

RESIDENTIAL CARE (RC)
2015 COST REPORT

– Optional Attendant Compensation Worksheet and Instructions –

NOTE: This worksheet is provided for your own information and should be retained in your files for future reference.

Do not return it to the Health and Human Services Commission

For assistance with the completion of this worksheet, contact the Rate Enhancement Analyst for this program listed on the following webpage:
<http://www.hhsc.state.tx.us/rad/long-term-svcs/contacts.shtml>.

OPTIONAL WORKSHEET

All monetary calculations should be carried out to two decimal places.

STEP 1 – Sum all unit of service (Resident Days)

In some instances, we have provided 3 periods in the worksheet. Depending on your cost reporting period, you may only have 2 periods. Enter the units of service or Resident days for each period as applicable and entering the total in Box A.

STEP 2 – Calculate Initial Rate for each time period

For each applicable time period, calculate the initial rate as follows: Enter the Level of Participation for the time period. Multiply the level times 5 cents. Add this amount to the attendant cost component of the non-participant rate for period one. Repeat these steps to calculate the initial rate for periods two and three.

STEP 3 – Sum the RC units only (Exclude Assisted Living and STAR+PLUS units)

Sum the RC Apartment units of service and enter the result in Box H. Sum the RC Non-Apartment units of service and enter the result in Box I. Sum the RC Private and Other units of service and enter the result in Box J.

STEP 4 – Sum the Grand Total of the RC units of service

Add the values in Boxes H, I and J. Enter the result in Box K.

STEP 5 – Sum the Medicaid RC units of service only (excluding Private and Other)

Add the values in Boxes H and I. Enter the result in Box L.

STEP 6 – Sum all Attendant Costs.

Determine your total Attendant Cost by adding the following: Total Attendant Staff Salaries & Wages, Attendant Payroll Taxes and Workers' Compensation, Employee Benefits, Mileage Reimbursement and Contracted Payments and enter the result in Box M. *Note: Attendants include drivers and medication aides.*

STEP 7 – Calculate Allocated Percentage of RC Only Attendant Costs

Divide the value from Box K by the value in Box A. Enter the result in Box N. Multiply the Total Attendant Costs (Box M) by the percentage of RC units over the total units (Box N). Enter the result in Box O.

STEP 8 - Calculate Average Attendant Cost Per Unit of Service

Divide RC attendant costs from Box O by the total RC units of service from Box K to calculate the attendant cost per unit of service. Enter the result in Box P.

STEP 9 – Calculate Weighted Average Rate (Attendant Cost Component)

Multiply units of service (period one) by your rate (attendant cost component for your level of participation) for period one, if applicable. Multiply units of service (period two) by your rate (attendant cost component for your level of participation) for period two, if applicable. Multiply units of service (period three) by your rate (attendant cost component for your level of participation) for period three, if applicable. Add these products and enter the amount in Box Q. Divide the amount in Box Q by the total units of service in Box L and enter the weighted average rate (attendant cost component) in Box R.

STEP 10 – Calculate Spending Requirement

Multiply the amount in Box R by 0.90 and enter the product in Box S.

If Box P is less than Box S, subtract Box S from Box P and enter the result in Box T.

If Box P is greater than or equal to Box S, enter zero in Box T.

The value in Box T is your *estimated recoupment per unit of service*. Note that this estimate is based on the information reported in this Cost Report. If this information is not accurate, your estimated recoupment will not be accurate.

STEP 11 – Check all calculations to insure accuracy