



Registration and Quarterly Reporting of Temporary Health Care Services Agencies and
Health Care Technology Platforms

2024 Quarter 2 Data Report

Background

Part X of the Health and Mental Hygiene Fiscal Year 2023-2024 Budget introduced Article 29-K to the Public Health Law requiring registration of temporary health care service agencies and health care technology platforms with the New York State Department of Health. Temporary health care service agencies and health care technology platforms, referred to as “agencies” throughout, are defined as a person, firm, corporation, partnership, association, or other organization in the business of providing or procuring temporary employment of health care personnel for health care entities. Article 29-K requires agencies to file quarterly financial information with the Department of Health. The Department of Health is mandated to publish aggregate and de-identified quarterly report data on the Department’s website. Accordingly, this document provides an aggregate analysis of agencies’ registration and 2024 quarter 2 reporting data.

Executive Summary

- The Department registered 446 temporary health care service agencies in Year 1.
- The Department received 269 agency reports for quarter 2 (April 1 – June 30, 2024).
- In aggregate, agencies listed a total of 32,614 temporary health care staff placed in New York State health care entities.
- Health Care entities were billed \$605M for temporary services this quarter.
- Analysis of total pay to health care worker and total billed to health care facilities, by job category, found an average gross profit margin of 44%. Data suggest a higher profit margin for Registered Nurses (48%) and the lowest profit margin for physicians (26%).
- 65% of temporary workers reported a home residency in New York State.

Registration of Temporary Health Care Services Agencies and Health Care Technology Platforms

Any person, firm, corporation, partnership, association, or other organization, referred to as “agencies” throughout, in the business of providing or procuring temporary employment of health care personnel for health care entities must register with the Department of Health. Registrations issued by the Department of Health are effective from August 1 through July 31 annually, unless revoked or suspended. For Year 1, (August 1, 2023 through July 31, 2024) the Department of Health registered 446 agencies. The list of registered temporary health care services agencies can be found on the Department’s website – [LINK](#).

The statute requires agencies to submit a registration form, supplemental materials, and an annual fee of \$1,000 to receive a registration certificate. As outlined in statute, information collected on the registration form and supplemental materials include the following:

- a. Names and addresses of the controlling persons.

- b. Names and addresses of health care entities where the controlling persons or their family members have an ownership relationship and/or direct the management or policies of the agency.
- c. Demonstration of good moral character and ability to comply with all applicable state laws and regulations.
- d. The state of incorporation of the agency.
- e. The submission of all contracts between agency and each health care entity to which it assigns or refers health care personnel, and copies of all invoices.

To be eligible for registration as a Temporary Health Care Services Agency under Article 29-K, agencies must meet the following minimum standards as outlined on the registration form.

- a. Agency does not restrict employment opportunities of personnel and does not require the payment of liquidated damages, employment fees, or other compensation should personnel be hired as a permanent employee.
- b. Agency will retain all records related to health care personnel for six calendar years and make them available to the Department upon request.
- c. Agency will comply with any request made by the Department to examine records of the Agency, subpoena witnesses and documents, and make other investigations as is necessary.
- d. Agency shall appoint an administrator qualified by training, experience, or education to operate the Agency. Each separate Agency location shall have its own administrator. Administrator resumes must be submitted to the Department.
- e. Agency shall maintain a written agreement or contract with each health care entity and the rates to be charged by the temporary health care services agency will be included in the agreement/contract.
- f. Contracts shall identify the minimum licensing, training, and continuing education requirements for each assigned health care personnel.
- g. Any requirement for minimum advance notice to ensure prompt arrival of assigned health care personnel will be included in the contract.
- h. The maximum rates that can be billed or charged by the temporary health care services agency will be included in the contract.
- i. Procedures for notice from health care entities of failure of medical personnel to report to assignments will be included in the contract.
- j. Procedures for the investigation and resolution of complaints about the performance of the temporary health care services agency personnel will be included in the contract.
- k. Procedures for notice of actual or suspected abuse, theft, tampering or other diversion of controlled substances by medical personnel will be included in the contract.

A copy of the registration form can be found in Appendix 1.

Quarterly Reporting

Agencies must report a full disclosure of charges and compensation, including a schedule of hourly bill rates per category of health care personnel, a full description of administrative charges, and a schedule of rates of all compensation per category of health care personnel to the Department of Health each quarter.

As outlined in statute, schedule of rates of all compensation per category of health care personnel including but not limited to the following must be submitted to the Department of Health each quarter:

1. Hourly regular pay rate, shift differential, weekend differential, hazard pay, charge nurse add-on, overtime, holiday pay, travel or mileage pay, and any health or other fringe benefits provided.
2. The percentage of health care entity dollars the agency expended on personnel wages and benefits compared to their profits and other administrative costs.
3. List of the states and zip codes of health care personnels' primary residences.
4. Names of all health care entities they have contracted within New York State.
5. The number of health care personnel of the temporary health care services agency working at each entity.

A copy of the quarterly reporting file can be found in Appendix 2.

2024 Quarter 2 Results

The quarterly reporting information for the period of April 1, 2024, through June 30, 2024, from temporary health care services agencies and health care technology platforms was due to the Department of Health by August 31, 2024. Reports from 269 agencies were submitted to the Department. Of those, 239 reports were used in the analysis that follows, as 30 agencies were asked to update their data, but resubmissions were not received by deadline.

Entity Expenditures

Agencies are required to quarterly report the amounts billed to each health care entity by job category. As illustrated in Table 1, nearly 63% of billing was to hospitals, followed by 17% to skilled nursing entities, and 4% to diagnostic and treatment centers or their extension clinics, according to staffing agency reports.

Eleven percent of billing could not be attributed to a health care entity type as some agencies did not accurately identify the placement entity in the data collection instrument. However, the program is working with Information Technology Services on the development of data collection platform to alleviate this, and other, data collection limitations.

Table 1: Health Care Entity Expenditures by Entity Type

Entity Type	Amount	Percent	Article 28
Hospital	\$377,982,503	62.5%	Yes
Residential Health Care Entity – skilled nursing	\$102,546,072	17.0%	Yes
<i>Entity identification not entered</i>	\$67,614,965	11.2%	No
Diagnostic and Treatment Center, Ext Clinic	\$25,874,035	4.3%	No
Hospital Extension Clinic	\$15,389,467	2.5%	Yes
Primary Care Hospital - Critical Access Hospital	\$6,073,725	1.0%	Yes
Licensed Home Care Services Agency	\$3,113,316	0.5%	No
<i>All other entity types</i>	\$5,994,600	1.0%	No
Total	\$604,588,683	100%	

Entity types with less than 0.5% expenditures were collapsed to a single category, “All other entity types.” All other entity types included the following:

- Certified Home Health Agency (0.4% billing)
- Adult Home (0.2% billing)
- Mobile Hospital Extension Clinic (0.1% billing)
- Long Term Home Health Care Program (0.1% billing)
- Adult Day Health Care Program - Offsite (0.1% billing)
- School Based Hospital Extension Clinic (0.1% billing)
- Primary Care Hospital - Critical Access Hospital Extension Clinic (<0.1% billing)
- School Based Diagnostic and Treatment Center Extension Clinic (<0.1% billing)
- Off-Campus Emergency Department (<0.1% billing)
- Enriched Housing Program (<0.1% billing)
- Hospice (<0.1% billing)

Table 2 illustrates the top 15 hospitals billed the highest amount for temporary staff in the quarter, according to staffing agency reports. Facility names have been removed. Expenditures ranged from \$6 million to \$50 million. The reported average per bed expenditure ranged from just under \$7,000 to over \$60,000, according to staffing agency reports. For this quarter, a hospital located in the Central region of New York had the highest total expenditure with just over \$50 million, as well as the highest average per bed expenditure at over \$60,000, according to staffing agency reports.

Table 2. Top 15 Most Billed Hospitals

Region	Expenditure	Beds	Average Per Bed Expenditure	# Temps
Central	\$50,365,833	752	\$66,976	786
Finger Lakes	\$21,748,398	528	\$41,190	1,046
Finger Lakes	\$15,164,699	904	\$16,775	359
Capital	\$14,712,505	755	\$19,487	415
NYC	\$11,797,596	352	\$33,516	554
NYC	\$10,331,918	1039	\$9,944	267
Southern Tier	\$9,428,964	281	\$33,555	247
Mid-Hudson	\$7,463,422	128	\$58,308	211
Long Island	\$7,315,696	306	\$23,908	201
NYC	\$7,083,801	415	\$17,069	215
NYC	\$6,999,250	750	\$9,332	184
Finger Lakes	\$6,590,537	261	\$25,251	191
NYC	\$6,388,517	919	\$6,952	158
NYC	\$6,386,583	538	\$11,871	172
NYC	\$6,250,029	342	\$18,275	374

Note: Hospital names removed from report.

Table 3 illustrates the average per bed expenditures and total expenditures by region, according to agency reports. The average per bed expenditure was almost \$11,000. Total billing was just under \$378 million. Central and Finger Lakes regions have the highest average per bed rates, \$26,738 and \$20,140 respectively. The average per bed expenditures were lowest on Long Island and in the Western region \$2,861 and \$2,992 respectively. New York City accounted for the highest expenditure (over \$128 million), with an average per bed expenditure of approximately half the state average (\$5,827).

Table 3. Hospital Expenditures by Region

Region	Hospital Beds	Average Per Bed Expenditure	Total Expenditure
Central	2,521	\$26,738	\$67,407,162
Finger Lakes	2,863	\$20,140	\$57,659,998
Southern Tier	1,527	\$13,661	\$20,859,973
Mohawk Valley	976	\$13,420	\$13,097,781
Capital	2,834	\$9,509	\$26,948,177
North Country	951	\$8,096	\$7,699,365
NYC	22,017	\$5,827	\$128,283,135
Mid-Hudson	5,824	\$5,434	\$31,645,232
Western	2,980	\$2,992	\$8,915,833
Long Island	5,405	\$2,861	\$15,465,847
Total	47,898	\$10,868 (Avg)	\$377,982,503

Table 4 illustrates the reported nursing home average per bed expenditures and total expenditures by region, according to staffing agency reports. Across the regions, the average expenditure per bed was over \$1,000 and the total expenditure was approximately \$102 million. The North Country had a significantly higher average per bed expenditure, \$5,517, compared to other regions. The average per bed expenditures were lowest on Long Island and in Western New York, \$633 and \$793 respectively. Despite New York City accounting for the highest expenditure at over \$43 million (42% of total billing), the average per bed expenditure (\$1,137) was below the statewide average (\$1,190).

Table 4. Nursing Home Expenditures by Region

Region	Nursing Beds	Average Per Bed Expenditure	Total Expenditure
North Country	1,245	\$5,517	\$6,868,631
Finger Lakes	5,500	\$1,842	\$10,133,685
Mohawk Valley	2,357	\$1,797	\$4,235,531
Capital	5,332	\$1,329	\$7,087,532
Mid-Hudson	9,954	\$1,228	\$12,226,124
Southern Tier	3,505	\$1,174	\$4,115,574
NYC	37,996	\$1,137	\$43,193,515
Central	3,513	\$933	\$3,276,347
Western	4,987	\$793	\$3,956,512
Long Island	11,760	\$633	\$7,447,704
Total	86,149	\$1,190 (Avg)	\$102,541,155

Temporary Workers – Total Pay to Worker and Total Billing of Health Care Entity

Agencies are required to provide quarterly data on temporary health care workers. Table 5 illustrates the reported total pay to temporary health care workers and the reported total billing of the health care entities, by job category.

The reported total pay to temporary health care workers and total billing of health care entities is directed at hiring nurses - specifically, Registered Nurses. Almost \$200 million, or 59% of the total pay, to temporary workers, is focused on temporary Registered Nurses, according to agency reports. Moreover, almost \$400 million of total reported billing (63%) of health care entities is focused on temporary Registered Nurses, according to agency reports. The average gross profit margin for the job category, Registered Nurse, is 48%, second highest after Certified Registered Nurse Anesthetists at 57%. The Physician category is reported to have 7% of total pay and 5% of total billing. This category has the lowest percent gross profit (26%) compared to other job categories.

Table 5. Agency Pay to Worker and Bill to Health Care Facility by Job Category

Job Category	Total Pay to All Workers	% of Total Pay	Total Billing to All Facilities	Percent of Total Billing	Gross Profit Margin %
Registered Nurse	\$197,717,700	59%	\$378,773,550	63%	48%
<i>Other - not listed</i>	\$46,765,597	14%	\$86,158,386	14%	46%
Licensed Practical Nurse	\$27,711,906	8%	\$39,950,500	7%	31%
Physician	\$23,737,301	7%	\$32,272,691	5%	26%
Certified Nurse Assistant	\$21,824,393	6%	\$31,760,140	5%	31%
Cert Nurse Anesthetist	\$6,239,990	2%	\$14,657,211	2%	57%
<i>All other categories</i>	\$12,966,486	4%	21016205	3%	38%
Total	\$336,963,373	100%	\$604,588,683	100%	44% (avg)

“All other job categories”, comprised the remaining 3.5% of total billing and included the following:

- Physical Therapists 1%
- Radiologists 1%
- Direct Support Professionals 0.8%
- Occupational Therapists 0.7%

Shifting the focus of the analysis to temporary staffing within hospitals, Table 6 shows the pay and bill rate of nurses working in hospitals. Registered Nurses are paid the most per hour (\$51/hour) and have the highest gross profit margin (45%) compared to Licensed Practical Nurses and Certified Nurse Assistants.

Table 6. Hospital Pay and Bill Rate by Nurse Job Category

Nurse Type	Pay Rate Per hour	Bill Rate Per Hour	Gross Profit Margin %
Registered Nurse	\$51	\$93	45%
Licensed Practical Nurse	\$37	\$55	32%
Certified Nurse Assistant	\$24	\$35	31%

Table 7 shows the reported pay of Registered Nurses working in hospitals by region. As illustrated, the Central region is reported to have the highest average pay per hour (\$69) and the highest bill rate (\$116). In comparison, the North Country and Southern Tier are reported to have the lowest average pay per hour (\$41). While, on Long Island, the gross profit margin at 34% is reported as the lowest among the ten regions.

Table 7. Registered Nurse Pay and Hospital Billing Rates by Region

Region	Pay	Bill Rate Per Hour	Gross Profit Margin %
Central	\$68.61	\$116.48	41%
Long Island	\$53.52	\$81.30	34%
Western	\$51.83	\$93.43	45%
Finger Lakes	\$50.83	\$87.39	42%
Mohawk Valley	\$45.71	\$83.76	45%
New York City	\$45.42	\$101.13	55%
Mid-Hudson	\$45.21	\$100.78	55%
Capital	\$43.89	\$84.30	48%
Southern Tier	\$41.07	\$88.23	53%
North Country	\$41.04	\$85.46	52%
Average	\$51.67	\$112.57	54%

Temporary Workers - Home Location and Primary Work Location

Aggregate quarter 2 data found 32,614 temporary workers listed with home residency data. Findings suggest that nearly two out of every three temporary workers (65%) have a home residence in New York State, whereas out-of-state workers represented 35%.

Analysis of home residence with primary work location was available for only 20,912 workers. As illustrated in Table 8, Florida and New Jersey were the leading states for out-of-state zip codes for temporary workers' home residences (7% and 5% respectively).

Table 8. Home Residence – United States

State	Total	Percent
New York	21,256	65%
Florida	2,406	7%
New Jersey	1,717	5%
Pennsylvania	1,137	4%
Connecticut	1,088	3%
Texas	899	3%
Georgia	796	2%
<i>All others (<5%)</i>	3,315	10%
Total	32,614	100%

As illustrated in Table 9, temporary workers with reported international home addresses spanning across 25 countries. The majority of international workers with addresses from Philippines (46%) and Canada (34%).

Table 9. Home Residence – International

Country	Total	Percent
Philippines	255	46.0%
Canada	189	34.1%
Haiti	21	3.8%
Thailand	20	3.6%
India	15	2.7%
Jamaica	11	2.0%
<i>All others (<2%)</i>	43	7.8%
Total	554	100%

Temporary Workers – New York State Commute from Home to Work

Of temporary health care workers with a reported home zip code in New York State, a majority were commuting less than 25 miles to their primary work location. Over a third traveled 10 miles or less (37%) and approximately 60% traveled 25 miles or less between home zip code and primary work location. Just over a quarter (27%) were traveling over 50 miles. The average miles reported was 41 miles with a median distance traveled of 14 miles. Of note, just over three-quarters of all New York State temporary workers – reportedly - traveled less than 50 miles to their primary work location.

Table 10. Distance from Home Zip Code to Health Care Entity

Distance to Entity	# Workers	Percent
0-10 miles	7,765	37.1%
10-25 miles	4,884	23.4%
25-50 miles	2,612	12.5%
50-100 miles	3,164	15.1%
Over 100 miles	2,487	11.9%
Total	20,912	100%
Mean	41 miles	
Median	14 miles	

Table 11 shows reported temporary worker commuting distances from their home zip codes to their primary work locations, organized by region. More than half of the reported temporary workers with a New York City home zip code are traveling 10 miles or less to the primary work location (54%). In contrast, only 3% of temporary workers with a North Country home zip code traveled 10 miles or less. North Country residents are more likely to be traveling 50 miles or greater.

Table 11. Distance from Home Zip Code to Health Care Entity by Region

Region	0-10 Miles	10-25 Miles	25-50 Miles	50-100 Miles	100+ Miles
Capital	223 (16%)	446 (31%)	193 (13%)	206 (14%)	370 (26%)
Central	309 (25%)	212 (17%)	179 (15%)	348 (28%)	183 (15%)
Finger Lakes	733 (31%)	245 (10%)	375 (16%)	724 (30%)	300 (13%)
Long Island	427 (33%)	469 (37%)	223 (17%)	96 (8%)	61 (5%)
Mid-Hudson	338 (19%)	800 (45%)	378 (21%)	178 (10%)	99 (6%)
Mohawk Valley	35 (5%)	111 (16%)	160 (23%)	240 (34%)	165 (23%)
North Country	6 (3%)	15 (7%)	22 (11%)	90 (43%)	76 (36%)
NYC	5417 (54%)	2017 (20%)	835 (8%)	863 (9%)	955 (9%)
Southern Tier	119 (16%)	105 (14%)	116 (16%)	236 (32%)	158 (22%)
Western	158 (15%)	464 (44%)	131 (12%)	183 (17%)	120 (11%)

Figure 1 illustrates distance to work among temporary health care workers with home zip codes reported by region, excluding New York City.

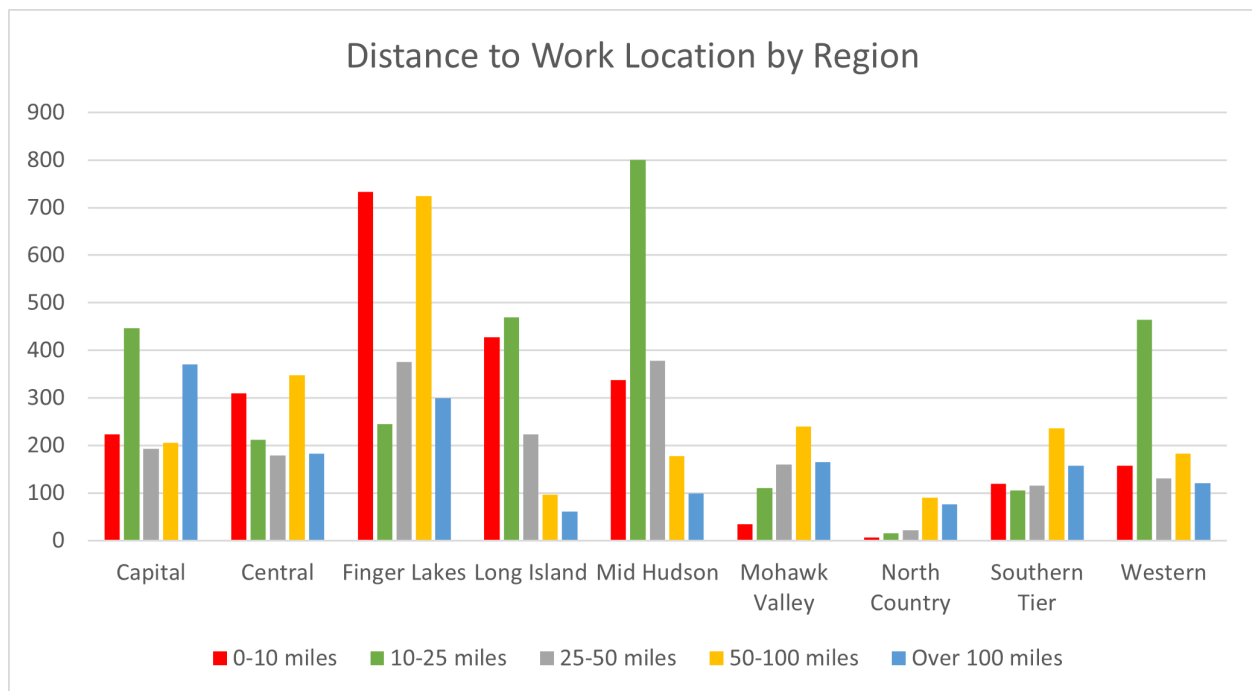


Figure 1. Distance to Work by Region

Figure 2 illustrates temporary health care workers' commute by reported regional home zip code.

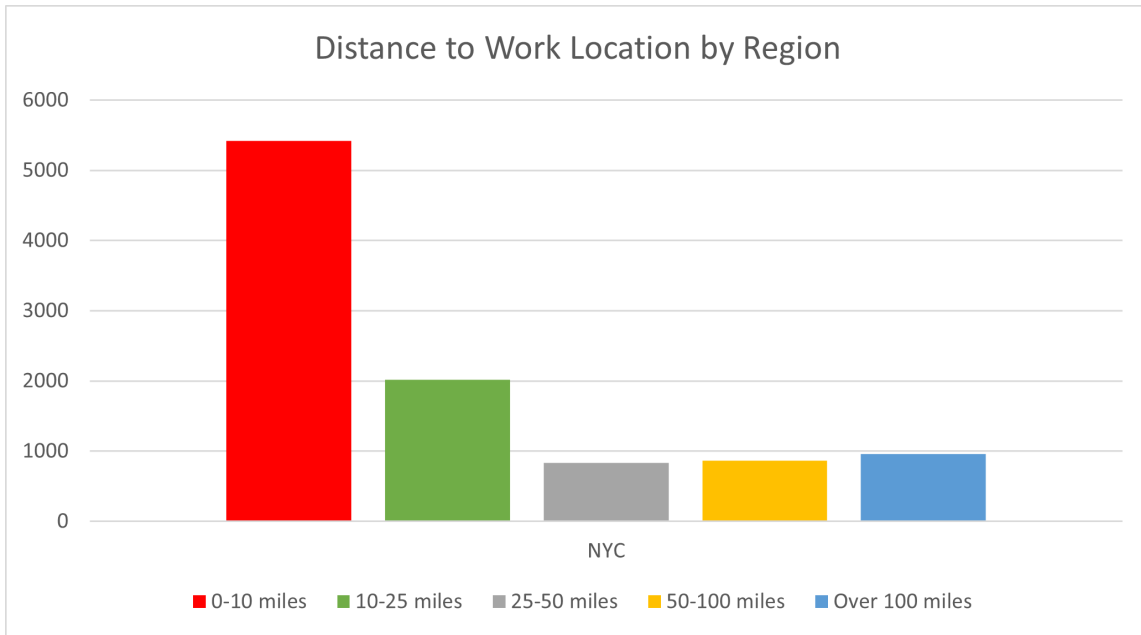


Figure 2. Distance to Work in NYC Region

Appendix 1. Registration Form

**Registration of Temporary Health Care Services Agencies and Health Care Technology Platforms
Registration and Renewal Form**

Instructions: Print and complete this form then mail it, along with a check or money order for \$1,000 payable to "New York State Department of Health," to

Office of Health Care Workforce Innovation
New York State Department of Health
Empire State Plaza, Corning Tower, Room 1695
Albany, NY 12237

Identify name on the check _____ Identify check # _____

In addition to this mail-in Registration Form, each temporary health care services agency and platform, hereinafter "**Agency**," is required to electronically submit four appendices for registration. Those appendices, along with their instructions, can be found on the Department's website: https://www.health.ny.gov/facilities/staffing_agency/.

A. This is an application for:

- New Registration or
- Registration Renewal, Agency ID# _____

B. Identify the name and address of the Agency headquarters.

Agency Name _____ Agency FEIN _____

Address _____

City _____ State _____ ZIP _____ Telephone _____

State of incorporation or organization _____ or Not Applicable

C. Identify the controlling person(s) for the Agency.

- | | |
|---------------|-------------|
| 1. Name _____ | Title _____ |
| 2. Name _____ | Title _____ |
| 3. Name _____ | Title _____ |

(If necessary, identify additional controlling person(s) on a separate sheet.)

D. Identify each health care entity ("entity") owned or managed by controlling person(s) or their family members.

1. Entity Name _____ PFI _____

Name of Controlling Person _____ or Family Member _____

The relationship between the Temp Agency Controlling Person/Family Member and the Health Care Entity is (select one)

- Ownership
- Management

2. Entity Name _____ PFI _____

Name of Controlling Person _____ or Family Member _____

The relationship between the Temp Agency Controlling Person/Family Member and the Health Care Entity is (select one)

- Ownership
- Management

(If necessary, identify additional health care entities and relationships on a separate sheet.)

E. Instructions: Please mark the check box next to each item to confirm the Agency meets the minimum requirement to be eligible for registration as a Temporary Health Care Services Agency under Article 29-K of the New York State public health law.

1. The Agency shall document that each health care personnel referred to, provided to, or contracted with health care entities currently meets the minimum licensing, training, and continuing education standards for the position in which the health care personnel will be working.	
2. Agency does not restrict employment opportunities of personnel and does not require the payment of liquidated damages, employment fees, or other compensation should personnel be hired as a permanent employee.	
3. Agency shall retain all records related to health care personnel for six calendar years and make them available to the Department upon request.	
4. Agency will comply with any request made by Department to examine records of the Agency, subpoena witnesses and documents, and make other investigations as is necessary.	
5. Agency shall appoint an administrator qualified by training, experience, or education to operate the Agency. Each separate Agency location shall have its own administrator.	
6. Agency shall maintain a written agreement or contract with each health care entity and the rates to be charged by the temporary health care services agency will be included in the agreement/contract.	
7. Contracts shall identify the minimum licensing, training, and continuing education requirements for each assigned health care personnel.	
8. Any requirement for minimum advance notice to ensure prompt arrival of assigned health care personnel will be included in the contract.	
9. The maximum rates that can be billed or charged by the temporary health care services agency will be included in the contract.	
10. Procedures for notice from health care entities of failure of medical personnel to report to assignments will be included in the contract.	
11. Procedures for the investigation and resolution of complaints about the performance of the temporary health care services agency personnel will be included in the contract.	
12. Procedures for notice of actual or suspected abuse, theft, tampering or other diversion of controlled substances by medical personnel will be included in the contract.	
13. The types and qualifications of health care personnel available for assignment through the temporary health care services agency will be included in the contract.	

F. Attestation: Consistent with Article 29-K of the Public Health Law (“Registration of Temporary Health Care Services Agencies and Health Care Technology Platforms”), the individual authorized by the above-named Agency to submit this form attests that the information submitted is true, accurate, and complete to the best of their knowledge. The information collected will be used to register the agency as a temporary health care services agency in New York State.

I understand that any falsification, omission, or concealment of information may subject the above-named agency and/or its controlling person(s) to administrative, civil, or criminal liability, penalties, and/or fines.

Name _____ Title _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Signature _____ Date _____

Appendix 2. 2024 Quarter 2 Reporting Instrument

Agency Tab

Quarterly Report Checklist:

Please complete the information on this worksheet and also on these 4 subsequent worksheets:

Tab 1. Wages paid to personnel, and amounts billed to health care entity, by job category and location.

Tab 2. Revenue and Expenses.

Tab 3. Locations of residence and work.

Tab 4. International personnel data.

You may email TempAgencyRegistration@health.ny.gov if you need assistance completing the workbook.

Please enter your agency name in the cell below:

Select Report Quarter

April-June

Please enter your DOH agency ID (TAXXX) in the cell below:

Please enter the name of the person submitting this report below:

Please enter the email of the person submitting this report below:

Please enter the telephone number of the person submitting this report below:

VMS Answer

Is this a Vendor Management System (VMS) business?

Tab 1. Wages and Billing

Provide quarterly information for all health care personnel defined as: nurses, certified nurse aides, and licensed or unlicensed direct care staff provide by the temporary health care services agency to provide temporary services in a health care entity (aka health care facility). Use the drop-down boxes where provided or the workbook will not be accepted.

Column A. Select the health care entity from the dropdown box. To reduce the number of selections in the dropdown box or to search for a specific name, enter a few letters of the entity name and press enter. You can use Excel's fill handle for multiple entries at the same facility. You may also refer to the "Health Care Entity PFI List" tab to see the full list of Health Care Entities.

Column B. Select the job category from the dropdown box. You may select "other" if the specific job title, or a similar job title, is not on the list.

Column C. Enter the total number of personnel in the entity and job category identified in Columns A and B.

Column D. Select the pay type from the dropdown list. Employer paid health insurance premiums can be entered as "other fringe benefits".

Column E. Enter the total number of hours worked for the pay type in Column D. Enter 0 for pay types that are not calculated by the hour: travel related expenses, lodging and meal per diem, and other fringe benefits.

Column F: Enter the total amount paid or expected to be paid to personnel for the hours worked in Column E. Please do not enter a zero or hourly rate.

Column G: Enter the total billed or expected to be billed to the healthcare entity for this job category and pay type for the hours worked reported in Column E. If no hours are reported in Column E, enter the total billed or expected to be billed to the healthcare facility to cover the expenditures incurred in Column F. Please do not enter a zero or hourly rate.

Health Care Entity	Job Category	Total Employees in Category	Pay Type or Benefit	Total Hours	Total Employee Pay or Benefit	Total Billed to Health Care Entity

Tab 3. U.S. Location Data

Instructions: To meet minimum standards for registration, temporary health care services agencies must report quarterly to the department a list of the states and ZIP codes of their health care personnels' primary residences. Please use the dropdown boxes where provided.

Columns A and B: Select the State and enter the ZIP code associated with the primary residence for each individual that worked in a health care entity in New York State during the quarter.

Column C: Select the county for the individual's primary work location. E.g., if the individual worked at Richmond University Medical Center, select Richmond County. If an employee worked in multiple counties, enter the work location where the employee spent most of their time during the quarter.

Column D: Select a job category from the drop-down list.

Primary Residence - State	ZIP code of Residence	Primary Work Location - County in NYS	Job Category

Tab 4. International

Instructions: Enter the location information for individuals whose **home residence is outside of the United States**, e.g., persons with Form I-9, H-1B worker status.

Column A: Select the home country outside the United States of each individual from the dropdown list.

Column B: Select the individual's primary work county from the dropdown list. The primary work location is where the employee spent most of their time during the quarter.

Column C: Select job category from the dropdown list. You may select "other" if the specific job category, or a similar category, is not on the list.

Home Country	Primary Work Location County in NYS	Job Category