance to an impartial arbitrator if written notice is given to the impacted unit's Executive or Senior Leadership within 14 days after receiving the impacted units Executive or Senior Leadership response to Step 2. Within 14 calendar days, the parties shall try to mutually agree upon selection of an arbitrator. If the parties cannot agree upon the selection of an arbitrator, the parties shall select an arbitrator from a list submitted by the Federal Mediation and Conciliation Service from among those on its panel of arbitrators. The request to FMCS for an arbitration panel shall ask the agency to provide a list of 11 candidates who have a primary business office in either Oregon or Washington. A selection from the panel shall be made within five days of receipt of the list. Selection of an arbitrator from the list may be by mutual agreement

between the parties or by alternatively striking one name each from the list until one name is left. The first strike shall be determined by a coin flip.

The arbitrator's decision shall be final and binding upon the Employee, the Union, and the Hospital.

The arbitrator shall apply only the express provisions of the Agreement, and shall have no authority to modify, add to, alter, or detract from the express provisions of the Agreement.

The arbitrator's fee and incidental expenses shall be borne by the losing party as designated by the arbitrator. Either party may order a court-reported transcript, the cost of which shall be shared equally if both sides use the transcript.

D. Time Limits. The time limits contained in this Article may be extended by mutual agreement of the Hospital and the Union confirmed in writing. Absent written mutual agreement, a grievance that is not timely is waived. Grievances may be, by mutual written consent of the parties, referred back for further consideration or discussion to a prior Step or advanced to a higher Step of the grievance procedure.

Article 11 - Leaves of Absence

Personal Leaves of Absence. A personal leave of absence is granted in the Hospital's discretion based on several factors including individual need, Hospital need, merit, and length of employment. Personal leaves are submitted through the Integrated Absence Management Team.

A. Full-time, part-time, and per diem, Employees who average 20 or more hours per pay period and have worked for the Hospital for more than 12 months may be eligible to receive an unpaid personal leave of absence for up to three months. Personal leave must be taken in a single block of time, with the minimum time away being 30 calendar days. Only one personal leave is granted per two year period.

B. If the reason for leave qualifies under another state, federal, or Hospital policy, the Employee will not be eligible for personal leave. If the Employee does not meet the eligibility requirements for a personal leave of absence, and the Employee does not qualify for leave under any other state, federal, or Hospital leave policy, the request for personal leave will be denied. If the Employee does not return to work at the end of the approved leave time, employment would be immediately terminated.

C. Effect on Pay. Unless otherwise specified, leaves of absence will be granted without pay. Employees shall use PTO, where applicable, while on authorized leave. Personal leaves, for reasons other than disability, are unpaid; however, the Employee is required to use all Paid Time Off until exhausted per the Hospital's Paid Time Off Policy.

D. Effect on Benefits. An Employee will not lose previously accrued benefits as provided in this Agreement but will not accrue additional benefits during the term of a valid leave of absence. Benefits provided while on regulatory or statutory leave (i.e., FMLA, OFLA, ADA) will be in accordance with Hospital policy and applicable federal and state law. Prior to the

requested personal leave, the Employee must arrange for healthcare plan coverage or any voluntary payroll deductions.

E. Effect on position. An Employee's position or any other position is not guaranteed when the Employee returns. The Employee may be required to return to a different job with reduction in pay.

F. FMLA/OFLA Leaves of Absence. FMLA/OFLA leaves of absence shall be provided in accordance with Hospital policy and applicable federal and state law. Employees may choose to reserve up to 36 hours of PTO for use after a parental leave under FMLA/OFLA.

G. Military Leave. Employees who are ordered to or volunteer for extended military training or active duty in the Armed Services shall be granted a leave of absence for the length of service as required by applicable federal or state law. Military leaves for extended tours are without pay and no benefits shall accrue during the period of the leave except as may be required by applicable federal or state law. Employees who are ordered to annual training may also take a leave of absence for such training. Employees shall provide their Director/Manager a copy of orders for military training within five days after the Employee receives the orders.

H. Jury Duty and Court Time.

1. Jury Duty. An Employee who is called to perform jury duty will be permitted the necessary time off to perform such service and will be paid the difference between the regular rate of pay for the scheduled workdays missed and the jury duty pay received, provided that the Employee has made arrangements, confirmed in writing, with the Employee's supervisor in advance of jury service. These benefits shall be extended only to Employees who are called, not Employees who volunteer, and shall be limited to a maximum of 10 days. For service beyond the 10 days, the Employee has the option to use their Paid Time Off or take time off without pay. The Employees must provide a signed statement from the responsible officer of the court as proof of jury service and jury duty pay received. When an Employee is on jury duty, for purposes of rates of pay, the Employee will be assumed to have worked the day shift Monday through Friday. An Employee who was regularly scheduled to work Monday through Friday will not be shifted involuntarily to weekend work when they are on jury duty. An Employee shall report to work if four or more hours of the Employee's shift remain at the end of jury service for the day. An Employee assigned to the evening or night shift shall be excused from work for each workday during which the Employee performs at least four hours of jury service. Jury service shall include time spent reporting and being held at the courthouse for availability.

2. Court Time Compensation. If an Employee is required to testify on behalf of the Hospital, the Employee will be compensated for all time spent in official trial proceedings and will be reimbursed for reasonable travel and meal expenses incurred.

3. Effect on Pay. Unless otherwise specified, leaves of absence will be granted without pay. Employees shall use PTO, where applicable, while on authorized leave.

4. Effect on Benefits. An Employee will not lose previously accrued benefits as provided in this Agreement, but will not accrue additional benefits during the terms of an

authorized leave of absence. Benefits provided while on FMLA/OFLA and Military Leave will be in accordance with Hospital policy and applicable federal and state law.

Article 12 - Labor Partnership Committee

The Hospital, jointly with Employees selected by the Union, shall establish a Labor/Partnership Committee (LPC) to assist with problem solving during the term of the collective bargaining agreement. The purpose of the Labor/Partnership Committee shall be to foster improved communication between the Hospital and the Employees, to increase Employee engagement, and to enhance labor relations. The functions of the Committee shall be limited to an advisory rather than a decision-making capacity. The Committee will recommend solutions to identified problems.

The Committee shall be composed of five representatives of the Hospital and five representatives of the Union, with no more than one Employee from a particular Department. The goal is to ensure that the Committee is representative of Hospital work areas. The Committee shall operate under guidance of co-chairs, one selected by Management and one by the Union. Management or the Union may request a meeting of the LPC when there is a need to collaborate or discuss topics that will meet the goals of improving communication and/or Employee engagement. Members of the committee will be compensated at the Employee's regular straight-time rate of pay (up to one hour) while in attendance at scheduled LPC meetings. The co-chairs shall prepare a common written agenda for each meeting to be normally distributed to all Committee members three days in advance of the meeting whenever possible and minutes shall be taken at the meeting.

By mutual agreement, additional guests may be invited to attend to address issues on the agenda.

Article 13 - Hospital-wide Safety (EOC) Committee

The Hospital and the Union are committed to enhancing the health and safety of Employees while they are at work. To that end, the Hospital will include a designated member representative of the Union on the Environment of Care Committee, who shall be paid for their time spent at committee meetings.

Article 14 - Department Meetings

Each Department in the Hospital generally holds monthly meetings that include the following standing agenda items: safety, quality, performance improvement, staffing, and a review of key performance indicators, and will continue to do so. These are collaborative meetings to encourage discussion among Department members. Employees are paid for time spent in such meetings. A summary of topics discussed in meetings and/or meeting minutes will be jointly reviewed and available to Employees in the Department.

Article 15 - Seniority

A. Seniority. Seniority shall mean the length of continuous employment within the Hospital in a capacity covered by this Agreement. Continuous employment includes the

performance of a bargaining unit position for all scheduled hours of work, including time off because of earned time off, and authorized leaves of absence.

Seniority shall be accumulated for each full-time and part-time bargaining unit member based on years of service to the Hospital. Per Diem Employees do not accrue seniority.

Seniority is lost upon termination/resignation of employment, a layoff in excess of six months, failure to report for work as scheduled after leave of absence, or failure to return from layoff upon recall. Bargaining unit Employees who return to work at AHCG within six months shall have AHCG seniority restored. Seniority restored for this purpose will be seniority at the date seniority was lost.

B. Layoffs and Recall. In cases where circumstances necessitate a layoff of bargaining unit Employees or a reduction of hours, AHCG shall, except in unforeseen emergency or disaster circumstances, notify the OFNHP in writing a minimum of 14 calendar days in advance and specify the positions so affected.

In no event shall Agency, temporary, or contract Employees be retained in any Department while qualified bargaining unit members are on layoff.

In the event of a layoff of more than 10 days in a specific Department of the hospital, the following will apply: Per diem Employees shall be laid off first. Then, if necessary, full-time or part-time bargaining unit Employees within the Department affected will be laid off by order of seniority. An Employee may be retained out of sequence of seniority if the Employee with greater length of employment cannot meet the unit-specific competency standards and licensure/certification measurements needed with one week of orientation.

Employees shall be recalled in the reverse order of layoff within their Department provided they meet the unit-specific competency standards and licensure/certifications for the particular position. It is recognized that in exercising seniority in situations of layoff or recall, an Employee must be willing to work the available shift and hours. The consolidation of part-time and full-time Employees to one list for purposes of layoff and recall is not a limitation on the Hospital's right to determine appropriate staffing strategies under the prevailing conditions, within the provisions of this Agreement. For example, if the shift available under the staffing strategy established by the Hospital is a full-time position and the senior Employee on the recall list has been part-time, the senior Employee may elect to accept the available full-time shift and hours offered by the Hospital or pass the opportunity to the next senior Employee. An Employee electing to pass on an available position may bid on the next available opening.

C. Job Postings.

1. Filling of Vacancies. A vacancy is defined as a newly created position or a position that becomes vacant due to an Employee leaving the position. The Hospital will post vacancies electronically for a period of seven calendar days and may post internally and externally at the same time. Position postings shall include required qualifications, Department, shift (if applicable), and mandatory standby obligation where applicable. Qualifications will be based on the requirements of the position.

2. General Vacancies. The Hospital will follow its corporate policy entitled Recruitment and Hiring Process. If two or more applicants (internal or external) meet the posted qualifications, the Hospital shall select the most qualified applicant. To determine which applicant is the most qualified, the Hospital will consider education, certifications, and work experience. If the Hospital determines that multiple applicants (both internal or external) possess equal qualifications, it will select the most senior bargaining unit applicant. The selection shall not be arbitrary or capricious and will be based on factors that are capable of accurate comparative assessment.

Except as allowed by Hospital policy, an Employee may not be considered for a vacancy when they are on active corrective action issued within the last six months.

Article 16 - Scheduling

A. Postings. All work schedules shall be posted a minimum of two weeks in advance and shall describe work schedules for each scheduling period. A scheduling period will be for a length of time of at least four weeks, but not longer than six weeks. The Hospital will provide at least 10 days' advance notice to affected Employees and OFNHP prior to implementing a change to the scheduling period. Once the final schedule is posted, schedules shall not be changed without the consent of the Employee(s) affected by the change. The Hospital will make a good-faith effort to include meetings, trainings, and orientations in the final schedule, with the understanding that there will be times when they need to be scheduled with less notice for reasons of staff and/or patient safety, in which case they are not subject to the preceding sentence regarding schedule changes. The Hospital agrees to work with Employees within each unit to assure an equitable rotation of extra shifts and voluntary overtime among regularly scheduled Employees. It is understood that nothing in this Section shall be construed to guarantee employment and that the Hospital may cancel an assigned shift with the proper notice without financial liability as a result of low census identified in the Article 17 regarding Low Census.

B. Posting Regular Schedules. The Hospital may post regular schedules of 8-, 9-, 10- or 12-hour shifts, or combinations thereof in accordance with Article 9. The Hospital and an Employee may agree to different shift lengths. If the Hospital posts new scheduled shift(s) in a Department, the Hospital will first award the scheduled shift(s) to interested, qualified Employees in the applicable classification by seniority. If there are no interested Employees, the Hospital may cancel or assign the new scheduled shift(s), When a new shift schedule position is filled, each affected Employee shall receive a written statement of the effect of the new shift schedule on overtime compensation and fringe benefits, A copy of the written statement shall be provided to the OFNHP within seven calendar days of the agreement.

C. Weekends. It is acknowledged by the parties that the current weekend scheduling practices in various Departments are not consistently applied within all Departments. It is not the intent of this contract to alter those existing weekend scheduling practices. If either party proposes alterations in the current practices, both parties will discuss alternative solutions.

Article 17 - Low Census

A. The Hospital and OFNHP agree that in the interests of high-quality patient care and prudent fiscal responsibility, Employees may have to be sent home when patient census or patient volume fluctuates. Low census is defined as the day-to-day fluctuations in patient census and/or patient volume for various reasons and is considered temporary in nature.

B. Employees may be assigned by management to take mandatory low census on an equitable rotation.

In assigning low census, the Hospital will assess patient needs and staff skill mix and will ensure the staff remaining on duty are competent to provide all manner of care or services needed for that Department.

As determined by the Hospital that appropriate skill mix is maintained, Employees will be low censused in the following order:

1. Employees working at an overtime or premium rate of pay during the shift;

2. Volunteers;

3. Agency Personnel (The Hospital will exercise all shift cancellations permissible under the contract between Adventist Health and the Agency. Once the Hospital has exhausted all shift cancellations available for the Agency personnel, it shall low census in accordance with the subsequent list [per diem, part-time non-benefited, etc.]);

4. Per Diem Employees;

5. Part-time non-benefited Employees; and

6. Full-time and part-time benefited Employees on an equitable rotation provided that the Hospital determines that skills, competency, ability, and availability are considered equal.

C. Employees who are assigned or volunteer for low census shall be given credit toward seniority towards all contractual benefits.

Employees may choose to use accrued PTO when they volunteer or if they are mandated to take low census.

Low census shall not negatively impact an Employee who accepts an incentive pay shift of work during that pay period where an Employee accepts or volunteers for low census.

Article 18 - Hours of Work

A. Basic Workweek. The basic workweek shall be 40 hours in a workweek of seven consecutive days or 80 hours in a work period of 14 consecutive days, as designated in advance by the Hospital.

It is understood that Employees who are scheduled to work more than five consecutive days in a 14-day payroll period shall normally be assigned to two consecutive days off. In no case shall an Employee be assigned to work more than five consecutive days without the Employee's consent. Such consent includes applying for a schedule that provides for working more than five consecutive days. If an Employee is called back for more than an eight-hour shift during a weekend of stand-by worked, or who works an extra shift on the weekend, between two regularly scheduled weeks of work, the Hospital will first offer any available low census on the following Monday to Employees who worked call or an extra shift on the weekend.

B. Overtime Compensation. Overtime compensation will be paid at one and one-half times the Employee's regular straight-time hourly rate inclusive of applicable shift differentials for all hours worked in excess of:

1. 40 hours (or 36 hours for Employees assigned three shifts of 12 hours, or four shifts of nine hours per week) in each workweek of seven consecutive days; or

2. 80 hours in each pay period of 14 consecutive days (for Employees on an eight-and-80 work agreement); or

3. Daily overtime for additional time worked beyond the Employee's regular scheduled shift of eight, nine, 10, or 12 hours.

Overtime shall not be pyramided, meaning that time worked at time and one-half will not count towards overtime.

Time spent in staff meetings and education do not count toward overtime unless the Employee exceeds a scheduled shift of eight, nine, 10, or 12 hours, or 40 hours in a workweek.

Overtime compensation will be paid at two times the straight-time hourly rate for all hours worked in excess of 16 consecutive hours. The Hospital shall not post schedules or require any Employee to work more than one shift in a payroll day, but such shifts may be assigned with the Employee's consent as required to meet unexpected scheduling problems.

All available overtime hours will be offered first to Employees on a voluntary basis, and will be posted, texted to eligible Employees, and/or discussed in daily huddles.

C. Rest Period. One 15-minute rest period shall be allowed during each four-hour period of employment. One half-hour (30 min) unpaid meal period shall be provided to Employees working more than six hours in a workday. The Hospital will provide designated space for Employees to take breaks and meal periods.

The Hospital, OFNHP, and bargaining unit Employees have a mutual interest in Employees taking their meal and rest periods. The parties agree that there is a mutual responsibility to ensure Employees take their meal and rest periods. Employees will take their meal and rest periods when scheduled and/or directed by Department management, in accordance with the demands of the Department and Oregon law.

D. Reporting to Work. Employees who are scheduled to report to work and who are permitted to come to work without receiving prior notice that no work is available in their regular assignment shall perform any work to which they may be assigned. When Hospital is unable to utilize such Employee, the Employee shall be paid an amount equivalent to two hours times the straight-time hourly rate plus applicable shift differential.

The provisions of this Section shall not apply if the Hospital makes a reasonable effort to notify the Employee by telephone not to report for work at least two hours before the Employee's scheduled time to work. It shall be the responsibility of the Employee to maintain a current address and telephone number in the Hospital's electronic personnel system and with the unit Leader. Failure to do so shall preclude the Hospital from the notification requirements and the payment of the above minimum two-hour guarantee.

E. Weekend Shifts. Hospital will attempt to schedule all Employees who indicate such a preference so that they have at least two full weekends off in a 28-day period, except those Employees who have signed up for a posted schedule that includes more weekend shifts. If there are insufficient volunteers to cover weekend shifts, each Employee may be expected to work up to two weekends (four shifts) per four-week schedule period.

F. Cases of Emergency. Except in cases of emergency, Employees will not be asked to work two consecutive shifts in the same 24-hour period.

G. Staff Meeting Attendance. Attendance to Department staff meetings shall be made available by phone or video conference. If an Employee is not able to attend a staff meeting in person, the Employee may attend by phone or video conference unless the staff meeting contains a "hands-on" training component, in which case all Employees must attend in person. For staff meetings that do not contain a hands-on training component, an Employee who attends by phone or video conference will receive full credit for attending. Attendance at staff meetings, whether in person or by phone or video conference, will be on paid time.

H. Critical Shift Incentive. Bargaining unit Employees will receive for Critical Shift Incentive pay when the Hospital determines a shift must be filled on short notice for critical Departmental staffing to meet patient care needs and designates the shift as eligible for "Critical Shift Incentive." Critical Shift Incentive pay shall be a flat hourly rate, as determined year-to-year by the Hospital. Annually, the Hospital shall provide notice to the bargaining unit and OFNHP of the amount of the flat fee. The Hospital shall notify eligible bargaining unit Employees of available critical shifts and award such shifts on a first-come, first-serve basis.

Article 19 - Wage Rates and Compensation

A. New Step Schedule. Effective the first day of the third pay period following ratification of this Agreement, the Hospital will adopt the step schedule attached as Appendix A.

B. Initial Step Placement. Effective the first day of the third pay period following ratification, Employees will be placed on the step that corresponds with their prior years of experience in their current classification or in a classification that is included in their current bargaining unit Department, including experience before and since they were hired at the Hospital. For Employees in Departments of the bargaining unit that have more than one bargaining unit classification, time spent in a classification in the same Department that is different from their current classification will receive 100% experience credit for any classification in the same Department. For example, a current MRI Tech would receive 100% credit for time worked as an MRI Tech and 100% credit for time worked as a Radiology Tech, but no credit for time worked in a classification outside of DI.

To reflect the change to a 25-step wage table, the Hospital will adjust current Employee's step placement by moving the Employee to the step that reflects their work experience. Current bargaining unit Employees will not experience a reduction in pay as a result of this Agreement.

C. Review of Credit for Work Experience. The Hospital will provide the Union with a list of bargaining unit Employees and their step placement within one week following ratification. Within 28 days following their placement on the step scale, Employees will have a one-time opportunity to request that they be placed at a higher step based on their years of work experience. Such request must be in writing and include supportive documentation. For each request received, the Hospital will review such request and respond within 30 days in writing with a copy to the Union.

D. Step Placement Upon Hire. New hires will receive credit for prior experience as outlined above in "Initial Step Placement."

E. Step Progression. Employees shall advance to the next step of the wage scale at the beginning of the pay period that includes their anniversary date in a classification represented by this Agreement.

F. Assignment to Lower Classification. If an Employee is temporarily assigned to a lower classification, the Employee's pay will not be reduced. If an Employee moves to a lower classification, either through a job bid, demotion, or reasonable accommodation, their pay will be reduced to the appropriate step in the lower classification.

G. Continuing Education. Employees must complete all mandatory education requirements in order to be eligible for movement to the next wage step. It is understood that this requirement is stated as hours spent in credited activities rather than units of credit allowed for educational activities.

H. Step Placement Upon Promotion. When an Employee is promoted to a classification at a higher Grade within the same Department, they will receive credit for their prior related experience, as outlined above under "Initial Step Placement." In the event that such placement results in a decrease in pay, the Employee will be placed as follows: the step closest to their pre-promotion wage, without going down, plus one step.

Effective the first full pay period following January 1, 2027, and each subsequent contract year (first full pay period following January 1, 2028 and January 1, 2029), the Hospital shall pay

a lump sum of $1,000 for each full-time and $500 for each part-time benefit-eligible Employees who are at Step 25 (top of Appendix A wage scale).

I. Future Increases. The step schedules will be increased in the first full pay period following each of the dates stated below during the term of the Agreement:

January 1, 2027 [Year 2]: 3%

January 1, 2028 [Year 3]: 2.5%

January 1, 2029 [Year 4]: 2%

J. Shift Differential. The evening shift differential is $2.50 per hour. The night shift differential is $ 5.00 per hour. The evening shift differential shall be paid to shift Employees for all hours worked between 3:00 p.m. and 11:00 p.m. The night differential shall be paid to shift Employees for all hours worked between 11:00 p.m. and 7:00 a.m. Shift differential will not be paid to Employees held over after 3:00 p.m. from a day shift or starting before 7:00 a.m. on a day shift, unless the Employee works more than two and one-quarter hours beyond the Employee's regularly assigned shift, in which case the shift differential will apply for the hours worked outside the normal day shift. Night shift differential will not be paid to Employees held over after 11:00 p.m. from an evening shift, unless the Employee works more than two and one-quarter hours beyond the Employee's regularly assigned shift, in which case the night shift differential will apply for the hours worked outside the normal day shift.

K. Weekend Differential. Employees working a regularly scheduled weekend shift (including Employees substituting on a regularly scheduled shift) will be paid a premium of $1.50 for each hour worked, in addition to any other applicable differential or premium. (It is understood that shift and weekend premiums are not part of an Employee's regular straight-time hourly rate of pay.) The weekend shifts for purposes of this premium shall be a 48-hour period, beginning on Friday at 7:00 p.m. and ending on Sunday at 7:00 p.m.

L. Preceptor Differential. The Hospital may assign Employees as preceptors for other Employees. Preceptor assignments and duties are at the discretion of the Hospital. Employees assigned as preceptors will be paid $1.25 per hour for the hours during which the Employee is performing preceptor duties.

M. Student Trainer Differential. The Hospital may assign Employees as trainers for students. Student Trainer assignments and duties are at the discretion of the Hospital. Employees assigned as Student Trainers will be paid $1.50 per hour for the hours during which the Employee is performing Student Trainer duties.

N. Lead Differential. The Lead premium of $2.00 per hour will be paid to an Employee who is working in a Relief Lead role and designated in writing by the Hospital to have Lead responsibilities. The selection and the assignment of the Lead duties shall be at the sole discretion of the Department manager. It is understood that any relief Lead identified in writing by the Department manager shall be entitled to the Lead differential when carrying out such assignments in the absence of the regular Lead.

O. Certification Pay. Employees will receive a differential of $2.00 per hour for Hospital-designated certification(s) in a specialty area that are above and beyond any certification required by the job description or does not make them eligible for a higher-level position covered under this CBA. Example: CLA I to a CLA II or Pharmacy Tech I to a Pharmacy Tech II.

Article 20 - Minimum Terms

All wage ranges, benefits, and other economic provisions of this Agreement establish minimums, and nothing herein shall be deemed or construed to limit the ability to increase wage rates and/or scales, benefits, premiums, and differentials, and to pay other extra compensation by mutual agreement between the hospital and OFNHP. Accordingly, it is also understood that any such increases shall be over and above the economic package negotiated under Article 19. No Employee shall suffer any reduction in wages or benefits as a result of the execution of this Agreement, except as provided for in this Agreement.

Article 21 - Health and Welfare

A. Flexible Benefit Plan. Eligible Employees will participate in the Hospital's Flexible Benefit Plan which currently includes:

1. Core Benefits. AHCG's Core Life Insurance, Health, Vision, Core Dental Plan, and Hospital contributions to 401 (k) Plan, plus Flexible Spending Account (FSA).

2. Optional Benefits. Additional Life Insurance, Short- and/or Long-term Disability Plan, and 401(k) Plan.

B. The Core benefits are provided by the Hospital to eligible full-time Employees, eligible regular part-time benefit-eligible Employees with at least 40 hours scheduled each pay, and part-time non-benefit-eligible Employees. Part-time non-benefit-eligible and per diem Employees are not eligible to participate in the Hospital's Core or Optional benefits, except those who qualify for the Hospital 401(k) match.

C. The Hospital will contribute as described below for the health and vision components of the Core Benefits described above.

D. For Plan Years 2026, 2027, 2028, and 2029, the Hospital will base its contributions and the Employee's contribution for the health and vision components of the Core Benefits (standard plan) described above on the premium sharing arrangement described and reflected in the percentages described in the table below.

Level	Monthly Hospital Contribution Full-time	Monthly Employer Contribution Part-time	Monthly Employee Contribution Full-Time	Monthly Employee Contribution Part-Time	Total %
Employee only	85-100%	67%	0-15%	33%	100%

Employee & Spouse	80%	74%	20%	26%	100%
Employee & Child(ren)	83%	74%	17%	26%	100%
Employee & Family	77%	74%	23%	26%	100%

The Hospital may offer plans in addition to the standard plan, at different contribution rates. Participation in plans other than the standard plan shall be voluntary.

In addition, the Hospital continues the Section 125 (Cafeteria) plan which Employees may elect to fund with pretax dollars for uses permitted by the IRS.

E. Future Modifications. It is recognized that the Benefit Plans described above have been put together by the Hospital and professional consultants for the benefit of all Hospital Employees. The parties further recognize that with the rapidly evolving conditions in healthcare, it is not possible to anticipate the future details of plan benefits or problems. The Hospital may revise its terms to accommodate changing conditions or the interests of the users. In no case, however, will the Hospital's contribution for benefits (standard plan) under the plan drop below the equivalent of $8,000 annually for a full-time Employee, although the level of benefits under the plan may be altered to provide varied benefits. Under either case, the Hospital will pay 85-100% of the cost for coverage for core or basic benefits (standard plan) for full-time Employees for health, dental, vision, and life insurance. Before a substantive change in the plans as currently described is effective, the Hospital will provide the Union two comment opportunities by prior written notice (usually at least 90 calendar days and 60 calendar days prior to implementation) to allow the bargaining unit an opportunity to discuss any proposed revisions in the Benefit Plans. In addition, any proposed changes will be submitted for review and comment by the Health Plan Advisory Committee (HPAC). The Hospital will give meaningful consideration to input received from the bargaining unit, the HPAC, and other commentators, before management makes final decisions regarding the redesign of health care benefits. The final design of the plan is recognized as a management responsibility, not subject to substantive review by the grievance and arbitration process of the labor agreement. Any revised plan will be the same for non-unit Hospital Employees as for bargaining unit Employees. Any revised plan will afford to regular part-time benefit-eligible Employees the opportunity to purchase coverage.

F. Discounts. Benefit-eligible Employees, their lawful spouse, and dependent children shall be given a courtesy discount of 20% on any Hospital bill incurred at AHCG, less the amount paid by insurance and copay. Recognizing that Employee family relationships are not always evident at the time of purchase, the Employee should discuss the discount with Patient Accounts where necessary to facilitate accurate billing. All Employees and their dependents may purchase pharmaceuticals from the Hospital pharmacy (Employees at any time, and their dependents during normal pharmacy working hours). Pharmaceuticals not covered by the Adventist Health medical plan will be available at cost plus dispensing fee.

G. Tests. At the beginning of employment, the Hospital shall provide benefit-eligible Employees a tuberculin test and, if necessary, a chest x-ray. Routine blood examinations, mammograms, and urinalysis are permitted annually at no cost to the Employee. Routine blood examinations shall be defined as: Lipid A profile (triglycerides, HDL, LDL, Cardiac Risk Ratio), CBC, and Glucose Test. Routine PSA tests are permitted annually at no cost to the male Employee.

The Union endorses the concern of the Hospital and its Employees for the need to respect appropriate protocols in balancing the confidentiality concerns for patients and physicians with the health and safety concerns for hospital staff in dealing with infectious diseases.

To the extent expressly permitted by statute, regulation, and case law, the Hospital shall disclose Hospital-run positive HIV results of patients to all Employees involved in the care of such patients. The Hospital shall also grant at no cost to the Employee HIV tests of the Employee as soon as practicable after the Employee informs the Hospital that she or he may have been exposed to the AIDS virus in the course of the Employee's duties. At the request of the Employee, a second test will be offered between four and seven months following the potential exposure to the AIDS virus.

The Hospital agrees to pay for the testing and immunization of Employees by the Hospital who request immunization against HBV virus in accordance with CDC guidelines.

H. Gloves. For Employees who have demonstrated a sensitivity to latex products, the Hospital shall provide synthetic gloves for their use.

Article 22 - Paid Time Off

A. Definition. Vacations, holidays, and sick leave for eligible Employees are addressed pursuant to a formal Paid Time Off (PTO) Plan. PTO hours accrued are based on hours compensated including regular hours, overtime hours, callback, PTO (other than PTO cashed out or donated), on-call hours (due to low census), low census hours, compensated education hours, periods of compensated jury duty, and other paid authorized leaves; provided that PTO hours are not pyramided (counted more than once for accrual purposes). For example, where an Employee originally scheduled eight hours is called off for low census and elects to use PTO to provide compensation for the shift, PTO will accrue on eight hours—not 16 hours. PTO is not earned on uncompensated time except for low census hours. Scheduled days taken off without pay when the Employee must be replaced on the schedule will not count as days worked for the purpose of PTO accrual. PTO shall be used for authorized leave, holidays, vacations, sick days, and for illness of family members to the extent allowed by law. PTO will be paid at the Employee's regular rate of pay including any shift or national certification differential which the Employee has been regularly receiving but excluding all other differentials, including weekend premiums.

B. Eligibility. All regular full-time and part-time benefit-eligible Employees will accrue PTO. PTO hours are accrued based upon hours compensated including regular hours, overtime hours, callback, PTO, on-call hours (due to low census), low census hours, compensated education hours, periods of compensated jury duty, and other paid authorized leaves. Regular part-time benefit-eligible Employees may accrue PTO for as long as they remain employed in a regular

part-time benefit-eligible capacity as defined in this Agreement by exercising the option described in Article 9. PTO will be available as it is accrued.

C. Accrued PTO may be utilized, at the Employee's option, to supplement worktime lost due to low census cancellation. PTO shall only be used to complete the Employee's timecard up to 40 hours per week or 80 hours per pay period.

D. Accrual Rates.

Length of Service	Earned Per Hour	Maximum Banked Hours
Year 0-5	.1068	400
Year 6-10	.1282	480
Year 11+	.1496	560

The periods of continuous employment (length of service) required to qualify for PTO accrual described above refer to regular full-time or regular part-time benefit-eligible (at least 40 hours per 14-day pay period) employment in the Hospital. Length of service shall be measured as of the Employee's anniversary date of employment each year.

E. Use of PTO for Vacation. PTO may be taken in as little as one-hour increments. In scheduling PTO, Employees shall request PTO electronically (or in writing for requests under number 1, below). PTO shall be scheduled by mutual agreement. PTO times will be established on a first-come-first-served basis by date of application. In the event two or more Employees request the same time and make a request on the same calendar date and only one Employee can be granted the request, the most senior Employee will be granted the PTO time requested. An Employee who exercises a seniority preference for scheduling PTO may not again exercise a seniority preference during the next one year. Requests for PTO should be submitted as far in advance as possible, not to exceed 12 months, to the Department Leader, at least four weeks prior to posting of the tentative schedule for the requested time. Requests will be responded to in writing within two weeks of their submission. The Hospital will grant request(s) for prescheduled time off for a minimum of one Employee per shift, per areas represented by this Agreement. It is understood that the Hospital reserves the right to determine how many Employees may take PTO at one time; however, the Hospital agrees to make good-faith reasonable efforts to grant time off to more than one Employee per shift, per eligible units. Once a schedule is posted, PTO may only be granted based on illness, protected leave, or emergency, unless an Employee finds a colleague to work a scheduled shift that does not result in overtime and/or approval by the Employee's manager.

F. Use of PTO for a Holiday. On recognized holidays, an Employee who is scheduled off or placed on low census call due to the holiday will receive pay for up to one day of accrued PTO. If the Employee is scheduled for an additional day during the week in lieu of the holiday, the Employee will not be required to use PTO.

G. Use of PTO for Short-term Illness. An Employee who becomes ill and has exhausted their Oregon Sick Time hours may use PTO for hours scheduled to work at the regular rate of pay, as shown in Appendix A. An Employee who fails to notify the Employee's immediate supervisor at least two hours in advance of the scheduled shift that will be missed because of

illness, except in verified emergencies where such notice is not possible or the Hospital determines the Employee made a good-faith effort to provide at least two hours' notice, shall not receive the PTO benefit for that shift.

H. The Payroll/Human Resources office will maintain a record of PTO accrued and used for each Employee. In addition, current accrued PTO hours will be shown on an Employee's paycheck stub.

I. PTO Cashout. The maximum number of PTO hours an Employee may accumulate is set forth in Section D (Accrual Rates) above. Once the maximum has been reached, no further hours will accrue until the Employee has taken PTO time off. Non-probationary Employees shall have the ability to cashout up to 80 hours of accrued PTO once per year on the first pay date in January of each calendar year.

J. All PTO accrued but unused by any Employee who accrues PTO at the time of termination will be converted to cash at the rate of one hour paid for each hour earned, using the Employee's final base rate of pay. It is understood that PTO does not accrue on PTO cashed out or donated.

K. Low Census. Employees may elect to use PTO to fill in hours missed while on low census or low census call time.

Article 23 - Extended Illness Time

A. The Hospital provides Extended Illness Time for full-time and part-time Employees who maintain a regular schedule of at least 40 hours per two weeks' pay period. For purposes of Article 22, Employees will be referred to as "Eligible Employees." Extended Illness Time is for illnesses or injuries that qualify as an approved leave of absence (i.e., FMLA, ADA, etc.).

To qualify for Extended Illness Time, Eligible Employees must submit and be approved for a leave of absence through the Hospital's Integrated Absence Management. Approval will require the submission of a medical certification from their healthcare provider to certify the nature of the Eligible Employee's medical condition or family member's medical condition. [The parties acknowledge that a medical certification for absences of less than three days is not required (as of February 13, 2026) for nonserious medical conditions of a "sick child" under OFLA.] Eligible Employees must obtain a release to return to work from the Eligible Employee's healthcare provider to if the leave was because of the Employee's own injury or illness.

Employees with wage replacement benefits, PTO, Sick Time, and Extended Illness Time will supplement wage replacement benefits to a Eligible Employee's average paid hours, unless prohibited by applicable law. The calculation will be based on the Employee's base rate of pay, without regard to differentials. Once wage replacement benefits cease and the Eligible Employee still has PTO, Sick Time, Extended Illness Time available, Employee can use such time to match the FTE equivalent of the Employee.

This Article will be administered in a manner consistent with the Hospital's leave of absence policies and applicable law.

B. Accrual. Accruals for the Extended Illness Time begin on the first day worked for full-time and part-time benefit-eligible. Eligible Employees who work 80 hours per pay period earn (1.54) hours of Extended Illness Time per pay period. Employees who work less than 80 hours per pay period will earn Extended Illness Time on a prorated basis. Extended Illness Time can accumulate to a maximum of 800 hours. Extended Illness Time is not paid out upon termination. If an Employee is rehired within 90 days from the date of separation, previously accrued and unused Extended Illness Time shall be reinstated.

Years of Service	Earned per 80 hours	Maximum eligible hours per pay period	Maximum Hours Banked
All	1.54	80	800

C. Use of Extended Illness Time. An Eligible Employee may use Extended Illness Time as follows:

Eligible Employee's Own Illness or Injury – Nonwork-related:

1. An Eligible Employee must be on an approved leave of absence due to a qualifying illness or injury, or a disability related to pregnancy or a pregnancy-related condition. Medical certification from the Employee's healthcare provider certifying the nature of the disability is required.

2. Extended Illness Time is designed to integrate with benefits received from a state disability plan such as Oregon's Paid Family Leave (OPFL).

3. SDI and Workers' Compensation. Employees may be eligible for OPFL if the workers' compensation insurance carrier denies or delays workers' compensation payments.

4. If an Employee has been released to return to work or is no longer on an intermittent leave of absence, Employees will be required to use Sick Time or PTO for all additional absences. If all Sick Time or PTO has been exhausted, further time off will be unpaid.

Eligible Employee's Own Illness or Injury – Work-related:

5. An Eligible Employee with an accepted claim for Workers' Compensation benefits must be on an approved leave of absence due to a qualifying illness or injury. Medical certification from the Employee's healthcare provider certifying the nature of the disability is required.

6. Extended Illness Time is designed to supplement Workers' Compensation wage loss benefits such as Total Temporary Disability (TTD).

7. The waiting period before Total Temporary Disability (TTD) benefits are payable is three calendar days. During the three day unpaid waiting period, the Eligible Employee can elect to take the time as unpaid or elect to use their accrued Sick Time (ST) and/or PTO.

8. For relapses of the same illness or injury requiring another qualifying leave of absence, the Employee may access Extended Illnesses Time without being subject to another three day waiting period. Any new qualifying illnesses or injuries with a new accepted claim for Workers' Compensation benefits may be subject to the three day waiting period.

Eligible Employee's Family Member's Illness or Injury:

9. An Eligible Employee must be on an approved leave to provide care for a family member as defined by state law and Article 24 Sick Time. Eligible Employees must obtain a medical certification from the family member's healthcare provider to certify the nature of the family member's disability. [The parties acknowledge that a medical certification for absences of less than three days is not required (as of February 13, 2026) for nonserious medical conditions of a "sick child" under OFLA.]

10. Extended Illness Time is designed to integrate with benefits received from a state plan such as OPFL. Oregon PFL does not have an unpaid waiting period before payments begin; therefore, an Eligible Employee can elect to use accrued Extended Illness Time effective day one of the approved leave or take the leave as unpaid.

11. If an Employee has been released to return to work or is no longer on an intermittent leave of absence, Employees will be required to use Sick Time or PTO for all additional absences. If all Sick Time or PTO has been exhausted, further time off will be unpaid.

12. Exception Oregon: The state of Oregon's Paid Leave benefit does not have an unpaid waiting period before payments begin; therefore, an Eligible Employee can elect to use Extended Illness Time effective day one of the approved leave.

13. Eligible Employee's Use for Judicial Proceeding*: An Eligible Employee who is absent from work in order to attend judicial proceedings because they are a victim of certain specific crimes, are an immediate family member of a victim, or other specified individuals may use accrued and available Sick Time for the absence. The Eligible Employee must use PTO for all additional hours of scheduled work not covered by Sick Time during the first seven calendar days of use. Extended Illness Time will be used thereafter. *Only time off taken under Oregon's Victim of Domestic Violence, Sexual Assault, Stalking, or Harassment Leave are eligible to use Extended Illness Time for this leave.

D. Conversion at Retirement. Employees who retire in good standing at age 65 with at least 10 years of continuous service immediately preceding their retirement date or at age 60 with at least 15 years of continuous service immediately preceding their retirement date will be eligible to use a percentage of their banked EIT (up to 624 hours of banked EIT hours) to purchase a Medicare supplement to the extent permitted by law or COBRA continuation coverage under any health plan other than a health flexible spending account according to the benefit table below. This percentage will be paid out to eligible Employee in a lump sum, to a maximum of $7,500, at retirement.

Otherwise, EIT benefits are not eligible for conversion or cashout and are recognized instead as a form of insurance available to eligible Employees during their term of employment at the Hospital.

Years of Service	Percentage of EIH Hours Available (up to 624 banked hours)
10 years	20%
15 years	30%
20 years	40%
25 years	50%
30 years	60%

The EIT Conversion at Retirement provisions of this Article sunsets at the expiration of this Agreement, December 31, 2029.

Article 24 - Sick Time

A. Eligible Sick Time. Employees are eligible to accrue Sick Time, which is to be used for Employee's own healthcare needs, including diagnosis, care, or treatment of an existing health condition and/or preventive care, or for the healthcare needs of a family member, including a child (biological, adopted or foster, stepchild, legal ward, adult dependent child, or in loco parentis), spouse, parent (biological, adoptive or foster, stepparent or legal guardian, registered domestic partner, parent-in-law), registered domestic partner, grandparent, or grandchild. Sick Time can also be used by victims of domestic violence, sexual assault, or stalking to seek aid, treatment, or related assistance, Oregon law.

Employees may use Sick Time for bereavement leave or in the event of a public health emergency, including upon an order of a general or specific public health emergency, or when the employer excludes the Employee from the workplace by law or rule for health reasons.

In the event an Employee utilizes all Sick Time available for use and is subsequently absent from work due to illness, the Employee may be qualified for other type of time off, consistent with Hospital policy and this Agreement.

B. Accrual. Following three full pay periods following ratification of this Agreement, Sick Time will begin to accrue at the rate of one hour Sick Time earned for each 30 hours worked. Employees hired into the Bargaining Unit will accrue Sick Time at the rate of one hour for each 30 hours worked beginning on the Employee's first day of employment.

Employees employed in a bargaining unit position at the time of ratification will receive 20 hours of Sick Time, effective three full pay periods following ratification.

Sick Time accrues based only on "hours worked." Sick Time will not accrue on on-call hours. Sick Time does not accrue while an Employee is using paid hours under Article 23, PTO for vacation or holiday time, or while an Employee is on a paid or unpaid leave of absence. Sick Time is not counted as hours worked when computing overtime pay.

C. Use. New Employees start accruing immediately upon hire but may only begin using Sick Time beginning on their 90th day of continuous employment.

Employees may use Sick Time in increments of 15 minutes and up to scheduled hours for any shift and the Employee's assigned FTE.

Employees may only request and use Sick Time based on the maximums stated in this Article and on shifts for which the Employee is scheduled to work and within their Hospital assigned FTE.

When leave is anticipated, Employees must make reasonable efforts to schedule planned paid sick leave in a manner that does not unduly disrupt operations and should attempt not to schedule paid sick leave during peak work hours, when work is time-sensitive, or when mandatory meetings are scheduled.

D. Carry Over, Cash Out, Rehire. Accrued Sick Time carries over from year to year in accordance with this Article.

1. Employees may accrue up to a maximum of 80 hours of accrued, unused Sick Time. Once an Employee's Sick Time accrual reaches 80 hours, the Employee stops accruing additional Sick Time until some of the Sick Time is used and the balance falls below the 80-hour cap.

2. No Sick Time will be accrued for the period during which the Sick Time balance was at the maximum.

3. Employees are limited to using 40 hours of Sick Time in 12 months, with the rest carried over up to 80 hours.

4. Employees may use any remaining accrued Sick Time while on a qualifying leave of absence per Article 11 once all other accrued time has been exhausted.

5. Sick time is not eligible for cash out at any time during employment or upon separation of employment.

6. If an Employee is rehired within 180 days from the date of separation, previously accrued and unused Sick Time shall be reinstated.

7. If Employee is rehired within one year, the Employee need not re-satisfy the 90 day waiting period to use accrued sick time.

E. Documentation. Requests for Sick Time must be made verbally or in writing. Employees must provide reasonable advance notice for foreseeable Sick Time and give notice as soon as practicable for unforeseeable Sick Time. Employees giving notice of unforeseen Sick Time may leave a message for their supervisor but must follow-up and speak directly with the supervisor later in the day, absent extenuating circumstances. Employees will make a good-faith effort to provide two-hours advance notice to their Department Manager or designee. Employees are required to accurately report use of Sick Time and verify the proper code is used in the time and attendance system.

Employees may be required to provide documentation for the need for Sick Time [such as a doctor's note] in accordance with Oregon law.

F. Rates of Pay. Sick Time for Employees shall be calculated in the same manner as the state/federal "regular rate" of pay (used in overtime calculations) for the workweek in which the Employee uses Sick Time.

Article 25 - Holiday

A. Holidays. Holidays are a built-in component of PTO. For the purposes of this Agreement, the holidays shall consist of regular shifts for which the majority of time falls between 12:00 a.m. and 11:59 p.m. of the holiday. The following holidays are recognized by the Hospital:

New Year's Day
Martin Luther King, Jr. Day
Memorial Day
Fourth of July
Labor Day
Thanksgiving Day
Christmas Eve
Christmas Day

B. Recognized Holidays. On recognized holidays, an Employee may elect to request one day of accrued PTO. PTO shall be used in the same increments that an Employee is normally scheduled unless the Employee submits a written request for a different arrangement prior to the posting of the affected schedule.

C. Holiday Rotation. It is agreed that holiday work shall be rotated among all full-time, regular part-time benefit-eligible and part-time non-benefit-eligible within a Department by the Hospital. A regular full-time and regular part-time benefit-eligible Employee who are required to work on a holiday shall receive time and one-half the Employee's regular rate of pay for hours worked as described in Appendix A. Part-time non-benefit-eligible and per diem Employees working a recognized holiday shall be compensated at the rate of time and one-half for all hours worked; all other Employees working a recognized holiday shall be paid at the rate of time and one-half for all hours worked. When rotating holidays, the Hospital shall give consideration to Employees' holiday preferences, and no Employee will be required to work the same holiday consecutively.

D. Holiday Workdays. For purposes of the OR, an Employee's "regular" workday will depend on the posted schedule for the scheduling period in question. The parties recognize that when a contract holiday falls on a Monday, the OR workweek may be scheduled Tuesday to Friday by appropriate posting procedures to ensure four workdays of OR availability.

Article 26 - On Call/Callback

A. Effective the first day of the third pay period following ratification, an Employee on on-call status will be paid $7.00 per hour for time spent on standby (including holiday).

B. Effective the first day of the third pay period following ratification, the standby rate for Surgical Techs and Surgical Tech First Assists in the OR Employees assigned to be /on-call will be $8.00 per hour (including holidays).

C. Time actually worked on-call/callback on any call day shall be paid at one-and-one-half times the Employee's regular hourly pay with a minimum of two hours.

D. The minimum callback will be two hours (three hours for Surgery) which will be paid and worked. An Employee whose primary assignment has been completed before the end of two (or three) hours may leave work at the conclusion of the assignment upon confirming with the Department Director or Supervisor that they are no longer needed. If the Department Director or Supervisor are not available, the Employee will confirm with the House Supervisor or the Emergency Department that they are no longer needed.

E. The on-call time and eligibility for on-call and callback pay shall begin at the commencement of the shift for which the Employee is on-call. It is understood that on-call pay terminates when an Employee reports for work. When an Employee is placed on-call for a previously scheduled shift, any callback pay will be owed only for hours worked during the period for which the Employee was assigned on-call status.

Article 27 - No Pyramiding

The overtime and premium provisions of this contract will not be pyramided for any purpose in determining appropriate pay for time worked. Other than hours worked on a contract holiday, hours in a pay period for which an Employee has already received a rate of time and one-half or greater under the terms of this Agreement (for example, callback, daily overtime, or workweek overtime pay), will not be counted again for purposes of determining daily or workweek overtime pay.

Article 28 - Performance Appraisal

The appropriate manager will provide a formal performance evaluation for each bargaining unit Employee pursuant to Hospital policy, providing feedback and coaching to Employees as appropriate. The manager may seek input from any source necessary to assist with an accurate assessment of the Employee's performance. The Employee shall sign the performance appraisal electronically and that signature shall only indicate that the Employee has read the performance appraisal. An Employee will be provided with electronic access to a copy of the appraisal.

Article 29 - Personnel Files

No material reflecting critically upon an Employee may be placed in the Employee's personnel files that the Employee has not had an opportunity to review. Employees are entitled to prepare a written explanation or opinion regarding any critical material placed in the files. The explanation or opinion shall be attached to the material and included in the files for so long as the critical material is maintained in the Employee's personnel records.

Such material submitted for possible inclusion in the Employee's file shall consist normally of not more than two pages in total. The Hospital retains the right to delete from any submitted

material items which the Hospital believes to be substantially inaccurate, defamatory, or otherwise inappropriate as part of the Hospital file. Such deleted material shall be returned to the Employee with a copy to the OFNHP representative. Within 14 days of mailing of such deleted material, the Employee may submit revised material for possible inclusion in the personnel file. The Hospital may also delete from such resubmitted material items which the Hospital believes to be substantially inaccurate, defamatory, or otherwise inappropriate as a part of the Hospital file. Such rejected material shall be returned to the Employee, with a copy to the OFNHP representative. Within 14 calendar days of the mailing, the Employee may submit revised material for possible inclusion in the personnel file after consultation and review by the OFNHP representative. The Hospital may also delete from such resubmitted material items which the Hospital believes to be substantially inaccurate, defamatory, or otherwise inappropriate as part of the Hospital file. Such rejected material shall be returned to the Employee. The Hospital will continue to recognize that the lack of misconduct for an extended period is a significant factor in determining "just cause" for discipline.

Article 30 - No Strike/Lockout

In view of the importance of the operation of Hospital's facilities to the community, Hospital and Union agree that there shall be no lockouts by Hospital and no strikes or picketing, sympathy strikes or picketing, or other interruptions of work by Employees or Union during the term of this Agreement.

Article 31 - Side Letter Regard Membership Fee in Diagnostic Imaging

The Hospital agrees that for the term of this Agreement, it will continue to pay each full-time and part-time DI Employee's annual membership fee in the American Society of Radiologic Technologists, through which the DI Employees can receive continuing education.

Article 32 - Separability and Successorship

A. Expressed Intention. In the event that any provision of this Agreement shall at any time be declared invalid by any court of competent jurisdiction or through government relations or decree, such decisions shall not invalidate the entire Agreement, it being the express intention of the parties hereto that all other provisions not declared invalid shall remain in full force and effect. In the event of such invalidation, the parties shall meet to negotiate in good faith appropriate modifications. Absent agreement, the matter is deferred to the next contract negotiations and is not subject to the arbitration provisions of this Agreement.

B. All Provisions. All provisions contained in this Agreement are subject to government review and approval under applicable economic controls, laws, and regulations.

C. Successors – Binding Agreement. In the event that the Hospital shall, by merger, consolidation, sale of assets, lease, franchise, or any other means, enter into an agreement with another organization which in whole or in part affects the existing collective bargaining unit, then such successor organization shall be bound by each and every provision in this Agreement. The Hospital shall have an affirmative duty to call this provision of the Agreement to the attention of any organization with which it seeks to make such an agreement as aforementioned, and if such

notice is so given the Hospital shall have no further obligations hereunder from the date of takeover.

Article 33 - Duration and Term of Agreement

A. This Agreement shall become effective with the first pay period following ratification, and shall remain in effect until December 31, 2029, and annually thereafter unless either party hereto serves notice on the other of their intent to amend or terminate the Agreement as provided in this Article.

The parties agree on request from either party to be reasonably available after July 1, 2029, to begin bargaining the next contract, with a mutual goal of reaching a successor agreement on or before expiration of this contract on December 31, 2029.

B. If either party hereto desires to modify or amend any of the provisions of this Agreement, or to terminate this Agreement, it shall give written notice to the other party not less than 90 days in advance of December 31, 2029, or any December 31 thereafter that this Agreement

C. is in effect.

Oregon Federation of Nurses and Health Professionals, AFT Local 5017

By: Sarina Roher Signature: Sarina Roher

Title: President Date: 06/26/2026

Mid-Columbia Medical Center dba Adventist Health Columbia Gorge

By: Kyle King Signature: Kyle King

Title: President Date: 06/22/2026