

**ATTACHMENT D: UNIT RATE CALCULATION:**  
**Montachusett Home Care Corporation.**

Per EOE Program Instruction PI-09-20, Extended Hour Service Plans consisting of more than 42 hours per week of Personal Assistance Services (Homemaker, Personal Care, Supportive Home Care Aide and Home Health Aide) shall be subject to a discounted rate. MHCC will discount each provider's hourly rate by 15% for companion, personal care, homemaker and supportive home care aide services. The rates for Home Health Services (HHA, SN, PT, OT, ST) are standardized rates set forth by the Executive Office of Health and Human Services.

**HM/PC Calculation of Average (hourly) Employee Compensation**

|                   |                             |
|-------------------|-----------------------------|
| Base Wages        | Health/Life Insurance       |
| Travel Stipend    | Training Wages              |
| Holiday Pay       | Transportation Expense      |
| Sick Pay          | Bereavement Pay             |
| Personal Days Pay | Annuity Pension             |
| Vacation Pay      | Day Care                    |
|                   | <b>TOTAL Hourly Average</b> |

**Calculation of Hourly Unit Rate**

**1. AVERAGE HOURLY COMPENSATION**

*(Transfer the TOTAL from above—not less than \$12.75)*

**2. HOURLY ADMINISTRATIVE OVERHEAD**

*(Including all costs associated with statutory fringe)*

**3. TOTAL HOURLY UNIT RATE**

*(The sum of lines 1 and 2, above)*

This rate was negotiated specifically for homemaker and/or personal care services as specified.

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