



Nursing Compensation and Benefits FAQ

This document is intended to provide transparency about how Rush has historically addressed these topics and to answer common questions.

Disclaimer: During the collective bargaining process, all elements of compensation, benefits and workplace policies are subject to negotiation. The information in this document is for reference only and does not guarantee or commit to any future terms.

Compensation

Does Rush provide a market or merit adjustment every year?

We review the market annually and adjust ranges as the market supports these changes. Merit increases are awarded annually. These adjustments accelerate nursing pay at Rush.

For example, in 2025, most Rush nurses received two types of market adjustments in response to market changes (market and equity), totaling a minimum of 5% in increases, more for most nurses; merit increases of up to 3% were applied on top of these market adjustments, **a minimum of 8% for the average nurse in 2025.**

When does Rush conduct market analyses?

Market reviews occur at least annually, typically in the spring based upon the release of external survey data. As Rush moves towards systemization, we have continued to adopt a more consistent and predictable cadence.

How long does it take to decide on market adjustments?

Once we have been able to gather good data and develop a market case, decisions are made relatively quickly. Decisions are made as efficiently as possible once all factors are reviewed.

Can Rush share pay scales from other hospitals?

No. While some organizations publish union contracts online, pay scales are not usually published or otherwise available to the public. Organizations participate in and use surveys because of legal rules that require that third parties compile this data rather than having peers share it directly. As a system, we rely on confidential survey data to remain compliant and competitive.

Why do increases sometimes seem higher for RN1 roles?

Increases are often focused on keeping Rush competitive in areas where market movement is greatest, which can vary by role and experience. Sometimes this is an increase to nursing starting rates, and sometimes this is an increase to the top of scale ranges.



Rush invests in nursing wages in several ways, including increasing starting pay, adjusting overall pay ranges, raising pay maximums and other flexible pay programs. At times, these combined market-driven adjustments can result in higher increases for certain RN1 positions, and at times these can result in higher increases for other nurses, as supported by market and business need.

When are merit increases announced and effective?

Merit is an annual process that has typically been announced in December and effective in January.

Will Workday delay the annual merit process?

We don't anticipate a delay in the merit process because of Workday, Rush's new payroll and HR system.

How often are wages reviewed overall?

At least annually, with additional reviews occurring as needed to stay competitive.

Will there be HR/compensation town halls?

HR continues to join all nursing CNO townhalls and supports questions submitted via Q&A.

Payroll

Why can payroll issues take time to resolve?

Payroll issues may occur for any number of reasons and require us to audit and engage in technical programming when issues arise. Each issue requires a thorough review to ensure pay accuracy. We know timely resolution matters and are working to improve turnaround times.

Benefits

Do benefit cost increases exceed or nullify merit increases?

No. Benefit cost increases have not exceeded and historically have been a small fraction of merit increases from a total cost perspective. If benefit costs increase, they generally have had a much smaller impact than annual pay increases.

Rush uses market data to guide benefit decisions and works to keep benefit costs as competitive and manageable as possible. In 2025, Rush *decreased* the cost of its Health Savings Advantage Plan and increases were subsidized by Rush to keep benefit costs below benchmarks for employees.

Why is some tuition reimbursement taxed?

IRS rules require taxation on tuition benefits over \$5,250 per year under Internal



Revenue Code (IRC) Section 127. Rush and other employers are legally required to follow these laws.

Why am I being asked to pay the DNP Administrative Fee if Rush offers tuition support?

Rush's tuition benefit is designed to support tuition, and does not cover internal university fees, including administrative or program-specific fees. The DNP Administrative Fee, introduced by the College of Nursing in fall 2025, supports required clinical education activities such as placement coordination, compliance processes and external partner costs.

While Rush's tuition benefit covers the tuition expense for eligible programs through its available programs (such as the internal tuition program), fees like this are assessed separately and are the responsibility of the student. This approach is consistent with how Rush has historically structured its education benefits.

What are Rush's internal and external programs for educational assistance?

Rush offers extremely competitive tuition benefits compared to the local market – both internally and externally. Please find more information below and visit the [tuition benefits page](#) for more details.

Rush's External Degree Program for Educational Assistance:

- Employees must have completed one year of service prior to the course start date to be eligible for undergraduate or graduate coursework.
- Full-time employees may receive up to \$5,250 in tuition assistance per year.
- Part-time employees may receive up to \$3,000 in tuition assistance per year.

Rush's Internal Degree Program from Educational Assistance:

- Prepaid tuition for up to nine credit hours per quarter for full-time employees (excluding medical school) and six credit hours for part-time employees.
- Employees are eligible for payment of undergraduate coursework after working at Rush for six months and eligible for graduate level coursework after working at Rush for one year.

What career pathways are available for nurses at Rush?

Rush offers multiple pathways to support current and aspiring nurses at every stage of their careers, from entry into the profession through leadership development:



Early Career & Entry Pathways

- **RN Residency (six months):** Designed for nurses with less than six months of experience, supporting the transition from school to professional practice.
- **RN Apprentice Program:** Local nursing students are paired with an RN for an eight-week summer experience, including four hours per week of supplemental education. Apprentices are paid and often transition to Nurse Assistants (NAIs), with the goal of hire as an RN after graduation.
- **AP to RN Program (Malcolm X College):** Supports Assistive Personnel in becoming RNs. Participants complete prerequisites and coursework with the goal of strengthening the workforce and increasing diversity.

Education & Advancement

- **RN–BSN Program:** Tuition is fully covered and participants submit for reimbursement in alignment with the standard tuition benefit processes. A Professional Nursing Practice (PNP) representative meets quarterly with participants to support balancing work and school.

Professional Development & Mentorship

- **PNP RN Mentor Program:** For nurses with 2–3 years of experience. RNs are paired with a mentor of their choice and meet monthly (paid time for both) to support career growth.

Leadership Development

- **New Leader Transition to Practice Program:** For nurses stepping into formal leadership roles (e.g., CNS, CNL, Unit Director, AVP). Includes:
 - One-on-one mentorship
 - Monthly cohort meetings with a PNP representative
 - Quarterly workshops for leadership skill-building
 - Networking opportunities across Rush

Why did Rush remove shift pay from non-productive time?

Pay practices were standardized during the UKG time and attendance system transition to align with market norms. As a result, shift pay now only applies to hours worked. We recognize this change was unexpected for some nurses, and as a result, we have worked to ensure that we communicate consistently across all groups on these topics.

Did Rush make up for the 403(b) matching suspension due to COVID-19?

During the uncertainty of the COVID-19 pandemic, Rush made the difficult decision to temporarily suspend 403(b) matching contributions for all employees, similar to many



peer institutions. When financial conditions improved, matching contributions were reinstated as soon as practicable. Since then, Rush has strengthened its retirement program, including increasing the 403(b) match to 100% of employee contributions up to 6% of pay, enhancing the long-term value of this benefit.

Why are benefit or pay changes not always communicated earlier?

Benefit and pay changes are significant investments and require significant planning across many Rush areas, including HR, finance, IT, communications, legal, operations and more. We aim to communicate as early and as clearly as possible once decisions have been made.

How does PTO work at Rush?

Rush is a market leader when it comes to the amount of PTO available to employees. At Rush, PTO is combined into a single bank (vacation, sick, holiday) and accrues based on hours worked. This structure is designed to provide flexibility and competitive value. Please find more information about Rush's program [here](#).

Parking

Will unionization result in free parking?

Neither Rush nor NNOC/NNU can predict the outcome of bargaining or make commitments to what will be achieved. Parking policies vary by organization. We will continue to share updates on parking options and any future changes.

Work Environment & Support

Will patient ratios change?

Patient safety and appropriate staffing remain top priorities. While no one can predict the outcome of negotiations, should they occur, we are not aware of any union contracts in Illinois or other areas that provide for staffing ratios. Where these are in place, they have largely been adopted as the result of state regulations that have been accompanied by increased funding in government-supported insurance programs.

Are business goals outweighing patient centered care?

RUMC is a not-for-profit whose goals are *always* patient focused. While we have ensured that we are always balancing the many competing needs of our diverse patient population and community, we are always focused on providing high quality, patient-centered care.

Are nurses being asked to do more without support?

Healthcare is always changing, but our goal has always been to provide appropriate support to nurses and our other providers to enable everyone to practice at the top of their profession. Rush regularly evaluates staffing, workflows and resources to support



nursing teams. This includes the role of the Professional Nursing Staff (PNS), which helps guide staffing models, workflow improvements, and other resources designed to ensure nurses have the support they need to provide safe, high quality care.

Are expectations and accountability consistent across roles?

We aim to meet expectations consistently and fairly across all roles.

If you have additional questions, we're here to help and will continue sharing updates as openly as possible.