

Contact information

Name (First & Last required): _____

Organization's Name: _____

Is this a non-profit organization or State-funded agency? Yes No

Address: _____

Phone: _____

Email: _____

- Please note Noridian Healthcare Solutions utilizes HFS software to process cost reports.
- Below, please include as much of the Medicare Part A provider information as possible. For example, provider name, provider mailing address, provider Legacy or NPI number, Fiscal Year (FY) end, etc.

Requested Records – Cost Reports

Facility Information:	Year(s):	As Filed	Finalized
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Cost report information requests. Please check the appropriate items below.

PDF format MCR format

Requested Records – Other

Describe Records:

Additional Details or Instructions

Fees:

Fees may be assessed for processing your request and an invoice for those fees may be issued with our final response to you as set forth in **HHS Regulations 45 CFR Part 5**.

- If you have a dollar limit on how much you are at liberty to pay, please list that fee limit: _____.
- NOTE: If the cost to 1) search for the records you requested, 2) copy the records you requested and/or 3) review the records you requested is estimated to exceed your limit, Noridian staff will contact you to discuss before mailing the records or an invoice to you.
- If you set no limit, and if the cost to search, copy and/or review the records you requested exceeds \$250, Noridian staff will contact you to request that the amount of the estimated fees be provided to Noridian before we proceed with further processing of your request.

Submit