



HOME HEALTH AGENCY START UP QUESTIONNAIRE

1. Agency name
2. Agency address
3. Agency phone number
4. Agency fax number
5. Agency email address
6. Provide the employee names, position, salary, and number of hours worked at each position
7. Itemize start up cost (equipment, insurance, etc.) and identify if these amounts will reduce your current cash available
8. List the agency rent amount and lease terms.
9. Explanation of how you expect to recruit patients and estimate of patient volume once licensed.
10. What is your direct service? Will other services be contracted out?
11. Identify the amount of cash on hand. Is it currently in the bank and available?
12. Identify the owners and percentage owned.
13. Are any of the owners skilled (for example Therapists or Nurses)?



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14. Have you developed a business plan?

15. Which types of payers will you accept (ex. private insurance, HMO, Medicare, Medicaid)

16. Please identify the person completing this form and list contact information.

Once complete, please email this form to snopes@yahoo.com or fax it to 727-279-2851. Feel free to call Doug at 727-244-5978 with any questions. Thank you.