

**Ministry of Health and Long-Term Care
Calculation Worksheet/Schedule to Accompany Application for Reimbursement by the Province (PART II or PART V)**

**PART II - Homemakers Services Provided - Employee of the Municipality, District Board or Approved Band
PART V - Nurses Services Provided - Employee of the Municipality, District Board or Approved Band
YEAR: 2019/2020**

Agency Name: A.D. Morrison

Total # of Clients served this period: 3

For the Period of: March 2020

of new clients serviced this period: 1

(A)		(B)	(C)	(D)	(E1 / E2 / E3)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)
HOMEMAKER	F/T Or P/T	H = Homemaker P = Certified PSW O = Other (specify)	CLIENT	RATE PER HOUR (\$)	# OF HOURS WORKED Regular/OT/Stat	Regular Wages	OVERTIME PAID (\$)	STATUTORY WORKED (\$)	TOTAL WAGES (\$)	VACATION PAY	STATUTORY NOT WORKED (\$)	EMPLOYER EI (\$)	OTHER BENEFITS (\$) INCL CPP/WSIB	TRAVEL MILEAGE PAID (\$)
						F=(D x E1)	Rate x 1.5 x E2 (O/T Hrs. Worked)	Rate x 1.5 x E3 (Statutory Hours Worked)	I=(F+G+H)	J=(I x 4%)	L=(I+J+K) x (1.58% x 1.4)			
Sally Smith	F/T	H	Bob Abbott	\$19.25	31 / 0 / 0	\$596.75	\$0.00	\$0.00	\$596.75	\$23.87		\$13.73	\$78.02	
Mike Wilson	P/T	H	Joe Jones	\$18.75	22 / 0 / 0	\$412.50	\$0.00	\$0.00	\$412.50	\$16.50		\$9.49	\$37.26	\$40.00
Michelle Myers	F/T	H	Mary Hobson	\$19.50	35 / 0 / 0	\$682.50	\$0.00	\$0.00	\$682.50	\$27.30		\$15.70	\$84.48	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
					0 / 0 / 0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00	
TOTAL	F/T=2, P/T=1	H=3, P=0, O=0			88 / 0 / 0	\$1,691.75	\$0.00	\$0.00	\$1,691.75	\$67.67	\$0.00	\$38.92	\$199.76	\$40.00

NOTES:
H = Homemaker: staff with no formal related training.
P = Certified Personal Support Worker: Graduate of a formal PSW training program/
O = Other: other formal training (e.g. nurse, has undergraduate degree).

- Columns A, B, and C must be completed in order to process this claim. Left blank, the entire claim will be deemed as incomplete, and will not be processed.
- TOTALS on schedule must balance with the "Application for Reimbursement by the Province" form.

Total Wages (Column I)	\$1,691.75
Total Benefits (J+K+L+M)	\$306.35
Travel Costs (Column N)	\$40.00
Net Costs (Wages + Benefits + Travel)	\$2,038.10
Provincial Subsidy (80% Net Costs)	\$1,630.48