

Important Information About the Union and UMRS

Distributed on behalf of University Medical Resident Services P.C. (UMRS)

On February 22, 2023, an organization called the Union of American Physicians and Dentists (UAPD) filed a petition with the National Labor Relations Board (NLRB) seeking to unionize residents and fellows enrolled in Graduate Medical Education (GME) programs at the University at Buffalo (UB). An election on whether to unionize will be held from April 12 to May 10 by mail-in ballot.

These FAQs are intended to provide information to aid residents and fellows in making an informed decision about how to vote in the upcoming election.

General Information About Unions

What is a labor union?

A labor union is a business organization that derives revenue from membership dues in return for negotiating a labor contract with an employer. The labor contract is known as a collective bargaining agreement (CBA).

What are the key differences between a unionized and a non-union workplace?

In a non-union workplace there is a direct working relationship between each employee and their supervisors and managers. At present, UB residents and fellows can discuss employment issues with program directors, hospital leaders, the GME office and UMRS.

In a unionized workplace, the direct relationship and unrestricted communications between each employee and their employer is severed and is replaced by a legally binding relation between management and the external labor union. Residents and fellows would be prohibited by law from dealing directly with UMRS or others regarding employment issues. Instead, union officials, as the exclusive agent for UB residents and fellows, would be required to negotiate with UMRS on behalf of residents and fellows. Please see the FAQs below for further information about the collective bargaining process.

Do I get a say in whether to unionize?

Yes. All residents and fellows will be able to vote in the upcoming election run by the NLRB to determine whether or not to unionize. It is *extremely important* that all residents and fellows vote in the election. Union elections are determined by the majority of people who *actually vote*. For example, if only 100 people vote in the election, and 51 vote for the union, then the union will win, and those 51 voters would make the decision on unionizing for the 800+ UB residents and fellows. *Every vote is critical.*

If UMRS is unionized, do I have to join the union?

Yes. If a majority of eligible voters who turn out for the election cast their ballots in favor of a union, then everyone in the defined bargaining unit is legally bound by the outcome and there is no opting out. In States like New York where there is no Right-To-Work Law protecting you from forfeiting your employment if you fail to pay mandatory union dues and/or fees, everyone must comply.

If UMRS is unionized and we're not satisfied with the union, how hard is it to decertify the union?

You should be aware that in order to promote stability in labor relations, once a union is elected, the law makes it very difficult to ever remove the union, regardless of whether employees are satisfied or dissatisfied with the representation.

Does it cost money to be in a union?

Yes. Unions almost always insist on contract clauses that require every employee they represent to pay "union dues." Under the typical contract clause, employees who refuse to pay union dues must be fired.

Do I get a say in how my union dues are spent?

Not necessarily. Union dues are typically spent in a variety of ways, including on legal fees, lobbying fees, and other administrative costs of the union.

Is UMRS anti-union?

No. UMRS believes that UB residents and fellows should have a choice on whether they want a union and encourages all residents and fellows to vote. UMRS will respect the outcome of the election. However, UMRS does not need to work through a union to understand and address concerns of residents and fellows. Please see the FAQs below for further information about how UMRS has heard and resolved resident and fellow concerns recently.

Specific Information About UAPD

What is the Union of American Physicians and Dentists (UAPD)?

UAPD is an external labor union that operates almost exclusively in California. If elected, UAPD would serve as the *exclusive* spokesperson for UMRS residents and fellows. Designated officials (often outside labor attorneys) for UAPD and UMRS would participate in a series of formal bargaining sessions to negotiate over the terms of a Collective Bargaining Agreement (CBA). Once reached, the CBA would govern the terms and conditions of employment for all UMRS residents and fellows.

It is important to understand that collective bargaining is inherently a difficult and time-consuming process because it involves the balancing of many competing interests and because the process is heavily regulated by federal law. Studies have shown that most initial CBAs following unionization take more than a year to negotiate, and it is not uncommon for the process to take much longer. All pre-existing pay rates and other terms and conditions of employment

would remain in place and cannot be changed until an agreement is reached- however long this takes.

Can the UAPD get me more money?

Not necessarily. If elected, UAPD will have to negotiate all salaries and benefits for residents and fellows with UMRS. However, UMRS does not generate income independently and does not have independent funding sources to pay for increased salaries and benefits. Rather, UMRS benefits from annual negotiations by and among UB and local area hospitals to allow residents and fellows enrolled in GME programs at UB to use hospital facilities to complete their educational requirements. Once discussions with UB are completed, the local hospitals commit to pay a set annual fee to UMRS in exchange for having residents and fellows work for educational purposes in their hospitals. Almost all of that fee is used for resident and fellow salaries and benefits, and the small remaining portion is used for UMRS administration costs. UMRS would need UB and the local affiliated hospitals to first agree to additional annual funding in the form of a higher fee before it would be able to offer residents and fellows an increase in their salaries and benefits.

Also, as discussed above, if UMRS is unionized, then wages and benefits cannot be changed until an initial CBA is negotiated and agreed to. The negotiation process for an initial CBA typically takes over a year to complete and sometimes much longer. It could be well over a year before any change in salaries or benefits could be implemented.

Can the UAPD control how much money the hospitals give UMRS?

No. The union relationship would be with UMRS. The union will not negotiate with the hospitals and will have no say and no control over how much money the local hospitals are willing to pay in exchange for having residents and fellows work for educational purposes in the hospitals.

Can UAPD reduce my work hours?

Not necessarily. Certain aspects of work hours are dictated by accreditation and certifying board requirements. For example, ACGME and ABMS have requirements for time that must be spent in outpatient clinics, the number and type of procedures that must be completed, etc. The residency and fellowship programs are developed to meet these accreditation requirements and otherwise facilitate educational development.

Work hours are also closely monitored by the UB GME office to comply with resident wellbeing concerns and NYS law. According to the self-reported work hours logged by residents and fellows for the 2021-2022 academic year, residents and fellows worked an average of **52.5 hours per week**. These reported work hours also included time spent in non-clinical, educational activities (i.e., protected academic time).

How much money will it cost to be a UAPD member?

UAPD has said that residents and fellows will pay 0.9% of each paycheck as union dues.

In 2021-2022, the UAPD collected \$6,537,735 in dues and agency fees, of which 27.9% was used toward representational activities. The highest other categories of union spending were general overhead (\$2,523,957), political activities and lobbying (\$545,071), taxes (\$514,964), and union

administration (\$432,104). This data was obtained from the [2021-2022 Labor Organization Annual Report](#).

How many residency programs does UAPD currently represent?

It appears that UAPD currently represents only *one group* of approximately 16 psychiatry residents in a community residency program. UAPD has very limited experience representing residents and fellows.

Is the presence of a resident labor union associated with improved well-being?

No. Studies suggest that resident labor unions do not appear to improve resident well-being. In a [cross-sectional survey study of 5,701 residents](#), unionized programs showed no significant differences from nonunionized programs in burnout, job satisfaction, duty hour violations, mistreatment, salaries, or the educational environment.

Current Benefits Provided to Residents and Fellows

The GME office has taken several steps to address resident and fellow concerns and improve pay and working conditions over the past few years.

For example, the GME office secured funding for a **6.1% pay increase** during a time when local hospital systems are experiencing incredible financial stress due to the pandemic. The GME office is also negotiating to secure funding of a further pay increase on par with the University of Rochester Medical Center (URMC). These negotiations began prior to any union organizing activity.

In addition, over the past two years, UMRS and the GME office have:

Successfully lobbied multiple state and local stakeholders to enable residents/fellows to become eligible for the NY State health worker bonus. Residents and fellows were initially deemed ineligible for the bonus under the law.	Improved nutrition options by working with hospital partners to provide enhanced healthy food options. For example, there is now locally sourced, fresh food available 24/7 at BGMC/GVI.
Implemented an updated leave policy with more generous allowances for parental, family, and personal leaves.	Attended to resident and fellow concerns and secured temporary internal moonlighting at Oishei Children’s Hospital during the recent RSV epidemic to supplement resident salaries.
Updated the resident and fellow mental health support program (ReST program) and scheduled many DIO and Ombuds meetings with residents who have expressed wellbeing concerns.	Enhanced oversight prompted by program data for 10-15 residency and fellowship programs per year, including conducting meetings with residents and fellows and program leadership.

Continued a longstanding policy of free parking at multiple work sites.	Coordinated and organized Thank a Resident Day events at all work sites.
Maintained excellent accreditation status. There have been no adverse accreditation outcomes for any program or the institution in the last six years.	Secured new resident work rooms at multiple work sites and new and improved call room sites at multiple work sites and monitored the quality of call room experiences at all sites.
Included residents and fellows in monthly GMEC Program Quality Review Subcommittee meetings to oversee compliance with Institutional, Common, and Program-Specific ACGME requirements.	Hosted recreational activities for residents and fellow by at Sabres and Bisons games.

Why are residents and fellows paid less in Buffalo than in Rochester?

UMRS is well-aware that residents and fellows are paid less in Buffalo than in Rochester and has been working with UB and its hospital partners to increase resident and fellow salaries to match the UPMC rates. As noted above, these negotiations were happening prior to UAPD petitioning for an election.

Over the past year, UMRs and GME have secured a **6.1% raise** for residents and fellows. In collaboration with UB, UMRs is committed to pursuing these successful negotiations with a goal to achieve **full parity** with the UPMC. This goal was set, and negotiations began prior to any union organizing activity.

It is also important to realize that GME in Buffalo and Rochester are fundamentally different across the board, and each of these differences affects funding and wages. The UPMC has a teaching hospital so that the same entity that oversees education also derives income independently to pay residents. This is not the case in Buffalo because UB does not have a teaching hospital. Instead, UB must contract with local hospitals. Those hospitals pay set amounts per year through a series of contracts with UB for the work done by residents and fellows working for educational purposes. UMRs does not itself generate any income and can only pay residents and fellows what the hospitals are willing to pay in exchange for having residents and fellows work for educational purposes in their hospitals.

What benefits do UMRs residents get in addition to their salaries?

Currently, UMRs provides a [robust benefit package](#) with medical, dental, and prescription coverage at **no cost** to residents and fellows as part of the overall compensation package. UMRs also announced in January of this year, in response to feedback from residents and fellows, that it will make a 4-year transition to a HSA-eligible health plan so that residents and fellows can utilize HSA monies. The health benefits UMRs offers are “silver” status as defined by the U.S. [government](#) and are on par with or in excess of other upstate New York residency programs.

In addition, *premiums are paid in full by UMRS* for group basic life insurance coverage, New York State short term and long term disability coverage. Residents and fellows receive 20 paid vacation and 20 paid sick days per year and, depending on program, residents and fellows receive up to 10 paid holidays per year. Residents and fellows are eligible for leaves of absence as per the generous UMRS [Leave of Absence Policy](#). Mental health services are made available to residents and fellows through the [ReST program](#), the [UB Employee Assistance Program](#), and various other sources.

This is just a small snapshot of resident/fellow benefits. The benefits available to residents and fellows are very generous. A complete list of all benefits available to residents and fellows can be found [here](#).

How does this compare to URMC?

All URMC residents and fellows must pay for their health and dental insurance. Currently, Buffalo residents and fellows do not pay for either health or dental insurance coverage. UMRC allows its residents to opt into a retirement savings plan known as a 403(b) program. However, like in Buffalo, residents and fellows must put their own money into these plans. UMRC does not contribute any money to these plans.

Is there currently an avenue through which residents and fellows can voice their concerns?

Yes. A resident and fellow representative from each UB GME program is elected by their peers to serve on the UB Resident's Committee (UBRC). UBRC meetings are also open with invitations sent to all residents and fellows to attend. Representatives from the UB GME office attend all UBRC meetings to hear directly from residents and fellows.

Members of the UBRC also elect representatives to serve as members of the Graduate Medical Education Committee (GMEC). The GMEC works to ensure that the UB medical school and the UB GME programs meet all requirements of their respective accreditation organizations and has input into how the residency and fellowship programs are operated.

UB Residents and fellows created the "UB Housestaff Committee." The GME office met regularly with the UB Housestaff Committee members while working to achieve a **6.1% salary increase** for UMRS residents and fellows. The GME office used the information learned from the Housestaff Committee to guide negotiations for additional funding for UMRS resident and fellow salaries. The Housestaff Committee also meets regularly with leadership at local affiliated hospitals to discuss work-related issues.

As discussed in the prior FAQs, in a union environment this direct relationship would change such that union representatives would be the exclusive advocates and representatives for residents and fellows and would negotiate with UMRS on their behalf. The union relationship would be with UMRS. The union will be unable to negotiate directly with the hospitals who provide the funds for resident and fellow salaries and benefits and will have no say and no control over the local hospitals' decision-making.

Response to UB House Staff Website

What is the UB House Staff Website?

You are likely aware that there is a website run by a group who call themselves the “UB House Staff.” This website encourages employees to vote for the union, and contains various sections addressing wages, benefits, working conditions, personal stories, and more.

The House Staff Website says that \$150,000 per resident is provided to GME by Medicare. Why aren't I getting paid \$150, 000?

Medicare does provide funding to hospitals for residents, up to a certain cap set by the CMS. The agency also provides funding for fellows, but at a lower rate. The time and expense to educate, train, and provide benefits to residents and fellows are extensive. For example, preparation for and attendance at Grand Rounds, other didactic sessions, simulations, skills labs, board preparation sessions, etc., require time and expense. The idea that hospitals, UMRS, or other entities are sitting on pots of money or becoming wealthy at the expense of residents and fellows is *not true*. Residency programs nationwide are unable to access these funds and there is not a residency program in the country that pays residents an annual salary anywhere near \$150,000.

One WNY hospital received \$140,593/resident in 2021. Of this amount, 37% was Direct GME payment, and 63% was for Indirect GME costs ([payments intended to cover the costs of “inefficient” care that may be provided by medical residents](#)). Of the money received by this hospital, 59% went to resident salary/benefits, 40% was for teaching/program expenses (such as GME office, program support, accreditation costs, teaching faculty salary, educational technology), and <1% for resident/fellow malpractice insurance.

The House Staff Website says that UB has only raised salaries 1%-2% over the past decade. Is this true?

No. Over the past year, UMRS and UB secured a **6.1% raise** for residents and fellows. In collaboration with UB, UMRS is also in the process seeking further increases to achieve parity in the salary and benefits package between UMRS and UPMC, which began *prior to any union organizing activity*. In the past decade, UMRS has raised salaries between 1.8% and 5% each year.

The House Staff Website says that UB did not pay residents and fellows the NY Health Care Worker bonus until “we started speaking up for ourselves.” Is this true?

Payments under the NY Health Care Worker bonus are governed by New York State law and not by UMRS or UB. The law as it was initially written determined that residents and fellows were not eligible for the bonus. After 10 months of collaborative work with government stakeholders, the UB GME office successfully advocated for residents and fellows to be eligible for the bonus and submitted for the health worker bonus on behalf of eligible residents and fellows in UB GME programs.

The House Staff Website says that during the Buffalo Blizzard of 2022, attending physicians, nurses, and techs were given overtime pay, holiday pay, and hazard pay, while residents and fellows were not. Is this true?

No. The Buffalo Blizzard was a once-in-a-generation natural disaster. No employees were able to leave the hospital or other medical facilities due to the driving ban imposed by the State and the City. During their time in hospitals, federal law and state law required that certain professionals,

such as nurses and techs, be paid overtime. Attending physicians are not subject to the same laws and **did not** receive overtime pay during the blizzard.

The House Staff Website says that residents have unsafe working conditions that “put patient care at risk.” Is this true?

No. In ACGME and GME internal surveys, UMRS residents and fellows have not identified worrisome concerns about working conditions such as patient safety issues or lack of personal protective equipment. UMRS residents and fellows have not reported patient or resident safety concerns during any ACGME Clinical Learning Environment Review (CLER) site visits, which occur every 18-24 months. UB and hospital partners also have systems in place for reporting unsafe working conditions. For example, residents and fellows can report unsafe working conditions to the GME office. Working conditions are also monitored in real time by attending physicians, site supervisors, program directors, department chairs, service line leaders, chief medical officers, hospital quality and safety officers, and others. Despite all these mechanisms, residents and fellows are not reporting unsafe working conditions.

Information About the Election

How will the election be held?

The election will be held by secret mail-in ballots. No one will know how you voted in the election. Ballots will be mailed to the resident address on file with UB GME. If the address on file is not your current mailing address, we strongly encourage you to provide your correct mailing address to UB GME as soon as possible. The question on the ballot will be “Do you wish to be represented for purposes of collective bargaining by Union of American Physicians & Dentists (UAPD)?” The choices on the ballot will be “Yes” or “No.”

When will the election be held?

Ballots will be mailed out on April 12, 2023 and must be returned by close of business on May 10, 2023. Ballots will be counted on May 11, 2023. It is extremely important that all residents and fellows vote in the election by completing and returning their ballots as instructed. Remember, union elections are determined by the majority of people who *actually vote*.

Every vote is critical.

Where Can I Learn More?

There are many opinion pieces about resident unions. Residents and fellows should look for data to help them decide whether unionization is appropriate in GME. A key piece of literature, for example, is [this recent peer-reviewed manuscript in JAMA- Open Network](#).