

Occupational Mix Fact Sheet

Occupational Mix Reporting Period

- The occupational mix survey provides for the collection of occupational mix data, either prospectively for a 4-week period that begins on or between December 28, 2003 and January 11, 2004, and ends no later than February 7, 2004, **or** retrospectively for a 12-month period, that is, calendar year 2003. Hospitals may elect the one option that most accurately captures their true occupational mix.

Submission of the Occupational Mix Survey

- Completed occupational mix surveys must be submitted to fiscal intermediaries on the Excel hospital reporting form provided by CMS, by February 16, 2004, via email attachment or on disk via overnight delivery.

Critical Access Hospitals (CAHs)

- The occupational mix survey is to be completed by 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 waiver. Because CAHs are not paid under IPPS, CAHs are not required to complete the survey.

Terminated Hospitals

- Hospitals that terminated participation in the Medicare program before calendar year 2003 are not required to complete the occupational mix survey. However, if the terminated hospital was a PPS provider during Federal fiscal year (FY) 2001, the hospital's Worksheet S-3, Parts II and III wage data will still be included in the FY 2005 wage index calculation.

“All Other Occupations” Category

- Employees (directly hired and under contract) in IPPS reimbursable cost centers, who do not meet the criteria of any of the 19 specified occupational categories, must be included in the "all other occupations" category. This category must not include occupations that are excluded from the wage index (such as, physician Part B services, interns, and residents).
- The “all other occupations” category must not include employees in areas 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.

- Administrators, computer specialists, dietary, and housekeeping staff are examples of employees who should be reported in the “all other occupations” category.
- In order to facilitate the workload of completing the occupational mix survey, a hospital may use a reporting period for the “all other occupations” category that differs from the reporting period it uses for the 19 specific occupational categories. For example, a hospital may use the 12-month retrospective reporting period for the 19 specific occupational categories and a 4-week prospective reporting period for the “all other occupations” category.

Certified Registered Nurse Anesthetists (CRNAs), Nurse Practitioners (NPs), and Clinical Nurse Specialists (CNSs)

- Although CRNAs, NPs, and CNSs, are excluded from the wage index, via Worksheet S-3, Part II, Lines 3 and 5, these employees are not excluded from the occupational mix survey. Hospitals must include the hours associated with CRNAs, NPs, and CNSs in the RN category on the occupational mix survey. These specialty categories of RNs must be included on the occupational mix survey because they cannot be isolated from the Bureau of Labor Statistics’ RN average hourly wage data that will be used in calculating the occupational mix index.

Home Office Staff

- To simplify data collection and reduce the reporting burden for hospitals, the occupational mix survey excludes staff allocated from the home office. Home office salary costs in the wage index typically reflect administrative positions. Therefore, if we were to include home office data in the occupational mix survey, the data would generally be placed in the “all other occupations” category.

Allocating Hours for General Service Employees to Excluded Areas (added 02/06/04)

- Employees in general service cost 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). However, the occupational mix survey must not include hours associated with excluded areas. Hospitals may apply an allocation methodology that is similar to the methodology used in the wage index calculation for allocating general service hours to excluded areas. (See 68 FR 45398, Step 4.)