Hofstra Chapter of the AAUP

Bargaining Update

July 24

2026

Agenda

Welcome
Tony’s Introduction
Introducing our Mascots
Poll Results from Last Meeting
A Health Care Primer
Administration’s Compensation Proposal to Faculty
Administration's Compensation to Themselves
Questions/Discussion
Action
Next Update

Welcome

We know these meetings take you away from your summer plans,

We appreciate your continued engagement on these matters.

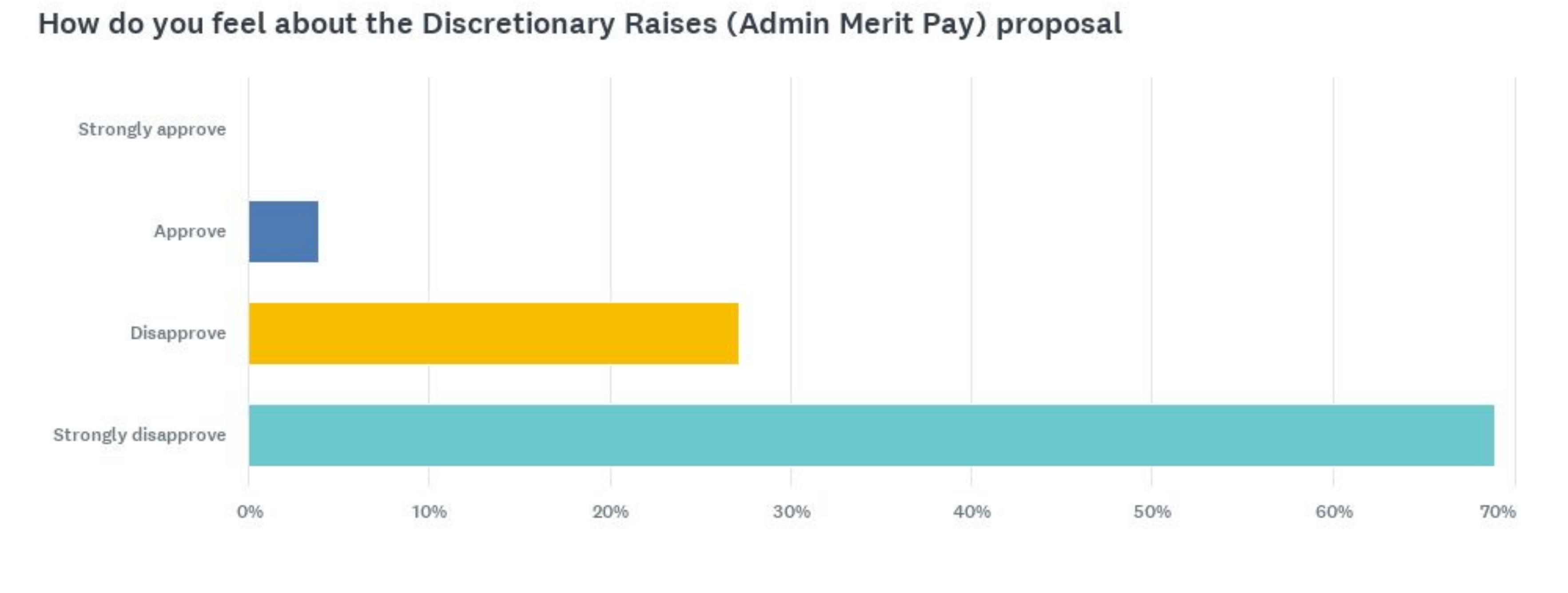
President’s Introduction

Introducing our Mascots

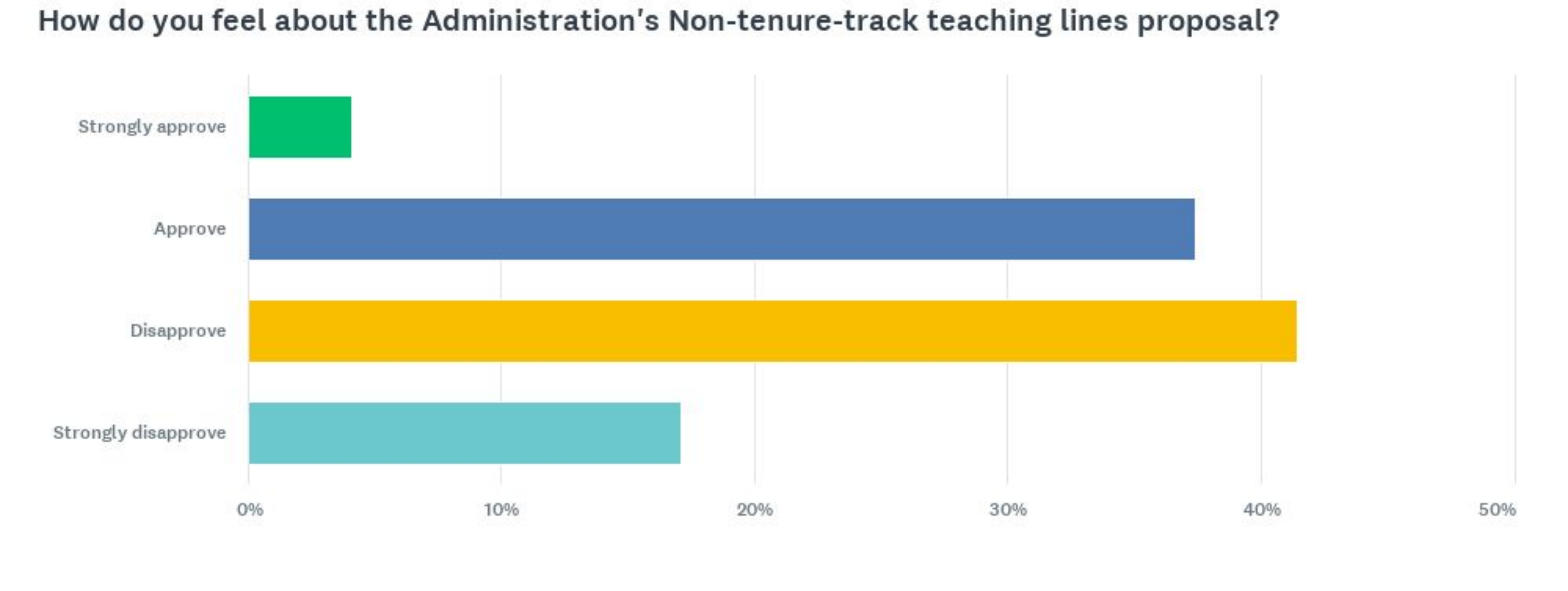
They Need Names...we are open to suggestions

Poll Results from the Last Meeting

Opinion Polls



Opinion Polls



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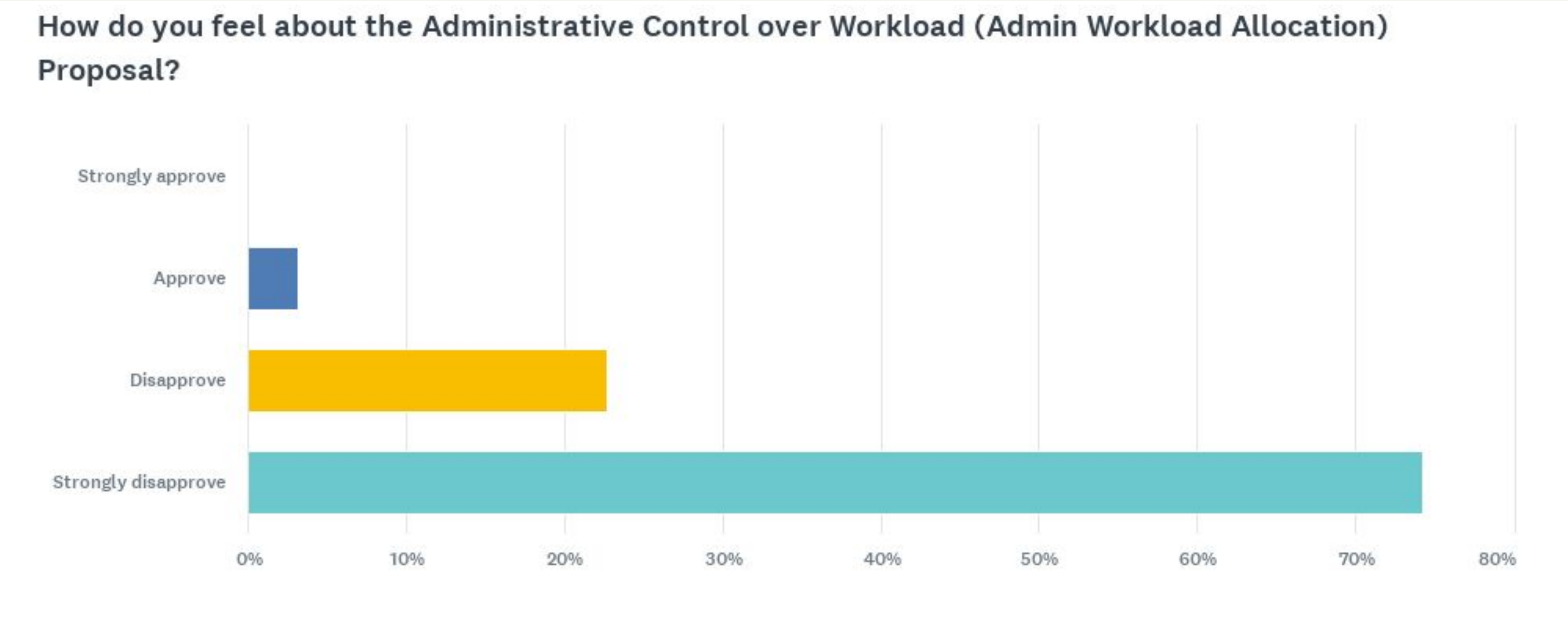

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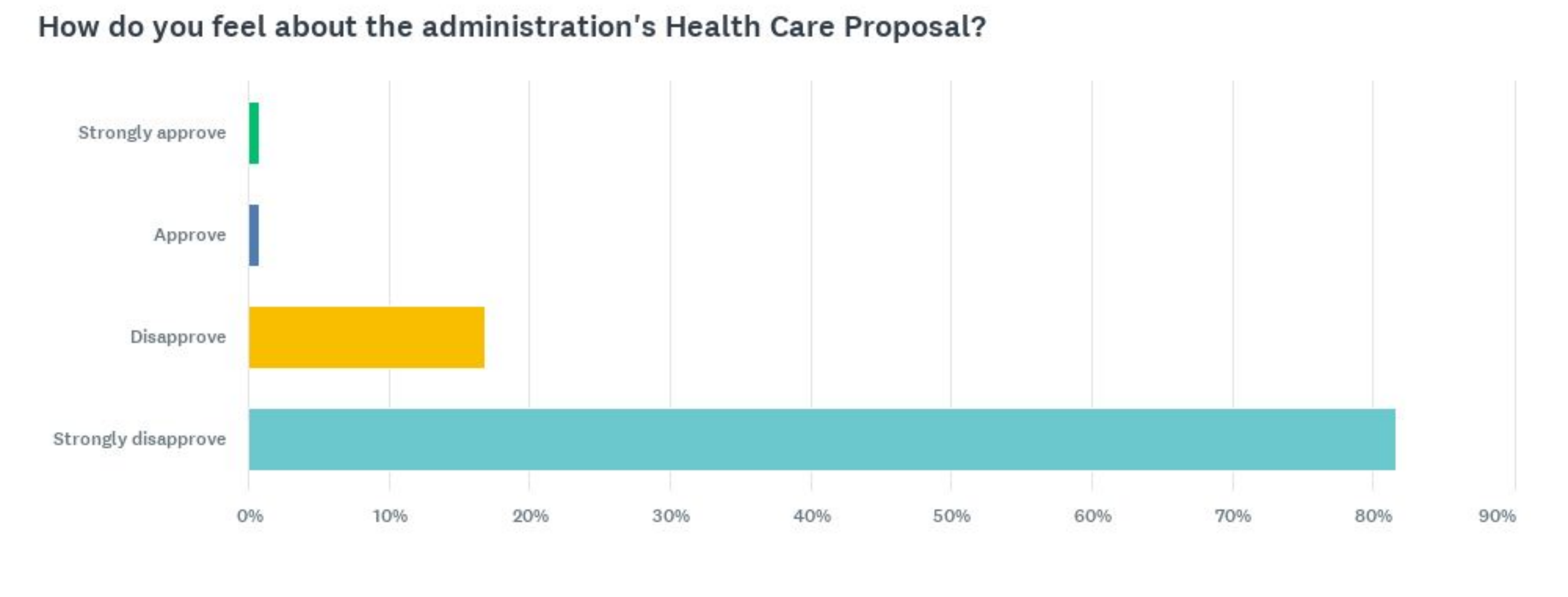

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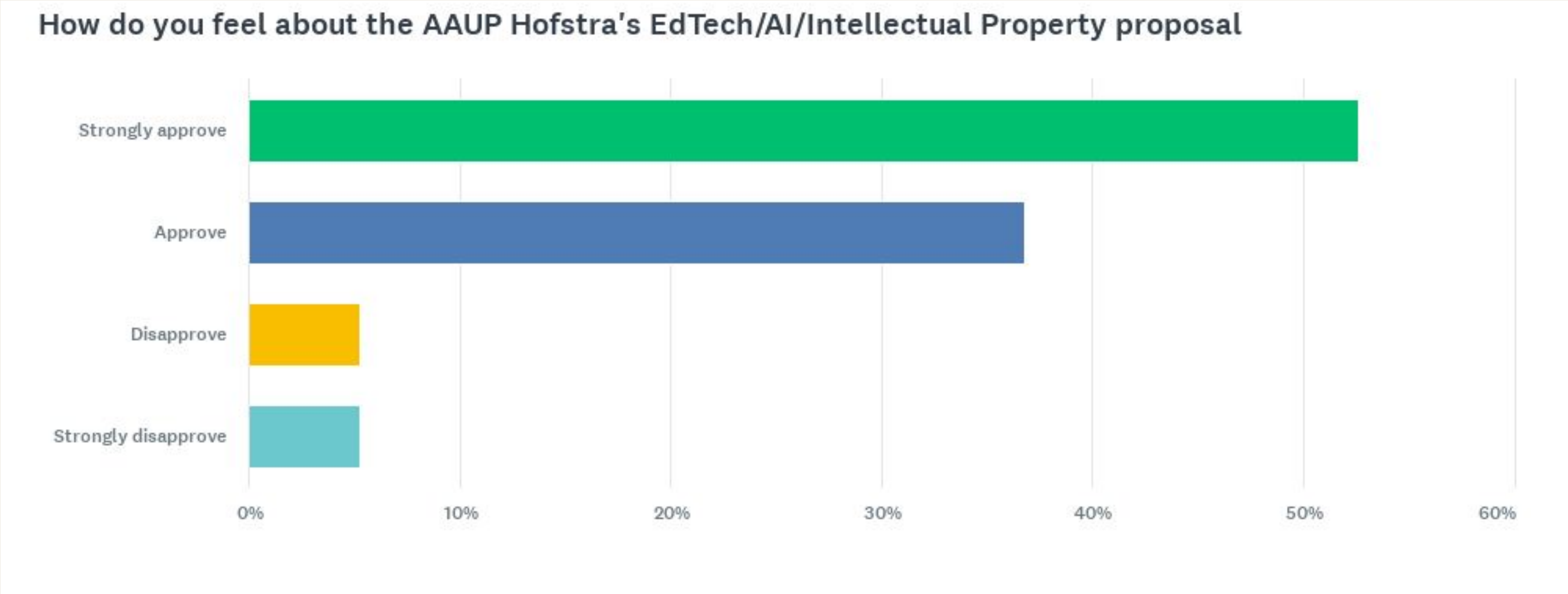


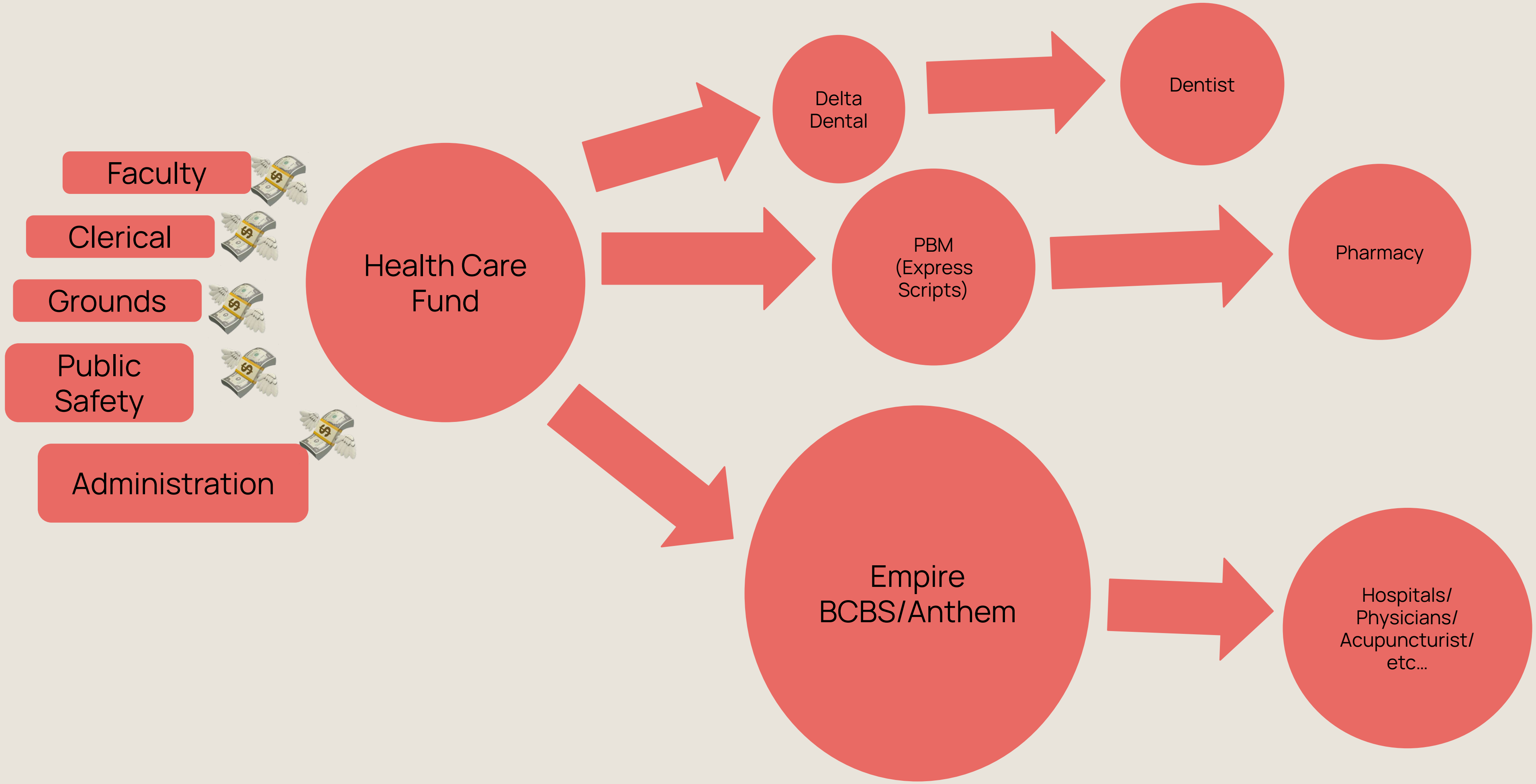
Let’s be clear here:

The AAUP’s Bargaining Team is staffed with pragmatic people; if our members liked these proposals, we’d work on accepting them.

Administration is offering almost nothing in consideration for accepting these proposals. While we are considering entertaining the teaching-track lines, we have conditioned it on achieving some of our priorities including a reduction in teaching load for tenure-track faculty and protections for adjuncts, among other conditions.

Administration is pushing unpopular and poorly-considered proposals while also proposing concessions on economics. This is entirely unreasonable.

A Health Care Primer


Faculty
Clerical
Grounds
Public Safety
Administration
Health Care Fund
Delta Dental
Dentist
PBM (Express Scripts)
Pharmacy
Empire BCBS/Anthem
Hospitals/ Physicians/ Acupuncturist/ etc...

By law, administration must give us access to the same health care they have access to.

We are the only collective bargaining unit that negotiates over benefits and plan design.

Local 153's CBA says "During the term of this Agreement, the health benefits terms and conditions applicable to members of the Local 153 bargaining unit shall be the same as those applicable to faculty."

Our negotiations impact everyone who uses healthcare on campus.

And administration has proposed that we give up our right to collectively bargain our health care.

2025 Medical/Rx cost projection

2025 Medical & Drug Cost Rate Development	Medical	Drug	Total
Claims Projection Development			
Period 1: August 2022 - July 2023 Claims Adjusted for Large Claims			
Claims Adjusted for Large Claims	$28,961,920	$10,241,107	$39,203,027
Enrollment (2 month lag medical, 0 month lag Rx)	1,460	1,451	
Claims Adjusted for Large Claims (PEPM)	$1,653.08	$588.16	$2,241.24
Period 1 Claims Trended to 2024 (PEPM)	**$1,812.85**	**$673.19**	**$2,486.04**
Period 1 Credibility	30.00%	30.00%	
Period 2: August 2023 - July 2024 Claims Adjusted for Large Claims			
Claims Adjusted for Large Claims	$28,894,823	$10,644,399	$39,539,222
Enrollment (2 month lag medical, 0 month lag Rx)	1,412	1,405	
Claims Adjusted for Large Claims (PEPM)	$1,705.31	$631.34	$2,336.65
Period 2 Claims Trended to 2024 (PEPM)	**$1,764.27**	**$656.92**	**$2,421.19**
Period 2 Credibility	70.00%	70.00%	
2025 Claims Projection			
Period 1 & 2 Claims Weighted for Credibility	$1,778.85	$661.80	$2,440.64
Healthcare Trend Factor	6.00%	10.00%	
2025 Projected Claims (PEPM)	$1,885.58	$727.98	$2,613.55
2025 Claim Adjustment (Medical GME Charges / Rx Part D Program Changes)	1.0059	1.0707	
Claims Risk Margin	1.25%	1.25%	
2025 Projected Claims with Margin (PEPM)	**$1,920.50**	**$789.19**	**$2,709.69**
Administration, Stop Loss, Rebates, & Subsidies			
Projected 2025 Administration Fees & Stop Loss Premium (PEPM)	$123.89	$4.35	$128.24
Projected 2025 Prescription Drug Rebates (PEPM)	$0.00	($183.63)	($183.63)
Projected 2025 Retiree Drug Subsidies (PEPM)	$0.00	($89.14)	($89.14)
Administration, Stop Loss, Rebates, & Subsidies (PEPM)	$123.89	($268.42)	($144.53)
2025			
Total Projected Cost (PEPM)	$2,044.39	$520.77	$2,565.16
Total Projected Cost (Active & Pre-65 Only) (PEPM)			$3,030.80
Projected Active & Pre-65 Enrollment			1,104
Total Projected 2025 Cost			**$40,152,304**
Current Active Rates x Enrollment			**$37,376,886**
Calculated Rate Change			**7.4%**

- PEPM = Per Employee Per Month
- Post-65 retiree rates are not increasing in 2025 as the current premium rates are expected to be sufficient to cover plan costs

Plan Year	Projected Enrollment (used to set premium equivalent rates in October of prior year)	Average Actual Enrollment of Current Plan Year	Estimated Cost based on Premium Equivalent Rates using the Average Actual Enrollment	Actual Total Plan Cost of Plan Year	"Loss Ratio"
2021	1546	1525	$37,384,000	$34,987,000	94%
2022	1523	1476	$40,362,000	$39,230,000	97%
2023	1488	1434	$39,592,000	$40,657,000	103%
2024	1422	1391	$41,235,000	$38,727,000	94%
2025	1382	1352	$42,557,000	$39,802,000	94%
Five Year Total	1474	1436	**$201,130,000**	**$193,403,000**	**96%**

$7,727,000 net surplus in collected premiums over this period.

So what happens to that money?

It goes into the general operating budget. **It is not spent on healthcare.**

We would expect it is spent on health care expenses, since that is what the money is collected for, but we have no way to audit or inspect if this is the case.

In 2020, the loss ratio was 83%.
$36,855,000 Projected cost vs. $30,880,000 actual cost
= ~$6 million net surplus collected.

We want a mechanism to audit how healthcare surplus is managed.

We know our rates keep going up...

Annual %Change in Individual Contribution						
	2021	2022	2023	2024	2025	2026
Anthem EPO	10.37%	5.43%	6.39%	6.73%	6.70%	4.84%
Anthem POS	11.02%	5.66%	6.55%	6.69%	6.91%	4.94%
Emblem HMO	5.17%	7.06%	n/a	n/a	n/a	5.25%
Emblem POS	n/a	n/a	n/a	n/a	7.20%	10.58%

Annual %Change in Family Contribution						
	2021	2022	2023	2024	2025	2026
Anthem EPO	10.27%	5.47%	6.31%	6.71%	6.71%	4.80%
Anthem POS	11.04%	5.66%	6.53%	6.68%	6.90%	4.95%
Emblem HMO	5.21%	7.05%	n/a	n/a	n/a	5.25%
Emblem POS	n/a	n/a	n/a	n/a	7.18%	10.60%

Admin’s Health Care Proposal

Increase employee cost share to 30% for EPO (Single and Family) and PPO/POS Single, and 32% for PPO/POS Family.

For Anthem EPO: Implement in-network Ind/Fam deductible of $750/$1000 and 20% co-insurance

For Anthem POS: Implement in-network Ind/Fam deductible to $750/$1500, 20% co-insurance

What’s a deductible?

You would pay all of the healthcare costs you incur until you reach the deductible.

For a family on the EPO plan, you would pay out of your own pocket until you reach $1,000.

What’s a coinsurance?

You pay 20% of each health care service up to the out-of-pocket maximum.

Administration's Compensation Proposal to Faculty

Adjunct Compensation

Administration finally agrees with us that adjunct compensation is way too low.

They have put forth a 20% increase to adjunct minimums.

Note, this is not a 20% increase to all adjunct rates, but to the minimums. This will impact all adjuncts who are at or close to the minimum.

Percentage increases: Year 1: 3.5% for those unaffected by the minimum increase and 2.5% thereafter.

We have asked for significantly more over the life of the agreement.

Full Time Compensation

Percentage Increase:

2.5% Year 1

1.5% increase in subsequent years.

Admin's includes the 1% merit pool in their proposals. Here we are only sharing guaranteed money. 1% merit increases are not guaranteed to everybody.

Promotion Increases (A true "merit" raise):*

Assistant Prof → Associate Prof = $5,000 (Currently $4,000, we proposed $6,000)

Associate Professor → Professor = $8,000 (Currently $6,000, we proposed $10,000)

Professor + = $8,000 (Currently $6,000, we proposed $10,000)

*first increase to these numbers since 2016

Retirement

For those faculty who are part of the grandfathered pension plan (which administration wants to eliminate), are retirement eligible, and have 25 years of service, a new exit incentive:

- Eligible faculty can opt-in within the first year of the agreement;
- Receive a one year salary plus benefits sabbatical;
- Receive a $15,000 one-time incentive payment, payable at end of sabbatical period

Reduce the 5-semester exit incentive to 2 semesters.

Remember, they previously proposed to remove grandfathered pension contribution schedule which applies to all faculty hired on or before December 31, 2011.

What does this mean to you?

Bonnie Fox Garrity has crunched the numbers and built a compensation calculator so you can see how the proposed raises and changes to health care and retirement would impact you.

https://drive.google.com/drive/folders/10HAzuEfK3kARP3fYk2dFiFWBT6gMH85k?usp=sharing

Either save to your own computer or make a copy of this to your own GoogleDrive.

This does not include increased cost of deductibles or coinsurance payments up to the out-of-pocket maximums.

Administration's Compensation to Themselves

Solidarity and Action

Three Actions

Petition

Sign our petition to administration that demonstrates our solidarity!

https://tinyurl.com/3ermxbm2

Sorry Chairs, you have to sit this one out.

Name our Eggs

Email Joe with your suggestions, he will share them with the bargaining team!

hofstraaaup.bargaining@gmail.com

Take the Survey

We will not release the results of this survey, but we are taking a straw poll and your questions you wanted to ask yesterday.

https://www.surveymonkey.com/r/DKKHP7L

Sorry Chairs, you have to sit this one out, too.

A New Survey

Closes at 1:45 pm

Questions? Discussion

About Anything

Joe will be in his office in Mason 309 Monday from 10:00 am until about 4:00 if you want to stop by and chat.

Next Bargaining Updates:

Friday, August 7, Noon, on Zoom

Monday, August 17, Noon, on Zoom

THANK YOU!