

DUHS Supplemental Premiums

Effective: 12/1/2023 (unless otherwise noted)

Last Revised: 12/1/2023

- **All DUHS Supplemental Premiums have been reviewed and approved by the VP Patient Care and CNE DUHS, CHRO DUHS, and Executive VP, DUHS.**
- **The DUHS Supplemental Premiums are standardized across DUHS and are based on market prevailing premium practices.**
- **Only the work units and/or classifications indicated are approved to use the premiums outlined in this document.**
- **All supplemental premiums should be paid via API unless otherwise noted.**
- **Supplemental premiums can be revised or discontinued at any time.**

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts
<p>Specialty Standby (On Call)</p> <p>The standard on-call rate is \$2 per hour. This is a special on call rate that is higher than the standard \$2 on call amount.</p> <p>This specialty on call rate may only be used in eligible areas and/or classifications identified in this document.</p> <p>Paid for all standby/on call hours</p> <p>If an employee is covering multiple pagers, services, etc, they only are eligible for a single on call rate at a time. The employee will not receive multiple on call rates.</p> <p>The on call rate begins when the employee badges out and leaves the building.</p> <p>If called in, the employee will continue to receive their specialty on call rate in addition to base pay and applicable differentials (shift premiums, overtime) for all hours worked.</p>	<p>Unless otherwise noted, use API to record eligible time and pay the specialty on-call.</p> <p>Exceptions:</p> <ul style="list-style-type: none"> - For DRH CT/OR, the OR on-call of \$3/hr (\$2 standard + \$1 specialty) will be paid via API. The additional \$2/hr will be paid via the Biweekly Supplemental Card. The total on-call amount is \$5/hr. - For Hospice General Inpatient Program, the standard on call (\$2/hr) will be paid via API. The specialty on-call (additional \$3/hr) will be paid via Biweekly Supplemental Card. The total on call amount is \$5/hr. <p><u>The entity HR leader must sign the Biweekly Supplemental Card before it is sent to Corporate Payroll.</u></p>	<p>Eligibility based on any of the following criteria:</p> <ul style="list-style-type: none"> •Market driven practice •Specialty skills are required so that staff cannot be called from other departments (closed unit) 	<p>CT OR (DUH)*</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Surgical Technologist ladder • Cardiovascular Invasive Spec I, II, III • RN First Assistant <p><i>Note: This premium does <u>not</u> include staff who work in the pre and post-operative areas.</i></p> <p>Cardiac Cath/EP (DUH, DRH, DRAH)*</p> <ul style="list-style-type: none"> • Clinical Nurse Ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Cardiovascular Invasive Specialist <p><i>See Excessive Call and Short-Term Call sections for additional on-call amounts</i></p>	<p>\$5.00 per hour total (\$2.00 standard + \$3.00 specialty supplemental)</p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts
<p>Specialty Standby (On Call) (cont.)</p> <p>The standard on-call rate is \$2 per hour. This is a special on call rate that is higher than the standard \$2 on call amount.</p> <p>This specialty on call rate may only be used in eligible areas and/or classifications identified in this document.</p> <p>Paid for all standby/on call hours</p> <p>If an employee is covering multiple pagers, services, etc, they only are eligible for a single on call rate at a time. The employee will not receive multiple on call rates.</p> <p>The on call rate begins when the employee badges out and leaves the building.</p> <p>If called in, the employee will continue to receive their specialty on call rate in addition to base pay and applicable differentials (shift premiums, overtime) for all hours worked.</p>	<p>Unless otherwise noted, use API to record eligible time and pay the specialty on-call.</p> <p>Exceptions:</p> <ul style="list-style-type: none"> - For DRAH SDS (Saturday only), the standard on call (\$2/hr) will be paid via API. The specialty on-call (additional \$1/hr) will be paid via Biweekly Supplemental Card. The total on call amount is \$3/hr. <p><u>The entity HR leader must sign the Biweekly Supplemental Card before it is sent to Corporate Payroll.</u></p>	<p>Eligibility based on any of the following criteria:</p> <ul style="list-style-type: none"> •Market driven practice •Specialty skills are required so that staff cannot be called from other departments (closed unit) 	<p>OR (DUH, DRH, DRAH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Surgical Technologist ladder • RN First Assistant <p><i>Note: This premium does <u>not</u> include staff who work in the pre and post-operative areas.</i></p> <p>Endo/Bronch Unit (DUH, DRH, DRAH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Surgical Technologist ladder <p>Labor and Delivery (DUH, DRH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager <p>SDS (Only Saturday) and PACU (DRAH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager <p>Apheresis (DUH) - <i>Effective 1/1/2024</i></p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager <p>Neurodiagnostic (DUH, DRH, DRAH)</p> <ul style="list-style-type: none"> • Neurodiagnostic Tech • Intraoperative Neuromonitoring Tech <p><i>See Excessive Call and Short-Term Call sections for additional on-call amounts</i></p>	<p>\$3.00 per hour total (\$2.00 standard + \$1.00 specialty supplemental)</p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts	Approval Period
<p>Excessive Standby (On Call)</p> <p>The standard on-call rate is \$2 per hour. This is a special on call rate that is higher than the standard \$2 on call amount.</p> <p>This excessive on call rate may only be used in eligible areas and/or classifications identified in this document.</p> <p>Paid for all standby/on call hours</p> <p>If an employee is covering multiple pagers, services, etc, they only are eligible for a single on call rate at a time. The employee will not receive multiple on call rates.</p> <p>The on call rate begins when the employee badges out and leaves the building.</p> <p>If called in, the employee will continue to receive their excessive on call rate in addition to base pay and applicable differentials (shift premiums, overtime) for all hours worked.</p>	<p>Unless otherwise noted, use API to record eligible time and pay the excessive on-call.</p> <p><u>Excessive call for Clinical Nurse FP will be manually processed on a biweekly supplemental card.</u></p> <p><u>The entity HR leader must sign the Biweekly Supplemental Card before it is sent to Corporate Payroll.</u></p>	<p>This premium is used to recognize and award staff who are required to be available and on-call for a specialized area. Excessive call is defined as call hours greater than 1,248 hours/year per FTE based on budgeted FTEs (average of more than 24 hours/week).</p> <p>Eligibility based on any of the following criteria:</p> <ul style="list-style-type: none"> • There are no or limited available staff from other areas who can participate in on-call coverage for the department which results in a higher on-call volume for employees. • Eligible staff will equally participate in on-call schedules (exceptions may exist for staff competencies, orientees, new staff, agency staff, and leads). • Projected call hours exceed the expected number of annual hours of call (1,248/year per FTE) <u>based on the budgeted FTEs.</u> • The staff are regularly called to return to work. <p>It is expected that the department will optimize the staffing schedule and offer extended shifts as appropriate.</p>	<p>Below are the approved departments and job classifications.</p> <p>Peds and CVIS CT OR (DUH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Surgical Technologist ladder • Cardiovascular Invasive Specialist I, II, III • RN First Assistant <p><i>Note: This premium does <u>not</u> include staff who work in the pre and post-operative areas.</i></p> <p>Cardiac Cath/EP (DUH - Adult Cardiac Cath Labs, DRH-Cardiac Cath Services)</p> <ul style="list-style-type: none"> • Clinical Nurse Ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Cardiovascular Invasive Specialist I, II, III <p>Hyperbaric Chamber</p> <ul style="list-style-type: none"> • Clinical Nurse Ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager • Hyperbaric Chamber Specialist 	<p>Additional \$5/hr</p> <p>Peds and CVIS CT OR (DUH) \$10/hr (\$2.00 standard + \$3.00 specialty + \$5 excessive)</p> <p>Cardiac Cath/EP (DUH - Adult Cardiac Cath Labs, DRH-Cardiac Cath Services) \$10/hr (\$2.00 standard + \$3.00 specialty + \$5 excessive)</p> <p>Hyperbaric Chamber \$7/hr (\$2.00 standard + \$5 excessive)</p>	<p>Typically July 1 – June 30</p> <p>Peds and CVIS CT OR teams approved through June 30, 2024</p> <p>Note: Adult CT OR team shifted to Short-Term Call and is approved through March 31, 2024</p> <p>Cardiac Cath/EP approved July 1, 2023 through June 30, 2024</p> <p>Hyperbaric Chamber approved July 1, 2023 through June 30, 2024</p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts	Approval Period
<p>Short-term Standby (On Call)</p> <p>The standard on-call rate is \$2 per hour. This is a special supplemental on-call rate that is higher than the standard \$2 on call amount.</p> <p>This short-term on call rate may only be used in eligible areas and/or classifications identified in this document.</p> <p>Paid for all standby/on call hours</p> <p>If an employee is covering multiple pagers, services, etc, they only are eligible for a single on call rate at a time. The employee will not receive multiple on call rates.</p> <p>The on call rate begins when the employee badges out and leaves the building.</p> <p>If called in, the employee will continue to receive their short-term on call rate in addition to base pay and applicable differentials (shift premiums, overtime) for all hours worked.</p> <p>Departments and job classifications included in the Excessive on-call are not eligible for Short-term Standby.</p>	<p>The standard on call/call in of \$2/hr will be recorded and paid via API. Use the Biweekly Supplemental Card to pay the Short-term Standby (additional \$5/hr).</p> <p><u>The entity HR leader must sign the Biweekly Supplemental Card before it is sent to Corporate Payroll.</u></p>	<p>This premium is used to recognize and award staff who are required to be available and on-call for a specialized <u>area as a result of a high functional vacancy rate</u>. Short-term call is defined as call hours greater than 1,248 hours/year (average of more than 24 hours/week) as a result of a functional vacancy rate.</p> <p>Eligibility based on any of the following criteria:</p> <ul style="list-style-type: none"> • There are no or limited available staff from other areas who can participate in on-call coverage for the department which results in a higher on-call volume for employees. • Eligible staff will equally participate in on-call schedules (exceptions may exist for staff competencies, orientees, new staff, agency staff, and leads). Projected call hours exceed the expected number of annual hours of call (1,248/year per FTE) <u>based on the filled FTEs</u>. •The staff are regularly called to return to work. <p>It is expected that the department will optimize the staffing schedule and offer extended shifts as appropriate.</p>	<p>Approved list maintained by Nursing Services and Compensation</p>	<p>Additional \$5/hr</p>	<p>Typically 13 weeks with the possibility of 1 extension for a second 13 weeks.</p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts
<p>Specialty Standby (Called In)</p> <p>Paid for hours worked when called in (returns) to work while on call.</p> <p>If the employee is called in, they will be paid for a minimum of two hours or all hours worked.</p> <p>If called in, the employee will continue to receive their on call rate in addition to this specialty call-in pay.</p>	<p>Use API to record eligible time</p> <p>The standard on call/call in (\$2/hr) will be recorded and paid via API. Use the Biweekly Supplemental Card to pay the supplemental call-in (\$3/hr supplemental call-in).</p> <p><u>The entity HR leader must sign the Biweekly Supplemental Card before it is sent to Corporate Payroll.</u></p>	<p>Eligibility based on any of the following criteria:</p> <ul style="list-style-type: none"> •Specialty skills are required so that staff cannot be called from other departments • There has been a high frequency of callbacks •Department not staffed on a 24/7 basis •Market driven practice 	<p>Radiology</p> <p>Interventional Tech (DUH, DRH, DRAH)</p> <p>Nuclear Med Tech (DUH, DRH, DRAH)</p> <p>MR Tech (DUH, DRH, DRAH)</p> <p>Cardiac Sonographers – JC 4587 (DUH, DRH, DRAH)</p> <p>Radiology Nurses (DUH, DRH, DRAH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager 	<p>\$5.00 per hour total (\$2.00 standard on call rate+ \$3.00 supplemental call-in)</p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff	Amounts
<p>DUHS Staffing Flex Plan</p> <p>DUHS Staffing Flex Plan supports departments with short-term needs for supplemental staffing by providing staff with an incentive to work hours beyond their normal schedule.</p> <p>The leadership of any entity within Duke University Health System may implement the DUHS Staffing Flex Plan with the appropriate approvals and under the following conditions:</p> <ul style="list-style-type: none"> - To address <u>short term</u> critical staffing shortages or; - When the entity senior leadership team identifies a need to increase staffing to align with an established growth plan or; - To address incremental unanticipated volume. 	<p>The following must be completed and shared with the entity CNO and CHRO:</p> <ul style="list-style-type: none"> • Functional vacancy rate that is 25% or greater. • Create an optimal schedule based on current FTE's and daily census. • Evaluate staffing options from like departments across the health system. • Develop a recruitment plan with identified metrics. • Validate sufficient requisitions are open to match vacant positions. <p>This plan requires approval of the entity CNO and CHRO along with the entity leader or designee. The approval is typically 13 weeks with the possibility of 1 extension for a second 13 weeks.</p> <p>Use API to record eligible shifts.</p>	<p>The plan allows staff the opportunity to select additional shifts that coincide with their work-life balance.</p>	<p><i>Currently under review</i></p>	<p><i>Currently under review</i></p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts
OR RN Premium	Added to base pay	<p>Clinical Nurses working in the intra-operative OR will receive this premium.</p> <p>If the employee transfers to another department, the premium will be taken away from their base pay.</p>	<p>OR (DUH, DRH, DRAH) Clinical Nurse ladder Clinical Nurse AD/DIP ladder Clinical Services Nurse ladder Clinical Services Nurse AD/DIP ladder Assistant Nurse Manager RN First Assistant</p> <p>PRNs in the Nursing PRN (0017) personnel sub-area are ineligible for this premium</p> <p>Note: This premium does not include staff who work in the pre and post-operative areas.</p>	10% of base pay, not to exceed band maximum
OR RN Premium – Select ORs	Added to base pay	<p>Clinical Nurses working in select ORs in recognition of the acuity and complexity of the cases managed. Select ORs include EC OR, OR Weekends, OR – Infrastructure, OR – NSU, OR – ORT, OR – Nights, OR – OHN, OR – Gen, OR – PSU, OR – Gyn, OR – URO, OR Peds</p>	<p>Select ORs (DUH) Clinical Nurse ladder Clinical Nurse AD/DIP ladder Clinical Services Nurse ladder Clinical Services Nurse AD/DIP ladder Assistant Nurse Manager RN First Assistant</p> <p>PRNs in the Nursing PRN (0017) personnel sub-area are ineligible for this premium</p> <p>Note: This premium is only for select ORs at DUH</p>	15% of base pay, not to exceed band maximum
DUH CT OR RN Premium	Added to base pay and paid via biweekly supplemental card	<p>Clinical Nurses working in the Cardiac Thoracic intra-operative OR will receive this premium.</p> <p>If the employee transfers to another department, the premium will be taken away from their base pay.</p> <p>The 20% supplemental premium will be paid via biweekly supplemental card.</p>	<p>CT OR (DUH) Clinical Nurse ladder Clinical Nurse AD/DIP ladder Assistant Nurse Manager RN First Assistant</p> <p>PRNs in the Nursing PRN (0017) personnel sub-area are ineligible for this premium</p> <p>Note: This premium does not include staff who work in the pre and post-operative areas.</p>	10% of base pay, not to exceed band maximum plus 20% supplemental premium

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Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amounts
<p>Cardiac Cath/EP RN Premium</p>	<p>Added to base pay</p>	<p>Clinical Nurses working in the following Cardiac Cath/EP areas will receive the premium:</p> <ul style="list-style-type: none"> - DUH Adult Cardiac Cath Lab - DUH Ped Cardiac - DUH EP Lab - DRAH Cardiac Cath Lab (excluding Holding) - DRH Regional Cardiac Cath Services <p>If the employee transfers to another department, the premium will be taken away from their base pay.</p>	<p>Cardiac Cath/EP (DUH, DRH, DRAH)</p> <ul style="list-style-type: none"> • Clinical Nurse ladder • Clinical Nurse AD/DIP ladder • Assistant Nurse Manager 	<p>Eligible for 0%-15% of base pay, not to exceed band maximum. This is based on the years of experience compared to the Cardiac Cath/EP RN hiring rate guidelines</p>
<p>LPN Premium – Select ORs</p>	<p>Added to base pay</p>	<p>LPNs working in select ORs in recognition of the acuity and complexity of the cases managed. Select ORs include EC OR, OR Weekends, OR – Infrastructure, OR – NSU, OR – ORT, OR – Nights, OR – OHN, OR – Gen, OR – PSU, OR – Gyn, OR – URO, OR Peds, OR-TSU, DRH OR, DRAH OR</p>	<p>Select ORs (DUH, DRH, DRAH)</p> <ul style="list-style-type: none"> • LPN 	<p>5% of base pay, not to exceed band maximum</p>
<p>Surgical Tech Premium – Select ORs</p>	<p>Added to base pay</p>	<p>Surgical Techs working in select ORs in recognition of the acuity and complexity of the cases managed. Select ORs include EC OR, OR Weekends, OR – Infrastructure, OR – NSU, OR – ORT, OR – Nights, OR – OHN, OR – Gen, OR – PSU, OR – Gyn, OR – URO, OR Peds</p>	<p>Select ORs (DUH)</p> <ul style="list-style-type: none"> •Surgical Tech (levels I-II) •Surgical Tech Advanced (levels III-IV) 	<p>5% of base pay, not to exceed band maximum</p>
<p>DUH CT OR Surgical Tech Premium</p>	<p>Biweekly supplemental card</p>	<p>Surgical Techs working in the Cardiac Thoracic intra-operative OR will receive this premium.</p> <p>If the employee transfers to another department, the premium will be taken away from their base pay.</p>	<p>CT OR (DUH)</p> <ul style="list-style-type: none"> •Surgical Tech (levels I-II) •Surgical Tech Advanced (levels III-IV) 	<p>20% of base rate as a supplement</p>

DUHS Non-exempt Supplemental Premiums

Plan	Business Process	Explanation of Premium	Eligible Staff <i>PRNs and Retirees are eligible, unless otherwise noted.</i>	Amount
Float Premium	Use API to record eligible time	<p>Staff in eligible job classifications will receive the Float premium when floating to a non-home cost center, including assignments within and outside of their CSU/specialty area. The following criteria must also be met:</p> <ul style="list-style-type: none"> - The float shift must be at least 4 hours - The nurse must have a direct care assignment - Float premium and staff incentive cannot be paid on the same hours 	<p>Float</p> <ul style="list-style-type: none"> •Clinical Nurse ladder •Clinical Nurse AD/DIP ladder •Assistant Nurse Manager •LPN 	\$3/hr when floating to a non-home cost center
Float Pool Premium	Added to base pay	<p>Eligible staff working in the Float Pool department will receive this premium.</p> <p>If the employee transfers to another department, the premium will be taken away from their base pay.</p>	<p>Nursing</p> <p>Clinical Nurse, FP ladder Clinical Nurse FP AD/DIP ladder Assistant Nurse Manager FP</p> <p>PRNs in the Nursing PRN (0017) personnel sub-area are ineligible for this premium</p>	\$5.00 per hour, not to exceed band maximum
			<p>Neurodiagnostic (DUH, DRAH)</p> <p>Intraoperative Neuromonitoring Tech</p>	\$3.00 per hour, not to exceed band maximum
			<p>Other</p> <p>LPN-FP, CMA-FP, Behavioral Health Tech-FP, NCA/HUC- FP, NCAII/HUC-FP</p>	\$2.00 per hour, not to exceed band maximum
Float Premium	Biweekly Supplemental Form	Neurodiagnostic Techs will received this premium when they float to an entity other than their primary entity.	Neurodiagnostic Neurodiagnostic Tech (JC 4576)	\$3/hour, when floating to a different entity