

COMMUNITY SERVICES BUREAU
PART B
FISCAL YEAR 2017 WAGE AND BENEFITS PAYMENT FORM

CFC/PAS Worker Types		A	B	C	D	E	F	G	H	I	J	K	L	M
		Average Hourly Wage 06/30/2016	Average Benefit Circle One: % or \$ 06/30/16	Total Average Hourly Wage & Benefits Actual 06/30/2016	Average Hourly Wage 07/01/2016	Average Benefit % or \$ 07/01/2016	Average Hourly Wage & Benefits 07/01/2016	FTE	Number Employees	Wage Difference (Column F-C)	Total Wage Difference (Column G x I x 2080 hrs.)	Entry Level Wage 06/30/2016	Entry Level Wage After Wage Increase FY 2017	Effective Date of Wage Increase to Workers
Billing Codes	Worker Types													
T1019 T2001 S5126	AB CFC/PAS													
T1019-U9	SD CFC/PAS													
	Totals													

HCBS/WAIVER Worker Types		A	B	C	D	E	F	G	H	I	J	K	L	M
		Average Hourly Wage 06/30/2016	Average Benefit Circle One: % or \$ 06/30/16	Total Average Hourly Wage & Benefits Actual 06/30/2016	Average Hourly Wage 07/01/2016	Average Benefit % or \$ 07/01/2016	Average Hourly Wage & Benefits 07/01/2016	FTE	Number Employees	Wage Difference (Column F-C)	Total Wage Difference (Column G x I x 2080 hrs.)	Entry Level Wage 06/30/2016	Entry Level Wage After Wage Increase FY 2017	Effective Date of Wage Increase to Workers
Billing Codes	Worker Types													
T1019-UA	HCBS PAS/SDPAS													
S5130 UA	HOMEMAKER													
T1005 UA	RESPIRE													
S5125 UA	SPECIALLY TRAINED ATTENDANT													
S5126 UA/U9	BIG SKY BONANZA													
S5135 UA	SENIOR COMPANION													
T2027 UA	SPECIALIZED CHILDCARE													
S5126 UA/U9	COMMUNITY SUPPORT													
	Totals													

Agency Name:		Contact Name:	
Email Address:		Phone Number:	