



3 West Road, Virks Building, Cranston, RI 02920

TO: Nursing Facility Administrators
FROM: Patricia Arruda, Chief of Strategic Planning, Monitoring, & Evaluation
DATE: February 11, 2025
SUBJECT: CY 2024 Medicaid Nursing Facility Cost Report

The CY 2024 Nursing Facility Medicaid Cost Report is due by May 30, 2025. All cost reports should be completed using the attached Excel template and updated Administrator's Scale. Copies of these files are also available on the [EOHHS nursing facility provider website](#). Please send completed cost report, along with the facility's most recently filed Medicare cost report, to OHHS.MedicaidFinance@ohhs.ri.gov. Confidential information and/or PHI must be transmitted securely.

Substantive Items

- Cost reports must reflect calendar year financials. The cost report no longer allows for alternative fiscal years to be used; This condition is unchanged from the prior year.
- Account 7442A, Insurance - Worker's Compensation has been added to Tab "Sch A_TB Adj".
- The Tab for the depreciation schedule is REQUIRED to be completed as configured by the state and submitted as part of the workbook. Different formats and separate submissions of the depreciation schedule will not be accepted.
- On the Tab for the Signature page of the workbook, all sections are to be completed and submitted as a part of the workbook. Separate submission of the workbook and the Signature page will NOT be acceptable
- Document Submission Checklist is no longer needed, nor are copies of tax invoices, resident personal needs allowance items (bond and certification), or financial statements. This condition is unchanged from the prior year.
- The Personal Needs Account Attestation is included in a tab in the Excel template, rather than in a separate document. This condition is unchanged from the prior year.

Facilities must retain appropriate backup and work papers for all worksheets in the cost report. This includes:

- Individual G/L account information.
- Worksheets/schedules reconciling G/L detail to the amount reported.
- Worksheets/schedules explaining any Accruals and Reversals.



- Worksheets/schedules detailing any Schedule A-1: Trial Balance Adjustments
- Rebates, Refunds, Credits.
- Audited financial statements. If the facility does not have audited financial statements, the facility must retain financial statements at highest level of assurance.

Please reach out to OHHS.MedicaidFinance@ohhs.ri.gov if you have questions regarding the completion and submission of the annual cost report.

