Home Health Agency Cost Report		
Data Dictionary		
Variable Name	Term Name	Definition
rpt_rec_num	NA	The report number assigned by CMS to each specific cost report.
Provider CCN	S2-Part1-Line-3-Column-2	CMS Certification Number (CCN)
HHA Name	S2-Part1-Line-3-Column-1	Home Health Agency Name
Street Address	S2-Part1-Line-1-Column-1	Home Health Agency Street Address
City	S2-Part1-Line-2-Column-1	City
State Code	S2-Part1-Line-2-Column-2	State
Zip Code	S2-Part1-Line-2-Column-3	Zip Code
		Indicates the type of control or auspices under which the hospital is conducted as indicated: 1 = Voluntary Nonprofit-Church, 2 = Voluntary Nonprofit-Other, 3 = Proprietary-Individual, 4 =
		Proprietary-Corporation, 5 = Proprietary-Partnership, 6 = Proprietary-Other, 7 = Governmental-Federal, 8 = Governmental-City-County, 9 = Governmental-County, 10 = Governmental-State, 11 = Governmental-Hospital District, 12 = Governmental-City, 13 =
Type of Control	S2-Part1-Line-6-Column-3	Governmental-Other.
Fiscal Year Begin Date	S2-Part1-Line-5-Column-1	Fiscal Year Begin Date
Fiscal Year End Date	S2-Part1-Line-5-Column-2	Fiscal Year End Date
HHA-based Hospice Provider CCN	S2-Part1-Line-4-Column-2	HHA-based Hospice Provider CCN
Skilled Nursing Care-RN, Medicare		Skilled Nursing Care-RN program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b)
Title XVIII Visits	S3-Part1-Line-1-Column- 1	through (g).
Total, Medicare Title XVIII Visits		Total program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b) through (g).
Skilled Nursing Care-LPN, Medicare Title XVIII Visits	S3-Part1-Line-2-Column-1	Skilled Nursing Care-LPN program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b) through (g).
Physical Therapy, Medicare Title XVIII Visits		Physical Therapy program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b) through (g).
Physical Therapy Asst., Medicare Title XVIII Visits	S3-Part1-Line-4-Column-1	Physical Therapy Asst. program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b) through (g).

		Occupational Therapy program visits rendered during the entire
		cost reporting period. A visit is an episode of personal contact
		with the patient by staff of the HHA, or others under
		arrangements with the HHA, for the purpose of providing a
Occupational Therapy, Medicare Title		1
XVIII Visits	S3-Part1-Line-5-Column-1	covered home health service as described in 42 CFR 409.45(b)
AVIII VISILS	53-Part1-Line-5-Column-1	through (g).
		Occupational Therapy Asst. program visits rendered during the
		entire cost reporting period. A visit is an episode of personal
		contact with the patient by staff of the HHA, or others under
		arrangements with the HHA, for the purpose of providing a
Occupational Therapy Asst.,		covered home health service as described in 42 CFR 409.45(b)
Medicare Title XVIII Visits	S3-Part1-Line-6-Column-1	through (g).
		Speech-Language-Path. program visits rendered during the entire
		cost reporting period. A visit is an episode of personal contact
		with the patient by staff of the HHA, or others under
		arrangements with the HHA, for the purpose of providing a
Speech-Language-Path., Medicare		covered home health service as described in 42 CFR 409.45(b)
Title XVIII Visits	S3-Part1-Line-7-Column-1	through (g).
		Medical Social Service program visits rendered during the entire
		cost reporting period. A visit is an episode of personal contact
		with the patient by staff of the HHA, or others under
		arrangements with the HHA, for the purpose of providing a
Medical Social Service, Medicare Title		covered home health service as described in 42 CFR 409.45(b)
XVIII Visits	S3-Part1-Line-8-Column-1	through (g).
		Home Health Aide program visits rendered during the entire cost
		reporting period. A visit is an episode of personal contact with the
		patient by staff of the HHA, or others under arrangements with
		the HHA, for the purpose of providing a covered home health
Home Health Aide, Medicare Title		service as described in 42 CFR 409.45(b) through (g).
XVIII Visits	S3-Part1-Line-9-Column-1	Scrivee as described in 42 crit 405.45(b) tillough (g).
AVIII VISILS	33 Farti Line 3 Columni i	Skilled Nursing Care-RN program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Skilled Nursing Care-RN, Medicare	60 0 14 11 4 5 1 -	title XVIII (for covered services), once as other (for non-covered
Title XVIII Patient Census	S3-Part1-Line-1-Column-2	services), and only once as total.
		Skilled Nursing Care-LPN program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		The of the is counted only office in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		· · · · · · · · · · · · · · · · · · ·
Skilled Nursing Care-LPN, Medicare		service. Another example is if a patient receives both covered

	T	- 1 · · · · · · · · · · · · · · · · · ·
		Physical Therapy program census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy, Medicare Title XVIII		title XVIII (for covered services), once as other (for non-covered
Patient Census	S3-Part1-Line-3-Column-2	services), and only once as total.
		Physical Therapy Asst. program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy Asst., Medicare Title		title XVIII (for covered services), once as other (for non-covered
XVIII Patient Census	S3-Part1-Line-4-Column-2	services), and only once as total.
Attain additional and a second	oo rarer line + columni-z	Occupational Therapy program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Occupational Therapy, Medicare Title		title XVIII (for covered services), once as other (for non-covered
XVIII Patient Census	S3-Part1-Line-5-Column-2	services), and only once as total.
		Occupational Therapy Asst. program census. Each patient is
		counted once for each type of service. For example, if a patient
		receives multiple Medicare covered skilled nursing visits from a
		registered nurse and multiple Medicare covered medical social
		service visits, he or she is counted only once in column 2 for the
		corresponding service. Another example is if a patient receives
		both covered services and non-covered services, he or she is
Occupational Therapy Asst.,		counted once as title XVIII (for covered services), once as other
Medicare Title XVIII Patient Census	S3-Part1-Line-6-Column-2	(for non-covered services), and only once as total.
		Speech-Language-Path. program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Speech-Language-Path., Medicare		title XVIII (for covered services), once as other (for non-covered
Title XVIII Patient Census	S3-Part1-Line-7-Column-2	services), and only once as total.
The Arm Faderic Serious	oo i diez zine / coldiiii z	Medical Social Service program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		lana tan Angelong ang angelot 16 militari kanalan 18 militari kanalan 18 militari kanalan 18 militari kanalan
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Medical Social Service, Medicare Title XVIII Patient Census	S3-Part1-Line-8-Column-2	

Jopecen Language-Falli, MEUICAIU		
Speech-Language-Path., Medicaid		covered home health service as described in 42 CFR 409.45(b)
		with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a
		cost reporting period. A visit is an episode of personal contact
		Speech-Language-Path. program visits rendered during the entire
Title XIX Visits	S3-Part1-Line-6-Column-3	through (g).
Occupational Therapy Asst., Medicaid		covered home health service as described in 42 CFR 409.45(b)
		arrangements with the HHA, for the purpose of providing a
		contact with the patient by staff of the HHA, or others under
		entire cost reporting period. A visit is an episode of personal
		Occupational Therapy Asst. program visits rendered during the
XIX Visits		through (g).
Occupational Therapy, Medicaid Title		covered home health service as described in 42 CFR 409.45(b)
		arrangements with the HHA, for the purpose of providing a
		with the patient by staff of the HHA, or others under
		cost reporting period. A visit is an episode of personal contact
		Occupational Therapy program visits rendered during the entire
XIX Visits	S3-Part1-Line-4-Column-3	through (g).
Physical Therapy Asst., Medicaid Title		covered home health service as described in 42 CFR 409.45(b)
		arrangements with the HHA, for the purpose of providing a
		with the patient by staff of the HHA, or others under
		cost reporting period. A visit is an episode of personal contact
		Physical Therapy Asst. program visits rendered during the entire
Visits	S3-Part1-Line-3-Column-3	
Physical Therapy, Medicaid Title XIX		service as described in 42 CFR 409.45(b) through (g).
		the HHA, for the purpose of providing a covered home health
		patient by staff of the HHA, or others under arrangements with
		reporting period. A visit is an episode of personal contact with the
		Physical Therapy program visits rendered during the entire cost
Title XIX Visits	S3-Part1-Line-2-Column-3	through (g).
Skilled Nursing Care-LPN, Medicaid		covered home health service as described in 42 CFR 409.45(b)
CITICAL NO. 100 CONTROL IN 11		arrangements with the HHA, for the purpose of providing a
		with the patient by staff of the HHA, or others under
		cost reporting period. A visit is an episode of personal contact
Total, Medicald Title AIA Visits	55 Furth Line 11 Column 5	Skilled Nursing Care-LPN program visits rendered during the entire
Total, Medicaid Title XIX Visits	S3-Part1-Line-11-Column-3	described in 42 CFR 409.45(b) through (g).
		for the purpose of providing a covered home health service as
ı		by staff of the HHA, or others under arrangements with the HHA,
		period. A visit is an episode of personal contact with the patient
		Total program visits rendered during the entire cost reporting
Title XIX Visits	S3-Part1-Line-1-Column-3	through (g).
Skilled Nursing Care-RN, Medicaid		covered home health service as described in 42 CFR 409.45(b)
		arrangements with the HHA, for the purpose of providing a
		with the patient by staff of the HHA, or others under
		cost reporting period. A visit is an episode of personal contact
		Skilled Nursing Care-RN program visits rendered during the entire
XVIII Patient Census	S3-Part1-Line-9-Column-2	services), and only once as total.
Home Health Aide, Medicare Title		title XVIII (for covered services), once as other (for non-covered
		services and non-covered services, he or she is counted once as
		service. Another example is if a patient receives both covered
		she is counted only once in column 2 for the corresponding
		and multiple Medicare covered medical social service visits, he or
		Medicare covered skilled nursing visits from a registered nurse
		for each type of service. For example, if a patient receives multiple
		Home Health Aide program census. Each patient is counted once

		Medical Social Service program visits rendered during the entire cost reporting period. A visit is an episode of personal contact
		with the patient by staff of the HHA, or others under
		arrangements with the HHA, for the purpose of providing a
Medical Social Service, Medicaid Title		covered home health service as described in 42 CFR 409.45(b)
XIX Visits	S3-Part1-Line-8-Column-3	through (g).
		Home Health Aide program visits rendered during the entire cost
		reporting period. A visit is an episode of personal contact with the
		patient by staff of the HHA, or others under arrangements with
		the HHA, for the purpose of providing a covered home health
Home Health Aide, Medicaid Title XIX		service as described in 42 CFR 409.45(b) through (g).
Visits	S3-Part1-Line-9-Column-3	( , , , , ,
		Skilled Nursing Care-RN program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Skilled Nursing Care-RN, Medicaid		title XVIII (for covered services), once as other (for non-covered
Title XIX Patient Census	S3-Part1-Line-1-Column-4	services), and only once as total.
		Skilled Nursing Care-LPN program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Skilled Nursing Care-LPN, Medicaid		title XVIII (for covered services), once as other (for non-covered
Title XIX Patient Census	S3-Part1-Line-2-Column-4	services), and only once as total.
		Physical Therapy program census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy, Medicaid Title XIX		title XVIII (for covered services), once as other (for non-covered
Patient Census	S3-Part1-Line-3-Column-4	services), and only once as total.
		Physical Therapy Asst. program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy Asst., Medicaid Title		title XVIII (for covered services), once as other (for non-covered
XIX Patient Census	S3-Part1-Line-4-Column-4	services), and only once as total.

•	i .	described in 42 CFR 409.45(b) through (g).
		for the purpose of providing a covered home health service as
		by staff of the HHA, or others under arrangements with the HHA,
		Total program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient
Skilled Nursing Care-RN, Other Visits	S3-Part1-Line-1-Column-5	through (g).
		covered home health service as described in 42 CFR 409.45(b)
		arrangements with the HHA, for the purpose of providing a
		with the patient by staff of the HHA, or others under
		cost reporting period. A visit is an episode of personal contact
		Skilled Nursing Care-RN program visits rendered during the entire
Patient Census	S3-Part1-Line-9-Column-4	services), and only once as total.
   Home Health Aide, Medicaid Title XIX		title XVIII (for covered services), once as other (for non-covered
		services and non-covered services, he or she is counted once as
		service. Another example is if a patient receives both covered
		she is counted only once in column 2 for the corresponding
		and multiple Medicare covered medical social service visits, he or
		Medicare covered skilled nursing visits from a registered nurse
		for each type of service. For example, if a patient receives multiple
AIN FALIETT CETISUS	55-F at LT-LIHE-O-COIUIIII-4	services), and only once as total.  Home Health Aide program census. Each patient is counted once
XIX Patient Census	S3-Part1-Line-8-Column-4	title XVIII (for covered services), once as other (for non-covered
Medical Social Service, Medicaid Title		services and non-covered services, he or she is counted once as
		service. Another example is if a patient receives both covered
		he or she is counted only once in column 2 for the corresponding
		nurse and multiple Medicare covered medical social service visits,
		multiple Medicare covered skilled nursing visits from a registered
		once for each type of service. For example, if a patient receives
		Medical Social Service program census. Each patient is counted
Title XIX Patient Census	S3-Part1-Line-7-Column-4	services), and only once as total.
Speech-Language-Path., Medicaid	C2 P. 14 11 7 C 1	title XVIII (for covered services), once as other (for non-covered
		services and non-covered services, he or she is counted once as
		service. Another example is if a patient receives both covered
		he or she is counted only once in column 2 for the corresponding
		nurse and multiple Medicare covered medical social service visits,
		multiple Medicare covered skilled nursing visits from a registered
		once for each type of service. For example, if a patient receives
		Speech-Language-Path. program census. Each patient is counted
Title XIX Patient Census	S3-Part1-Line-6-Column-4	(for non-covered services), and only once as total.
Occupational Therapy Asst., Medicaid		counted once as title XVIII (for covered services), once as other
		both covered services and non-covered services, he or she is
		corresponding service. Another example is if a patient receives
		service visits, he or she is counted only once in column 2 for the
		registered nurse and multiple Medicare covered medical social
		receives multiple Medicare covered skilled nursing visits from a
		counted once for each type of service. For example, if a patient
		Occupational Therapy Asst. program census. Each patient is
XIX Patient Census	S3-Part1-Line-5-Column-4	services), and only once as total.
Occupational Therapy, Medicaid Title		title XVIII (for covered services), once as other (for non-covered
		services and non-covered services, he or she is counted once as
		service. Another example is if a patient receives both covered
		he or she is counted only once in column 2 for the corresponding
		nurse and multiple Medicare covered medical social service visits,
		multiple Medicare covered skilled nursing visits from a registered
		once for each type of service. For example, if a patient receives
		Occupational Therapy program census. Each patient is counted

Home Health Aide, Other Visits	S3-Part1-Line-9-Column-5	
		reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b) through (g).
Medical Social Service, Other Visits	S3-Part1-Line-8-Column-5	through (g).  Home Health Aide program visits rendered during the entire cost
		Medical Social Service program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b)
Speech-Language-Path., Other Visits	S3-Part1-Line-7-Column-5	through (g).  Modical Social Service program visits rendered during the entire
		Speech-Language-Path. program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b)
Occupational Therapy Asst., Other Visits	S3-Part1-Line-6-Column-5	covered home health service as described in 42 CFR 409.45(b) through (g).
Occupational There are Acet. Other		Occupational Therapy Asst. program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a
Occupational Therapy, Other Visits	S3-Part1-Line-5-Column-5	covered home health service as described in 42 CFR 409.45(b) through (g).
		Occupational Therapy program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a
Physical Therapy Asst., Other Visits	S3-Part1-Line-4-Column-5	through (g).
		with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b)
		Physical Therapy Asst. program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the nations by staff of the HHA or others under
Physical Therapy, Other Visits	S3-Part1-Line-3-Column-5	
		Physical Therapy program visits rendered during the entire cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b) through (g).
Skilled Nursing Care-LPN, Other Visits	S3-Part1-Line-2-Column-5	through (g).
		arrangements with the HHA, for the purpose of providing a covered home health service as described in 42 CFR 409.45(b)
		cost reporting period. A visit is an episode of personal contact with the patient by staff of the HHA, or others under

		Skilled Nursing Care-RN program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Skilled Nursing Care-RN, Other		title XVIII (for covered services), once as other (for non-covered
Patient Census	S3-Part1-Line-1-Column-6	services), and only once as total.
		Skilled Nursing Care-LPN program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Skilled Nursing Care-LPN, Other		title XVIII (for covered services), once as other (for non-covered
Patient Census	S3-Part1-Line-2-Column-6	services), and only once as total.
		Physical Therapy program census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy, Other Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-3-Column-6	services), and only once as total.
		Physical Therapy Asst. program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy Asst., Other Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-4-Column-6	services), and only once as total.
		Occupational Therapy program census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
ı		
		services and non-covered services, he or she is counted once as
Occupational Therapy, Other Patient		services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.
Occupational Therapy, Other Patient Census	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is counted once for each type of service. For example, if a patient
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives
• • •	S3-Part1-Line-5-Column-6	title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Occupational Therapy Asst. program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the

Speech-Language-Path. program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services), once as other (for non-covered services), and only once as total.  Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services), once as other (for non-covered services), and only once as total.  Medical Social Service, Other Patient Census  S3-Part1-Line-8-Column-6  Home Health Aide program census. Each patient is counted once as title XVIII (for covered services), once as other (for non-covered services) and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered services), once as other (for non-covered services) and only once in column 2 for the corresponding service. Another example is if a patient receives both covered services. Another example is if a patient receives both covered services. Another example is if a patient receives both covered services. Another example is if a patient receives both covered services. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.
multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services, and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered medical social service wisits, he or she is counted once for each type of service. For example, if a patient receives multiple Medicare covered medical social service visits, he or she is counted once for each type of service. For example, if a patient receives multiple Medicare covered medical social service visits, he or she is counted once so the service. Another example is if a patient receives both covered service and multiple Medicare covered medical social service visits, he or she is counted once services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services).
nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Medical Social Service program census. Each patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding services and non-covered services, he or she is counted only once as total.  Medical Social Service, Other Patient  Census  S3-Part1-Line-8-Column-6  S3-Part1-Line-8-Column-6  S3-Part1-Line-8-Column-6  Home Health Aide program census. Each patient receives multiple Medicare covered services, and only once as total.  Home Health Aide program census. Each patient receives multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example, if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services, he or she is counted once as title XVIII (for covered services, he or she is counted once as title XVIII (for covered services, he or she is counted once as title XVIII (for covered services, he or she is counted once as title XVIII (for covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services).
he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.    Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered services wists he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.    Home Health Aide program census. Each patient is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.    Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services), once as other (for non-covered services), once as other (for non-covered services).
service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding services. Another example is if a patient receives both covered services and non-covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services).
Speech-Language-Path., Other Patient Census  S3-Part1-Line-7-Column-6  S3-Part1-Line-7-Column-6  S3-Part1-Line-7-Column-6  S3-Part1-Line-7-Column-6  Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multipl Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services) once as other (for non-covered services) once as other (for non-covered services) once as other (for non-covered services), once as other (for non-covered services), once as other (for non-covered services) once as other (for non-covered services), once as other (for non-covered services), once as other (for non-covered services) once as other (for non-covered services), once as other (for non-covered services).
Speech-Language-Path., Other Patient Census  S3-Part1-Line-7-Column-6  S3-Part1-Line-7-Column-6  Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding services), and only once as other (for non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Medical Social Service, Other Patient  Census  S3-Part1-Line-8-Column-6  S3-P
Patient Census  S3-Part1-Line-7-Column-6  Services), and only once as total.  Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multipl Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services and non-covered services), once as other (for non-covered services).
Medical Social Service program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.    Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), once as other (for non-covered services).
nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
nurse and multiple Medicare covered medical social service visits he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.    Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
Services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services), and only once as total.  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
Medical Social Service, Other Patient Census  S3-Part1-Line-8-Column-6  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
Census  S3-Part1-Line-8-Column-6  Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered)
Home Health Aide program census. Each patient is counted once for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered)
for each type of service. For example, if a patient receives multiple Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
Medicare covered skilled nursing visits from a registered nurse and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
and multiple Medicare covered medical social service visits, he or she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
she is counted only once in column 2 for the corresponding service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered services).
service. Another example is if a patient receives both covered services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
services and non-covered services, he or she is counted once as title XVIII (for covered services), once as other (for non-covered
Home Health Aide, Other Patient title XVIII (for covered services), once as other (for non-covered
Skilled Nursing Care-RN total visits rendered during the entire cos
reporting period. A visit is an episode of personal contact with the
patient by staff of the HHA, or others under arrangements with
the HHA, for the purpose of providing a covered home health
service as described in 42 CFR 409.45(b) through (g).  Skilled Nursing Care-RN, Total Visits S3-Part1-Line-1-Column-7
Total total visits rendered during the entire cost reporting period.
A visit is an episode of personal contact with the patient by staff
of the HHA, or others under arrangements with the HHA, for the
purpose of providing a covered home health service as described
Total, Total Visits S3-Part1-Line-11-Column-7 in 42 CFR 409.45(b) through (g).
Skilled Nursing Care-LPN total visits rendered during the entire
cost reporting period. A visit is an episode of personal contact
with the patient by staff of the HHA, or others under
arrangements with the HHA, for the purpose of providing a
covered home health service as described in 42 CFR 409.45(b)
Skilled Nursing Care-LPN, Total Visits S3-Part1-Line-2-Column-7 through (g).
Physical Therapy total visits rendered during the entire cost
reporting period. A visit is an episode of personal contact with the
patient by staff of the HHA, or others under arrangements with
the HHA, for the purpose of providing a covered home health
Physical Therapy, Total Visits S3-Part1-Line-3-Column-7 service as described in 42 CFR 409.45(b) through (g).
Physical Therapy Asst. total visits rendered during the entire cost
reporting period. A visit is an episode of personal contact with the
patient by staff of the HHA, or others under arrangements with
the HHA, for the purpose of providing a covered home health
service as described in 42 CFR 409.45(b) through (g).
Physical Therapy Asst., Total Visits S3-Part1-Line-4-Column-7

	T	<u> </u>
		Occupational Therapy total visits rendered during the entire cost
		reporting period. A visit is an episode of personal contact with the
		patient by staff of the HHA, or others under arrangements with
		the HHA, for the purpose of providing a covered home health
	62 5 14 11 5 6 1 7	service as described in 42 CFR 409.45(b) through (g).
Occupational Therapy, Total Visits	S3-Part1-Line-5-Column-7	
		Occupational Therapy Asst. total visits rendered during the entire
		cost reporting period. A visit is an episode of personal contact
		with the patient by staff of the HHA, or others under
		arrangements with the HHA, for the purpose of providing a
Occupational Therapy Asst., Total		covered home health service as described in 42 CFR 409.45(b)
Visits	S3-Part1-Line-6-Column-7	through (g).
		Speech-Language-Path. total visits rendered during the entire cost
		reporting period. A visit is an episode of personal contact with the
		patient by staff of the HHA, or others under arrangements with
		the HHA, for the purpose of providing a covered home health
		service as described in 42 CFR 409.45(b) through (g).
Speech-Language-Path., Total Visits	S3-Part1-Line-7-Column-7	
		Medical Social Service total visits rendered during the entire cost
		reporting period. A visit is an episode of personal contact with the
		patient by staff of the HHA, or others under arrangements with
		the HHA, for the purpose of providing a covered home health
		service as described in 42 CFR 409.45(b) through (g).
Medical Social Service, Total Visits	S3-Part1-Line-8-Column-7	( , , , , ,
		Home Health Aide total visits rendered during the entire cost
		reporting period. A visit is an episode of personal contact with the
		patient by staff of the HHA, or others under arrangements with
		the HHA, for the purpose of providing a covered home health
Home Health Aide, Total Visits	S3-Part1-Line-9-Column-7	service as described in 42 CFR 409.45(b) through (g).
1, 11,		Skilled Nursing Care-RN total census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Skilled Nursing Care-RN, Total Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-1-Column-8	, , , , , , , , , , , , , , , , , , , ,
Cerisus	33-Farti-Line-1-Columni-6	services), and only once as total. Skilled Nursing Care-LPN total census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
Chilled Nameira Consul DN Total		services and non-covered services, he or she is counted once as
Skilled Nursing Care-LPN, Total	C2 Danta 11 - 2 C 1 - 5	title XVIII (for covered services), once as other (for non-covered
Patient Census	S3-Part1-Line-2-Column-8	services), and only once as total.
		Physical Therapy total census. Each patient is counted once for
		each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy, Total Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-3-Column-8	services), and only once as total.
	•	

		Physical Therapy Asst. total census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Physical Therapy Asst., Total Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-4-Column-8	services), and only once as total.
2011343	55 Tares Line Teolamin 6	Occupational Therapy total census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Occupational Therapy, Total Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-5-Column-8	services), and only once as total.
2011343	55 Turti Line 5 Columni-0	Occupational Therapy Asst. total census. Each patient is counted
		once for each type of service. For example, if a patient receives
		multiple Medicare covered skilled nursing visits from a registered
		nurse and multiple Medicare covered medical social service visits,
		he or she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Occupational Therapy Asst., Total		title XVIII (for covered services), once as other (for non-covered
Patient Census	S3-Part1-Line-6-Column-8	services), and only once as total.
diene census	33 Tarti Line o colanni o	Speech-Language-Path. total census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
Speech Language Bath Total Bationt		services and non-covered services, he or she is counted once as
Speech-Language-Path., Total Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-7-Column-8	services), and only once as total.  Modical Social
		Medical Social Service total census. Each patient is counted once
		for each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
Modical Casial Carriage Tatal Datis at		services and non-covered services, he or she is counted once as
Medical Social Service, Total Patient	C2 David Lina 0 Calaman 0	title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-8-Column-8	services), and only once as total.
		Home Health Aide total census. Each patient is counted once for
		each type of service. For example, if a patient receives multiple
		Medicare covered skilled nursing visits from a registered nurse
		and multiple Medicare covered medical social service visits, he or
		she is counted only once in column 2 for the corresponding
		service. Another example is if a patient receives both covered
		services and non-covered services, he or she is counted once as
Home Health Aide, Total Patient		title XVIII (for covered services), once as other (for non-covered
Census	S3-Part1-Line-9-Column-8	services), and only once as total.

	T	T
_ , _ , , , , , , , , , , , , , , , , ,		The number of aggregate program visits furnished in each
Full Episodes without Outliers-Total		episode/period of care payment category for each covered
Visits	S3-Part4-Line-13-Column-1	discipline.
- 11 - 1 - 11 - 11		The number of aggregate program visits furnished in each
Full Episodes with Outliers-Total		episode/period of care payment category for each covered
Visits	S3-Part4-Line-13-Column-2	discipline.
		The number of aggregate program visits furnished in each
		episode/period of care payment category for each covered
Lupa Episodes-Total Visits	S3-Part4-Line-13-Column-3	discipline.
		The number of aggregate program visits furnished in each
		episode/period of care payment category for each covered
PEP Episodes-Total Visits	S3-Part4-Line-13-Column-4	discipline.
		The number of aggregate program visits furnished in each
		episode/period of care payment category for each covered
Total Episodes-Total Visits	S3-Part4-Line-13-Column-5	discipline.
		The corresponding aggregate program visit charges imposed for
Full Episodes without Outliers-Total		each covered discipline for each episode/period of care payment
Charges	S3-Part4-Line-15-Column-1	category
		The corresponding aggregate program visit charges imposed for
Full Episodes with Outliers-Total		each covered discipline for each episode/period of care payment
Charges	S3-Part4-Line-15-Column-2	category
		The corresponding aggregate program visit charges imposed for
		each covered discipline for each episode/period of care payment
Lupa Episodes-Total Charges	S3-Part4-Line-15-Column-3	category
The best of the Control		The corresponding aggregate program visit charges imposed for
		each covered discipline for each episode/period of care payment
PEP Episodes-Total Charges	S3-Part4-Line-15-Column-4	category
TEL Episodes Fotal Glidiges	oo rarer time to commit t	The corresponding aggregate program visit charges imposed for
		each covered discipline for each episode/period of care payment
Total Episodes-Total Charges	S3-Part4-Line-15-Column-5	
Skilled Nursing Care-RN, Cost	C-Part1-Line-1-Column-2	Category Total cost for the discipline.
Skilled Nursing Care-LPN, Cost	C-Part1-Line-2-Column-2	·
		Total cost for the discipline.
Physical Therapy, Cost	C-Part1-Line-3-Column-2	Total cost for the discipline.
Physical Therapy Asst., Cost	C-Part1-Line-4-Column-2	Total cost for the discipline.
Occupational Therapy, Cost	C-Part1-Line-5-Column-2	Total cost for the discipline.
Occupational Therapy Asst., Cost	C-Part1-Line-6-Column-2	Total cost for the discipline.
Speech-Language-Path., Cost	C-Part1-Line-7-Column-2	Total cost for the discipline.
Medical Social Service, Cost	C-Part1-Line-8-Column-2	Total cost for the discipline.
Home Health Aide, Cost	C-Part1-Line-9-Column-2	Total cost for the discipline.
Total Cost	C-Part1-Line-10-Column-2	Total cost for the facility.
Skilled Nursing Care-RN, Avg. Cost		Average cost for the discipline.
Per Visit	C-Part1-Line-1-Column-4	
Skilled Nursing Care-LPN, Avg. Cost		Average cost for the discipline.
Per Visit	C-Part1-Line-2-Column-4	
Physical Therapy, Avg. Cost Per Visit	C-Part1-Line-3-Column-4	Average cost for the discipline.
Physical Therapy Asst., Avg. Cost Per		Average cost for the discipline.
Visit	C-Part1-Line-4-Column-4	
Occupational Therapy, Avg. Cost Per		Average cost for the discipline.
Visit	C-Part1-Line-5-Column-4	,
Occupational Therapy Asst., Avg. Cost		Average cost for the discipline.
Per Visit	C-Part1-Line-6-Column-4	
Speech-Language-Path., Avg. Cost Per		Average cost for the discipline.
Visit	C-Part1-Line-7-Column-4	
Medical Social Service, Avg. Cost Per		Average cost for the discipline.
Visit	C-Part1-Line-8-Column-4	The tage cost for the discipline.
VIJIC	C raiti Lilie-o-Colullili-4	

	Τ	A
Home Health Aide, Avg. Cost Per Visit	C-Part1-Ling-9-Column-4	Average cost for the discipline.
Home Health Aide, Avg. Cost Per Visit	C-Part1-Line-9-Column-4	The Medicare HHA visits by practitioner from your records or the
Skilled Nursing Care-RN, HHA		PS&R data for the specific program area. Note this may differ
Medicare Progam Visits	C-Part1-Line-1-Column-5	
Medicare Progatit visits	C-Part1-Line-1-Column-5	from the data reported on the S3 worksheet.
Skilled Nursing Core LDN 1111A		The Medicare HHA visits by practitioner from your records or the
Skilled Nursing Care-LPN, HHA	C Dowt 1 Line 2 Column 5	PS&R data for the specific program area. Note this may differ
Medicare Progam Visits	C-Part1-Line-2-Column-5	from the data reported on the S3 worksheet.
Dhariad Thamana 1111A Madiana		The Medicare HHA visits by practitioner from your records or the
Physical Therapy, HHA Medicare	C De da Live 2 Celeve 5	PS&R data for the specific program area. Note this may differ
Progam Visits	C-Part1-Line-3-Column-5	from the data reported on the S3 worksheet.
		The Medicare HHA visits by practitioner from your records or the
Physical Therapy Asst., HHA Medicare		PS&R data for the specific program area. Note this may differ
Progam Visits	C-Part1-Line-4-Column-5	from the data reported on the S3 worksheet.
		The Medicare HHA visits by practitioner from your records or the
Occupational Therapy, HHA Medicare		PS&R data for the specific program area. Note this may differ
Progam Visits	C-Part1-Line-5-Column-5	from the data reported on the S3 worksheet.
		The Medicare HHA visits by practitioner from your records or the
Occupational Therapy Asst., HHA		PS&R data for the specific program area. Note this may differ
Medicare Progam Visits	C-Part1-Line-6-Column-5	from the data reported on the S3 worksheet.
		The Medicare HHA visits by practitioner from your records or the
Speech-Language-Path., HHA		PS&R data for the specific program area. Note this may differ
Medicare Progam Visits	C-Part1-Line-7-Column-5	from the data reported on the S3 worksheet.
		The Medicare HHA visits by practitioner from your records or the
Medical Social Service, HHA Medicare		PS&R data for the specific program area. Note this may differ
Progam Visits	C-Part1-Line-8-Column-5	from the data reported on the S3 worksheet.
Trogam visits	e rarez zine e eoranin e	The Medicare HHA visits by practitioner from your records or the
Home Health Aide, HHA Medicare		PS&R data for the specific program area. Note this may differ
Progam Visits	C-Part1-Line-9-Column-5	from the data reported on the S3 worksheet.
Tiogani visits	C-rarti-Line-5-Column-5	·
		The Medicare HHA visits by practitioner from your records or the
Total IIIIA Madigara Dragam Visita	C-Part1-Line-10-Column-5	PS&R data for the specific program area. Note this may differ
Total HHA Medicare Progam Visits	C-Part1-Line-10-Column-5	from the data reported on the S3 worksheet.
		Medicare cost of services are calculated by multiplying the
Stilled Novine Company		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Skilled Nursing Care-RN, HHA		the number of Medicare covered visits in Worksheet C-Part 1
Medicare Progam Cost	C-Part1-Line-1-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Skilled Nursing Care-LPN, HHA		the number of Medicare covered visits in Worksheet C-Part 1
Medicare Progam Cost	C-Part1-Line-2-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Physical Therapy, HHA Medicare		the number of Medicare covered visits in Worksheet C-Part 1
Progam Cost	C-Part1-Line-3-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Physical Therapy Asst., HHA Medicare		the number of Medicare covered visits in Worksheet C-Part 1
Progam Cost	C-Part1-Line-4-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Occupational Therapy, HHA Medicare		the number of Medicare covered visits in Worksheet C-Part 1
Progam Cost	C-Part1-Line-5-Column-6	
T TOGUITI COST	C Tarti Line-3-Column-0	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
Occupational Thereas: A 1111A		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Occupational Therapy Asst., HHA	C Dowt 1 Lines C Column C	the number of Medicare covered visits in Worksheet C-Part 1
Medicare Progam Cost	C-Part1-Line-6-Column-6	Column 5, for each respective discipline.

		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Speech-Language-Path., HHA		the number of Medicare covered visits in Worksheet C-Part 1
Medicare Progam Cost	C-Part1-Line-7-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Medical Social Service, HHA Medicare		the number of Medicare covered visits in Worksheet C-Part 1
Progam Cost	C-Part1-Line-8-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
Home Health Aide, HHA Medicare		the number of Medicare covered visits in Worksheet C-Part 1
Progam Cost	C-Part1-Line-9-Column-6	Column 5, for each respective discipline.
		Medicare cost of services are calculated by multiplying the
		average cost per visit amount in Worksheet C-Part 1 Column 4 by
		the number of Medicare covered visits in Worksheet C-Part 1
Total HHA Medicare Progam Cost	C-Part1-Line-10-Column-6	Column 5, for each respective discipline.
		The total enrollment days applicable for each respective program
		(dually eligible (Medicare/Medicaid) beneficiaries are included
		under Medicare). Enrollment days are unduplicated days of care
Total Hospice Days Title Other	S4-Part1-Line-5-Column-3	received by a hospice patient.
•		The total enrollment days applicable for each respective program
		(dually eligible (Medicare/Medicaid) beneficiaries are included
		under Medicare). Enrollment days are unduplicated days of care
Total Hospice Days Title XIX Medicaid	S4-Part1-Line-5-Column-2	received by a hospice patient.
		The total enrollment days applicable for each respective program
		(dually eligible (Medicare/Medicaid) beneficiaries are included
Total Hospice Days Title XVIII		under Medicare). Enrollment days are unduplicated days of care
Medicare	S4-Part1-Line-5-Column-1	received by a hospice patient.
		The total enrollment days applicable for each respective program
		(dually eligible (Medicare/Medicaid) beneficiaries are included
		under Medicare). Enrollment days are unduplicated days of care
Total Hospice Days Total	S4-Part1-Line-5-Column-4	received by a hospice patient.
		Amount of cash on deposit in banks and immediately available for
		use in financing activities, amounts on hand for minor
		disbursements and amounts invested in savings accounts and
Cash on Hand and in Banks	F-Line-1-Column-1	certificates of deposit.
		Current securities evidenced by certificates of ownership or
		indebtedness. Typical accounts would be marketable securities
Temporary Investments	F-Line-2-Column-1	and other current investments.
		Current unpaid amounts evidenced by certificates of
Notes Receivable	F-Line-3-Column-1	indebtedness.
		Unpaid inpatient and outpatient billings. Include direct billings to
		patients for deductibles, co-insurance and other patient
Accounts Receivable	F-Line-4-Column-1	chargeable items not included elsewhere.
Less: Allowances for uncollectible		The estimated amount of the HHA accounts receivable not
notes and accounts receivable	F-Line-6-Column-1	expected to be paid.
		The costs of unused HHA supplies. Perpetual inventory records
		may be maintained and adjusted periodically to physical count.
Inventory	F-Line-7-Column-1	
		The costs incurred that are properly chargeable to a future
Prepaid Expenses	F-Line-8-Column-1	accounting period.
		The balances of all other current assets not identified elsewhere.
Other Current Assets	F-Line-9-Column-1	
		Total Current Assets (sum of lines 1 through 9 on the F
Total Current Assets	F-Line-10-Column-1	Worksheet).

Land	F-Line-11-Column-1	The cost of land as defined in CMS Pub. 15-1, chapter 1, §104.6.
Land Improvements	F-Line-12-Column-1	The costs of land improvements as defined in CMS Pub. 15-1, chapter 1, §104.7.
Buildings	F-Line-14-Column-1	The costs of the HHA buildings as defined in CMS Pub. 15-1, chapter 1, §104.2.
Leasehold Improvements	F-Line-16-Column-1	The costs of leasehold improvements as defined in CMS Pub. 15-1 chapter 1, §104.8.
Fixed Equipment	F-Line-18-Column-1	The costs of building equipment as defined in CMS Pub. 15-1, chapter 1, §104.3.
Major Movable Equipment	F-Line-22-Column-1	The costs of equipment as defined in CMS Pub. 15-1, chapter 1, §104.4.
Minor Equipment Depreciable	F-Line-24-Column-1	The costs of minor equipment as defined in CMS Pub. 15-1, chapter 1, §106(c). Enter
Total Fixed Assets	F-Line-27-Column-1	The sum of lines 11 through 26 and 26.50 from the F Worksheet.
Investments	F-Line-28-Column-1	The cost of investments purchased with HHA funds and the fair market value (at date of donation) of securities donated to the HHA.
		The balances of all other assets not identified and reported on lines 28 through 30 on the F Worksheet. This could include intangible assets such as goodwill, unamortized loan costs and
Other Assets	F-Line-30.50-Column-1	other organization costs.
Total Other Assets	F-Line-31-Column-1	Sum of lines 28 through 30 and 30.50 from the F worksheet.
Total Assets	F-Line-32-Column-1	Sum of lines 10, 27, and 31 from the F Worksheet.
Accounts Payable	F-Line-33-Column-1	The amounts due trade creditors and others for supplies and services purchased.
Salaries, Wages, and Fees Payable	F-Line-34-Column-1	The actual or estimated liabilities of salaries and wages/fees payable.
		The actual or estimated liabilities of amounts payable for payroll taxes withheld from salaries and wages, payroll taxes to be paid and other payroll deductions, such as hospitalization insurance
Payroll taxes payable	F-Line-35-Column-1	premiums.
Notes and Loans Payable (short term)	F-Line-36-Column-1	Amounts payable on notes and loans as evidenced by certificates of indebtedness due in the next 12 months.
		The amount of deferred income received or accrued applicable to services to be rendered within the next accounting period.  Deferred income applicable to accounting periods extending beyond the next accounting period is included as other current
Deferred Income	F-Line-37-Column-1	liabilities.
Other Current Liabilities	F-Line-39-Column-1	The balances of all other current liabilities not identified and reported on lines 33 through 38 on the F Worksheet.
Total Current Liabilities	F-Line-40-Column-1	The sum of lines 33 through 39 on the F Worksheet.
Mortgage Payable	F-Line-41-Column-1	The long-term financing obligation as evidenced by certificates of indebtedness used to purchase real estate/property.
Notes Payable	F-Line-42-Column-1	Amounts payable on notes and loans as evidenced by certificates of indebtedness due after the next 12 months.
Unsecured Loans	F-Line-43-Column-1	Amounts payable for unsecured liabilities due after the next 12 months.
Other Long Term Liabilities	F-Line-44-Column-1	The balances of all other long-term liabilities not identified and reported on lines 41 through 43 on the F Worksheet.
Total Long Term Liabilities	F-Line-45-Column-1	The sum of lines long term liabilities, which are 41 through 44 on the F Worksheet
Total Liabilities	F-Line-46-Column-1	The sum of liabilities on lines 40 and 45 of the F Worksheet.
Fund Balance	F-Line-47-Column-1	The end of period fund balance.

		The sum of liabilities and fund belones on lines 46 and 47 of the E
Total Liabilities and Fund Balances	F-Line-C48-Column-1	The sum of liabilities and fund balance on lines 46 and 47 of the F Worksheet.
		Total patient revenue from the HHA accounting books and/or
Gross Patient Revenues Title XVIII		records by program as indicated. Note: revenue from a managed
Medicare	F1-Line-1-Column-1	care program must be entered in column 3, "Other".
		Total patient revenue from the HHA accounting books and/or
Gross Patient Revenues Title XIX		records by program as indicated. Note: revenue from a managed
Medicaid	F1-Line-1-Column-2	care program must be entered in column 3, "Other".
		Total patient revenue from the HHA accounting books and/or
		records by program as indicated. Note: revenue from a managed
Gross Patient Revenues Other	F1-Line-1-Column-3	care program must be entered in column 3, "Other".
		Total patient revenue from the HHA accounting books and/or
		records for the facility. Note: revenue from a managed care
Gross Patient Revenues Total	F1-Line-1-Column-4	program must be entered in column 3, "Other".
G1033 Fatient Nevenues Total		The allowances and discounts by program as indicated. These
		allowances and discounts are total patient revenues not received
		including: Provision for Bad Debts, Contractual Adjustments,
Less: Allowances and discounts on		Charity Discounts, Teaching Allowances, Policy Discounts,
patients' accounts Title XVIII		Administrative Adjustments, and Other Deductions from Revenue
Medicare	F1-Line-2-Column-1	, and other beductions from Neverlde
	T Line 2 Column 1	The allowances and discounts by program as indicated. These
		allowances and discounts are total patient revenues not received
		including: Provision for Bad Debts, Contractual Adjustments,
		Charity Discounts, Teaching Allowances, Policy Discounts,
Less: Allowances and discounts on		
patients' accounts Title XIX Medicaid	F1-Line-2-Column-2	Administrative Adjustments, and Other Deductions from Revenue
patients accounts title xix Medicald	1 1-Line-2-Columni-2	The allowances and discounts by program as indicated. These
		The allowances and discounts by program as indicated. These allowances and discounts are total patient revenues not received
		·
		including: Provision for Bad Debts, Contractual Adjustments,
Less: Allowances and discounts on		Charity Discounts, Teaching Allowances, Policy Discounts,
patients' accounts Other	F1-Line-2-Column-3	Administrative Adjustments, and Other Deductions from Revenue
patients accounts Other	i 1-Line-2-Columni-3	The allowances and discounts for the facility. These allowances
		The allowances and discounts for the facility. These allowances and discounts are total patient revenues not received including:
		·
		Provision for Bad Debts, Contractual Adjustments, Charity
Loos, Allauranasa and diagounta an		Discounts, Teaching Allowances, Policy Discounts, Administrative
Less: Allowances and discounts on	E4 Line 2 Column 4	Adjustments, and Other Deductions from Revenue.
patients' accounts Total Net Patient Revenues (line 1 minus	F1-Line-2-Column-4	For each group the Coase Batient Borrows with a least
•	E1 Line 2 Column 1	For each program, the Gross Patient Revenues minus the Less:
line 2) XVIII Medicare	F1-Line-3-Column-1	Allowances and discounts on patients' accounts.
Net Patient Revenues (line 1 minus	E4 Line 2 Calumn 2	For each program, the Gross Patient Revenues minus the Less:
line 2) XIX Medicaid	F1-Line-3-Column-2	Allowances and discounts on patients' accounts.
Net Patient Revenues (line 1 minus	E4 Line 2 Calaura 2	For each program, the Gross Patient Revenues minus the Less:
line 2) Other	F1-Line-3-Column-3	Allowances and discounts on patients' accounts.
Net Patient Revenues (line 1 minus	Ed Line 2 Calana A	For the total facility, the Gross Patient Revenues minus the Less:
line 2) Total	F1-Line-3-Column-4	Allowances and discounts on patients' accounts.
Less Total Operating Expenses (sum	F4 11 - 47 0 1	Total operating expenses summed lines 4 through 16 on the F1
of lines 4 through 16)	F1-Line-17-Column-4	Worksheet.
Net Income from service to patients		Net income from service to patients (line 3 minus line 17)
(line 3 minus line 17)	F1-Line-18-Column-4	
Total Other Income (sum of lines 19		Total Other Income (sum of lines 19 through 31)
through 31)	F1-Line-32-Column-4	
Net Income or Loss for the period		Net Income or Loss for the period (line 18 plus line 32)
(line 18 plus line 32)	F1-Line-33-Column-4	1

		Under PPS, enter only payment amounts associated with
		episodes/periods completed in the current cost reporting period
Total PPS Payment - full		(see §4707.4 for additional information on episodes and periods).
episodes/periods without outliers	D-Line-10-Column-1	
		Under PPS, enter only payment amounts associated with
		episodes/periods completed in the current cost reporting period
Total PPS Payment - full		(see §4707.4 for additional information on episodes and periods).
episodes/periods with outliers	D-Line-11-Column-1	
		Under PPS, enter only payment amounts associated with
		episodes/periods completed in the current cost reporting period
Total PPS Payment - LUPA		(see §4707.4 for additional information on episodes and periods).
episodes/periods	D-Line-12-Column-1	
		Under PPS, enter only payment amounts associated with
		episodes/periods completed in the current cost reporting period
Total PPS Payment - PEP		(see §4707.4 for additional information on episodes and periods).
episodes/periods	D-Line-13-Column-1	
Total PPS Outlier Payment - full		The appropriate PPS outlier payment for each episode/period of
episodes/periods with outliers	D-Line-14-Column-1	care payment category indicated on the worksheet.
Total PPS Outlier Payment - PEP		The appropriate PPS outlier payment for each episode/period of
episodes/periods	D-Line-15-Column-1	care payment category indicated on the worksheet.
		Medicare allowable bad debts, reduced by bad debt recoveries. If
		recoveries exceed the current year's bad debts, lines 25 and 26
Allowable Bad debts	D-Line-25-Column-1	will be negative.
		The amount (including negative amounts) from line 25 (Allowable
Adjusted Reimbursable Bad Debts	D-Line-26-Column-1	Bad Debts) multiplied by 65 percent.
Total Hospice Expenses	O5-Column-3, Line-100	Total HHA-based hospice expenses.