

Nursing Home Direct Care Worker Wage Pass Through Reimbursement Form

Input information about your nursing home and the reimbursement period (i.e., the payroll period(s)) in the table below.

Facility Name:	
Facility NPI:	
Facility SIGMA Vendor ID:	
Facility Address:	
Facility Contact:	
Contact's Email:	
Contact's Phone Number:	
Reimbursement Period:	

Input direct care worker hours in the table below, only input time associated with direct care work.

Direct Care Worker Hours Information	
Registered Nurse (RN) Hours:	
RN Overtime Hours:	
Licensed Practical Nurse (LPN) Hours:	
LPN Overtime Hours:	
Competency Evaluated Nursing Assistant (CENA) Hours:	
CENA Overtime Hours:	
Respiratory Therapist Hours:	
Respiratory Therapist Overtime Hours:	
Administrative Staff Direct Care Worker Hours:	
Administrative Staff Direct Care Worker Overtime Hours:	
Total Standard Hours:	
Total Overtime Hours:	

Input total direct care worker payroll tax expenses specifically associated with the \$2/hour direct care worker wage established by Michigan Public Act (PA) 123 of 2020.

Direct Care Worker Payroll Tax Expenses	
RN Payroll Tax Expenses:	
LPN Payroll Tax Expenses:	
CENA Payroll Tax Expenses:	
Respiratory Therapist Payroll Tax Expenses:	
Administrative Staff Direct Care Work Payroll Tax Expenses:	
Total Payroll Tax Expenses:	

The table below shows the total reimbursement for direct care worker related expenses due the nursing home.

Direct Care Reimbursement Due Nursing Home	
Direct Care Wage Reimbursement:	
Direct Care Overtime Reimbursement:	
Payroll Tax Reimbursement:	
Total Reimbursement:	

By typing the individual's name below (*physical signature is not required*) and checking the certification box, the individual or officer signing this Nursing Home Direct Care Worker Wage Pass Through Reimbursement Form certifies by his or her signature that he or she is authorized to sign this form on behalf of the nursing home, responsible governing board, official and/or contractor(s), and agrees to abide by any specific direct care worker wage pass through reimbursement guidance provided by the Michigan Department of Health and Human Services, pass on the direct care worker wage reimbursement on to eligible employees, retain documentation to support wage expenses claimed on this form, comply with Michigan PA 123 of 2020, and agrees that payments may be subject to audit and recoupment if the terms of this form are violated.

Individual Name	Individual Title	Date