

AAUP-BHSNJ Bargaining Proposals for New Jersey Medical Schools Clinical Faculty

1. As per the holding in College of Medicine and Dentistry of New Jersey vs. New Jersey Medical School Faculty Practice Service and the Affiliation Agreement as amended between the Administration and UPA, the AAUP-BHSNJ and the Administration recognize and agree that clinical revenues generated by faculty enrolled in the faculty practice are the property of those enrolled faculty. Following the end of the term of the Affiliation Agreement, a clinical faculty member's right to determine the assignment and to assign reimbursement of his/her clinical practice revenues continues.
2. With respect to clinical services performed by New Jersey Medical School faculty physicians prior to July 1, 2020, faculty shall be paid and have all benefits afforded by the UPA/Rutgers Affiliation Agreement, including any tail payments owed as provided by that agreement.
3. Practice Support (i.e., funds used to pay for the cost of running each Department's practice) provided by Rutgers, RHG, University Hospital or an affiliated entity (other than UPA or its successor) to each Department shall not be decreased from the amount that exists on July 1, 2019. Rutgers shall make up the difference in Practice Support to any Department caused by a decrease in Practice Support by RHG, University Hospital, RWJBH, or an affiliated entity (other than UPA or its successor).
4. Effective July 1, 2020 or when an entity other than UPA commences collection of NJMS faculty clinical revenues (the "New Clinical Collections Entity"), whichever is later, the Administration shall guarantee to each NJMS clinical department ("Department") a minimum amount of clinical revenue (the Minimum Clinical Revenue Funds) equal to the amount received during the average of the three previous years (the "Index Years") minus "Mandatory Taxes". "Mandatory Taxes" for this calculation are those taxes defined in the UPA Affiliation Agreement Sections V.C(2)a(i)-(iii) and in existence on July 1, 2017. The Minimum Clinical Revenue Funds for a Department shall be increased by the clinical revenues collected by the Department that exceed the Minimum Clinical Revenue minus Mandatory Taxes. For example, if the Minimum Clinical Revenue Funds for a Department are \$5 million after the payment of Mandatory Taxes, and the Department collects \$6 million in revenue, the Department shall receive an additional \$1 million in revenue minus Mandatory Taxes. Minimum Clinical Revenues shall also be increased as necessary to cover Guaranteed Compensation payments as set forth in Section 5(i) and (ii) below.
5. Minimum Clinical Revenue Funds received by a Department shall be used to ensure that:
 - i. Individual members of the practice plan who were hired as NJMS faculty members on or prior to July 1, 2019, are guaranteed an annual minimum amount of compensation ("Guaranteed Compensation") for their clinical efforts equal to the mean annual compensation they received in each full year of employment. For purposes of determining the Guaranteed Compensation, the mean annual compensation shall be calculated utilizing

no more than the immediate three prior years. Guaranteed Compensation shall be increased or decreased on a prorated basis if the faculty member's total FTE is changed after July 1, 2019.

- ii. Faculty members hired after July 1, 2019 ("New Faculty"), shall be guaranteed by the Administration an annual minimum amount of compensation from their clinical efforts equal to 50% of the mean of the compensation received by the members of their Department in their specialty or subspecialty ("New Faculty Guaranteed Compensation"). The New Faculty Guaranteed Compensation shall be increased by the Administration to further compensate New Faculty who are assigned administrative duties.
 - iii. Following the payment of Guaranteed Compensation and New Faculty Guaranteed Compensation, the remaining Clinical Revenue Funds will be assigned by each Department's clinical faculty as described in Sections 6 and 7 below, at a meeting called with appropriate notice and having appropriate quorum, to support any unfunded Department clinical operations, and to support non-clinical missions of the Department/its Division(s)/School/University if so approved by the Department's faculty.
6. Effective October 1, 2019, faculty in each Department who are members of AAUP-BHSNJ, are 50% or more NJMS FTE, and are 20% or more NJMS cFTE, who have been NJMS faculty for at least 12 consecutive months, and have generated at least 500 wRVUs through the NJMS clinical program in those 12 months shall be deemed voting clinical members ("VCM"). VCM, the Department chair and any other administratively titled members of the Department designated by the VCM shall constitute the Departmental Governance Committee ("DGC"). 60% of the voting members of the DGC shall constitute a quorum and 60% of voting members present at a meeting at which there is a quorum shall determine the manner in which Clinical Revenue Funds shall be distributed to Department members, subject to the requirements of Section 5 above, and the other purposes for which such funds shall be allocated.
7. The DGCs shall meet as frequently as necessary and shall be solely responsible for the distribution of the Department's Clinical Revenue Funds, consistent with Section 5 above. No change in the distribution of Clinical Revenue Funds shall be implemented prior to a New Clinical Collections Entity undertaking collections of billings or July 1, 2020, whichever is later. All decisions regarding the distribution of Departmental Clinical Revenue Funds must be approved by the DGC. All members of the DGC shall be given reasonable advance notice of all meetings. The clinical compensation assigned to each individual clinical faculty by the method described above will not exceed fair market value for the specific services provided by that faculty member (fair market value shall take into consideration the reimbursement rates and gross collections charged by each faculty member). It shall also be consistent with any appointment letter providing a faculty practice income guarantee. All funds paid to faculty replacing UPA salary and clinical components will be counted as earnings for the purpose of retirement benefits and health care premium contributions

8. Effective July 1, 2020 or when a New Clinical Collections Entity commences collections of the NJMS clinical faculty revenues, whichever is later, NJMS clinical faculty shall continue to have the same control and decision-making authority concerning the practice of medicine and the faculty practice as existed prior to July 1, 2020, by the methods described in Sections 6 and 7 above.
9. Effective July 1, 2020 or when a New Clinical Collections Entity commences collection, whichever is later, NJMS clinical faculty shall have access to all financial records concerning the faculty practice as existed with UPA.
10. Within two months of the collective negotiations agreement ratification, the AAUP-BHSNJ shall select two (2) two VCM from each NJMS clinical department who shall be appointed by the AAUP-BHSNJ to represent the faculty during any negotiations to develop "Clinical Integration Agreements" between those clinical areas and the affiliated partner. (See MAA p. 25) Such representatives shall ordinarily be AAUP-BHSNJ members.
11. The AAUP-BHSNJ shall appoint at least one-half of the representatives of the Clinical Management and Operations Committee which shall provide advice and recommendations concerning clinical matters to the Joint Committee. (See MAA p. 11) These shall be equally apportioned from the two medical schools. Such representatives shall ordinarily be AAUP-BHSNJ members.
12. The Administration and Rutgers agree that any NJMS clinical faculty member who, on or after July 1, 2018, provides clinical services at an office shall be permitted to continue to provide clinical services at such office, and shall be provided adequate resources by Rutgers to ensure that the cost of running the office is not so excessive, due to Mandatory Taxes and practice overhead, that the practice is not viable at the location in question. Should that occur, either Rutgers or its designee shall provide practice support as permitted by law, or shall waive some or all Mandatory Taxes at that site to allow for patients to retain access to the practitioners at that site. All other requests for off-campus offices shall be subject to existing procedures and practices.
12. Further, Rutgers agrees that any NJMS faculty member who, on or after July 1, 2018, provides services at any healthcare facility, including nursing homes and surgery centers, or who has privileges at any hospital or other healthcare facility, shall be permitted to continue providing such services at such hospital or facility and shall be permitted to continue such privileges.
13. Subsequent to July 1, 2018, there shall be a committee consisting of six (6) members appointed by the AAUP-BHSNJ and five (5) members appointed by the Administration who shall hear requests from faculty who wish not to participate in a negotiated insurance plan and to otherwise provide advice and support in situations where it may not be appropriate to participate in such plan.