

SNF WAGE INDEX INFORMATION		PROVIDER NO.:		PERIOD:		WORKSHEET S-3		
				FROM _____	TO _____	PARTS II & III		
PART II DIRECT SALARIES		Amount Reported	Reclass. of Salaries from Wkst. A-6	Adjusted Salaries (col. 1 ± col. 2)	Paid Hours Related to Salary in col. 3	Average Hourly Wage (col. 3 ÷ col. 4)	Data Source	
		1	2	3	4	5	6	
1	Total salary (See Instructions)							1
2	Physician salaries-Part A							2
3	Physician salaries-Part B							3
4	Interns & Residents (approved)							4
5	Home office personnel							5
6	Sum of lines 2 thru 5							6
7	Revised wages (line 1 minus line 6)							7
8	Other Long Term Care							8
9	Other Inpatient Routine Service							9
10	Interns & Residents (Not In Approved Program)							10
11	HHA							11
12	Outpatient Rehabilitation Providers							12
13	Hospice							13
14	Non-reimbursable							14
15	Total Excluded salary (Sum of lines 8 through 14)							15
16	Subtotal (line 7 minus line 15)							16
17	Contract Labor: Patient Related & Mgmt						CMS 339	17
18	Home office salaries & wage related costs							18
19	Wage related costs (core)						CMS 339	19
20	Wage related costs (other)						CMS 339	20
21	Wage related costs (excluded units)						CMS 339	21
22	Subtotal (see instructions)							22
23	Total (see instructions)							23
24	Contract Labor: Physician services-Part A							24

PART III - OVERHEAD COST - DIRECT SALARIES

		Amount Reported	Reclass. of Salaries from Wkst. A-6	Adjusted Salaries (col. 1 ± col. 2)	Paid Hours Related to Salary in col. 3	Average Hourly Wage (col. 3 ÷ col. 4)		
		1	2	3	4	5		
1	Employee Benefits							1
2	Administrative & General							2
3	Plant Operation, Maintenance & Repairs							3
4	Laundry & Linen Service							4
5	Housekeeping							5
6	Dietary							6
7	Nursing Administration							7
8	Central Services and Supply							8
9	Pharmacy							9
10	Medical Records & Medical Records Library							10
11	Social Service							11
12	Interns & Records (Apprvd Tching Prog)							12
13	Other General Service (specify)							13
14	Total (sum lines 1 thru 13)							14

FORM CMS-2540-96 (07/96) (INSTRUCTIONS FOR THIS WORKSHEET ARE PUBLISHED IN CMS PUB. 15-II, SECTION 3509.1 - 3509.2)