

CALCULATION OF THE NUMBER OF HOURS TO BE PROVIDED BY NATURAL SUPPORT

	Consumer Name:	1	J SAMPLE		
	Consumer ID:	2	0011111		
	Current Purchasing Plan Effective Date:	3	08/01/09		
	Current Approved CDC+ Monthly Budget:	4	\$ 2,482.31		
Enter the month and year of your most recent CDC+ Statement		5	August 2010		
Enter the amount of the negative ending balance shown on the CDC+ Statement you entered on Line 5		6	\$ (9,306.00)		
Enter the number of weeks for which the repayment CAP will be written (maximum 52)		7	52		
Weekly amount that must be reduced in order to reduce neg bal to \$0.00 in number of weeks in Line 7		8	\$ 178.96		
Enter the number of employees who have agreed to provide natural support		9	3		
Average amount each of these employees' pay will need to be reduced each week		10	\$ 59.65		
Enter the name of Employee 1 who will be providing natural supports in lieu of being paid:		11	Jim Ray		
Enter the Service to be reduced by the number of paid hours		12	PCA		
Enter the number of hours per month authorized on current Purchasing Plan		13	80		
This is the number of hours per month converted to the number of hours per work week, on average		14	18		
Enter the hourly rate of pay authorized on current Purchasing Plan		15	\$ 15.00		
Total monthly amount for this employee for this service on current approved Purchasing Plan		16	\$ 1,200.00		
Average weekly payroll amount		17	\$ 277.14		
Maximum gross amount this employee can be paid each week:		18	\$ 217.48	Max Paid Hrs/Mo	Actual
Maximum number of hours this employee can be paid to provide each week:		19	14	61	55
Therefore, number of hours this employee will provide as an unpaid natural support:		20	4	Emp Tx not incl	12.7
Enter the name of Employee 2 who will be providing natural supports in lieu of being paid:		21	Phil Jones		
Enter the Service to be reduced by the number of paid hours		22	PCA		
Enter the number of hours per month authorized on current Purchasing Plan		23	50		
This is the number of hours per month converted to the number of hours per work week, on average		24	12		
Enter the hourly rate of pay authorized on current Purchasing Plan		25	\$ 12.00		
Total monthly amount for this employee for this service on current approved Purchasing Plan		26	\$ 600.00		
Average weekly payroll amount		27	\$ 138.57		
Maximum gross amount this employee can be paid each week:		28	\$ 78.91	Max Paid Hrs/Mo	Actual
Maximum number of hours this employee can be paid to provide each week:		29	7	30	24
Therefore, number of hours this employee will provide as an unpaid natural support:		30	5	Emp Tx not incl	5.5
Enter the name of Employee 3 who will be providing natural supports in lieu of being paid:		31	Sara Jones		
Enter the Service to be reduced by the number of paid hours		32	PCA		
Enter the number of hours per month authorized on current Purchasing Plan		33	60		
This is the number of hours per month converted to the number of hours per work week, on average		34	14		
Enter the hourly rate of pay authorized on current Purchasing Plan		35	\$ 12.00		
Total monthly amount for this employee for this service on current approved Purchasing Plan		36	\$ 720.00		
Average weekly payroll amount		37	\$ 166.28		
Maximum gross amount this employee can be paid each week:		38	\$ 106.63	Max Paid Hrs/Mo	Actual
Maximum number of hours this employee can be paid to provide each week:		39	9	39	35
Therefore, number of hours this employee will provide as an unpaid natural support:		40	5	Emp Tx not incl	8.1
Total negative bal reduction over number of weeks indicated in Line 7:		41	\$ 9,360.00		
Minimum amount of funds that must accumulate in the Purchasing Plan Savings section each month:		42	\$774.90		

This form has been designed to help you figure out how long it will take you to reduce the negative balance on your account if you were to reduce the amount of pay equally among your employees who have offered to provide natural support. The form will tell you how much, on average, you would need to reduce each of those employees' paid hours to accomplish that goal. From this information, you should be able to develop a workable Corrective Action Plan and the NEW Purchasing Plan that must be submitted with the CAP. Please note that if any of these employees is subject to Employer Tax, you will have to adjust the number of hours the employee will be able to be paid to provide to accommodate the employer tax the CDC+ Participant will have to pay on his or her behalf. Keep in mind that the amount on Line 42 is the minimum that must appear as accumulating each month in the Savings section. Each month this is the amount that will reduce the negative balance in accordance with the CAP.