Full Time Employee (FTE) Worksheet Instructions

References are made to various cost reports throughout these instructions. If the referenced cost report has been audited, please use the cost report that you received with your Notice of Amount of Program Reimbursement (NPR) package; otherwise, please use the submitted cost report for the referenced fiscal year end.

If you have reason to believe that a more accurate FTE number exists because of either a known error on the cost report or proposed audit adjustments, please report the number of FTEs that is most appropriate. If any FTEs are different from what was reported on any of your filed cost reports, please provide a brief explanation of the reason for the difference.

1A Total number of Indirect Medical Education (IME) FTEs applicable to allopathic and osteopathic programs during your last cost reporting period ending on or before 12/31/1996. This number is reported on Worksheet E Part A, line 3.08. Please do not include any 422 adjustments, affiliation agreements, or new programs in this cell.

1B Total number of IME FTEs applicable to allopathic and osteopathic programs as reported on Worksheet E Part A, Line 3.08 of your penultimate (year before your prior) year cost report.

1C Total number of IME FTEs applicable to allopathic and osteopathic programs as reported on Worksheet E Part A, Line 3.08 of your prior year cost report.

1D Total number of IME FTEs applicable to allopathic and osteopathic programs that you anticipate will be reported on Worksheet E Part A, Line 3.08 of your current fiscal period.

2B Total number of IME FTEs applicable to dentistry and podiatry programs as reported on Worksheet E Part A, line 3.13 of your penultimate year cost report.

2C Total number of IME FTEs applicable to dentistry and podiatry programs as reported on Worksheet E Part A, line 3.13 of your prior year cost report.

2D Total number of IME FTEs applicable to dentistry and podiatry programs that you anticipate will be reported on Worksheet E Part A, line 3.13 of current fiscal period.

3B Prospective Payment System (PPS) bed count (bed days available in the cost reporting period / number of days in the cost reporting period) as reported on Worksheet E Part A, Line 3.00 of your penultimate year cost report.

3C PPS bed count as reported on Worksheet E Part A, line 3.00 of your prior year cost report.

3D PPS bed count that you anticipate will be reported on Worksheet E Part A, line 3.00 of your current fiscal year cost report.

4A Total number of unweighted Graduate Medical Education (GME) FTEs applicable to allopathic and osteopathic programs from the last cost reporting period ended on or before 12/31/1996. This number is reported on Worksheet E-3 Part IV, line 3.01. Please do not include any 422 adjustments, affiliation agreements, or new programs in this cell.

4B Total number of unweighted GME FTEs applicable to allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.05 of your penultimate year cost report.

4C Total number of unweighted GME FTEs applicable to allopathic and osteopathic as reported on Worksheet E-3 Part IV, line 3.05 of your prior year cost report.

4D Total number of unweighted GME FTEs applicable to allopathic and osteopathic programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.05 of your current fiscal period.

5B Total number of weighted GME FTEs applicable to allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.09 of your penultimate year cost report. This number will be split between primary and non-primary care FTEs in lines 7B and 8B of this worksheet.

5C Total number of weighted GME FTEs applicable to allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.09 of your prior year cost report. This number will be split between primary and non-primary care FTEs in lines 7C and 8C of this worksheet.

5D Total number of weighted GME FTEs applicable to allopathic and osteopathic programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.09 of your current fiscal year cost report. This number will be split between primary and non-primary care FTEs in lines 7D and 8D of this worksheet.

6B Total number of weighted GME FTEs applicable to dentistry and podiatry programs as reported on Worksheet E-3 Part IV, line 3.11 of your penultimate year cost report.

6C Total number of weighted GME FTEs applicable to dentistry and podiatry programs as reported on Worksheet E-3 Part IV, line 3.11 of your prior year cost report.

6D Total number of weighted GME FTEs applicable to dentistry and podiatry programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.11 of your current fiscal year cost report.

7B Total number of weighted GME FTEs applicable to primary care allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.07 of your penultimate year cost report.

7C Total number of weighted GME FTEs applicable to primary care allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.07 of your prior year cost report.

7D Total number of weighted GME FTEs applicable to primary care allopathic and osteopathic programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.07 of your current fiscal year cost report.

8B Total number of weighted GME FTEs applicable to non-primary care allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.08 of your penultimate year cost report. The sum of the FTEs reported in 7B and 8B should equal the number in 5B.

8C Total number of weighted GME FTEs applicable to non-primary care allopathic and osteopathic programs as reported on Worksheet E-3 Part IV, line 3.08 as reported on your prior year cost report. The sum of the FTEs reported in 7C and 8C should equal the number in 5C.

8D Total number of weighted GME FTEs applicable to non-primary care allopathic and osteopathic programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.08 of your current fiscal year cost report. The sum of the FTEs reported in 7D and 8D should equal the number in 5D.

9aB Total number of IME unweighted FTEs applicable to allopathic and osteopathic programs which have been redistributed to your facility from another for the purpose of adjusting the 1996 FTE cap. Report the number of unweighted FTEs to be added to your 1996 cap as specified in the affiliation agreement that your facility entered into for your penultimate year cost report. This number was reported on Worksheet E- 3 Part IV, line 3.06 of your penultimate year cost report. Novitas Solutions must have received a copy of this affiliation agreement by July 1 of the applicable academic year in order for the redistribution to be valid.

9aC Total number of IME unweighted FTEs applicable to allopathic and osteopathic programs which have been redistributed to your facility from another for the purpose of adjusting the 1996 FTE cap. Report the number of unweighted FTEs to be added to your 1996 cap as specified in the affiliation agreement that your facility entered into for your prior year cost report. This number was reported on Worksheet E-3 Part IV, line 3.06 of your prior year cost report. Novitas Solutions must have received a copy of this affiliation agreement by July 1 of the applicable academic year in order for the redistribution to be valid.

9aD Total number of IME unweighted FTEs applicable to allopathic and osteopathic programs which have been redistributed to your facility from another for the purpose of adjusting the 1996 FTE cap. Report the number of unweighted FTEs to be added to your 1996 cap as specified in the affiliation agreement that your facility entered into for your current fiscal year cost report. This number was reported on Worksheet E-3 Part IV, line 3.06 of your current fiscal year cost report. Novitas Solutions must have received a copy of this affiliation agreement by July 1 of the applicable academic year in order for the redistribution to be valid.

9bB Total number of GME unweighted FTEs applicable to allopathic and osteopathic programs which have been redistributed to your facility from another for the purpose of adjusting the 1996 FTE cap. Report the number of unweighted FTEs to be added to your 1996 cap as specified in the affiliation agreement that your facility entered into for your penultimate year cost report. This number was reported on Worksheet E- 3 Part IV, line 3.03 of your penultimate year cost report. Novitas Solutions must have received a copy of this affiliation agreement by July 1 of the applicable academic year in order for the redistribution to be valid.

9bC Total number of GME unweighted FTEs applicable to allopathic and osteopathic programs which have been redistributed to your facility from another for the purpose of adjusting the 1996 FTE cap. Report the number of unweighted FTEs to be added to your 1996 cap as specified in the affiliation agreement that your facility entered into for your prior year cost report. This number was reported on Worksheet E-3 Part IV, line 3.03 of your prior year cost report. Novitas Solutions must have received a copy of this affiliation agreement by July 1 of the applicable academic year in order for the redistribution to be valid.

9bD Total number of GME unweighted FTEs applicable to allopathic and osteopathic programs which have been redistributed to your facility from another for the purpose of adjusting the 1996 FTE cap. Report the number of unweighted FTEs to be added to your 1996 cap as specified in the affiliation agreement that your facility entered into for your prior year cost report. This number was reported on Worksheet E-3 Part IV, line 3.03 of your year current fiscal year cost report. Novitas Solutions must have received a copy of this affiliation agreement by July 1 of the applicable academic year in order for the redistribution to be valid.-

Lines 10 – 12 only apply for those new programs whose minimum accredited length has not yet expired. If the minimum accredited length has expired, please distinguish the count of new program FTEs for IME and GME below line 12.

10D Total number of unweighted allopathic and osteopathic new program FTEs.

11D Total number of weighted new program FTEs applicable to primary care allopathic and osteopathic programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.16 of your current fiscal year cost report.

12D Total number of weighted new program FTEs applicable to non-primary care allopathic and osteopathic programs that you anticipate will be reported on Worksheet E-3 Part IV, line 3.17 of your current fiscal year cost report.

Temporary/Permanent IME Cap Adjustment

Temporary IME Cap Adjustment: Number of IME FTEs by which the 1996 cap is to be adjusted for new programs that are still under the minimum accredited length.

Permanent IME Cap Adjustment: Number of IME FTEs by which the 1996 cap is to be adjusted for new programs that have exceeded the minimum accredited length.

Temporary/Permanent GME Cap Adjustment

Temporary GME Cap Adjustment: Number of GME FTEs by which the 1996 cap is to be adjusted for new programs that are still under the minimum accredited length.

Permanent GME Cap Adjustment: Number of GME FTEs by which the 1996 cap is to be adjusted for new programs that have exceeded the minimum accredited length.

Lines 13 – 16 only apply for those new programs whose minimum accredited length has expired. Please distinguish the count of new program FTEs for IME and GME.

Lines 17 – 19 only apply for displaced residents. This number would normally appear in the cost report line description for “init years”. Please distinguish the count of displaced resident FTEs for IME and GME.