4090 (Cont.)		FORM CMS-2552-10										09-13
	ATION OF GENERAL SERVICE TO HHA COST CENTERS								PROVIDER CCN: HHA CCN:	PERIOD: FROM TO	WORKSHEET H-2, PART I	
HHA COST CENTER (omit cents)		From Wkst. H-1 Part I, col. 6, line	HHA TRIAL BALANCE (1) 0		ITAL D COSTS MOVABLE EQUIPMENT 2	EMPLOYEE BENEFITS DEPARTMENT 4	SUBTOTAL (cols. 0-4) 4A	ADMINIS- TRATIVE & GENERAL 5	MAIN- TENANCE & REPAIRS 6	OPERATION OF PLANT 7	LAUNDRY & LINEN SERVICE 8	
1	Administrative and General	5										1
2	Skilled Nursing Care	6										2
3	Physical Therapy	7										3
4	Occupational Therapy	8										4
5	Speech Pathology	9										5
6	Medical Social Services	10										6
7	Home Health Aide	11										7
8	Supplies	12										8
9	Drugs	13										9
	DME	14										10
	Home Dialysis Aide Services	15										11
12	Respiratory Therapy	16										12
	Private Duty Nursing	17										13
	Clinic	18										14
	Health Promotion Activities	19										15
	Day Care Program	20										16
	Home Delivered Meals Program	21										17
	Homemaker Service	22										18
	All Others	23										19
	Totals (sum of lines 1-19) (2)											20
21	21 Unit Cost Multiplier: column 26, line 1, divided by the sum of column 26, line 20, minus column 26, line 1, rounded to 6 decimal places.											21

Column 0, line 20 must agree with Wkst. A, column 7, line 101.
Columns 0 through 26, line 20 must agree with the corresponding columns of Wkst. B, Part I, line 101.

01-22		FORM CMS-2552-10										4090 (Cont.)		
ALLOCATION OF GENERAL SERVICE COSTS TO HHA COST CENTERS										PROVIDER CCN: HHA CCN:	PERIOD: FROM TO	WORKSHEET H-2, PART I (CONT.)		
	HHA COST CENTER (omit cents)	HOUSE KEEPING 9	DIETARY 10	CAFETERIA 11	MAIN- TENANCE OF PERSONNEL 12	NURSING ADMINIS- TRATION 13	CENTRAL SERVICES & SUPPLY 14	PHARMACY 15	MEDICAL RECORDS & LIBRARY 16	SOCIAL SERVICE 17	OTHER GENERAL SERVICE 18	NON- PHYSICIAN ANES- THETISTS 19		
1	Administrative and General												1	
	Skilled Nursing Care												2	
	Physical Therapy												3	
	Occupational Therapy												4	
	Speech Pathology												5	
	Medical Social Services												6	
7	Home Health Aide												7	
	Supplies												8	
9	Drugs												9	
10	DME												10	
11	Home Dialysis Aide Services												11	
12	Respiratory Therapy												12	
13	Private Duty Nursing												13	
14	Clinic												14	
15	Health Promotion Activities												15	
16	Day Care Program												16	
17	Home Delivered Meals Program												17	
18	Homemaker Service												18	
19	All Others												19	
20	Totals (sum of lines 1-19) (2)												20	
21	21 Unit Cost Multiplier: column 26, line 1, divided by the sum of column 26, line 20, minus column 26, line 1, rounded to 6 decimal places.												21	

(2) Columns 0 through 26, line 20 must agree with the corresponding columns of Wkst. B, Part I, line 101.

4090 (Cont.)		FORM CMS-2552-10									
	ATION OF GENERAL SERVICE TO HHA COST CENTERS							PROVIDER CCN: HHA CCN:	PERIOD: FROM TO	WORKSHEET H-2, PART I	
HHA COST CENTER (omit cents)		NURSING PROGRAM 20	INTERNS & SALARY AND FRINGES 21	RESIDENTS PROGRAM COSTS 22	PARAMEDICAL EDUCATION (SPECIFY) 23	SUBTOTAL (sum of cols. 4a-23) 24	INTERN & RESIDENT COST & POST STEPDOWN ADJUSTMENTS 25	SUBTOTAL (cols. 23 ± 24) 26	ALLOCATED HHA A&G (see Part II) 27	TOTAL HHA COSTS 28	
1	Administrative and General										1
2	Skilled Nursing Care										2
3	Physical Therapy										3
	Occupational Therapy										4
5	Speech Pathology										5
	Medical Social Services										6
7	Home Health Aide										7
8	Supplies										8
9	Drugs										9
10	DME										10
11	Home Dialysis Aide Services										11
12	Respiratory Therapy										12
13	Private Duty Nursing										13
	Clinic										14
	Health Promotion Activities										15
	Day Care Program										16
	Home Delivered Meals Program										17
	Homemaker Service										18
	All Others										19
	Totals (sum of lines 1-19) (2)										20
21	Unit Cost Multiplier: column 26, line 1, d line 20, minus column 26, line 1, rounded		mn 26,								21

(2) Columns 0 through 26, line 20 must agree with the corresponding columns of Wkst. B, Part I, line 101.