

APPORTIONMENT OF ANCILLARY AND OUTPATIENT COST AND REDUCTION OF THERAPY COST FOR TITLE XVIII	PROVIDER NO. : _____	PERIOD : FROM _____ TO _____	WORKSHEET D PARTS II & III
Check One: <input type="checkbox"/> SNF	<input type="checkbox"/> NF	<input type="checkbox"/> ICF/MR	

PART II - APPORTIONMENT OF VACCINE COST

1	Drugs charged to patients - ratio of cost to charges (From Worksheet C, column 3, line 30)	1
2	Program vaccine charges (From your records, or the P S & R.)	2
3	Program costs (Line 1 X line 2) (Title XVIII, PPS providers, transfer this amount to Worksheet E, Part III, line 20)	3

PART III - CALCULATION OF PASS THROUGH COSTS FOR INTERNS & RESIDENTS

>> *FOR COST REPORTING PERIODS BEGINNING ON AND AFTER 07/01/98* <<

Cost Centers	Total Cost (From Worksheet B, Part I, Col 18)	Intern and Residents Costs (From Wkst. B, Part I, Column 14)	Ratio of Intern & Residents Costs To Total Costs - Part A (Col. 2 / Col.. 1)	Program Part A Cost (From Wkst. D. Part 1, Col. 4)	Program Intern & Residents Costs for Pass Through (Col. 3 X Col. 4)	
	1	2	3	4	5	
ANCILLARY SERVICE COST CENTERS						
21	Radiology					21
22	Laboratory					22
23	Intravenous Therapy					23
24	Oxygen (Inhalation) Therapy					24
25	Physical Therapy					25
26	Occupational Therapy					26
27	Speech Pathology					27
28	Electrocardiology					28
29	Medical Supplies					29
30	Drugs Charged to Patients					30
31	Dental Care - Title XIX only					31
32	Support Surfaces					32
33	Other Ancillary Service Costs					33
75	Total (Sum of lines 21 - 33)					75