

**CHART E -- ACTUAL EXPENSES
RATING FACTORS 1, 2, 3 AND 5**

OMB Number: 2502-0261
Expiration Date: 07/31/2019

Select whether your agency is applying as an LHCA, or as an Intermediary/SHFA/MSO

| |
|---|
| <input type="checkbox"/> LHCA |
| <input type="checkbox"/> Intermediary, SHFA, or MSO |