09-13				FC	JKM CMS-2552-	·10				4090 (Cont.)
ALLOCATION OF GENERAL SERVICE COSTS TO COMMUNITY MENTAL HEALTH CENTERS									PERIOD: FROM	WORKSHEET J-1, PART II	
								COMPONENT CCN:	ТО	-	
PART I	I - ALLOCATION OF GENERAL SERVICE CO	OSTS TO COMMU			NTERS - STATISTICAI	BASIS		_	1	1	
			CAPITAL RELATED COST								l
					EMPLOYEE		ADMINIS-	MAIN-	OPER LITTORY	LAUNDRY	i
	ALLOCATION OF GENERAL SERVICE COSTS TO		BLDGS & FIXTURES	MOVABLE	BENEFITS		TRATIVE &	TENANCE &	OPERATION	& LINEN	i
				EQUIPMENT	DEPARTMENT	DECONOR	GENERAL	REPAIRS	OF PLANT	SERVICE	l
			(SQUARE FEET)	(SQUARE FEET)	(GROSS SALARIES)	RECONCIL- IATION	(ACCUM. COST)	(SQUARE FEET)	(SQUARE FEET)	(POUNDS OF LAUNDRY)	l
		0	1 TEE1)	2	SALARIES)	4A	5	6 6	7 ree1)	RAUNDRY)	i
	Administrative and General	U	1	2	4	4A	3	0	,	0	1
2											2
3											3
4											4
- 5	4 4										5
- 6											6
7											7
- 8											8
9											9
10	Group Therapy										10
11	Individualized Activity Therapies										11
12	Family Counseling										12
	8										13
											14
											15
											16
											17
											18
											19
											20
											21
											22
											23
24	Unit Cost Multiplier (see instructions)			1	1			1	1	1	24

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4090	(Cont.)				FUR	CM CM3-233	02-10						09-1
ALLOCATION OF GENERAL SERVICE COSTS TO												WORKSHEET J-1,	
COMM	UNITY MENTAL HEALTH CENTERS										FROM PART II (CO		
										COMPONENT CCN:	ТО	_	
DADE	A ALLOCATION OF CENERAL CERVICE C	OCTO TO COLO	G DUTTY A GENT	AL HEALTH CE	VITED COST SEN	TEDS STATIST	TO A DAGIG						
PARI	I - ALLOCATION OF GENERAL SERVICE C	OSTS TO COMM	IUNITY MENTA	AL HEALTH CE	1	11EKS - STATIST	ICAL BASIS	1	1	T	T .	YOY	
					MAIN-							NON-	
CORF COST CENTER (omit cents)					TENANCE	NURSING	CENTRAL		MEDICAL			PHYSICIAN	
		HOUSE-			OF	ADMINIS-	SERVICES &		RECORDS &	SOCIAL	OTHER	ANES-	
		KEEPING	DIETARY	CAFETERIA	PERSONNEL	TRATION	SUPPLY	PHARMACY	LIBRARY	SERVICE	GENERAL	THETISTS	
		(HOURS OF	(MEALS	(MEALS	(NUMBER	(DIRECT	(COSTED	(COSTED	(TIME	(TIME	SERVICE	(ASSIGNED	
		SERVICE)	SERVED)	SERVED)	HOUSED)	NURS. HRS)*	REQUIS.)	REQUIS.)	SPENT)	SPENT)	(SPECIFY)	TIME)	
		9	10	11	12	13	14	15	16	17	18	19	
1	Administrative and General												
2	Skilled Nursing Care												
3	Physical Therapy												
4	Occupational Therapy												1
5	Speech Pathology												Î
6	Medical Social Services												
7	Respiratory Therapy												
8	Psychiatric/Psychological Services												
9	Individual Therapy												
10	Group Therapy												1
11	Individualized Activity Therapies												1
12	Family Counseling												1
13	Diagnostic Services												1
14	Approved Patient Training & Education												1
15	Prosthetic and Orthotic Devices												1
16	Drugs and Biologicals												1
17	Medical Supplies												1
18	Medical Appliances												1
19													1
20	Durable Medical Equipment-Sold												2
21	All Others												2
22	Totals (sum of lines 1-21)												2
23	Total Cost to be Allocated			1								1	2

24 Unit Cost Multiplier (see instructions)

							COMPONENT CCN:	10		
RT II - ALLOCATION OF GENERAL SERVICE O	COSTS TO COMMUNITY	Y MENTAL HEALTH C	ENTER COST CENTE	RS - STATISTICAL BAS	SIS			<u></u>		
			RESIDENTS	PARA- MEDICAL						T
CORF COST CENTER	NURSING PROGRAM	SALARY & FRINGES	PROGRAM COSTS (ASSIGNED TIME) 22	EDUCATION (SPECIFY)		25	26	25		
(omit cents)	(ASSIGNED TIME) 20	(ASSIGNED TIME) 21		(ASSIGNED TIME)					28	
1 Administrative and General	20	21	ZZ	23	24	23	20	27	20	٠
2 Skilled Nursing Care	+									+
3 Physical Therapy										t
4 Occupational Therapy										t
5 Speech Pathology										T
6 Medical Social Services										7
7 Respiratory Therapy										T
8 Psychiatric/Psychological Services										T
9 Individual Therapy										T
10 Group Therapy										T
11 Individualized Activity Therapies										T
2 Family Counseling										T
13 Diagnostic Services										T
4 Approved Patient Training & Education										T
5 Prosthetic and Orthotic Devices										T
6 Drugs and Biologicals										T
7 Medical Supplies										T
18 Medical Appliances										T
19 Durable Medical Equipment-Rented										T
20 Durable Medical Equipment-Sold										T
21 All Others										T
22 Totals (sum of lines 1-21)										T
23 Total Cost to be Allocated										T
24 Unit Cost Multiplier (see instructions)										Т

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