

COMPUTATION OF CMHC REHABILITATION COSTS	PROVIDER CCN:	PERIOD : FROM _____ TO _____	WORKSHEET J-2 PART 1
	COMPONENT CCN:		

PART I - APPORTIONMENT OF CMHC COST CENTERS

	Total Costs (from Wkst. J-1, Pt. I, col. 20) 1	Total Charges 2	Ratio of Costs to Charges 3	Title V		Title XVIII		Title XIX		
				Charges 4	Costs (col. 3 x col. 4) 5	Charges 6	Costs (col. 3 x col. 6) 7	Charges 8	Costs (col. 3 x col. 8) 9	
1	Administrative and General									1
2	Skilled Nursing Care									2
3	Physical Therapy									3
4	Occupational Therapy									4
5	Speech Pathology									5
6	Medical Social Services									6
7	Respiratory Therapy									7
8	Psychiatric/Psychological Services									8
9	Individual Therapy									9
10	Group Therapy									10
11	Individualized Activity Therapy									11
12	Family Counseling									12
13	Diagnostic Services									13
14	App. Patient Training & Education									14
15	Prosthetic and Orthotic Devices									15
16	Drugs and Biologicals									16
17	Medical Supplies									17
18	Medical Appliances									18
19	Durable Medical Equipment - Rented									19
20	Durable Medical Equipment - Sold									20
21	All Other									21
22	Totals (sum of lines 2-21)									22