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PERSONAL CARE SERVICES

2011 SURVEY INSTRUCTIONS

Dear Medicaid Service Provider,

The Department of Health and Welfare is conducting a survey of all Personal Care Providers per/in accordance with Idaho Statute 39-5606. The survey is requesting the number of hours of all Direct Care Staff and the costs involved for all travel, administration, training, and all payroll taxes and fringe benefits. The information obtained from the survey will assist the Department to calculate a supplemental component for personal care services that is reasonably related to an efficient provider's costs. It is critically important that all personal care providers participate in the survey in order to obtain a valid sampling of actual cost data.

Keep in mind that the Department has the authority to audit the survey data pursuant to Administrative Rules IDAPA 16.03.09.305.01, "Scope of System Reimbursement Audits," so it is important to make sure your completed survey reflects accurate data.

In this packet you will receive the survey and contact information. The survey information is related to calendar year 2010, and it includes all the expenses related to Direct Care Staff for a personal care agency. The survey data will be confidential.

If you want to fill out an electronic Excel version of the survey, please go to www.healthandwelfare.idaho.gov and click on the provider tab, then the Medicaid Provider link and you will find the survey link in the right hand column. Download the survey to your computer, fill it out, and email the completed form to KellermR@dhw.idaho.gov.

The deadline to have all material completed is **August 1, 2011**. Enclosed you will find a Self Addressed Envelope to mail all completed documents back to us.

If you have any question regarding the survey, please call Robert Kellerman at (208) 364-1994 or email him at KellermR@dhw.idaho.gov.

PERSONAL CARE SERVICES

Provider Information

PROVIDER SPECIALTY	
AGENCY NAME	
PROVIDER NO.	
ADDRESS:	
City	
Zip	
REPORT DATE	From:
	To:
ADMINISTRATOR	
TELEPHONE NO.	
EMAIL ADDRESS	
CONTACT NAME	
TELEPHONE NO.	
EMAIL ADDRESS:	

[COORDINATION](#)

OVERVIEW

The Department of Health and Welfare Medicaid will distribute a survey to all Personal Care Agencies. The survey will request the number of hours of all Direct Care Staff and the costs involved for all travel, administration, training, and all payroll taxes and fringe benefits. information obtained from the survey will assist the Department to calculate a supplemental component for personal care services. It is critically important that all personal care service providers participate in the survey in order to obtain a valid sampling of actual data.

See Idaho Code section 16.10.307.04 for additional information on survey.

Click on each tab to see the cost data needed. Please refer all questions to Robert Kellerman at (208) 364-1994.

Question about the survey template?

Contact: Robert Kellerman
Telephone: 208.364.1994
Email: KellermR@dhw.idaho.gov

Note: *Please send questions via email with an example and a reference point (folder tab name, cell and line number).*

How to submit this survey?

After completing the survey, please save and file in excel following the format given below.

Format:  **EurekaCare-DD Cost Survey.xls** (ProviderName-ProviderGroup Cost Survey.xls)
(this is only an example)

Send the saved survey to KellermR@dhw.idaho.gov as an attachment

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PERSONAL CARE SERVICES COST SURVEY

LINE	GENERAL INFORMATION	
1	Provide Name	0
2	Provider Number	0
3	Street Address	0
4	City	0
5	Zip	0
6	DATE:	
7	Contact Person	0
8	Contact Email	0
9	Contact Telephone	0
10	Provider Type	

Requirements:

1. This survey sheet must be submitted.
2. End of year employee payroll summary report for the company for 2010 must be submitted with direct care staff names highlighted. If you file IRS form 1099 for contractors you must submit these forms for each direct care employee.
3. Provide an Income Statement ("Profit and Loss Statement") if available.

ANNUAL COMPENSATION				ANNUAL EXPENSES	
A	B	C	D	E	F
Direct Care Staff Salary	Travel	Administration	Training	All Payroll Taxes	Fringe Benefits
				FICA	
				FED	
				STATE	
				SSDI	
				FUTA	
				SUTA	

A	Payroll records defined as salary for direct care staff.
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