

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM 10-Q

QUARTERLY REPORT PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934

For the quarterly period ended March 28, 2004

OR

TRANSITION REPORT PURSUANT TO SECTION 13 OR 15 (d) OF THE SECURITIES EXCHANGE ACT OF 1934

For the transition period from _____ to _____

Commission File No. 1-15669

Gentiva Health Services, Inc.

(Exact name of registrant as specified in its charter)

Delaware
(State or other jurisdiction of
incorporation or organization)

36-4335801
(I.R.S. Employer
Identification No.)

3 Huntington Quadrangle, Suite 200S, Melville, NY 11747-4627
(Address of principal executive offices) (Zip Code)

Registrant's telephone number, including area code: (631) 501-7000

Indicate by check mark whether the registrant (1) has filed all reports required to be filed by Section 13 or 15(d) of the Securities Exchange Act of 1934 during the preceding 12 months (or for such shorter period that the registrant was required to file such reports), and (2) has been subject to such filing requirements for the past 90 days.

Yes No

Indicate by check mark whether the registrant is an accelerated filer (as defined in Rule 12b-2 of the Exchange Act).

Yes No

The number of shares outstanding of the registrant's Common Stock, as of April 28, 2004, was 25,268,741.

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PART I – FINANCIAL INFORMATION

Item 1. Financial Statements

Gentiva Health Services, Inc. and Subsidiaries
Consolidated Balance Sheets
(In thousands, except share amounts)
(Unaudited)

	March 28, 2004	December 28, 2003
ASSETS		
Current assets:		
Cash, cash equivalents and restricted cash	\$ 111,110	\$ 100,013
Short-term investments	-	10,000
Receivables, less allowance for doubtful accounts of \$8,523 and \$7,936 in 2004 and 2003, respectively	138,127	132,998
Deferred tax assets	22,311	26,464
Prepaid expenses and other current assets	8,275	6,524
Total current assets	279,823	275,999
Fixed assets, net	18,082	15,135
Deferred tax assets, net	27,006	28,025
Other assets	16,447	15,929
Total assets	\$ 341,358	\$ 335,088
LIABILITIES AND SHAREHOLDERS' EQUITY		
Current liabilities:		
Accounts payable	\$ 19,559	\$ 16,079
Payroll and related taxes	12,120	12,932
Medicare liabilities	13,178	12,736
Cost of claims incurred but not reported	27,897	28,525
Obligations under insurance programs	36,708	37,200
Other accrued expenses	30,473	32,230
Total current liabilities	139,935	139,702
Other liabilities	19,805	18,207
Shareholders' equity:		
Common stock, \$.10 par value; authorized 100,000,000 shares; issued and outstanding 25,309,160 and 25,598,301 shares in 2004 and 2003, respectively	2,531	2,560
Additional paid-in capital	265,706	270,468
Accumulated deficit	(86,619)	(95,849)
Total shareholders' equity	181,618	177,179
Total liabilities and shareholders' equity	\$ 341,358	\$ 335,088

See notes to consolidated financial statements.

Gentiva Health Services, Inc. and Subsidiaries
Consolidated Statements of Income
(In thousands, except per share amounts)
(Unaudited)

	Three Months Ended	
	March 28, 2004	March 30, 2003
Net revenues	\$ 213,905	\$ 202,016
Cost of services sold	130,643	133,250
Gross profit	83,262	68,766
Selling, general and administrative expenses	(66,369)	(61,253)
Depreciation and amortization	(1,845)	(1,745)
Operating income	15,048	5,768
Interest income, net	82	43
Income before income taxes	15,130	5,811
Income tax expense	5,900	610
Net income	<u>\$ 9,230</u>	<u>\$ 5,201</u>
Net income per common share:		
Basic	<u>\$ 0.36</u>	<u>\$ 0.19</u>
Diluted	<u>\$ 0.34</u>	<u>\$ 0.19</u>
Weighted average shares outstanding:		
Basic	<u>25,542</u>	<u>26,696</u>
Diluted	<u>27,084</u>	<u>27,752</u>

See notes to consolidated financial statements.

Gentiva Health Services, Inc. and Subsidiaries
Consolidated Statements of Cash Flows
(In thousands)
(Unaudited)

	Three Months Ended	
	March 28, 2004	March 30, 2003
OPERATING ACTIVITIES:		
Net income	\$ 9,230	\$ 5,201
Adjustments to reconcile net income to net cash provided by operating activities		
Depreciation and amortization	1,845	1,745
Provision for doubtful accounts	2,047	2,031
Gain on sale / disposal of businesses and fixed assets	-	(191)
Deferred income tax expense	5,172	-
Changes in assets and liabilities, net of acquisitions/divestitures		
Accounts receivable	(7,176)	(5,359)
Prepaid expenses and other current assets	(1,743)	3,723
Current liabilities	(8)	518
Other, net	(13)	(5)
Net cash provided by operating activities	9,354	7,663
INVESTING ACTIVITIES:		
Purchase of fixed assets	(3,370)	(2,487)
Proceeds from sale of assets / business	-	200
Acquisition of businesses	-	(1,300)
Purchase of short-term investments	-	(10,000)
Maturities of short-term investments	10,000	-
Net cash provided by (used in) investing activities	6,630	(13,587)
FINANCING ACTIVITIES:		
Proceeds from issuance of common stock	1,039	714
Repurchases of common stock	(5,830)	-
Repayment of capital lease obligations	(96)	-
Net cash (used in) provided by financing activities	(4,887)	714
Net change in cash, cash equivalents and restricted cash	11,097	(5,210)
Cash, cash equivalents and restricted cash at beginning of period	100,013	101,241
Cash, cash equivalents and restricted cash at end of period	\$ 111,110	\$ 96,031
Supplemental Schedule of Non Cash Investing and Financing Activities		
Fixed assets acquired under capital lease	\$ 1,443	\$ -

See notes to consolidated financial statements.

Gentiva Health Services, Inc. and Subsidiaries
Notes to Consolidated Financial Statements
(Unaudited)

1. Background and Basis of Presentation

Gentiva Health Services, Inc. (“Gentiva” or the “Company”) provides home health services throughout most of the United States principally through its Gentiva[®] Health Services and CareCentrix[®] brands (“Home Health Services business”).

The accompanying interim consolidated financial statements are unaudited, but have been prepared by Gentiva pursuant to the rules and regulations of the Securities and Exchange Commission and, in the opinion of management, include all adjustments necessary for a fair presentation of results of operations, financial position and cash flows for each period presented. Results for interim periods are not necessarily indicative of results for a full year. The year-end balance sheet data was derived from audited financial statements, but does not include all disclosures required by accounting principles generally accepted in the United States of America.

2. New Accounting Standards

In January 2003, the Financial Accounting Standards Board (“FASB”) issued Interpretation No. 46, “Consolidation of Variable Interest Entities,” as revised in December 2003 (“FIN 46”). FIN 46 provides guidance on the identification of entities for which control is achieved through means other than through voting rights, known as “variable interest entities” (“VIEs”), and requires a VIE to be consolidated by a company if that company is subject to a majority of the risk of loss from the VIE’s activities or entitled to receive a majority of the entity’s residual returns or both. Historically, entities generally were not consolidated unless the entity was controlled through voting interests. FIN 46 also requires disclosures about VIEs that a company is not required to consolidate but in which it has a significant variable interest. The consolidation requirements of FIN 46 will apply to VIEs as of March 28, 2004 for the Company. As of March 28, 2004, the Company did not have any VIE subject to the consolidation requirements of FIN 46.

3. Medicare Revenues

Medicare revenues for the first quarter of fiscal 2004 included approximately \$9 million received in settlement of the Company’s appeal filed with the U.S. Provider Reimbursement Review Board (“PRRB”) related to the reopening of all of its 1997 cost reports (see Note 9), net of a revenue adjustment of \$1 million to reflect an estimated repayment to Medicare in connection with services rendered to certain patients since the inception of the Prospective Payment Reimbursement System (“PPS”) in October 2000. The Centers for Medicare & Medicaid Services has recently determined that homecare providers should have received lower reimbursements for certain services rendered to beneficiaries discharged from inpatient hospitals within fourteen days immediately preceding admission to home healthcare.

4. Earnings Per Share

Basic and diluted earnings per share for each period presented has been computed by dividing net income by the weighted average number of shares outstanding for each respective period. The computations of the basic and diluted per share amounts were as follows (in thousands, except per share amounts):

	Three Months Ended	
	March 28, 2004	March 30, 2003
Net income	\$ 9,230	\$ 5,201
Basic weighted average common shares outstanding	25,542	26,696
Shares issuable upon the assumed exercise of stock options and in connection with the employee stock purchase plan using the treasury stock method	1,542	1,056
Diluted weighted average common shares outstanding	27,084	27,752
Net income per common share:		
Basic	\$ 0.36	\$ 0.19
Diluted	\$ 0.34	\$ 0.19

5. Acquisition

Acquisition of First Home Care Business

On March 28, 2003, the Company completed the purchase of certain assets and the business of First Home Care - Houston, Inc. and FHCH, Inc. pursuant to an asset purchase agreement for cash consideration of \$1.3 million. The purchase price allocation consisted of goodwill of \$1.2 million and assets and other intangibles of \$0.1 million.

6. Revolving Credit Facility, Restricted Cash and Debt

The Company's credit facility, which was entered into on June 13, 2002, as amended, as described below, provides up to \$55 million in borrowings, including up to \$40 million which is available for letters of credit. The Company may borrow up to a maximum of 80 percent of the net amount of eligible accounts receivable, as defined, less any reasonable and customary reserves, as defined, required by the lender. Borrowing availability under the credit facility was reduced by \$10 million until such quarter in 2003 in which the trailing 12 month EBITDA, excluding certain restructuring costs and special charges, as defined, exceeded \$15 million. As of March 30, 2003, the trailing 12 month EBITDA threshold was achieved and the availability restriction lifted, effective June 1, 2003.

At the Company's option, the interest rate on borrowings under the credit facility was based on the London Interbank Offered Rates (LIBOR) plus 3.25 percent or the lender's prime rate plus 1.25 percent. In addition, the Company was required to pay a fee equal to 2.5 percent per annum of the aggregate face amount of outstanding letters of credit. Beginning in 2003, the applicable margins for the LIBOR borrowing, prime rate borrowing and letter of credit fees decreased by 0.25 percent to 3.0 percent, 1.0 percent, and 2.25 percent, respectively, provided that the Company's trailing 12 month EBITDA, excluding certain restructuring costs and special charges, as defined, is in excess of \$20 million. The Company was also subject to an unused line fee equal to 0.50 percent per annum of the average daily difference between the total revolving credit facility amount and the total outstanding borrowings and letters of credit. Beginning in 2003, the unused credit line fee decreased to 0.375 percent provided the minimum EBITDA target described above is achieved. The higher margins and fees are subject to reinstatement in the event that the Company's trailing 12 month EBITDA falls below \$20 million. The Company met this minimum EBITDA requirement as of March 30, 2003, with the rate reduction effective June 1, 2003, and continued to meet this requirement as of March 28, 2004.

The credit facility, which expires in June 2006, includes certain covenants requiring the Company to maintain a minimum tangible net worth of \$101.6 million, minimum EBITDA, as defined, and a minimum fixed charge coverage ratio, as defined. Other covenants in the credit facility include limitation on mergers, consolidations, acquisitions, indebtedness, liens, distributions including dividends, capital expenditures, stock repurchases and dispositions of assets and other limitations with respect to the Company's operations. On August 7, 2003, the Company's credit facility was amended to make covenants relating to acquisitions and stock repurchases less restrictive, provided that the Company maintains minimum excess aggregate liquidity, as defined in the amendment, equal to at least \$60 million and to allow for the disposition of certain assets. As of March 28, 2004, the Company was in compliance with the covenants in the credit facility, as amended.

The credit facility further provides that if the agreement is terminated for any reason, the Company must pay an early termination fee equal to \$275,000 if the facility is terminated during the period from June 13, 2003 to June 12, 2004 and \$137,500 if the facility is terminated from June 13, 2004 to June 12, 2005. There is no fee for termination of the facility subsequent to June 12, 2005. Loans under the credit facility are collateralized by all of the Company's tangible and intangible personal property, other than equipment.

Total outstanding letters of credit were approximately \$20.7 million as of March 28, 2004 and \$20.8 million at December 28, 2003. The letters of credit, which expire one year from date of issuance, were issued to guarantee payments under the Company's workers compensation program and for certain other commitments. There were no borrowings outstanding under the credit facility as of March 28, 2004.

The Company has entered into a trust agreement and segregated \$21.8 million of cash funds in a trust account for use as collateral under the Company's insurance programs. These funds are reported as restricted cash in the accompanying consolidated balance sheets. Interest on the funds in the trust account accrues to the Company. The Company, at its option,

may access the cash funds in the trust account by providing equivalent amounts of alternative security, including letters of credit and surety bonds.

During the first quarter of fiscal 2004, the Company commenced implementation of a five year capital lease for certain equipment. The Company reported capital lease assets of approximately \$1.4 million in fixed assets, net, current obligation of capital leases of \$0.3 million in other accrued expenses and long-term capital lease obligations of \$1.1 million in other liabilities, in the accompanying consolidated balance sheet as of March 28, 2004.

7. Shareholders' Equity

Changes in shareholders' equity for the three months ended March 28, 2004 were as follows (in thousands):

	<u>Common Stock</u>	<u>Additional Paid-in Capital</u>	<u>Accumulated Deficit</u>	<u>Total</u>
Balance at December 28, 2003	\$ 2,560	\$270,468	\$ (95,849)	\$ 177,179
Comprehensive income:				
Net income	-	-	9,230	9,230
Issuance of stock upon exercise of stock options and under stock plans for employees and directors (139,106 shares)	14	1,025	-	1,039
Repurchase of common stock at cost (428,247 shares)	<u>(43)</u>	<u>(5,787)</u>	<u>-</u>	<u>(5,830)</u>
Balance at March 28, 2004	<u>\$ 2,531</u>	<u>\$265,706</u>	<u>\$ (86,619)</u>	<u>\$ 181,618</u>

Comprehensive income amounted to \$9.2 million and \$5.2 million for the first quarter of fiscal 2004 and fiscal 2003, respectively.

On May 16, 2003 and August 7, 2003, the Company's Board of Directors authorized two stock repurchase programs under which the Company could repurchase and formally retire up to an aggregate of 2,500,000 shares of its outstanding common stock. The repurchases will occur periodically in the open market or through privately negotiated transactions based on market conditions and other factors. As of July 23, 2003, the Company had completed the purchase of 1,000,000 shares authorized under the first stock repurchase program. During the first quarter of fiscal 2004, the Company repurchased 428,247 shares of its outstanding common stock at an average cost of \$13.61 per share and a total cost of approximately \$5.8 million. As of March 28, 2004, the Company had repurchased an aggregate of 1,866,711 shares at an average cost of \$10.85 per share and a total cost of approximately \$20.3 million.

8. Stock Options

The Company has chosen to adopt the disclosure only provisions of Statement of Financial Accounting Standards ("SFAS") No. 123, "Accounting for Stock-Based Compensation" ("SFAS 123"), as amended by SFAS No. 148, "Accounting for Stock-Based Compensa-

tion – Transition and Disclosure – an amendment of FASB Statement No. 123” (“SFAS 148”), and continues to account for stock-based compensation using the intrinsic value method prescribed in Accounting Principles Board (“APB”) Opinion No. 25, “Accounting for Stock Issued to Employees” (“APB 25”), and related interpretations. Under this approach, the imputed cost of stock option grants and discounts offered under the Company’s Employee Stock Purchase Plan (“ESPP”) is disclosed, based on the vesting provisions of the individual grants, but not charged to expense.

The weighted average fair values of the Company’s stock options granted during the first quarter of fiscal 2004 and fiscal 2003, calculated using the Black-Scholes option-pricing model, and other assumptions are as follows:

	Three Months Ended	
	March 28, 2004	March 30, 2003
Risk-free interest rate	3.36%	3.51%
Expected volatility	60%	60%
Expected life	6 years	6 years
Contractual life	10 years	10 years
Expected dividend yield	0%	0%
Weighted average fair value of options granted	\$ 7.63	\$ 5.24

Pro forma compensation expense is calculated for the fair value of the employee’s purchase rights under the ESPP, using the Black-Scholes model. Assumptions for the first quarter of fiscal 2004 and fiscal 2003 are as follows:

	Three Months Ended	
	March 28, 2004	March 30, 2003
Risk-free interest rate	1.02%	1.25%
Expected volatility	28%	32%
Expected life	0.5 years	0.5 years
Expected dividend yield	0%	0%

The following table presents net income and basic and diluted income per common share had the Company elected to recognize compensation cost based on the fair value at the grant dates for stock option awards and discounts for stock purchases under the Company’s ESPP, consistent with the method prescribed by SFAS 123, as amended by SFAS 148 (in thousands, except per share amounts):

	Three Months Ended	
	March 28, 2004	March 30, 2003
Net income - as reported	\$ 9,230	\$ 5,201
Deduct: Total stock-based compensation expense determined under fair value based method for all awards, net of tax	(695)	(565)
Net income - pro forma	<u>\$ 8,535</u>	<u>\$ 4,636</u>
Basic income per share - as reported	\$ 0.36	\$ 0.19
Basic income per share - pro forma	\$ 0.33	\$ 0.17
Diluted income per share - as reported	\$ 0.34	\$ 0.19
Diluted income per share - pro forma	\$ 0.32	\$ 0.17

During the first quarter of fiscal 2004, the Company granted 1,022,100 stock options to officers, directors and employees under its existing option plans at an average exercise price of \$12.93. At March 28, 2004, there were 3,658,429 options outstanding at a weighted average exercise price of \$8.16 per share.

9. Legal Matters

Litigation

In addition to the matters referenced in this Note 9, the Company is party to certain legal actions arising in the ordinary course of business, including legal actions arising out of services rendered by its various operations, personal injury and employment disputes.

Cooper v. Gentiva CareCentrix, Inc. t/a/d/b/a/ Gentiva Health Services, U.S. District Court (W.D. Penn), Civil Action No. 01-0508. On January 2, 2002, this amended complaint was served on the Company alleging that the defendant submitted false claims to the government for payment in violation of the Federal False Claims Act, 31 U.S.C. 3729 et seq., and that the defendant had wrongfully terminated the plaintiff. The plaintiff claimed that infusion pumps delivered to patients did not supply the full amount of medication, allegedly resulting in substandard care. Based on a review of the court's docket sheet, the plaintiff filed a complaint under seal in March 2001. In October 2001, the United States government filed a notice with the court declining to intervene in this matter, and on October 24, 2001, the court ordered that the seal be lifted. The Company filed its responsive pleading on February 25, 2002, and discovery has now commenced. The Company has denied the allegations of wrongdoing in the complaint and is defending itself vigorously in this matter. On May 19, 2003, the Company filed a motion for summary judgment on the issue of liability. On February 6, 2004, the court granted partial summary judgment for the Company, dismissing two of the three claims alleged under the False Claims Act and denying summary judgment for the Company on the wrongful termination claim. The parties are completing discovery; therefore, the Company cannot determine a range of damages, if any, at this time.

Government Matters

PRRB Appeal

Prior to October 1, 2000, reimbursement of Medicare home care nursing services was based on reasonable, allowable costs incurred in providing services to eligible beneficiaries subject to both per visit and per beneficiary limits in accordance with the Interim Payment System established through the Balanced Budget Act of 1997. These costs were reported in annual cost reports, which were filed with the Centers for Medicare & Medicaid Services (“CMS”), and were subject to audit by the fiscal intermediary engaged by CMS. In connection with the audit of the Company’s 1997 cost reports, the Medicare fiscal intermediary made certain audit adjustments related to the methodology used by the Company to allocate a portion of its residual overhead costs. The Company filed cost reports for years subsequent to 1997 using the fiscal intermediary’s methodology. The Company believed its methodology used to allocate such overhead costs was accurate and consistent with past practice accepted by the fiscal intermediary; as such, the Company filed appeals with the Provider Reimbursement Review Board (“PRRB”) concerning this issue with respect to cost reports for the years 1997, 1998 and 1999. The Company’s consolidated financial statements for the years 1997, 1998 and 1999 had reflected use of the methodology mandated by the fiscal intermediary.

In June 2003, the Company and its Medicare fiscal intermediary signed an Administrative Resolution relating to the issues covered by the appeals pending before the PRRB. Under the terms of the Administrative Resolution, the fiscal intermediary agreed to reopen and adjust the Company’s cost reports for the years 1997, 1998 and 1999 using a modified version of the methodology used by the Company prior to 1997. This modified methodology will also be applied to cost reports for the year 2000, which are currently under audit. The Administrative Resolution required that the process to (i) reopen all 1997 cost reports, (ii) determine the adjustments to allowable costs through the issuance of Notices of Program Reimbursement (“NPRs”) and (iii) make appropriate payments to the Company, be completed in early 2004. Cost reports relating to years subsequent to 1997 will be reopened after the process for the 1997 cost reports is completed.

On February 17, 2004, the fiscal intermediary notified the Company that it had completed the reopening of all 1997 cost reports and determined that the adjustment to allowable costs for that year was \$9.0 million. As of March 28, 2004, the Company had received the funds and recorded the adjustment of \$9.0 million as net revenues for the first quarter of fiscal 2004.

Although the Company believes that it will likely recover additional funds as a result of applying the modified methodology discussed above to cost reports subsequent to 1997, the settlement amounts cannot be specifically determined until the reopening or audit of each year’s cost reports is completed. This is not expected to occur until the second half of fiscal 2004 or fiscal 2005. However, in view of changes in reimbursement and the Company’s operations in periods subsequent to 1997, it is likely that any future recoveries relating to any cost report year from 1998 to 2000 will be significantly less than the 1997 settlement.

Subpoena

On April 17, 2003, the Company received a subpoena from the Department of Health and Human Services, Office of the Inspector General, Office of Investigations (“OIG”). The subpoena seeks information regarding the Company’s implementation of settlements and corporate integrity agreements entered into with the government, as well as, the Company’s treatment on cost reports of employees engaged in sales and marketing efforts. With respect to the cost report issues, the government has preliminarily agreed to narrow the scope of production to the period from January 1, 1998 through September 30, 2000. On February 17, 2004, the Company received a subpoena from the U.S. Department of Justice (“DOJ”) seeking additional information related to the matters covered by the OIG subpoena. The Company has provided documents and other information requested by the OIG pursuant to its subpoena and similarly intends to cooperate fully with the DOJ subpoena, as well as any future OIG or DOJ information requests. To the Company’s knowledge, the government has not filed a complaint against the Company.

Indemnifications

Gentiva became an independent, publicly owned company on March 15, 2000, when the common stock of the Company was issued to the stockholders of Olsten Corporation, a Delaware corporation (“Olsten”), the former parent corporation of the Company (the “Split-Off”). In connection with the Split-Off, the Company agreed to assume, to the extent permitted by law, and to indemnify Olsten for, the liabilities, if any, arising out of the home health services business.

In addition, the Company and Accredo Health, Incorporated (“Accredo”) have agreed to indemnify each other for breaches of representations and warranties of such party or the non-fulfillment of any covenant or agreement of such party in connection with the sale of the Company’s Specialty Pharmaceutical Services (“SPS”) business to Accredo on June 13, 2002. The Company has also agreed to indemnify Accredo for the retained liabilities and for tax liabilities and Accredo has agreed to indemnify the Company for assumed liabilities and the operation of the SPS business after the closing of the acquisition. The representations and warranties generally survive for the period of two years after the closing of the acquisition, which occurred on June 13, 2002, except that:

- representations and warranties related to health care compliance survive for three years after the closing of the acquisition;
- representations and warranties related to title of the assets and sufficiency of assets and employees survive for the applicable statute of limitations period; and
- representations and warranties related to tax matters survive until thirty days after the expiration of the applicable tax statute of limitations period, including any extensions of the applicable period, subject to certain exceptions.

Accredo and the Company generally may recover indemnification for a breach of a representation or warranty only to the extent a party’s claim exceeds \$1 million for any individual claim, or exceeds \$5 million in the aggregate, subject to certain conditions and only up to a maximum amount of \$100 million.

These indemnification rights are the exclusive remedy from and after the closing of the acquisition, except for the right to seek specific performance of any of the agreements in the related asset purchase agreement, in any case where a party is guilty of fraud in connection with the acquisition, and with respect to tax liabilities and obligations.

On May 6, 2003, the Company received correspondence from Accredo giving the Company notice of Accredo's indemnification rights for any breach under the asset purchase agreement related to the adequacy of the accounts receivable reserves in accordance with section 8.3 of the asset purchase agreement; however, no breach of a representation or warranty was asserted against the Company in the correspondence.

10. Income Taxes

The Company recorded federal and state income taxes of approximately \$5.9 million for the first quarter ended March 28, 2004, of which \$0.7 million represented a current provision and \$5.2 million represented a deferred tax provision. The difference between the federal statutory income tax rate and the Company's effective tax rate of 39 percent is due primarily to state taxes.

State income taxes and federal alternative minimum taxes of \$0.6 million were recorded for the first quarter of fiscal 2003. The Company's effective tax rate of approximately 10.5 percent was lower than the statutory income tax rate due to the impact of a valuation allowance offsetting the realization of tax benefits associated with the net operating loss carry-forward and other deferred tax assets.

Deferred tax assets and deferred tax liabilities were as follows (in thousands):

	Three Months Ended	
	March 28, 2004	December 28, 2003
Deferred tax assets - current		
Reserves and allowances	\$ 20,921	\$ 21,290
Net operating loss and other carryforwards (Federal and state)	998	4,966
Other	392	208
Total current deferred tax assets	<u>22,311</u>	<u>26,464</u>
Deferred tax assets - non-current		
Intangible assets	28,264	29,085
Depreciation	81	23
Capitalized software	(1,339)	(1,083)
Total non-current deferred tax assets (net)	<u>27,006</u>	<u>28,025</u>
Net deferred tax assets	<u>\$ 49,317</u>	<u>\$ 54,489</u>

As of March 28, 2004, the Company's tax credit carryforwards for income tax purposes were approximately \$1.0 million. Net operating losses of approximately \$11 million were utilized in the first quarter of fiscal 2004 to offset taxable income.

11. Subsequent Event

On March 30, 2004, the Company sold its minority interest in a home care nursing services business in Canada. The business had been acquired as partial consideration for the sale of the Company's Canadian operations in the fourth quarter of fiscal 2000. In connection with the sale of the minority interest, the Company received cash proceeds of \$4.1 million and will record a gain on sale of approximately \$0.9 million in the second quarter of fiscal 2004.

Item 2. Management's Discussion and Analysis of Financial Condition and Results of Operations

Forward-looking Statements

Certain statements contained in this Quarterly Report on Form 10-Q, including, without limitation, statements containing the words "believes," "anticipates," "intends," "expects," "assumes," "trends" and similar expressions, constitute "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995. Forward-looking statements are based upon the Company's current plans, expectations and projections about future events. However, such statements involve known and unknown risks, uncertainties and other factors that may cause the actual results, performance or achievements of the Company to be materially different from any future results, performance or achievements expressed or implied by such forward-looking statements. Such factors include, among others, the following:

- general economic and business conditions;
- demographic changes;
- changes in, or failure to comply with, existing governmental regulations;
- legislative proposals for health care reform;
- changes in Medicare and Medicaid reimbursement levels;
- effects of competition in the markets the Company operates in;
- liability and other claims asserted against the Company;
- ability to attract and retain qualified personnel;
- availability and terms of capital;
- loss of significant contracts or reduction in revenue associated with major payor sources;
- ability of customers to pay for services;
- a material shift in utilization within capitated agreements; and
- changes in estimates and judgments associated with critical accounting policies.

Forward-looking statements are found throughout "Management's Discussion and Analysis of Financial Condition and Results of Operations" and elsewhere in this Quarterly Report on Form 10-Q. The reader should not place undue reliance on forward-looking statements, which speak only as of the date of this report. Except as required under the federal securities laws and the rules and regulations of the Securities and Exchange Commission ("SEC"), the Company does not have any intention or obligation to publicly release any revisions to forward-looking statements to reflect unforeseen or other events after the date of this

report. The Company has provided a detailed discussion of risk factors in its 2003 Annual Report on Form 10-K and various filings with the SEC. The reader is encouraged to review these risk factors and filings.

The following discussion and analysis provides information which management believes is relevant to an assessment and understanding of the Company's results of operations and financial position. This discussion and analysis should be read in conjunction with the Company's consolidated financial statements and related notes included elsewhere in this report.

General

The Company's results of operations are impacted by various regulations and other matters that are implemented from time to time in its industry, some of which are described in the Company's Annual Report on Form 10-K for the fiscal year ended December 28, 2003 and in other filings with the SEC.

For a discussion of the Company's critical accounting policies, please refer to Note 2 of Notes to Consolidated Financial Statements in the Company's 2003 Annual Report on Form 10-K.

Overview

Gentiva is the nation's largest provider of comprehensive home health services, based on the amount of revenues derived from the provision of skilled home nursing services to patients. The Company generates revenues and profits primarily by providing patients with direct home health care services, including specialty services and neuro-rehabilitation services; by delivering national, regional and local administrative services to managed care organizations and self-insured employers; and by providing home health care consulting services to independent and hospital-based home health agencies.

Gentiva's direct home health services to patients include skilled nursing; physical, occupational, speech and neuro-rehabilitation therapy services; social work; nutrition; disease management education and help with daily living activities, as well as other therapies and services. The Company's specialty services involve physical therapist-led orthopedic rehabilitation services for patients who have had joint replacements or other major orthopedic surgery, and therapies for patients with balance issues who are prone to injury or immobility as a result of falling. Gentiva is also piloting similar specialty programs for cardiopulmonary and wound care services that are expected to be launched during 2004. The Company's neuro-rehabilitation services, known as Rehab Without Walls[®], provide home and community-based therapies for patients with traumatic brain injury, cerebrovascular accident injury and acquired brain injury, as well as a number of other complex rehabilitation cases.

Gentiva's national, regional and local administrative services for managed care organizations and self-insured employers -- provided through its CareCentrix[®] business unit -- include central access, care coordination, utilization management, and claims processing. The Company is capable of coordinating a wide range of home care services, including traditional

home nursing, chronic and acute infusion therapies, and durable medical and respiratory equipment, to member patients of these managed care organizations.

Consulting services to home health agencies are delivered primarily by the Company's Gentiva Business Services unit. These services include billing and collection activities, web-based caregiver training and credentialing, on-site agency support and consulting, operational support, and individualized strategies for reduction of days sales outstanding.

The Company's services can be delivered across the United States 24 hours a day, 7 days a week. Direct home health services to patients are delivered through more than 350 owned and operated direct service delivery units in approximately 250 locations in 35 states. Administrative services for managed care organizations and self-insured employers are coordinated within four regional coordination centers. Home care services provided to member patients of these organizations are delivered through Company-owned and third-party credentialed provider locations covering the continental United States.

Results of Operations

Revenues

Net revenues increased by \$11.9 million, or 5.9 percent to \$213.9 million for the quarter ended March 28, 2004 as compared to the quarter ended March 30, 2003. Revenue growth in the first quarter of fiscal 2004 was reported in Medicare, while revenue from Medicaid and Other Government and Commercial Insurance and Other payor categories decreased in the first quarter of fiscal 2004.

For the quarter ended March 28, 2004 as compared to the quarter ended March 30, 2003, net revenues from Medicare increased by \$20.0 million or 47.1 percent to \$62.6 million, Commercial Insurance and Other payors decreased by \$5.0 million or 4.2 percent to \$112.1 million, and Medicaid and Other Government payors decreased by \$3.2 million or 7.5 percent to \$39.2 million.

Medicare revenues were impacted by two special items which contributed \$8.0 million, or 18.8 percent of the Medicare revenue growth, in the first quarter of fiscal 2004. The special items represented (i) approximately \$9 million received in settlement of the Company's appeal filed with the PRRB related to the reopening of all of its 1997 cost reports and (ii) a revenue adjustment of \$1 million to reflect the estimated repayment to Medicare in connection with services rendered to certain patients since the inception of the Prospective Payment Reimbursement System in October 2000. The Centers for Medicare & Medicaid Services has recently determined that homecare providers should have received lower reimbursements for certain services rendered to beneficiaries discharged from inpatient hospitals within fourteen days immediately preceding admission to home healthcare.

Medicare revenue growth for the first quarter of fiscal 2004 was also fueled by increases in admissions of approximately 20 percent, the 3.3 percent market basket rate increase that became effective for patients on service on or after October 1, 2003, as well as various operational and clinical process enhancements. The market basket rate increase represented \$1.4 million in incremental revenue in the first quarter of fiscal 2004.

Commercial Insurance and Other revenues decreased \$5.0 million or 4.2 percent for the first quarter of 2004, primarily due to a decline in revenue derived from CIGNA Health Corporation (“CIGNA”). The CIGNA revenue decline of \$12.3 million, or 16.0 percent, compared to the first quarter of fiscal 2003, was caused by a reduction in the number of enrolled CIGNA members in 2004, and lower revenue and related costs resulting from a change in the Company’s delivery model of certain home medical equipment (“HME”) products and services. The revenue decrease was partially offset by an increase of \$7.3 million, or 18.1 percent, in non-CIGNA, Commercial Insurance and Other revenue driven by unit volume and pricing increases from existing business, as well as new contracts signed during the past year.

Medicaid and Other Government revenues decreased for the three months ended March 28, 2004 due to revenue reductions related to more restrictive eligibility requirements, lower authorized services per beneficiary and lower reimbursement rates in various states in which the Company operates, as well as the Company’s decision to reduce its participation in certain low-margin, hourly Medicaid and state and county programs. Revenues relating to hourly and intermittent care Medicaid and state and county programs decreased \$2.7 million and \$0.5 million, respectively, as compared to the first quarter of fiscal year 2003.

Gross Profit

Gross profit was approximately \$83.3 million for the first quarter ended March 28, 2004 and \$68.8 million for the quarter ended March 30, 2003. As a percentage of net revenues, gross profit margins increased from 34.0 percent for the quarter ended March 30, 2003, to 38.9 percent for the quarter ended March 28, 2004.

During the first quarter of fiscal 2004, the two special items had a net positive impact of 2.3 percent on gross profit margins. The remaining increase in gross margin percentage was due to improved rates in both Medicare and managed care contracts, as well as a favorable change in business mix in which volume growth of Medicare business more than offset the anticipated revenue loss in certain low-margin Medicaid and local government programs, as well as in the CIGNA business.

Selling, General and Administrative Expenses

Selling, general and administrative expenses, including depreciation and amortization, increased \$5.2 million to \$68.2 million for the quarter ended March 28, 2004, as compared to \$63.0 million for the quarter ended March 30, 2003.

The increase for the first quarter of fiscal 2004 related to (i) increases in field operating and administrative costs to service incremental revenues, including revenues from the Company’s specialty programs (\$2.6 million), (ii) increased sales and clinical care coordination expenses (\$1.1 million) and (iii) incremental costs associated with the retooling of the Company’s CareCentrix network of HME providers and various information technology strategic initiatives (\$1.5 million).

Interest Income, Net

Net interest income was approximately \$0.1 million for the quarter ended March 28, 2004, and \$43 thousand for the quarter ended March 30, 2003. Net interest income included interest income of approximately \$0.4 million for the first quarter of fiscal 2004 and \$0.3 million for the first quarter of fiscal 2003, partially offset by fees relating to the revolving credit facility and outstanding letters of credit.

Income Taxes

The Company recorded federal and state income taxes of approximately \$5.9 million for the first quarter ended March 28, 2004, of which \$0.7 million represented a current provision and \$5.2 million represented a deferred tax provision. The difference between the federal statutory income tax rate and the Company's effective tax rate of 39 percent is due primarily to state taxes.

State income taxes and federal alternative minimum taxes of \$0.6 million were recorded for the first quarter of fiscal 2003. The Company's effective tax rate of approximately 10.5 percent was lower than the statutory income tax rate due to the impact of a valuation allowance offsetting the realization of tax benefits associated with the net operating loss carry-forward and other deferred tax assets.

Net Income

For the first quarter of fiscal 2004, net income was \$9.2 million, or \$0.34 per diluted share, compared with net income of \$5.2 million, or \$0.19 per diluted share, for the corresponding period of 2003. Net income for the first quarter of fiscal 2004 included two special items related to Medicare, noted in the Revenues section above, which had a net positive impact of \$4.9 million, or \$0.18 per diluted share. Net income for the first quarter of fiscal 2003 reflected the positive impact of a lower effective income tax rate of 10.5 percent.

Liquidity and Capital Resources

Liquidity

The Company's principal source of liquidity is the collection of its accounts receivable. For healthcare services, the Company grants credit without collateral to its patients, most of whom are insured under third party commercial or governmental payor arrangements. Net cash provided by operating activities for the quarter ended March 28, 2004 was \$9.4 million and was used to fund capital expenditures of \$3.4 million and repurchase shares of the Company's common stock of \$5.8 million during the quarter.

Days Sales Outstanding ("DSO") as of March 28, 2004 remained flat from December 28, 2003 at 59 days. Working capital at March 28, 2004 was approximately \$140 million, an increase of \$4 million as compared to approximately \$136 million at December 28, 2003, primarily due to:

- a \$1 million increase in cash, cash equivalents, restricted cash and investments;
- a \$5 million increase in accounts receivable;
- a \$2 million increase in prepaid expenses and other assets; and
- a \$4 million decrease in deferred tax assets.

The Company participates in the Medicare, Medicaid and other federal and state healthcare programs. Revenue mix by major payor classifications are as follows:

	Three Months Ended	
	March 28, 2004	March 30, 2003
Medicare	29%	21%
Medicaid and Other Government	18	21
Commercial Insurance and Other	53	58
	<u>100%</u>	<u>100%</u>

On October 1, 2003, a 3.3 percent market basket rate increase became effective for patients on service on or after October 1, 2003. Effective April 1, 2004, this increase was reduced by 0.8 percent to 2.5 percent for open episodes of care on or after April 1, 2004. In addition, Medicare reimbursement was increased 5 percent for the rural add-on related to home health services performed in specifically defined rural areas of the country, effective April 1, 2004. These two reimbursement changes are not expected to have a material effect on Company results for the remainder of 2004.

There are certain standards and regulations that the Company must adhere to in order to continue to participate in these programs, including compliance with the Company's corporate integrity agreement. As part of these standards and regulations, the Company is subject to periodic audits, examinations and investigations conducted by, or at the direction of, governmental investigatory and oversight agencies. Periodic and random audits conducted or directed by these agencies could result in a delay or adjustment to the amount of reimbursements received under these programs. Violation of the applicable federal and state health care regulations can result in the Company's exclusion from participating in these programs and can subject the Company to substantial civil and/or criminal penalties. The Company believes it is currently in compliance with these standards and regulations.

The Company is party to a contract with CIGNA, pursuant to which the Company provides or contracts with third party providers to provide home nursing services, acute and chronic infusion therapies, durable medical equipment, and respiratory products and services to patients insured by CIGNA. For the first quarter of fiscal 2004, CIGNA accounted for approximately 30 percent of the Company's total net revenues compared to approximately 38 percent for the first quarter of fiscal 2003. The Company has extended its relationship with CIGNA by entering into a new national home health care contract, effective January 1, 2004. The term of the new contract extends to December 31, 2006, and automatically renews thereafter for additional one year terms unless terminated. Under the termination provisions, CIGNA has the right to terminate the agreement on December 31, 2005 if it provides 90 days

advance written notice to the Company, and each party has the right to terminate at the end of each term thereafter by providing at least 90 days advance written notice prior to the start of the new term. If CIGNA chose to terminate or not renew the contract, or to significantly modify its use of the Company's services, there could be a material adverse effect on the Company's cash flow.

Net revenues generated under capitated agreements with managed care payors were approximately 12 percent of total net revenues for the first quarter of fiscal 2004 and 16 percent for the first quarter of fiscal 2003. Fee-for-service contracts with other commercial payors are traditionally one year in term and renewable automatically on an annual basis, unless terminated by either party.

The Company's credit facility, which was amended on August 7, 2003 as described below, provides up to \$55 million in borrowings, including up to \$40 million which is available for letters of credit. The Company may borrow up to a maximum of 80 percent of the net amount of eligible accounts receivable, as defined, less any reasonable and customary reserves, as defined, required by the lender. Borrowing availability under the credit facility was reduced by \$10 million until such quarter in 2003 in which the trailing 12 month EBITDA, excluding certain restructuring costs and special charges recorded by the Company during fiscal 2002, as defined, exceeded \$15 million. As of March 30, 2003, the trailing 12 months EBITDA threshold was achieved and the availability restriction lifted, effective June 1, 2003.

At the Company's option, the interest rate on borrowings under the credit facility was based on the London Interbank Offered Rates (LIBOR) plus 3.25 percent or the lender's prime rate plus 1.25 percent. In addition, the Company was required to pay a fee equal to 2.5 percent per annum of the aggregate face amount of outstanding letters of credit. Beginning in 2003, the applicable margins for the LIBOR borrowing, prime rate borrowing and letter of credit fees decreased by 0.25 percent to 3.0 percent, 1.0 percent, and 2.25 percent, respectively, provided that the Company's trailing 12 month EBITDA, excluding certain restructuring costs and special charges, as defined, is in excess of \$20 million. The Company was also subject to an unused line fee equal to 0.50 percent per annum of the average daily difference between the total revolving credit facility amount, as defined, and the total outstanding borrowings and letters of credit. Beginning in 2003, the unused credit line fee decreased to 0.375 percent provided the minimum EBITDA target described above is achieved. The higher margins and fees are subject to reinstatement in the event that the Company's trailing 12 month EBITDA falls below \$20 million. The Company met this minimum EBITDA requirement as of March 30, 2003, with the rate reduction effective June 1, 2003 and continued to meet this requirement as of March 28, 2004.

Total outstanding letters of credit were \$20.7 million as of March 28, 2004. The letters of credit, which expire one year from date of issuance, were issued to guarantee payments under the Company's workers compensation program and for certain other commitments. As of March 28, 2004, there were no borrowings outstanding under the credit facility and the Company had borrowing capacity under the credit facility, after adjusting for outstanding letters of credit, of approximately \$34 million.

The credit facility, which expires in June 2006, includes certain covenants requiring the Company to maintain a minimum tangible net worth of \$101.6 million, minimum

EBITDA, as defined, and a minimum fixed charge coverage ratio, as defined. Other covenants in the credit facility include limitation on mergers, consolidations, acquisitions, indebtedness, liens, distributions including dividends, capital expenditures, stock repurchases and dispositions of assets and other limitations with respect to the Company's operations. On August 7, 2003, the credit facility was amended to make covenants relating to acquisitions and stock repurchases less restrictive, provided that the Company maintains minimum excess aggregate liquidity, as defined in the amendment, equal to at least \$60 million and to allow for the disposition of certain assets. As of March 28, 2004, the Company was in compliance with the covenants in the credit facility, as amended.

The credit facility further provides that if the agreement is terminated for any reason, the Company must pay an early termination fee equal to \$275,000 if the facility is terminated during the period from June 13, 2003 to June 12, 2004 and \$137,500 if the facility is terminated from June 13, 2004 to June 12, 2005. There is no fee for termination of the facility subsequent to June 12, 2005. Loans under the credit facility are collateralized by all of the Company's tangible and intangible personal property, other than equipment.

The credit facility includes provisions, which, if not complied with, could require early payment by the Company. These include customary default events, such as failure to comply with financial covenants, insolvency events, non-payment of scheduled payments, acceleration of other financial obligations and change in control provisions. In addition, these provisions include an account obligor, whose accounts are more than 25 percent of all accounts of the Company over the previous 12-month period, canceling or failing to renew its contract with the Company and ceasing to recognize the Company as an approved provider of health care services, or the Company revoking the lending agent's control over its governmental lockbox accounts. The Company does not have any trigger events in the credit facility that are tied to changes in its credit rating or stock price. As of March 28, 2004, the Company was in compliance with these provisions.

The Company may be subject to workers compensation claims and lawsuits alleging negligence or other similar legal claims. The Company maintains various insurance programs to cover this risk but is substantially self-insured for most of these claims. The Company recognizes its obligations associated with these programs in the period the claim is incurred. The Company estimates the cost of both reported claims and claims incurred but not reported, up to specified deductible limits, based on its own specific historical claims experience and current enrollment statistics, industry statistics and other information. Such estimates and the resulting reserves are reviewed and updated periodically.

The Company is responsible for the cost of individual workers compensation claims and individual professional liability claims up to \$500,000 per incident which occurred prior to March 15, 2002 and \$1,000,000 per incident thereafter. The Company also maintains excess liability coverage relating to professional liability and casualty claims which provides insurance coverage for individual claims of up to \$25,000,000 in excess of the underlying coverage limits. Payments under the Company's workers compensation program are guaranteed by letters of credit and segregated restricted cash balances.

Capital Expenditures

The Company's capital expenditures for the three months ended March 28, 2004 were \$3.4 million, excluding equipment capitalized under capital lease obligations of \$1.4 million, as compared to \$2.5 million for the same period in fiscal 2003. The Company intends to make investments and other expenditures to, among other things, upgrade its computer technology and system infrastructure and comply with regulatory changes in the industry. In this regard, management expects that capital expenditures for fiscal 2004 will range between \$12.0 million and \$13.5 million. Management expects that the Company's capital expenditure needs will be met through operating cash flow and available cash reserves.

Cash Resources and Obligations

The Company had cash, cash equivalents and restricted cash of approximately \$111.1 million as of March 28, 2004. The restricted cash relates to cash funds of \$21.8 million that have been segregated in a trust account to provide additional collateral under the Company's insurance programs. Interest on the funds in the trust account accrues to the Company. The Company, at its option, may access the cash funds in the trust account by providing equivalent amounts of alternative security, including letters of credit and surety bonds.

The Company anticipates that repayments to Medicare for partial episode payments and prior year cost report settlements will be made periodically through June 2005. These amounts are reflected as Medicare liabilities in the accompanying consolidated balance sheets.

On May 16, 2003 and August 7, 2003, the Company's Board of Directors authorized two stock repurchase programs under which the Company could repurchase and formally retire up to an aggregate of 2,500,000 shares of its outstanding common stock. The repurchases will occur periodically in the open market or through privately negotiated transactions based on market conditions and other factors. As of July 23, 2003, the Company had completed the purchase of 1,000,000 shares authorized under the first stock repurchase program. During the first quarter of fiscal 2004, the Company repurchased 428,247 shares of its outstanding common stock at an average cost of \$13.61 per share and a total cost of approximately \$5.8 million. As of March 28, 2004, the Company had repurchased an aggregate of 1,866,711 shares at an average cost of \$10.85 per share and a total cost of approximately \$20.3 million. See also Part II, Item 2, of this Form 10-Q.

Contractual Obligations and Commercial Commitments

At March 28, 2004, the Company had no long-term debt. During the first quarter of fiscal 2004, the Company commenced implementation of a five year capital lease for equipment. Under the terms of the lease the Company capitalized the equipment at its fair market value of approximately \$1.4 million, which approximates the present value of the minimum lease payments. Future minimum rental commitments for all non-cancelable leases and purchase obligations at March 28, 2004, are as follows (in thousands):

<u>Contractual Obligations</u>	<u>Payment due by period</u>				
	<u>Total</u>	<u>Less than 1 year</u>	<u>1-3 years</u>	<u>4-5 years</u>	<u>More than 5 years</u>
Long-term debt obligations	\$ -	\$ -	\$ -	\$ -	\$ -
Capital lease obligations	1,348	264	570	514	-
Operating lease obligations	60,452	19,463	26,085	9,580	5,324
Purchase obligations	505	505	-	-	-
Total	<u>\$ 62,305</u>	<u>\$ 20,232</u>	<u>\$ 26,655</u>	<u>\$ 10,094</u>	<u>\$ 5,324</u>

The Company had total letters of credit outstanding under its credit facility of approximately \$20.7 million at March 28, 2004 and \$20.8 million at December 28, 2003. The letters of credit, which expire one year from date of issuance, are issued to guarantee payments under the Company's workers compensation program and for certain other commitments. The Company has the option to renew these letters of credit or set aside cash funds in a segregated account to satisfy the Company's obligations, as further discussed above under the caption "Cash Resources and Obligations".

The Company has no other off-balance sheet arrangements and has not entered into any transactions involving unconsolidated, limited purpose entities or commodity contracts.

Management expects that the Company's working capital needs for fiscal 2004 will be met through operating cash flow and its existing cash balances. The Company may also consider other alternative uses of cash including, among other things, acquisitions, additional share repurchases and cash dividends. These uses of cash would require the approval of the Company's Board of Directors and may require the approval of its lender. If cash flows from operations, cash resources or availability under the credit facility fall below expectations, the Company may be forced to delay planned capital expenditures, reduce operating expenses, seek additional financing or consider alternatives designed to enhance liquidity.

Item 3. Quantitative and Qualitative Disclosures About Market Risk

Generally, the fair market value of fixed rate debt will increase as interest rates fall and decrease as interest rates rise. The Company had no interest rate exposure on fixed rate debt or other market risk at March 28, 2004.

Item 4. Controls and Procedures

Evaluation of disclosure controls and procedures.

The Company's Chief Executive Officer and Chief Financial Officer have evaluated the effectiveness of the design and operation of the Company's disclosure controls and procedures (as defined in the Securities Exchange Act of 1934 ("Exchange Act") Rule 13a-15(e)) as of the end of the period covered by this report. Based on that evaluation, the Company's Chief Executive Officer and Chief Financial Officer have concluded that the Company's disclosure controls and procedures are adequate and effective to ensure that information required to be disclosed by the Company in reports that it files or submits under the Exchange Act is recorded, processed, summarized and reported within required time periods.

Changes in internal control over financial reporting.

As required by the Exchange Act Rule 13a-15(d), the Company's Chief Executive Officer and Chief Financial Officer evaluated the Company's internal control over financial reporting to determine whether any change occurred during the quarter ended March 28, 2004 that has materially affected, or is reasonably likely to materially affect, the Company's internal control over financial reporting. Based on that evaluation, there has been no such change during such quarter.

PART II - OTHER INFORMATION

Item 1. Legal Proceedings

See Note 9 to the consolidated financial statements included in this report for a description of legal matters and pending legal proceedings, which description is incorporated herein by reference.

Item 2. Changes in Securities, Use of Proceeds and Issuer Purchases of Equity Securities

(e) Issuer Purchases of Equity Securities (1)

<u>Period</u>	<u>(a) Total Number of Shares Purchased</u>	<u>(b) Average Price Paid per Share</u>	<u>(c) Total Number of Shares Purchased as Part of Publicly Announced Plans or Programs</u>	<u>(d) Maximum Number of Shares that May Yet be Purchased Under the Plans or Programs</u>
January (12/29/03 - 1/25/04)	92,747	\$ 12.96	92,747	968,789
February (1/26/04 - 2/22/04)	106,400	\$ 12.61	106,400	862,389
March (2/23/04 - 3/28/04)	229,100	\$ 14.34	229,100	633,289
Total	<u>428,247</u>	<u>\$ 13.61</u>	<u>428,247</u>	

(1) On August 7, 2003, the Company announced that its Board of Directors had authorized the repurchase of up to 1,500,000 shares of its outstanding common stock.

Item 3. Defaults Upon Senior Securities

None.

Item 4. Submission of Matters to a Vote of Security Holders

None.

Item 5. Other Information

In connection with a July 19, 1999 settlement with various government agencies, Olsten executed a corporate integrity agreement with the Office of Inspector General of the Department of Health and Human Services, which will remain in effect until August 18, 2004. The corporate integrity agreement applies to the Company's businesses that bill the federal government health programs directly for services, such as its nursing brand (but excludes the SPS business), and focuses on issues and training related to cost report preparation, contracting, medical necessity and billing of claims. Under the corporate integrity agreement, the Company is required, for example, to maintain a corporate compliance officer to develop and implement compliance programs, to retain

an independent review organization to perform annual reviews and to maintain a compliance program and reporting systems, as well as to provide certain training to employees.

The Company's compliance program is required to be implemented for all newly established or acquired business units if their type of business is covered by the corporate integrity agreement. Reports under the integrity agreement are to be filed annually with the Department of Health and Human Services, Office of Inspector General. After the corporate integrity agreement expires, the Company is to file a final annual report with the government. The Company believes it is in compliance with the corporate integrity agreement and has timely filed all required reports. If the Company fails to comply with the terms of its corporate integrity agreement, the Company will be subject to penalties.

Item 6. Exhibits and Reports on Form 8-K

(a)	<u>Exhibit Number</u>	<u>Description</u>
	3.1	Restated Certificate of Incorporation of Company. (1)
	3.2	Certificate of Correction to Certificate of Incorporation, filed with the Delaware Secretary of State on July 1, 2002. (2)
	3.3	Restated By-Laws of Company. (2)
	4.1	Specimen of common stock. (4)
	4.2	Form of Certificate of Designation of Series A Junior Participating Preferred Stock. (1)
	4.3	Form of Certificate of Designation of Series A Cumulative Non-Voting Redeemable Preferred Stock. (3)
	10.1	Employment Agreement dated as of March 22, 2004 with Ronald A. Malone*+
	10.2	Change in Control Agreement dated March 22, 2004 with Ronald A. Malone*+
	31.1	Certification of Chief Executive Officer dated May 4, 2004 pursuant to Rule 13a-14(a).*
	31.2	Certification of Chief Financial Officer dated May 4, 2004 pursuant to Rule 13a-14(a).*

32.1 Certification of Chief Executive Officer dated May 4, 2004 pursuant to 18 U.S.C. Section 1350.*

32.2 Certification of Chief Financial Officer dated May 4, 2004 pursuant to 18 U.S.C. Section 1350.*

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- (1) Incorporated herein by reference to Amendment No. 2 to the Registration Statement of Company on Form S-4 dated January 19, 2000 (File No. 333-88663).
 - (2) Incorporated herein by reference to Form 10-Q of Company for the quarterly period ended June 30, 2002.
 - (3) Incorporated herein by reference to Amendment No. 3 to the Registration Statement of Company on Form S-4 dated February 4, 2000 (File No. 333-88663).
 - (4) Incorporated herein by reference to Amendment No. 4 to the Registration Statement of Company on Form S-4 dated February 9, 2000 (File No. 333-88663).

* Filed herewith

+ Management contract or compensatory plan or arrangement.

(b) Reports on Form 8-K

On February 10, 2004, the Company furnished a report on Form 8-K (i) furnishing in Item 7 as an exhibit a press release covering the Company's 2003 fourth quarter and full year consolidated earnings and (ii) reporting in Item 12 the issuance of the Company's press release on the subject of its 2003 fourth quarter and full year consolidated earnings.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned thereunto duly authorized.

GENTIVA HEALTH SERVICES, INC.

(Registrant)

Date: May 4, 2004

/s/ Ronald A. Malone

Ronald A. Malone

Chairman and Chief Executive Officer

Date: May 4, 2004

/s/ John R. Potapchuk

John R. Potapchuk

Senior Vice President and

Chief Financial Officer