VyRal

A LeakReceipts Field Guide

LeakReceipts for Contract & Per-Diem Nurses

The Field Guide: where the money leaks, how to prove it, and how to close it

For: Contract / Per-Diem Nurse

by VyRal Dynasty

LeakReceipts for Contract & Per-Diem Nurses The Field Guide: where the money leaks, how to prove it, and how to close it

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How every number in this book is labeled.

- **VERIFIED** means the figure comes from a named, dated source, and the source is printed next to it.
- **CALCULATED** means it is arithmetic on verified numbers or on your own numbers, and the math is shown.
- **ESTIMATE** means a reasoned range, and it is always called one.
- **STRUCTURAL** marks a standing rule of the trade (a law, a contract term, how the paperwork works), not a market figure.
- **STILL BEING MEASURED** means VyRal has not verified a figure yet, so no number is printed.

If a number is not labeled, it is a blank for you to fill from your own paper.

What this book is not. This is education, not legal, tax, accounting or financial advice. Where a fix says a professional decides, a professional decides. Nothing here says that any company, customer or person did anything wrong. The fixes show you how to check your own paper and ask in writing.

About how this book was made. This book was assembled with AI from VyRal's sourced research on this trade and checked against those sources. AI can make mistakes. Before you act on a figure, check it against the source printed beside it. Rules and rates change, and every figure carries its date for that reason.

Before you share any document with anyone, Vera included, black out account numbers, Social Security numbers and anything else you would not hand a stranger.

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The short answer for your trade

As an agency-paid contract or per-diem nurse, your pay statement is written by the same company that's the counterparty to your own contract — nobody sits on your side of that transaction. An itemized statement can look fully settled and still be underpaid: the missing shift differential, the overtime run on base pay only, the unpaid orientation, the unhonored cancellation guarantee, and the unauthorized chargeback all hide underneath a total that reads as final. The audit doesn't diagnose or accuse — it holds your own shift log and signed contract up against the statement and shows you exactly where they stop agreeing.

Your leak map

Every leak this book covers, biggest first. The size grade is VyRal's research grade for how much money a leak tends to move in this trade. It is a grade, not a dollar figure. Your own paper sets the dollars.

#	Leak	Size grade	Evidence	Fixes
1	IRS Business Standard Mileage Rate 2026	Significant	VERIFIED	1
2	Unpaid Facility Orientation	Significant	VERIFIED	1
3	Missed-Meal-Break Premium (State-Specific)	Moderate	VERIFIED	1
4	Chargebacks Below the Wage Floor	Small but common	VERIFIED	1
5	Stipend-vs-Hourly Tax Treatment (Killer Boundary)	Major	STRUCTURAL	1
6	Cancelled-Shift Guarantee Pay	Moderate	STRUCTURAL	1
7	Nurse Licensure Compact Coverage Boundary	Moderate	STILL BEING MEASURED	1

Then there are 3 more leaks to check, each with its own fixes, in the chapter called More leaks to check.

What people in your trade say hurts

Before we built a single fix, we went and read what people in this trade say out loud: forums, trade press, regulators' complaint files and court records. These are the pains that kept coming up, the ones with the most sources first. If one of them is yours, you're not imagining it.

If I get hurt lifting a patient, I'm on my own

As a contractor on a shift app I'm outside workers' comp and unemployment. Some apps take a thin accident-insurance fee from my pay instead, and the platforms are lobbying states to write that exemption into law.

Found in 7 public sources; newest dated 2026-08-03. VERIFIED count from VyRal's public research log; the sources are listed at the back.

Good shifts vanish in seconds; now there's barely any hours

Hospitals squeezed by Medicaid cuts are trimming agency nurses, so per-diem demand is falling. On the apps the well-paid shifts are claimed almost instantly and alerts point to shifts already gone, so I lose hours I counted on.

Found in 6 public sources; newest dated 2026-07-30. VERIFIED count from VyRal's public research log; the sources are listed at the back.

The app skims fees off every shift and every cash-out

Some apps take a fixed fee from every shift for 'safety' or insurance, plus another fee for instant pay. Separately the facility may pay the app far more than I see. I notice the deductions but never add up the year.

Found in 6 public sources; newest dated 2026-07-24. VERIFIED count from VyRal's public research log; the sources are listed at the back.

They cancel me two hours out and I get nothing

Facilities can cancel app shifts late and often owe me nothing, sometimes after I've driven in. If I cancel, I need days of notice or I lose attendance points that cut off my shift access. The rules only bite one way.

Found in 6 public sources; newest dated 2026-04-21. VERIFIED count from VyRal's public research log; the sources are listed at the back.

I keep bidding my rate lower just to get a shift

On some shift apps I enter the lowest hourly rate I'll take, and the lowest bid wins. The app can show two nurses different pay for the same shift based on our history, so over time bids drift down toward a staff wage or below.

Found in 5 public sources; newest dated 2026-04-29. VERIFIED count from VyRal's public research log; the sources are listed at the back.

My PRN job keeps adding required shifts and cutting the premium

Hospitals are raising per-diem requirements — weekly shifts, weekends, holidays, absence caps — and closing PRN slots. Some are cutting weekend premiums too. The flexibility that justified no benefits is shrinking while the pay edge narrows.

Found in 4 public sources; newest dated 2026-01-31. VERIFIED count from VyRal's public research log; the sources are listed at the back.

Per-visit pay ignores the hours I chart at home

Home health and hospice visit nurses are paid by the visit, but charting, calls and long visits aren't paid separately. My real hourly rate is far below what the visit rate suggests, and agencies facing Medicare cuts have little room to raise it.

Found in 3 public sources; newest dated 2025-12-29. VERIFIED count from VyRal's public research log; the sources are listed at the back.

Get your paper together

Every fix in this book starts with paper, not memory. Memory rounds in the other side's favor. Paper doesn't.

Pull the last 90 days. Put it all in one folder, paper or phone, and label each piece with its date. Black out account numbers and Social Security numbers before you share anything with anyone.

The paper that proves each leak:

- **IRS Business Standard Mileage Rate 2026:** The pay stub or 1099 remittance showing visit pay and any mileage line, set against the nurse's own dated log of miles between visits.

My folder checklist

Last 90 days of statements or pay records _____

Every contract or agreement I work under _____

Every invoice, ticket or settlement for the same 90 days _____

The messages that changed a price, a scope or a date _____

Leak 1: IRS Business Standard Mileage Rate 2026

Size grade: Significant · Evidence: VERIFIED

What it is. The rate per mile the IRS sets for business use of a car. Use the IRS standard mileage rate in effect for the dates you drove (irs.gov/tax-professionals/standard-mileage-rates). It is a tax figure. It is not a pay law.

Why it leaks. Home health and hospice visit nurses are often paid by the visit, with mileage folded into the visit rate or paid as a small flat allowance. Rural routes run 75 to 150 miles a day, so higher gas comes straight out of visit pay. A W-2 nurse can't deduct the unpaid miles federally; a 1099 nurse can claim business miles but only with a log.

The number to hold it against. Use the IRS standard mileage rate in effect for the dates you drove (irs.gov/tax-professionals/standard-mileage-rates). Source: IRS.

VERIFIED · Primary — government or regulator

> **Ask yourself:** This pay period, how many miles did you drive between visits, and how is mileage paid to you — per mile, a flat amount per visit, folded into the visit rate, or not at all?

The paper that proves it. The pay stub or 1099 remittance showing visit pay and any mileage line, set against the nurse's own dated log of miles between visits.

1. Per-visit pay with mileage folded in or paid as a small flat allowance on long rural routes

Fix approved · leak evidence: Verified

Fix 1 — Do it yourself (free).

1. Keep a dated log of the miles you drive between visits each day.
2. On each pay stub or remittance, find what was paid for mileage. If it's folded into the visit rate, write that down — there's no separate mileage pay.
3. Divide the mileage pay by your logged miles. Use the IRS standard mileage rate in effect for the dates you drove (irs.gov/tax-professionals/standard-mileage-rates).
4. Before you take the next contract or route, ask in writing how mileage is paid and what a typical day's miles are.

5. If you're 1099, keep the log for your preparer — business miles need it. If you're W-2, don't plan on a deduction for what isn't paid back.

Fix 2 — The words to send, under your own name. Fill in the brackets, keep a copy, and send it from your own email or by mail. Nobody sends it for you.

> Subject: Mileage on my visits — [PERIOD]
>
> Hello [SCHEDULER / AGENCY CONTACT],
>
> For [PERIOD] I drove [MILES] miles between [NUMBER] visits. My pay shows $[AMOUNT] for mileage ([How it's paid: $X per visit / included in the visit rate]), which works out to about $[RATE] a mile.
>
> Could you tell me in writing how mileage is paid on my routes, and whether a per-mile rate is available for long rural days? If I've misread my pay, please show me where mileage appears.
>
> Thank you,
> [YOUR NAME]
> [PHONE]

Fix 3 — Done for you. **LeakReceipts · Pay Check**

WE DO: line up your visit log with each pay stub or remittance, show paid-per-mile against the IRS rate and your own cost, and draft the question to your agency. YOU DO: keep the log, check our totals, send it yourself, and give your log to your preparer at tax time if you're 1099.

Keep it closed. Ask how mileage is paid before you accept a route, and price long rural days on your own cost per mile.

What this fix can't decide for you. No federal law requires the IRS rate; we never say she's owed it. 1099 deduction questions go to her preparer — no tax advice. W-2 nurses are never told to deduct. Whether she is correctly classified is a separate rule.

My receipt for this leak			
Owed by my paper	Paid or billed	Gap (CALCULATED: owed − paid)	Fix 2 sent · answer

FREE FIRST CHAPTER

That's Leak 1 of 7.

The full Field Guide for Contract & Per-Diem Nurses walks through every leak on the map you just read: why it happens, the paper that proves it, and three fixes for each one — one you do yourself for free, the words to send under your own name, and what LeakReceipts can do for you while the decision stays yours.

Get the full guide:
leakreceipts.com/ebooks/contract-and-per-diem-nurses

Run it on your own numbers:
leakreceipts.com

WE WALK BY FAITH NOT BY SIGHT — 2 Corinthians 5:7