

ATTACHMENT A

Adjust the base wage salary range as indicated below:

Classification Title: Hospital Chief Nursing Officer												
Hourly, Bi-Weekly and Monthly Pay Rates							Class Code	WG *	EEO Cat*	W/C*	BU	FLSA Code*
Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7						
\$126.860	\$0.000	\$0.000	\$0.000	\$0.000	\$0.000	\$173.264	12C28	1	OA	9043	Y	Exempt
\$10,148.80	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$13,861.12						
\$21,989	\$0	\$0	\$0	\$0	\$0	\$30,032						

*provided for information purposes only