

Northern New England 2019 Home Care & Hospice Compensation Survey

GENERAL INSTRUCTIONS

Welcome to the 2019 Northern New England Home Care & Hospice Compensation Survey. The survey is a collaboration between Gallagher Surveys and five healthcare associations:

Vermont Association of Hospitals and Health Systems, Inc.
New Hampshire Hospital Association
Home Care, Hospice & Palliative Care Alliance of New Hampshire
Maine Hospital Association
Home Care & Hospice Alliance of Maine

Below is information about survey organization and content, as well as general instructions for completion.

The complete survey is contained in the spreadsheet questionnaire attached to this email. Survey participation is very simple and consists of just three steps:

- ◇ Fill out the organizational data and policy tabs in the spreadsheet.
- ◇ Populate the appropriate data tab(s) with your organization's individual incumbent salary data
- ◇ Email your data back to Gallagher Surveys, or upload via our secure upload link

The entire survey results will be based on individual incumbent data. This type of submission reduces the number of errors, increases the reliability of the final results, and allows for more extensive analysis of the data. We are very flexible regarding the format of electronic salary submissions and can accept almost any electronic format as long as it contains the necessary data. It does not have to match the template provided exactly as long as we get individual incumbent data. Please DO NOT report individual per diem employees, but please supply the average per diem rate for each position.

THE EFFECTIVE DATE OF DATA IS JANUARY 1, 2019. DO NOT REPORT CHANGES THAT TOOK PLACE AFTER THAT DATE.

Once complete, mail your data submission to compensationsurveys@ajg.com

Or

Securely upload your data by using the link below

https://gbsviewpoints.co1.qualtrics.com/jfe/form/SV_1CaN76RxEvz0EdL

The deadline is March 1, 2019.

We have targeted a mid April distribution date. To achieve that target, we must have everyone's cooperation in meeting this deadline. Thank you.

Questions? Contact Thomas Cummins or Annmarie Flaherty at:

Thomas_cummins@ajg.com
(617) 531-7758

Annmarie_Flaherty@ajg.com
(617) 531-7776

Instructions for Participating in the 2019 NNE Compensation Survey

Follow the three steps outlined below to participate in the 2019 NNE Compensation Survey.

Step

1

Complete the Institution Data and Policy sections of the questionnaire

All of the organizational, policy, and compensation data is collected within the spreadsheet. To begin, click on the Excel icon to open the file “2019_NNE_HomeCare_Hospice_Questionnaire.xlsx” in MS Excel. Once opened, save a copy to your own computer to act as a working copy. **This spreadsheet file contains six worksheets:**

1. **Org Data** – used to collect your contact information and scope data
2. **Policy** - compensation policy data
3. **HC Mgt Positions** – The list of HOME CARE and HOSPICE management positions in the survey
4. **HC Mgt Data** – Used to collect HOME CARE and HOSPICE management salary data
5. **HC Staff Positions** – The list of HOME CARE and HOSPICE staff positions in the survey
6. **HC Staff Data** – Used to collect HOME CARE and HOSPICE staff salary data

Please note that each “Data” tab contains one line of sample data **highlighted in red**. You can overwrite the sample data if you wish.

Unless otherwise noted, please answer all Yes/No questions. If you leave it blank, we cannot assume that you meant no and the final results will be distorted due to non-answers.

Step

2

Submit Individual Incumbent Salary Data

The survey is compiled using individual incumbent data for both the management and staff sections. The final results will present two sets of statistics, one based on the individual incumbent data and another based on averages by organization. In order to compile the survey this way, all participants must submit their incumbent data either by populating the appropriate “data” tab or submitting an electronic report. Please note that we are flexible and can accept incumbent salary submissions in various formats as long as they contain the necessary data. Your submission does not have to match the template exactly; just provide the relevant data in some form.

Please review all of the job descriptions and make sure that your matches are accurate.

Please note each data page contains one line of sample data at the top.

- 1. HC Mgt Data** – The suggested template for submitting the individual incumbent HOME CARE AND HOSPICE management data. Please submit data in an ANNUAL format for each incumbent in a position matched to the proper survey code.

The home care and hospice management data fields are defined as follows:

Job code	The code used to link each individual salary to a position in the survey. The codes are located in the list of positions on the “Mgt Positions” worksheet.
Your Title (Optional)	Your organization’s title for the position.
Annual Rate \$	The Annual Base Salary for the incumbent(s)
Formal Range Min and Max	Report formal range numbers on an ANNUALIZED basis.
STI Eligible? Y/N	Report yes (y) or no (n) if the incumbent is eligible for a short term incentive.
Actual STI \$	Report most recent annual bonus amount in \$.
STI Target %	Report the STI plan’s target at a % of base salary
LTI Eligible? Y/N	Report yes (y) or no (n) if the incumbent is eligible for a long term incentive.
Strength of match	Report whether the responsibilities of your position are greater than, approximately equal to, or less than those of the surveyed position.

- 2. HC Staff Data** – The suggested template for submitting the individual incumbent HOME CARE and HOSPICE staff data. Please report regularly scheduled employees only. If you are having a problem or have any questions, please call Thomas Cummins at (617) 531-7758 or Thomas_cummins@ajg.com. We can work with you to come up with some sort of submission that is feasible for everybody.

The home care and hospice staff data fields are defined as follows:

Job Code	The code used to link each individual salary to a position in the survey. The codes are located in the list of positions on the “Staff Positions” worksheet.
Your Title (Optional)	Your organization’s title for the position.
Hourly rate \$	The current HOURLY rate for the incumbent(s)
Range minimum and maximum	Report formal range numbers on an HOURLY basis.
Union? Y or N	Report yes (y) if unionized; no (n) if not
Bonus? Y or N	Report yes (y) if eligible for a bonus; no (n) if not
Exempt? Y or N	Report yes (y) if position is exempt; no (n) if not
Differentials	Report shift differentials as either a % or \$.
Per Visit Rates	Report the average per visit rate for admission visits and revisits.

Step

3

Submit your data to Gallagher Surveys

Please submit your completed survey to Gallagher by either –

1. Emailing your survey data to – compensationsurveys@ajg.com
2. Upload to our secure server –
https://gbsviewpoints.co1.qualtrics.com/jfe/form/SV_1CaN76RxEvz0EdL

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