

# Premium Pay for Workforce Recruitment and Retention Grant Program

## *Round 2 Introduction*

Webinar for Potential Applicants

February 2, 2023

# Agenda

- Overview and Program Guidance
- FTE Summary Spreadsheet
- Three Common Errors
- Your Questions

Note: At future town hall webinars, we will cover information about:

- Online Application (February 9<sup>th</sup> at 12 noon),
- Eligible Employees,
- Distributing Premium Pay,
- Financial and Program Reporting, and
- Other topics based on frequently asked questions.

# Premium Pay for Workforce Recruitment and Retention Grant Program

Overview and Program Guidance

# Program Overview

- Who
  - Per Act 83 of 2022, certain health care and social services employers may apply for grant funding.
- What
  - Grant funding must be distributed by Eligible Employers as Premium Pay to Eligible Employees.
  - Eligible Employees must commit to continuing employment with the Eligible Employer for at least one calendar quarter following receipt of the payment.
- Why
  - Aims to mitigate the negative impacts these employers have sustained throughout the COVID-19 public health emergency by providing Premium Pay to essential employees.
  - Supports recruitment and retention efforts.
- How
  - Eligible Employers may apply for \$2,000 per full-time equivalent employee (FTE).
- When
  - Grant applications can be submitted online between February 8<sup>th</sup> and February 27<sup>th</sup>, 2023.
  - Grant funds must be disbursed as Premium Pay within 90 days of grant payment (check or ACH) date.

# Program Website

- <https://humanservices.vermont.gov/recruitment-and-retention>
- Available documents
  - Program Guidance
  - Application Information
    - Online Application Information
    - Summary Report of FTEs template (must be uploaded to the online application)
    - Link to Form W-9 (must be uploaded to the online application)
    - List of Application Certifications (must be completed in the online application)

# Premium Pay for Workforce Recruitment and Retention Grant Program

FTE Summary Spreadsheet

# FTE Spreadsheet - Instructions

- The FTE Summary Spreadsheet helps determine the size of your potential grant.
- You will include all filled and budgeted positions of your eligible business lines in Vermont from October through December, regardless of whether the employees are ultimately eligible to receive premium pay.
- You can choose either the 12-week or full-quarterly option – whichever is easier for your payroll system to report.
- The spreadsheet has six tabs, the first of which is an instructions tab.

# FTE Spreadsheet – Step 1

Applicant Contact Information		Work Location Name and Town	
Organization Name		<i>sample:</i> Main Street Nursing Home - Burlington	
Contact Name		<i>sample:</i> Home Health Visits to Homes in Vermont - Franklin and Lamoille Counties	
Email			
Phone Number			
<p><b>Instructions for this tab</b></p> <ol style="list-style-type: none"><li>1. In column B, enter your contact information.</li><li>2. In column D, enter the facility name and Vermont town following the format used in the sample.</li></ol> <p><b>Notes:</b></p> <ul style="list-style-type: none"><li>* For the purpose of this application, a "company" is defined by EIN number.</li><li>* Only enter each of the company's Vermont locations where individual(s) are employed in relation to the operations listed under "Eligible Employers" to the right.</li><li>* If a company conducts home visits, enter the work area following the format used in the second sample.</li></ul>			





# FTE Spreadsheet– Step 1

A. Applicant Contact Information		C. Work Location Name and Town		D. Employee Types		Do you employ any of this type of staff?
Organization Name	Main Street Nursing Home	<i>sample:</i> Main Street Nursing Home - Burlington		<b>24/7 Residential Direct Service Staff</b>		Yes
Eligible Employer Type	nursing home	<i>sample:</i> Home Health Visits to Homes in Vermont - Franklin and Lamoille Counties		<b>Administrative Staff</b>		Yes
Contact Name	Jane Smith		Main Street Nursing Home - Burlington	<b>Community Support Staff/Non-licensed Direct Service Providers</b>		Yes
Title	Business Manager			<b>Crisis Bed Direct Support Staff</b>		Yes
Email	j.smith@mainstreetvt.com			<b>Dental Hygienists</b>		Yes
Phone	802-555-5555			<b>Dental Therapists</b>		Yes
B. Counties of Work				<b>Emergency Service Clinicians (including 988)</b>		Yes
Primary County	Chittenden			<b>Master's Level Clinician Providing Direct Service</b>		Yes
Secondary County	Washington			<b>Medical Assistants</b>		Yes
Additional counties?	<a href="#">no</a>			<b>MD/DO/ND/DMD</b>		No
				<b>Nurse-CNA</b>		Yes
				<b>Nurse-LPN</b>		no
				<b>Nurse-RN</b>		No
				<b>Nurse-APRN (incl. NP, PA, and midwife)</b>		Yes
				<b>Skilled Living Providers</b>		Yes

Enter contact information.

Enter Vermont locations where individual(s) are employed in operations related to the program's "Eligible Employers" along with geographical location.

Table D asks which of 15 types of staff your organization employs. The list is not exhaustive, but you only have to enter 'yes' or 'no' here. You don't have to list other staff types.

# FTE Spreadsheet– Step 2

out one "Step 2"

Choose to period September 2022.

Table i. Full-time employees ( $\geq 35$ hr/week)						Table ii. Part-time employees ( $< 35$ hr/week)					
Employee # or Name	Unique Identifier (if needed)	Primary work location	# of weeks on payroll	Type of employee	FTE (calculated)	Employee # or Name	Unique Identifier (if needed)	Primary work location	# of weeks on payroll	# of hours for this 12-week period	Type of employee (calculated)
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						
					0.00						

Compensated for an...  
...were on payroll...  
...dered full-time...  
...le to the right

Enter employee # for full-time employees. If not available, enter name and birthday.

Enter a "12" for an employee who was on payroll the whole 12-week period. Enter a "2" for an employee who started two weeks before the end of the period (or departed two weeks after the start of the period).

- Enter employees in Table i ( $\geq 35$  hr/wk) and Table ii ( $< 35$  hr/wk).
- Col "Primary work location" offers a dropdown with your selections from Step 1
- Col "Type of Employee" offers a dropdown with your selections from Step 1 as well as 'other.'

# FTE Spreadsheet– Step 2 continued

Table iii. Vacant positions (incl. those filled by contract staff)					Table iv. Out of all your vacant positions, how many total hours were covered by contract staff?	
Position name or #	Primary work location	Type of employee	# of hours budgeted and vacant this 12-week period	FTE (calculated)		hours total over the 2-week period
				0.00		
				0.00		
				0.00		
				0.00		
				0.00		
				0.00		
				0.00		
				0.00		
				0.00		
				0.00		

- List budgeted vacant positions in Table iii. Please be sure to distinguish positions.
- In table iv, enter the total number of vacant hours covered by contract workers (e.g. travelers).

# FTE Spreadsheet – Step 3

	A	B	C	D	E	F	G	H	I	J
1	<b>Wages for Particular Employee Types as of 12/31/2022</b>									
2		Highest Hourly Wage - all filled staff positions	Lowest Hourly Wage - all filled staff positions	Average Hourly Wage - all filled staff positions	<p><b>Instructions:</b></p> <p>All of the employee types you listed in Step 1 should be listed at the left, as well as "other."</p> <p>You don't need to report the wage for each employee listed in Step 2, just the highest, lowest, and average wages for each employee type, <u>regardless of whether or not they received premium pay.</u></p> <p>For example, say you have three employees categorized as "Administrative Staff." Two received premium pay and one did not. Their hourly wages are \$18, \$20, and \$28. In the 'Administrative Staff' row, you would enter \$28, \$18, and \$22 in columns B, C, and D respectively.</p> <p>For another example, say you have five employees listed in Step 2 that did not fall in one of the specified employee types. Their hourly wages are \$15, \$15, \$20, \$40, and \$50. In the 'other' row, you would enter \$50, \$15, and \$28 in columns B, C, and D respectively.</p>					
3	Administrative Staff	29.00	19.00	21.00						
4	Nurse-CNA	30.00	15.00	22.00						
5	Nurse-LPN	40.00	25.00	32.00						
6	Other	55.00	15.00	25.00						
7										
8										
9										
10										
11										

- The employee types you selected in Step 1 will populate in the Step 3 table.
- For each employee type, enter the average hourly wage as of 12/31/22, as well as the highest and lowest.

# Step 4 – Duplicate Check

Full-time employee # or name	Part-time employee # or name										
12345	Jane Smith	<p style="text-align: center;"><b>Explanation of Duplicates (if applicable)</b></p> <ol style="list-style-type: none"> <li>1. We have two Jane Smiths but we entered their birth dates into Step 2 Table ii to provide a unique identifier.</li> <li>2. Employee #12345 changed from Part-time to Full-time in November; they are less than 1.0 FTE</li> </ol>									
34567	12345										
67890	56789										
45678	Jane Smith										
0	0										
0	0										

- Columns A and B automatically populate.
- If a cell turns red, it is a duplicate. Please check to make sure it is accurate and proper.
- If your report is accurate, please add a short explanatory note in the text box.

# Step 5

Subtotal Actual Employees	Subtotal Vacant (incl. Contract)	Number of FTEs to Enter into Application	Implied Vacancy Rate	Portion of Vacancy Filled by Contract Staff
0.0	0.0	0	0.0%	0.0%
<p><b>Instructions for this tab</b></p> <p>1. Make a note of the "Number of FTEs to Enter into Application" (Cell C2) to enter into your application when you login.</p> <p>2. If your "Implied Vacancy Rate" (Cell D2) is under 10.0%, describe your organization's need in the text box to the right. This statement can reference your experience with turnover, vacancies, or other factors that you think can be improved with a premium pay grant.</p>			<p><b>Statement of Need</b></p>	

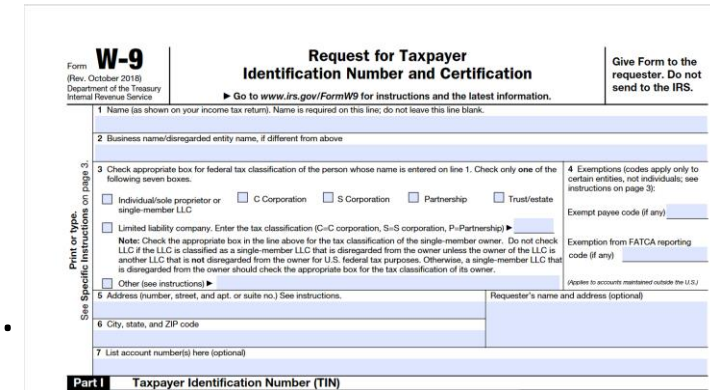
- Note the # of FTEs – you will enter this # into your online application.
- Grantees must demonstrate a need for funding.
  - If your implied vacancy rate is > 10.0%, this will be your demonstrated need.
  - If not, explain your need, and how the grant will help, in the green text box.

# Premium Pay for Workforce Recruitment and Retention Grant Program

Three Common Applicant Errors and Tips for Avoiding Them

# Common Error #1: Form W-9

- The W-9 form and detailed instructions are [available from the IRS](https://www.irs.gov/FormW9).
- Ensure accurate information.
  - Check all spelling on form, especially the name.
  - Ensure mailing address is the correct address for your checks to be sent.
  - Make sure you select the correct tax classification – If you select “other,” be sure to put the appropriate code in the blank space.
  - If you are at all unsure about your tax classification, please work with your accountant to fill this out.
- Ensure appropriate formatting.
  - A physical signature and date are required; no electronic signatures.
  - Must be signed and dated within the last 6 months.
  - Fill entire form in one color.
  - No corrections (white out, etc.).
  - Can't be partially typed and partially written (except for signature); must be either all typed or all hand written.



The image shows the top portion of Form W-9, 'Request for Taxpayer Identification Number and Certification'. The form is titled 'Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service'. It includes a header with the IRS logo and a note to go to www.irs.gov/FormW9 for instructions. The form is divided into several sections: 1. Name (as shown on your income tax return), 2. Business name/disregarded entity name, 3. Check appropriate box for federal tax classification (Individual/sole proprietor or single-member LLC, C Corporation, S Corporation, Partnership, Trust/estate, Limited liability company, or Other), 4. Exemptions (codes apply only to certain entities), 5. Address (number, street, and apt. or suite no.), 6. City, state, and ZIP code, and 7. List account number(s) here (optional). The form also includes a section for the requester's name and address (optional) and a section for the taxpayer identification number (TIN).




# Common Error #2: FTE Summary Issues

- In Step 1, Table C, be sure the eligible type of work that takes place at a business location is clear.
  - For example, if you are a hospital and are applying for a primary care practice within your network, say “Springfield Health Center” rather than “1 Main Street”
- In Step 2, Table iii, distinguish similar vacant positions.
  - For example, if you have 4 open RN positions say “RN 1 of 4,” “RN 2 of 4,” etc., rather than simply “RN” in multiple rows.
- In Step 4, check for duplicates and explain in text box, if necessary.
  - For example, "We have two Jane Smiths but we entered their birth dates into Table ii to provide a unique identifier" or "Employee #23456 changed from Part-time to Full-time in November; they are less than 1.0 FTE"
- Doublecheck the output FTE # in Step 5 is the number you enter in your online application. If you correct your FTE sheet, be sure to update your application entry.

# Common Error #3: Sam.gov Registration Not Public

## What do you want to do?

Choose what you need and we will show you what information to prepare.



Register for Financial Assistance Awards Only

- To apply for grants and loans as described by 2 CFR 200. [↗](#)
- Includes getting a Unique Entity ID and entity registration.



Register for All Awards

- To bid on federal contracts and other procurements, as described by the Federal Acquisition Regulation (FAR). [↗](#)
- To apply for grants and loans as described by 2 CFR 200. [↗](#)



Get a Unique Entity ID Only

- May be required to report subawards, such as federal subcontracts or sub-



- If your organization isn't registered with sam.gov, please do so today.
- Choose the 'register for financial assistance awards only' option.
- Be sure to set your registration to 'public.'
- You will then receive a Unique Entity ID, which you will enter into your premium pay grant application.
- Sam.gov registration processing was running a few weeks last summer, so best to submit early.

# Premium Pay for Workforce Recruitment and Retention Grant Program

Your Questions

# Additional Questions

- My organization has a line of business that was funded in Round 1, but we also have a primary care practice. What should we do?
  - Submit a new application based on FTEs for the new employer type(s) only (Employees/positions must not have been included in your previous application).
  - If you encounter issues with the online application, contact us and we will work with you to resolve the issue.
    - Note: It is very important for you to start an online application to enable staff to resolve any technical issues!
- On the FTE Summary Spreadsheet, Steps 2 and 3 aren't populating with the employee types I selected in Step 1. What should we do?
  - Ask your IT staff if your system has an Excel setting that can be adjusted.
  - Contact us and we will send you a more basic version.
- When can we talk about the online application? Or which employees are eligible for premium pay?
  - We will have a webinar next Thursday (2/9) at 12 noon to go over the online application.
  - Future webinars can cover eligible employees, options for disbursing premium pay, financial and evaluation reporting, and more.

# Your Questions?

Additional information available at:

<https://humanservices.vermont.gov/recruitment-and-retention>