



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

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DIRECTOR

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Dear Administrator:

The Department of Medical Assistance Services (DMAS) recommends that nursing facilities provide wage data annually. This data will be used to develop inflation factors. It is needed to support rate development and must be collected more quickly than cost reports allow. Therefore, DMAS encourages all non-hospital-based nursing facilities to complete this annual wage survey.

Data reported should be consistent with nursing staff costs and hours filed on the cost report. For nursing facilities with a December 31st fiscal year-end (FYE), the total nursing staff costs reported on the wage survey should equal the total nursing staff costs on Schedules A-4 and N of the PIRS 1090 cost reporting forms. Facilities with a different FYE should use the equivalent cost reporting data sources but report data for the twelve-month period ending December 31, 2025.

Parts I through III of the survey request nursing staff salary costs and hours, consistent with the totals reported on lines 1 and 2 of Schedule A-4 (excluding nursing departmental supplies and professional fees) or lines 24 and 25 of Schedule B-5, Part 1, whichever is applicable, of the PIRS 1090 cost reporting forms, plus NATCEP wages and benefits from Schedule N. These sections should include salary costs and hours for quality assurance nurses. Additionally, time spent at the facility by home office quality assurance coordinators should be included in direct patient care base operating costs and reported in Parts I through III. The regulatory language regarding direct patient care operating costs, specifically nursing service expenses, can be found in 12VAC30-90-271 Direct Patient Care Operating at:

<https://law.lis.virginia.gov/admincode/title12/agency30/chapter90/section271/>

Part IV of the survey requests non-nursing salary and hour data. This includes all other salaries and wages that comprise indirect care operating costs, as reported on Schedule A-3 or Schedule B-5, Part I of the PIRS 1090.

Part V is for reporting the salaries and wages of employee therapists. Data for agency personnel should not be included in this section. The total of these salaries and wages should correspond to the total of employee therapists' salaries and wages as included in the total ancillary costs reported on Schedule C of the PIRS 1090.

Nursing Facility Wage Survey Page 2

Parts VI and VII summarize salary and benefit data reported for nursing home employees. Part VIII requests data on liability insurance premiums and deductibles.

Parts IX and X of the survey are used by DMAS for analysis and are not part of the inflation calculation. These data are used to analyze quality metrics for informational purposes.

The attached Microsoft Excel worksheet may assist in gathering the required information prior to completing the online survey. Completion of this worksheet is **not required**. The final section provides some reasonability checks for values to be entered in the survey. These formulas can help verify your responses.

Facilities can complete the survey via DMAS's secure website:
<https://www.dmas.virginia.gov/for-providers/rates-and-rate-setting/nursing-facilities/>

This year's survey requires providers to log in to MES PRSS with a primary account holder (PAH) or administrator credentials. The survey is expected to be posted by February 13, 2026. Upon completion, you will need to re-enter your name and certify the accuracy of your responses by checking the designated box. This serves as your electronic signature

For documentation purposes, please print and retain a copy of your completed survey. You may be contacted at a later date to clarify or correct survey information. Having a printed copy of your survey will be helpful in answering any questions that may arise.

The survey is due by March 13, 2026. Please send any questions or concerns to PRDratesetting@dmas.virginia.gov.

Thank you for your continued support and cooperation.

Sincerely,



Tanyea Darrisaw
Division Director, Provider Rate Development

Attachment