

MEDICARE WAGE INDEX OCCUPATIONAL MIX SURVEY

Date: ____/____/____
Provider Number: _____
Provider Contact Name: _____
Provider Contact Phone Number: _____
Reporting Period: **01/01/2006 – 06/30/2006**

Introduction

Section 304(c) of Public Law 106-554 amended section 1886(d)(3)(E) of the Act to require CMS to collect data every 3 years on the occupational mix of employees for each short-term, acute care hospital participating in the Medicare program, in order to construct an occupational mix adjustment to the wage index. The law also requires the application of the occupational mix adjustment to the wage index beginning October 1, 2004.

This survey provides for the collection of occupational mix data prospectively for a 6-month period, that is, January 1, 2006 through June 30, 2006¹, to be applied to the FY 2008 wage index. Complete the survey for any hospital that is subject to the inpatient prospective payment system (IPPS), or any hospital that would be subject to IPPS if not granted a waiver². It is important for hospitals to ensure that the data reported on the survey are accurate and verifiable through supporting documentation.

¹ We are allowing some flexibility for the reporting period begin and end dates to accommodate some hospitals' bi-weekly payroll and reporting systems. That is, the 6-month reporting period must begin on or after December 25, 2005 and before January 9, 2006, and must end on or after June 24, 2006 and before July 9, 2006.

² Note: Critical Access Hospitals (CAHs) are not paid under the IPPS, therefore CAHs are not required to complete the survey. Also, hospitals that terminated participation in the Medicare program before calendar year 2006 are not required to complete the survey.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0907. The time required to complete this information collection is estimated to average 160 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Completed occupational mix surveys must be submitted to fiscal intermediaries, on the Excel hospital reporting form, by July 31, 2006, via email attachment or overnight delivery to the intermediaries. The Excel version of the occupational mix survey may be obtained from fiscal intermediaries or downloaded from CMS's website at:
<http://www.cms.hhs.gov/providers/hipps/ippswage.asp>.

Instructions and definitions for the data elements and the occupational categories are attached.

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Instructions and Definitions

Instructions

Complete this survey for employees who are full-time and part-time, directly hired, and acquired under contract. Do not include employees in areas excluded from IPPS via Worksheet S-3, Part II, Lines 8 and 8.01, such as skilled-nursing facilities, psychiatric, or rehabilitation units or facilities. This exclusion applies to directly-hired and contract employees who provide either direct or indirect patient care services in IPPS excluded areas. Also, do not include employees whose services are excluded from the IPPS, such as physician Part B, and interns and residents. Include employees who are allocated from the home office or related organizations to IPPS reimbursable cost centers and outpatient departments of the hospital that are included in the wage index (i.e., outpatient clinic, emergency room). **Note:** Employees in the home office, related organizations, or general services costs centers (Worksheet S-3, Part II, Lines 21 through 35) typically provide services throughout the hospital, including the IPPS-excluded areas (Lines 8 and 8.01). Hospitals should apply the allocation methodology that is used in the wage index calculation for allocating general service salaries and hours to excluded areas. (See 70 FR 47373, August 12, 2005, Step 4.) If home office or related organization personnel provide only administrative services, report their wages and hours in the “All Other Occupations” category. To the extent that there are home office or related organization personnel that are engaged in nursing activities, they must be reported in the appropriate nursing subcategory.

As a general rule, only nursing personnel working in the following cost centers as used for Medicare cost reporting purposes should be included in the general nursing categories and RN subcategories. (The wages and hours for nursing personnel working in other areas of the hospital that are reimbursable under the IPPS or OPDS, or nurses who are performing solely administrative functions, would be included in the “All Other Occupations” category).

COST CENTER DESCRIPTIONS

COST CENTERS

14	Nursing Administration
25	Adults and Pediatrics (General Routine Care)
26	Intensive Care Unit
27	Coronary Care Unit
28	Burn Intensive Care Unit
29	Surgical Intensive Care Unit
30	Other Special Care (specify)
33	Nursery
37	Operating Room
38	Recovery Room

39	Delivery Room and Labor Room
60	Clinics
61	Emergency
62	Observation Beds

Note: Subscripted cost centers that would normally fall into one of these cost centers would be included in the survey.

Definitions

Paid Salaries and Paid Hours:

Paid Salaries – Include the total of **paid** wages and salaries for the specified category of hospital employees including overtime, vacation, holiday, sick, lunch, and other paid-time-off, severance, and bonuses. Do not include fringe benefits or wage-related costs as defined in Provider Reimbursement Manual, Part I, Section 3605.2.

Paid Hours – Include the total **paid** hours for the specified category of hospital employees. Paid hours include regular hours, overtime hours, paid holiday, vacation, sick, and other paid-time-off hours, and hours associated with severance pay. Do not include non-paid lunch periods and on-call hours in the total paid hours. Overtime hours must be calculated as one hour when an employee is paid time and a half. No hours are required for bonus pay. The hours reported for salaried employees who are paid a fixed rate must be recorded based on 40 hours per week or the number of hours in the hospital's standard workweek.

Occupational Categories:

[Note: The general occupational categories and definitions included in this survey derive directly from the U. S. Bureau of Labor Statistics (BLS), 2001 Occupational Employment Statistics survey. The numbers in parentheses are the BLS standard occupational categories (SOCs). As with the BLS survey, workers should be classified in the occupation that requires their highest level of skill. If no measurable difference in skills, workers are to be included in the occupation that they spend the most time.]

Registered Nurses (RNs, SOC 29-1111) - Assess patient health problems and needs, develop and implement nursing care plans, and maintain medical records. Administer nursing care to ill, injured, convalescent, or disabled patients. May advise patients on health maintenance and disease prevention or provide case management. Licensing or registration required. RNs who have specialized formal, post-basic education and who function in highly autonomous and specialized roles, maybe assigned a variety of roles such as staff nurse, advanced practice nurse, case manager, nursing educator, infection control nurse, performance improvement nurse, and community health nurse. **Exclude from the survey advance practice nurses (nurse practitioners, clinical nurse specialists, certified nurse midwives, and certified registered nurse anesthetists) that are paid under a Part B fee schedule and not the IPPS.**

Functional Subcategories:

Management Personnel – Direct nursing activities. Act in administrative, leadership, or supervisory role, but also provide supervision to staff nurses that are involved in direct patient care, and/or provide direct patient care him/herself. Assist in the coordination of medical and nursing services. Assign duties to professional and ancillary nursing personnel based on resident needs, available staff and unit needs. Plan work schedules and assign duties to nurses and aides, provide or arrange for training, and visit patients to observe nurses and to ensure that the patients receive proper care. May ensure that records are maintained and equipment and supplies are ordered.

Staff Nurse/Clinician – Provide direct patient care based on scientific knowledge and standardized care plans. At the intermediate level, may become more skilled in developing individual care plans to meet patient needs. At the advanced level, may provide care for patients with more complex and unpredictable medical conditions. Includes charge nurses.

Licensed Practical Nurses (LPNs, SOC 29-2061) - Care for ill, injured, convalescent, or disabled persons in hospitals, nursing homes, clinics, private homes, group homes, and similar institutions. Most LPNs provide basic bedside care, such as vital signs as temperature, blood pressure, pulse, and respiration. May work under the supervision of a registered nurse. Some more experienced LPNs supervise nursing assistants and aides. Licensing is required after the completion of a state-approved practical nursing program.

Nursing Aides, Orderlies, & Attendants (SOC 31-1012) - Provide basic patient care under direction of nursing staff. Perform duties, such as feed, bathe, dress, groom, or move patients, or change linens.

Examples: Certified Nursing Assistant; Hospital Aide; Infirmary Attendant.

Medical Assistants (SOC 31-9092) - Performs administrative and certain clinical duties under the direction of physician. Administrative duties may include scheduling appointments, maintaining medical records, billing, and coding for insurance purposes. Clinical duties may include taking and recording vital signs and medical histories, preparing patients for examination, drawing blood, and administering medications as directed by physician. Exclude “Physician Assistants” (29-1071).

Example: Morgue Attendant; Ophthalmic Aide; Physicians Aide. Note: Include only those employees who perform administrative and certain clinical functions under the direction of a physician in the IPPS cost centers and outpatient areas of the hospital that are included in the wage index. Do not include phlebotomists, information technology personnel, health information management personnel, and general business office personnel in the Medical Assistants category.

All Other Occupations – Non-nursing employees (directly hired and under contract) in IPPS reimbursable cost centers and outpatient departments that are included in the wage index (i.e., outpatient clinic, emergency room) must be

included in the “All Other Occupations” category. In addition, this category would include the wages and hours of nurses that function solely in administrative or leadership roles, that do not directly supervise staff nurses who provide patient care, and do not provide any direct patient care themselves. This category must not include occupations that are excluded from the wage index (such as physician Part B services, interns, and residents, nurse practitioners, clinical nurse specialists, certified nurse midwives, and certified registered nurse anesthetists). Also, the “All Other Occupations” category must not include employees in areas of the hospital that are excluded from the wage index via Worksheet S-3, Part II, Lines 8 and 8.01, such as skilled nursing, psychiatric, and rehabilitation units and facilities. Therapists and therapy assistants, equipment technologists and technicians, medical and clinical laboratory staff, pharmacists and pharmacy technicians, administrators (other than nursing), computer specialists, dietary, and housekeeping staff are examples of employees who should be reported in the “All Other Occupations” category. Also include the wages and hours of personnel from the home office or related organizations if they perform solely administrative functions and work in IPPS cost centers and outpatient departments that are included in the wage index.

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Report Paid Salaries and Paid Hours in whole numbers. Round Average Hourly Wage to 2 decimal places.

Occupational Category	Paid Salaries	Paid Hours	Average Hourly Wage (Salaries/Hours)
RNs			
Management Personnel			
Staff Nurse/Clinician			
Total RNs			
LPNs			
Total LPNs			
Nursing Aides, Orderlies, & Attendants			
Medical Assistants			
Total Nursing			
All Other Occupations			
Total (Nursing and All Other)			

Note: Do not mark in shaded areas.