

California Department of Developmental Services

DDS Rate Study-Specialized Therapeutic Services

Provider Survey Instructions

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INTRODUCTION

Pursuant to Welfare & Institutions Code 4519.8, the California Department of Developmental Services (DDS) is required to study the reimbursement rates paid to vendors. Burns & Associates, Inc. (B&A) is assisting DDS with this study.

As part of the rate study, B&A is distributing a survey to collect data regarding vendors' service delivery designs and costs for Specialized Therapeutic. These instructions are intended to assist vendors in the completion of the survey.

The survey is voluntary, but all vendors are strongly encouraged to participate as the information collected will be a key consideration in the assessment of current rates.

Data collected through this survey will be used solely for the purpose of evaluating reimbursement rates. Only aggregated data will be reported to DDS; no vendor-specific information will be published.

Assistance with the Survey

B&A recognizes that the survey can be complicated so several avenues have been designed for vendors seeking assistance. Vendors are encouraged to read these instructions and instructions for certain questions are included in the survey itself as 'fly-over' messages that appear when a cell is selected.

B&A has recorded a webinar to provide a detailed walk-through of the survey instrument and can be accessed through the web page established for this project at <http://www.burnshealthpolicy.com/ddsvendorrates/>. All vendors are encouraged to listen to the training webinar.

Questions regarding the survey should be directed to B&A at DDSPProviderSurvey@burnshealthpolicy.com or 602-241-8515.

Completing the Survey

The survey is a Microsoft Excel file and is compatible with Excel 2010 and newer versions. Broadly, it is designed to collect information in five primary areas:

- Wages and Benefits of Administrative Staff
- Other Administrative and Program Operations Costs
- Benefits for Direct Care and Program Operations Staff
- Direct Care and Program Operations Staff Wages, Training, and Duties
- Specialized Therapeutic Service-Productivity and Other Factors

Throughout the survey, fields in which users may record data are shaded in light green. Some fields are restricted to only accept numeric answers. Examples are shaded in grey. Dark green fields are automatically calculated based upon other responses.

Providers should provide information from their most recently completed fiscal year for which data is available.

Submitting the Survey

When saving the survey, please add your agency's name to the beginning of the file name; e.g., "ABC Agency DDS Specialized Therapeutic Rate Study Provider Survey".

The deadline for submitting completed surveys is October 12, 2018. Submit completed surveys to B&A at DDSPROVIDERSURVEY@BURNSHEALTHPOLICY.COM.

Partially completed surveys will be accepted. If any information requested in the survey is unavailable, leave that field blank. Similarly, if there is any schedule that your agency cannot complete, that form may be left blank. Even if a submitted survey is incomplete, the information that your agency is able to provide will be considered as part of the analysis of survey responses.

If there are any factors that you believe should be considered but were not included in the survey, note those issues (and any other comments) in the transmittal email when submitting the survey.

The remainder of this document provides instructions for completing each of the forms included in the survey.

AGENCY CONTACT INFORMATION AND REVENUES

This sheet collects contact information and revenue figures for your organization.

Agency Contact Information

- Line 2 List any Federal Employer Identification Numbers (FEIN) or Tax IDs for entities through which your organization provides DDS-funded services. These IDs will be used to associate your organization with paid claims data.
- Line 3 List any Vendors IDs for entities through which your organization provides DDS-funded services. These IDs will be used to associate your organization with paid claims data.

Annual Agency Revenues

This section and the DDS Revenue form requests information regarding revenues from your organization's most recently completed fiscal year. Revenue figures will be compared to administrative and program operations costs reported later in the survey in order to determine administrative burdens.

- Line 11, 12, and 13 Report the revenues received by your agency for each service code.
- Line 14 Report all other revenues received for DDS services (e.g. Behavior Analyst).
- Line 15 Report all revenues from donations and investment income
- Line 16 Report all revenues associated with any other programs operated by your agency (e.g., Department of Rehabilitation, private payer, etc.).
- Line 17 The worksheet will sum the amounts reported on Lines 11 through 16 to calculate total agency revenue for your organization's most recently completed fiscal year.

DEFINITIONS OF ADMINISTRATION, PROGRAM OPERATIONS, AND DIRECT CARE

The survey asks vendors to differentiate between direct care, program operations, and administrative costs. There are not always clear distinctions between these categories and definitions of these terms vary. For the purposes of this survey, the following guidelines should be used:

- | | |
|--------------------|--|
| Direct Care | Includes the salaries and benefits (including unemployment insurance and workers' compensation) of Direct Care Staff (DCS), participant transportation expenses whether using staff's personal vehicles or company owned/leased vehicles), and the physical space in which programs are delivered (e.g., the clinic space used to provide the therapeutic services). Direct care costs should not be reported in the two "Admin" worksheets described in the next several pages. |
| Program Operations | Includes expenses that are neither direct care nor administrative. Such activities are program-specific and can be allocated to individual service codes, but not on behalf of an individual participant. Examples include staff responsible for training direct care workers, office space for program operations staff, accreditation and professional licensing fees, program development, supervision, and quality assurance. |
| Administration | Includes expenses associated with the operation of your agency, but which are not program-specific and which cannot be allocated to individual service codes. Employees that are typically considered administrative include general management, finance/accounting, information technology, and human resource staff. |

ADMINISTRATIVE COSTS

The survey includes two worksheets relating to your organization's administrative costs. The purpose of these forms is to capture expenses that are not direct care costs, which are collected elsewhere in the survey.

Note: For a definition of administration, program operations, and direct care costs – see page 4.

“Admin Staff” – Salary and Benefit Costs for Administrative Staff

Use this form to record information regarding the staff responsible for the administrative functions of your agency. Direct care staff performing non-direct activities related to their caseload (e.g., completing incident reports or attending planning meetings) are not considered administrative or program operations so, in general, direct care staff would not be listed on this form. However, in smaller firms in particular, staff who deliver direct services may also perform administrative functions and should therefore be listed.

Title	<p>List the job title for each administrative employee. This level of detail is requested to allow for a review to ensure that only administrative employees are list. For reporting purposes, only a total cost for wages and for benefits will be reported and organization-specific data will not be released.</p> <p>If your agency has multiple employees within a given job title (e.g., three Human Resource Specialists), you may list them in the same row if their time is allocated similarly (e.g., each spends 100 percent of their time on administrative functions for DDS programs; see the discussion below for the Percent of Time Allocated columns).</p> <p>In general, do not combine staff with different job titles in a single line. If, however, there are any employees who work entirely for other programs (that is, they do not provide any support to the organization's DDS programs) they may be reported on a single line.</p>
# of Emp.	<p>Report the number of individuals (not full-time equivalents) in each job title employed by your agency.</p>
Wages	<p>Report the total wages (inclusive of salary, bonuses, and any other cash compensation from all fund sources) actually received by the individual(s) included in each job title in your agency's most recently completed fiscal year.</p> <p>Only report actual wages paid, rather than salary levels (e.g., if an employee was hired midyear, report the wages that they earned and not their annual salary).</p>
Cost of Payroll Taxes & Benefits	<p>Report the cost to your organization in the most recently completed fiscal year to provide the following benefits to individual(s) associated with each job title: health insurance, dental insurance, retirement, and any other benefits that are provided at your agency's discretion. Report all mandatory expenses (except workers' compensation which is reported on line 13 of the Administrative & Program Operations Expense Other form) such as Social Security, Medicare, and state and federal unemployment insurance.</p> <p>Only report costs paid by your agency. Exclude employee costs such as their share of health insurance premiums or retirement contributions. Similarly, if a benefit is available but an employee opts not to participate, no cost should be reported.</p>

% of Time
Allocated

There are four columns relating to the amount of each employee's time that is devoted to administrative tasks for DDS programs, fundraising and investment activities, administrative tasks for other programs, and non-administrative tasks. The total of the time allocated across the four columns should equal 100 percent. These columns are used to allocate the costs associated with the employee(s) listed on each line.

Although this sheet is only intended to capture information regarding administrative staff, the non-administrative column has been included because reported staff, particularly in smaller agencies, may have other duties at times.

If your agency does not already have a methodology for allocating costs across programs, it is recommended that your agency conduct a one-week time study in which staff maintain logs and record (no less frequently than once per hour) the program on which they are working. After that week, each employee's time would be allocated based on their log. For example, if an employee worked 40 hours and 10 of their hours were related to the DDS programs, 25 percent of that employee's time would be allocated to DDS program administration. If a time study is not feasible for your agency, please contact B&A to discuss other potential allocation methodologies.

“AdminProgOps Other” – Administrative & Program Operations Expenses Other Than Staff Salary and Benefits

This form collects information for all administrative and program operations costs other than staff expenses. Costs associated with direct care should not be included in this worksheet.

Note: For a definition of administration, program operations, and direct care costs – see page 4.

For each category of expenses, the form requests the total expense for your agency’s most recently completed fiscal year. It is understood that there may be some differences regarding how agencies categorize their expenses. The categories provided on the form are common administrative expenses, but vendors are not required to report an amount for each and should use the categories that are closest to their own accounting classifications. For example, a vendor’s accounting records may group utilities as a part of rental expense. In this case, the agency can report its total rental cost (including utilities) on that line rather than trying to break utilities out of their records. Additionally, Lines 23-27 are available to report expenses that do not fit well into the provided categories.

Then, the form asks how each expense should be allocated by category (e.g. DDS services versus fundraising or other non-DDS services) and by program (if your agency can allocate program operations costs by service). The total allocation of costs across all categories should equal 100 percent. The columns labelled “Prog Ops for” allows you to select the service(s) for which the expense is attributable (e.g. Specialized Therapeutic Services, Other DDS services, or Other Non-DDS services). A “Total Allocation” column is included that displays a running total of the allocation percentage for each expense so you can ensure that 100% of the total expense is allocated for the expense category. If the total allocation does not equal 100%, or if a cost has been entered but not allocated, the allocation cell will turn yellow and the percentage number turns red.

- Line 1 Report your organization’s rent/ mortgage/ depreciation costs for administrative and program operations space. Do not include costs associated with direct care space such as rooms used to provide client therapy services.

- Line 5 Report your organization’s depreciation expenses for capital items other than facilities and vehicles (which should be reported on Lines 1 and 20, respectively).

- Line 7 Report utility and similar costs that are not included as part of rental costs already reported. Do not include costs associated with direct care space such as rooms in which therapy services are conducted.

- Line 8 Report property and corporate income taxes paid by your agency, but do not include payroll taxes (Social Security, Medicare) or personal income taxes.

- Line 10 Report your organization’s hiring expenses such as background checks, placement agency fees, etc. Do not include staff costs such as human resource employees who should be reported on the Administrative Staff page.

- Line 11 Report your organization’s training expenses such as training materials, course fees, etc. Do not include staff costs such as agency trainers who should be reported on the Administrative Staff page.

- Line 12 Report your organization’s insurance costs. Do not include employee benefits such as health or dental insurance, workers’ compensation costs, or automobile insurance.

- Line 13 Report your organization’s workers’ compensation cost for administrative staff and Program Operations only. Do not include costs for direct care staff.
- Line 16 Report the costs of program operating supplies in support of your specific DDS programs. For example art supplies for the Creative Arts program (service code 094).
- Line 19 Report the costs of professional and consultant services (e.g., legal and accounting) related to your agency’s operation. Do not include costs associated with contractors who provide direct care services as these costs are captured later in the survey.
- Line 20 Report travel-related costs (e.g., mileage reimbursement or vehicle purchase) for administrative and program operations functions and staff. Do not include travel associated with direct care such as company vehicles used to transport individuals or reimbursement of direct care staff for the use of their personal vehicles.
- Line 21 Report any allocated corporate office overhead costs that are not otherwise captured elsewhere in the “Administrative Staff” and “Administrative & Program Operations Expenses Other Than Staff Salary and Benefits” forms, if applicable. For example, some multi-state organizations have a parent office to which a portion of local agencies’ revenues are allocated, but which cannot be identified with specific corporate staff (and so cannot be reported on the Administrative Staff form) or expenses (that would be listed on another line on this form).
- Line 22 If corporate office costs are reported in Line 21, briefly describe the allocation methodology used to assign costs to the agency’s California operations.
- Lines 23-27 Input any other administrative or program operations costs that do not fit into the provided categories. Label any categories that are add and report and allocate the associated expense.
- Line 28 Based upon the figures reported on the “Contact Info & Revenues”, “Administrative Staff”, “Administrative & Program Operations Expenses Other Than Staff Salary and Benefits”, “Fringe Benefits for Direct Care and Program Operations Staff, and “Wages, Training, and Duties for Direct Care and Program Operations Staff” forms, the worksheet will calculate the administrative and program operations overhead rate in total for administrative cost for DDS programs, fundraising and investment activities, all other non-DDS programs. In addition, a program operations rate will be calculated for each therapeutic service (e.g. 115, 116, and 117), all other DDS services, and non-DDS services that receives and allocation of “Total Expense”.
- The calculated Program Operations rate for a given service (e.g. 116 – Early Start Specialized Therapeutic Services) will not be finalized until all the service specific information has been input.

DIRECT CARE STAFF (DCS) AND PROGRAM OPERATIONS STAFF

Costs associated with the employment of direct care staff are collected in two areas: a sheet to collect information about fringe benefits for all program operations and direct care staff and a sheet that collects data about wages paid, training, and staff duties for direct care staff providing specialized therapeutic services.

Fringe Benefits for Direct Care Staff (DCSs) and Program Operations Staff

This worksheet requests information regarding the benefits available to program operations and direct care staff. Report information only for these employees; do not include administrative staff as these costs are captured on the Administrative Staff form.

There are separate columns for full-time and part-time direct service staff. For the purposes of the survey, full-time is defined as at least 30 hours per week.

Lines 3-7 For the purpose of the survey, holidays include only paid days off (being paid for a holiday when not working that day) or compensatory time (vacation hours that an employee receives for working on a holiday that they can later use as paid time off). Additional holiday pay (such as time-and-a-half for employees who work on a holiday) should not be counted in this section – this compensation should be reported in the Total Wage Paid section of the individual wages form for the associated service.

Line 12 For the purposes of this survey, include the mandatory sick days required by California or other local laws.

Lines 16-17 Of the employees reported on Line 1, report the number currently *eligible* for health insurance (Line 16) and the number currently *receiving* health insurance (Line 17).

Line 19 The average employer cost of providing health insurance to participating employees is automatically calculated by dividing the total cost reported on Line 18 by the number of participating employees reported on Line 17.

Lines 20-27 Use this section to report data regarding fringe benefits not already included on this sheet. Do not include information about payroll taxes and other mandatory benefits such as unemployment insurance. If you answer ‘yes’ on line 20, be sure to complete line 21.

Lines 24-25 Of the employees reported on Line 1, report the number currently *eligible* for the benefit(s) listed on Line 24 and the number currently *receiving* the benefit on Line 25.

Line 27 The average employer cost of providing the benefits reported on Line 21 to participating employees is automatically calculated by dividing the total cost reported on Line 26 by the number of participating employees reported on Line 25.

Line 28 Report your organization’s state unemployment insurance tax rate for 2018. This is the employer-specific tax rate applied to the first \$7,000 in wages paid to each employee each year in order to determine payment amounts to the Employment Development Department for state unemployment insurance taxes.

Organizations that pay the actual cost of benefits paid to former employees are asked to calculate a comparable tax rate by dividing total payments in the most recently completed fiscal year by a ‘taxable wage base’. For each staff employed during the last fiscal year, their

individual taxable wage base would be the lesser of their actual wages or \$7,000. The total taxable wage base is the sum of the amounts determined for each individual.

Do not include the federal unemployment insurance tax.

Wages, Training and Duties for Direct Care and Program Operations Staff

This worksheet collects data regarding the direct care and program operations staff associated with providing specialized therapeutic services.

Direct Care Staff Specialty This field contains a dropdown menu of job titles (e.g. registered nurse, therapist, dentist, etc.) of staff providing the service. Staff do not need to be listed individually; they can be grouped by job title, but do not group employees together when there are meaningful differences. For example, if your agency employs staff that supervise other employees and provide direct care to participants, these staff should not be combined with staff who do not have supervisory responsibilities.

Other Specialist If 'Other' is selected from the list in the previous field (i.e. Direct Care Staff Specialty), enter the type of specialty service provided.

County or Regional Center if in Los Angeles County This field is optional and should be completed by those vendors that can separately report payroll data for staff based on the county or, for Los Angeles County, the Regional Center catchment area in which they work. If your organization cannot report payroll data by county or Regional Center catchment area, leave this field blank.

Using the drop down menu, indicate the county or Regional Center catchment area in which the staff provide the service. There should be a separate line for staff within each county or Regional Center catchment area served by your agency. If there are individuals that provide services within multiple counties/regions, report the county/region within which they deliver the majority of the associated services.

Employee/Contractor Using the drop-down menu, select whether the staff in each job category are agency employees or contractors. If a given job title includes both employees and contractors, complete one row for employees and another for contractors.

Total Hours Paid Report the number of hours for which staff in each job title were paid within the past year. The total is inclusive of paid time off (e.g., holidays) and overtime hours.

If salaried staff are included in the job title and actual hours worked are not tracked and cannot otherwise be estimated, assume that a full-time employee works 2,080 hours per year.

% of Hours that were Overtime Report the percentage of paid hours reported in the Total Hours Paid column that were work hours during which DCSs were receiving overtime pay.

For example, if 10,000 hours were reported in the Total Hours Paid column and the DCSs included in this total worked 1,000 hours of overtime, '10%' would be reported (1,000 overtime hours divided by 10,000 total paid hours).

Total Wages Paid Report the total wages paid within the past year to staff in each job title listed. The amount reported here should be inclusive of overtime pay, shift differentials, paid time off (holidays, vacation pay, etc.), and all other cash compensation. Do not include reimbursement of expenses such as mileage.

Average Hourly Wage This field is automatically calculated by dividing the Total Wage Paid field by the Total Hours Paid field.

Annual Turnover	Indicate the estimated annual turnover experienced for this job title. Calculate turnover by dividing the number of staff within the reported job title who left the position within the past year (through a transfer or promotion, separation, etc.) and for whom a replacement was/ is needed, by the number of employees within the job title over the course of your agency's most recently completed fiscal year.
Staff Training	Report the average number of training hours that a staff person in the reported job title receives during their first year with your agency and then the average number of training hours received in each subsequent year.
Job Function	<p>Report the percentage of time that staff spend on functions related to specialized therapeutic services. The categories are: direct care, supervision (of other staff not service recipients), training/ program development, professional supports (that is, staff operating under a professional license such as a nurse or therapist), other program operations duties, and other functions.</p> <p>Zeros do not need to be entered, but the total allocation of time across these six columns should equal 100 percent.</p>
# of Staff Supervised	For employees who have supervisory responsibility (for other staff not service recipients), report the average number of direct reports each supervisor has.
Services Delivered/ Supported	<p>Report the percentage of time that staff spend delivering or supporting the specialized therapeutic service codes or 'Other Services'. Other services may include waiver services that are not part of this survey or services that are part of another program.</p> <p>Only working hours should be considered when completing this form; do not include paid time off (holidays, vacation, or sick leave). Zeros do not need to be entered, but the total allocation of time across the columns should equal 100 percent.</p> <p>If your agency does not already have a methodology for allocating costs across programs, it is recommended that your agency conduct a one-week time study in which staff maintain logs and record (no less frequently than once per hour) the program on which they are working. After that week, each employee's time would be allocated based on their log. For example, if an employee worked 40 hours and 10 of their hours were related to the DDS programs, 25 percent of that employee's time would be allocated to DDS program administration. If a time study is not feasible for your agency, please contact B&A to discuss other potential allocation methodologies.</p>

PRODUCTIVITY AND OTHER FACTORS

This section provides instructions related to productivity and other factors for the Specialized Therapeutic Service (service codes 115, 116, and 117). Questions that are self-evident are not addressed within this document.

For each service code report data regarding your organization's caseload, the 'staffing pattern' of direct care staff, and other service-specific issues.

Direct Staff Specialty

- Line 1 Using the drop-down menu, select the staff specialty (e.g. registered nurse, social worker, dietician) performing the 115, 116, or 117 service. If the job title is not listed, select 'other'. Staff do not need to be listed individually; they can be grouped by job title. If there are more than four job titles for a service code (115, 116, or 117) create an additional copy of the '115,116,117_Other' tab.

Agency Caseload and Service Design

- Line 4 Report the average number of separately billable encounters that a direct care staff performs in an average week. If a single individual receives services twice in a day (e.g., two hours in the morning and two hours in the evening), that would be counted as two encounters.
- Line 5 Report the average length (in hours) of a service encounter.
- Lines 6-7 Report the percentage of service hours provided in individuals' homes and in the community on Line 6 and the percentage of service hours provided in a clinic or office setting on Line 7. The percentages reported on Lines 6 and 7 should total to 100 percent.

Clinic/ Office Space

- Line 9 Report the total square footage of the clinics reported on Line 8.
- Line 10 Report the percentage of square footage (from Line 8) that is used to provide direct service for the applicable service. This would not include administrative space such as offices; non-program space such as lobbies, hallways, and bathrooms; or direct service space for services other than the applicable service code. Calculate the percentage by dividing the program space for the applicable service code by the total square footage reported on Line 9.
- Lines 11-13 These lines allow you to report the operating cost associated with your program facilities.
- Line 14 The operating cost per square foot is automatically calculated by dividing reported operating costs (Lines 11 thru 13) by total square footage (Line 9).

Staffing Pattern for a 'Typical' Week for Direct Care Staff

These sections collect information regarding the 'typical' week for a direct care staff providing the specialized therapeutic services.

It is understood that the number of hours that a DCS works and how they spend their time may vary from week-to-week. To complete these sections of the worksheets, informed judgement will be necessary to

consider these variations and determine what constitutes an average week. This could be done for example, by considering how much time a DCS spends on each of these activities over the course of a year and then dividing that total by 52. For example, most DCSs probably do not participate in an individual planning meeting during a typical week. Rather, they may attend a handful of planning meetings over the course of a year. Thus, if a DCS spends an average of 10 hours per year in individual planning meetings, your agency would report 0.19 hours per week (10 divided by 52).

Total hours worked and paid for in a week (Line 15)	<p>This field asks the total number of work hours for a direct care staff person during a typical week. Work hours do not include paid time off or holidays.</p> <p>The remaining lines in the Staffing Pattern section require that you account for the total number of hours reported on this line by allocating their time across the provision of service and other activities. There is an automatically-calculated line at the bottom of the section that states whether or not all reported work hours have been allocated.</p>
Providing Direct Care services (Line 16)	<p>Report the number of hours per week that the staff person is providing the specialized therapeutic services. This line should equal the Line 4 (number of encounter per week) times Line 5 (the average length of a service encounter).</p>
Providing other billable services (Line 17)	<p>This section asks the number of hours per week that the staff person is providing billable services other than the specialized therapeutic service codes (115, 116, and 117). For example, if staff is providing specialized therapeutic services and also some billable Behavior Management Consultant (service code 620) service, the time spent providing Behavior Management Consultant services would be reported as 'other billable' time.</p>
Participating in individual planning meetings (Line 18)	<p>Report time that direct care staff spend in participating in individual program planning (IPP), individualized family service plan (IFSP), and similar planning meetings. If direct care staff bill for any time spent in planning meetings, that time would be reported on line 16.</p>
Travel time between individuals (Line 19)	<p>Report time that direct care staff spend driving between the office and a service site and between service sites. Only report travel time for which the staff is paid. That is, employees are generally not paid to travel between their home and the office/ service site at the beginning or end of the workday so those hours would not be reported. Do not include time associated with transporting individuals.</p>
Recordkeeping (Line 20)	<p>Report time that direct care staff spend on completing progress notes, updating medical records, etc. that does not occur during the course of service provision. Do not include time that is billed. For example, if progress notes are completed while services are delivered and being billed, the time would not be reported.</p>
'Employer time' (Line 21)	<p>Report time that direct care staff spend on duties associated with their employment. Examples include attending staff meetings and receiving counseling from their supervisor.</p>

Performing ‘collateral contacts’ (Line 22)	Report time that direct care staff spend performing contacts on behalf of an individual. Examples could include speaking with an individual’s case manager or health care provider, custodian, workplace supervisor, etc.
Time lost to missed appointments (Line 23)	Hours reported for this category should only include the amount of time that cannot be redirected to another billable or non-billable activity. It is not necessarily the length of the missed appointment. For example, a Dietician may have a two-hour appointment scheduled with an individual who cancels. The Dietician may not have other billable work that can be completed during this time, but they likely perform other functions, such as catching up on paperwork or training, performing ‘collateral’ contacts, etc. rather than being idle. Since there are categories for these other activities, the time should be reported there.
Other activities (Lines 24-26)	This section includes has lines for undefined ‘other activities’ that can be used to report any duties that occur during a typical workweek, but that are not included in the previously defined categories. If these lines are used, type in a brief description of the activity and report the associated time.
Total mile driven per week per staff to travel between service encounters (Line 28)	For staff that use their own vehicle, report the average number of miles driven per week between service encounters.
Workers’ Compensation rate (Line 29)	Report your workers’ compensation cost for the direct care staff providing the applicable service as a rate for each \$100 in wages paid as of the last day of your agency’s most recently completed fiscal year.