

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
**Department of Health Care Finance**



Office of the Senior Deputy Director and Medicaid Director

**Transmittal 24-19**

**TO:** Home Health Agencies

**FROM:** Melisa Byrd *Melisa Byrd*  
Senior Deputy Director and Medicaid Director

**DATE:** May 16, 2024

**SUBJECT:** Home Health Agency Cost Report Submission

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**Purpose**

In accordance with 29 DCMR 5016, DHCF may conduct routine audits of provider data to ensure Medicaid payments are consistent with efficiency, economy, and quality of care. Performing the audits requires the availability of submitted cost reports by DC Medicaid-enrolled Home Health Agencies. This transmittal provides notice to all DC Medicaid-enrolled Home Health Agencies (regardless of the service delivery system, e.g., FFS or managed care) of the requirement to submit annual cost reports to DHCF for review.

**Reporting Details**

Cost reports cover 12 months, and each provider is expected to furnish information about their expenses and relevant statistical data, including workforce costs, utilization, staffing details, and disclosure of any related party. Further, cost reports are reported on the accrual basis of accounting and are due no later than ninety (90) days after the end of each provider's fiscal year.

Beginning with FY24, cost reports are due annually and must be submitted to DHCF by March 31<sup>st</sup>, 2025. At the time of submission, the cost report must be complete with all supporting documentation attached.

Failure to submit the cost reports within the specified timeframe without an approved extension may result in escalating penalties, up to and including suspension of claims payment. Completion of the cost report does not relieve providers of other reporting requirements, including the DSP wage reporting outlined under Transmittal 24-01 Distribution of DCSP Supplemental Payment for Calendar Year 2024 Enhanced Direct Care Worker Wages and any cost data requested under the HHA rate study.

**Submission Process**

To improve the accuracy of the data reported, the Office of Rates and Reimbursement (ORRFA) will provide technical support and two training sessions on cost report preparation.

Subsequently, the prepared cost report must be completed and submitted using the DHCF HHA cost report template (see attached) in alignment with the reporting manual. No modifications or substitute forms to the approved HHA cost report templates are permitted.

The following documents must also be submitted with the completed HHA cost report:

1. Audited financial statements, if available, and any supplemental statements.
2. Medicare Home Health Agency cost report (form CMS 1728-94) and all accompanying supporting documentation submitted to Medicare for the same fiscal period of the Medicaid cost report being submitted.
3. Signed certification page (Worksheet S-1).
4. HHA Organizational Chart.

All cost reports must be submitted in an Excel workbook to [HHACostReports@dc.gov](mailto:HHACostReports@dc.gov) with the file name protocol "Provider Name FY2024 Cost report." Only electronic copies in the specified Excel format will be accepted, and no hard copies or flash drives will be accepted.

**Contact**

If you have questions, please contact Samuel Woldeghiorgis, Associate Director, Office of Rates, Reimbursement, and Financial Analysis, via phone at (202) 442-9240 or email at [samuel.woldeghiorgis@dc.gov](mailto:samuel.woldeghiorgis@dc.gov)

**cc:** DC Behavioral Health Association  
DC Coalition of Disability Service Providers  
DC Health Care Association  
DC Home Health Association  
DC Hospital Association  
DC Primary Care Association  
Medical Society of the District of Columbia