

COMPUTATION OF CELLULAR THERAPY ACQUISITION COSTS		PROVIDER CCN: _____	PERIOD: FROM _____ TO _____	WORKSHEET D-6, PART III
PART III - SUMMARY OF CELLULAR THERAPY ACQUISITION COSTS				
			Amount	
1	Acquisition cost from Worksheet B, col. 26 (see instructions)			1
			Inpatient	Outpatient
Acquisition Services Total Costs			1	2
2	Routine and ancillary			2
3	Interns and residents			3
4	Apportionment of acquisition cost from line 1			4
5	Cost of physicians' services in a teaching hospital (see instructions)			5
6	Total acquisition cost (sum of lines 2 through 5)			6
			Inpatient	Outpatient
Determine Ratio of Medicare Transplants to Total Transplants			1	2
7	Total transplants (see instructions)			7
8	Medicare transplants (see instructions)			8
9	Medicare ratio (line 8 ÷ line 7)			9
10	Medicare cost (see instructions)			10
PART IV - STATISTICS				
1	Number of recipients intended for allogeneic HSCT where the acquisition cost was incurred but the transplant did not occur (see instructions)			1