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| CMS S-3 Line Code | ICR Exhibit 3 Line Code | CMS 2552 Center Code | HCRIS Code | 2022 Description | ICR Cost Center Code | Exh. 19 & 20 Column Code | Exhibit 46 Charge Code Assign. | Exh 4, 30 & 31A Code Assign. |
|-------------------|-------------------------|----------------------|------------|--|----------------------|--------------------------|--------------------------------|------------------------------|
| | | | | General Service Cost Center Line Assignments (95) | | | | |
| | | | | (38) Standard 001-026, 029-030, 033, 040-041,044-047, 095, 293 | | | | |
| | | | | (57) Variable 027-028, 031-032, 034-039, 048 - 094 | | | | |
| | | | | (Program Capabilities 200) | | | | |
| | | 1 | 00100 | Capital Related Costs-- Buildings and Fixtures | 001 | 1100 | | |
| | | 2 | 00200 | Capital Related Costs-- Movable Equipment | 002 | 1101 | | |
| | | 3 | 00300 | Other Capital Related Costs | 293 | | | |
| | | 4 | 00400 | Employee Benefits | 003 | 1102 | | |
| | | 4.01 | 00401 | Inservice Education | 044 | 1144 | | |
| | | 4.02 | 00402 | Day Care | 045 | 1142 | | |
| | | 6 | 00600 | Maintenance and Repairs | 004 | 1100 | | |
| | | 7 | 00700 | Operation of Plant | 041 | 1100 | | |
| | | 8 | 00800 | Laundry and Linen Service | 005 | 1103 | | |
| | | 9 | 00900 | Housekeeping | 006 | 1104 | | |
| | | 10.01 | 01001 | Dietary--Raw Food | 007 | 1105 | | |
| | | 10.02 | 01002 | Dietary--Other | 008 | 1106 | | |
| | | 11 | 01100 | Cafeteria | 009 | 1107 | | |
| | | 12 | 01200 | Maintenance of Personnel | 010 | 1108 | | |
| | | 16 | 01600 | Medical Records & Medical Records Library | 011 | 1109 | | |
| | | 17 | 01700 | Social Service | 012 | 1110 | | |
| | | 18 | 01401 | Medical Supplies and Expense | 015 | 1113 | | |
| | | 18.01 | 01400 | Central Services and Supply | 016 | 1114 | | |
| | | 18.02 | 01500 | Pharmacy | 017 | 1115 | | |
| | | 18.03 | 01300 | Nursing Administration | 018 | 1120 | | |
| | | 18.04 | 1850 | Intensive Nursing Care | 019 | 1117 | | |
| | | 18.05 | 1851 | General Nursing Service | 021 | 1116 | | |
| | | 18.06 | 1852 | Supervising Physicians-- Other | 040 | 1139 | | |
| | | 18.07 | 1853 | Transportation | 046 | 1141 | | |
| | | 18.08 | 1854 | Activities | 047 | 1143 | | |
| | | 19 | 01900 | Nonphysician Anesthetists | 029 | 1130 | | |
| | | 20 | 02000 | Nursing School | 020 | 1118 | | |
| | | 21 | 02100 | Intern & Res. Service-- Salary & Fringes (Appvd) | 013 | 1111 | | |
| | | 22 | 02200 | Intern & Res. Other Program Costs (Appvd) | 033 | 1131 | | |
| | | 22.01 | 02201 | Supervising Physicians - Teaching | 014 | 1112 | | |
| | | 23 | 02300 | Paramedical Ed. Program (Specify) | 030 | 1127 | | |
| | | 5.01 | 00540 | Nonpatient Telephones | 022 | 1122 | | |
| | | 5.02 | 00550 | Data Processing | 023 | 1123 | | |
| | | 5.03 | 00560 | Purchasing Receiving and Stores | 024 | 1124 | | |



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| | | 5.04 | 00570 | Admitting | 025 | 1125 | | |
| | | 5.05 | 00580 | Cashiering/Accounts Receivable | 026 | 1126 | | |
| | | 5.06 | 00590 | Other Administrative and General | 095 | 0000 | | |
| | | Variable | Variable | Any Additional General Service Cost Centers | 027, 028, 031, 032, 034 to 039, 048 to 094 | 1119, 1132 to 1138, 1200 to 1248 | | |
| | | | | Ancillary Service Cost Center Line Assignments (97) | | | | |
| | | | | (64) Standard 100 - 124, 126 - 128, 132 - 158, 185-197 | | | | |
| | | | | (1) "Do not use" 198 | | | | |
| | | | | (32) Variable 125, 129 - 131, 159 - 184 | | | | |
| | | | | (Program Capabilities 150 lines for Ancillary and Outpatient Cost Centers) | | | | |
| | | 50 | 05000 | Operating Room | 100 | 1150 | | |
| | | 51 | 05100 | Recovery Room | 101 | 1179 | | |
| | | 52 | 05200 | Labor Room & Delivery Room | 103 | 1152 | | |
| | | 53 | 05300 | Anesthesiology | 102 | 1151 | | |
| | | 54 | 05400 | Radiology-Diagnostic | 104 | 1153 | | |
| | | 55 | 05500 | Radiology-Therapeutic | 105 | 1154 | | |
| | | 56 | 05600 | Radioisotope | 121 | 1167 | | |
| | | 57 | 05700 | Computed Tomography (CT) Scan | 128 | 1177 | | |
| | | 58 | 05800 | Magnetic Resonance Imaging (MRI) | 135 | 1188 | | |
| | | 59 | 05900 | Cardiac Catherization Laboratory | 141 | 1194 | | |
| | | 60 | 06000 | Laboratory | 106 | 1155 | | |
| | | 60.01 | 06001 | Bio-Medical (Lab) (Engineering) | 139 | 1192 | | |
| | | 61 | 06100 | PBP Clinical Lab Srvc-Program Only | 132 | 1185 | | |
| | | 62 | 06200 | Whole Blood and Packed Red Blood Cells | 114 | 1160 | | |
| | | 62.30 | 06250 | Blood Clotting Factors Admin Costs | 118 | 1164 | | |
| | | 63 | 06300 | Blood Storing, Processing & Trans. | 115 | 1168 | | |
| | | 64 | 06400 | Intravenous Therapy | 117 | 1162 | | |
| | | 65 | 06500 | Respiratory Therapy | 113 | 1159 | | |
| | | 66 | 06600 | Physical Therapy | 109 | 1158 | | |
| | | 67 | 06700 | Occupational Therapy | 110 | 1163 | | |
| | | 68 | 06800 | Speech Pathology | 111 | 1173 | | |
| | | 69 | 06900 | Electrocardiology | 107 | 1156 | | |
| | | 70 | 07000 | Electroencephalography | 108 | 1157 | | |
| | | 71 | 07100 | Med Supplies Charged to Patients | 122 | 1169 | | |
| | | 72.00 | 07200 | Implantable Devices Charged to Patients | 197 | 1298 | | |
| | | 73 | 07300 | Drugs Charged to Patients | 123 | 1170 | | |
| | | 74 | 07400 | Renal Dialysis | 124 | 1172 | | |
| | | 75 | 07500 | ASC (Non-Distinct) | 126 | 1184 | | |



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| | | 76 | 03996 | Blank Line - Not Used | 198 | 1299 | | |
| | | 76.01 | 03040 | Audiology | 112 | 1174 | | |
| | | 76.02 | 03320 | Shock Therapy | 116 | 1161 | | |
| | | 76.03 | 03160 | Cardiopulmonary | 119 | 1199 | | |
| | | 76.04 | 03950 | Cystoscopy | 120 | 1166 | | |
| | | 76.05 | 03630 | Ultrasound Diagnostic | 127 | 1176 | | |
| | | 76.06 | 03480 | Oncology | 134 | 1187 | | |
| | | 76.07 | 03440 | Mammography | 136 | 1189 | | |
| | | 76.08 | 03450 | Nuclear Medicine - Diagnostic | 137 | 1190 | | |
| | | 76.09 | 03470 | Nuclear Medicine - Therapeutic | 138 | 1191 | | |
| | | 76.10 | 03240 | Cytology | 140 | 1193 | | |
| | | 76.11 | 03650 | Vascular Lab | 142 | 1195 | | |
| | | 76.12 | 03580 | Recreational Therapy | 143 | 1196 | | |
| | | 76.13 | 03140 | Cardiology | 144 | 1197 | | |
| | | 76.14 | 03260 | Echocardiography | 145 | 1198 | | |
| | | 76.15 | 03560 | Pulmonary Function Testing | 146 | 1250 | | |
| | | 76.16 | 03620 | Stress Test | 147 | 1251 | | |
| | | 76.17 | 03640 | Urology | 148 | 1252 | | |
| | | 76.18 | 03330 | Endoscopy | 149 | 1253 | | |
| | | 76.19 | 03340 | Gastro Intestinal Services | 150 | 1254 | | |
| | | 76.20 | 03520 | Ophthalmology | 151 | 1255 | | |
| | | 76.21 | 03550 | Psychiatric/Psychological Services | 152 | 1256 | | |
| | | 76.22 | 03250 | Dental Services | 153 | 1257 | | |
| | | 76.23 | 03070 | Birthing Center | 154 | 1258 | | |
| | | 76.24 | 03951 | Fee For Service - Cardiology | 155 | 1259 | | |
| | | 76.25 | 03952 | Fee For Service - Emergency Service | 156 | 1260 | | |
| | | 76.26 | 03953 | Fee For Service - Laboratory | 157 | 1261 | | |
| | | 76.27 | 03954 | Fee For Service - Radiology | 158 | 1262 | | |
| | | 76.28 | 03190 | Chemotherapy | 133 | 1186 | | |
| | | 76.29 | 03955 | Asthma | 196 | 1297 | | |
| | | 76.97 | 07697 | Cardiac Rehabilitation | 195 | 1296 | | |
| | | 76.30 | 03956 | Diabetes | 194 | 1295 | | |
| | | 76.99 | 07699 | Lithotripsy | 193 | 1294 | | |
| | | 76.31 | 03957 | Nutritional Counseling | 192 | 1293 | | |
| | | 76.32 | 03958 | Pain Management | 191 | 1292 | | |
| | | 76.33 | 03959 | PET Scans | 190 | 1291 | | |
| | | 76.34 | 03960 | Sleep Lab | 189 | 1290 | | |
| | | 76.35 | 03611 | Wound Care | 188 | 1289 | | |



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| | | 76.98 | 07698 | Hyperbaric Oxygen Therapy | 187 | 1288 | | |
| | | 77 | 07700 | Allogeneic HSCT Acquisition | 186 | 1287 | | |
| | | 78 | 07800 | CAR T-Cell Immunotherapy | 185 | 1286 | | |
| | | Variable | Variable | Any Additional Ancillary Cost Centers | 125, 129 to 131, 159 to 184 | 1165, 1175, 1178, 1180 to 1183, 1263 to 1285 | | |
| | | | | Inpatient Service Cost Center Line Assignments (95) | | | | |
| | | | | (36) Standard 201, 203, 205-210, 214-215, 217-219, 224-229, 268, 301-302, 304-309, 312-317, 377-378 | | | | |
| | | | | (59) Variable 318 - 376 | | | | |
| | | | | (Program Capabilities 50) | | | | |
| | | 30 | 03000 | Adults and Pediatrics (CMS line comb. lines 30) | | | | |
| 1.06 | 050 | 30.01 | 03001 | Medical Surgical Inpatients | 201 | | 0195 | 001 |
| 1.07 | 054 | 30.02 | 03002 | Pediatric Unit | 214 | | 0094 | 020 |
| 1.08 | 055 | 30.03 | 03003 | Maternity Unit | 215 | | 0095 | 030 |
| | | 30.04 | 03004 | Alternate Level of Care | 219 | | 0370 | 043 |
| 1.10 | 053 | 30.05 | 03005 | Epilepsy Unit | 205 | | 0182 | 042 |
| 1.12 | 057 | 30.06 | 03006 | Rehabilitation Medicine | 218 | | 0093 | 41 |
| 1.13 | 060 | 30.07 | 03007 | Tuberculosis | 217 | | 0198 | 45 |
| 1.14 | 061 | 30.08 | 03008 | H. I. V. Care | 224 | | 0193 | 47 |
| 1.15 | 52 | 30.09 | 03009 | Chemical Dependency Detoxification | 203 | | 0018 | 203 |
| 1.16 | 42 | 30.1 | 03010 | Chemical Dependency Rehabilitation | 210 | | 0019 | 210 |
| 1.17 | 301 | 30.11 | 03011 | Psychiatric | 301 | | 3001 | 301 |
| 1.18 | 302 | 30.12 | 03012 | Traumatic Brain Injury/Coma | 302 | | 3002 | 302 |
| 1.21 | 304 | 30.13 | 03013 | Bone Marrow Unit | 304 | | 3004 | 304 |
| 8 | 002 | 31 | 03100 | Intensive Care Unit | 206 | | 0196 | 002 |
| 8.01 | 305 | 31.01 | 03101 | Pediatric ICU | 305 | | 3005 | 305 |
| 8.02 | 377 | 31.02 | 03102 | Cardiac ICU | 377 | | 3080 | 377 |
| 9 | 003 | 32 | 03200 | Coronary Care Unit | 207 | | 0197 | 003 |
| 10 | 040 | 33 | 03300 | Burn Intensive Care Unit | 208 | | 0183 | 004 |
| 11 | 041 | 34 | 03400 | Surgical Intensive Care Unit | 209 | | 0184 | 005 |
| 12 | 063 | 35 | 02060 | Neonatal Intensive Care Unit | 229 | | 0194 | 054 |
| 12.98 | 310 | | | Neonatal Intermediate Care | | | | 310 |
| 12.99 | 311 | | | Neonatal Continuing Care | | | | 311 |
| | See Below | 35.01 | See HCRIS List | Other Special Care Units (specify) | See Below | | See Below | See Below |
| 16 | 009 | 40 | 04000 | Subprovider I Psychiatric | 225 | | 0188 | 055 |
| 16.01 | 378 | 40.01 | 04001 | Dual-Diagnosis Psychiatric | 378 | | 3081 | 378 |
| 17 | 010 | 41 | 04100 | Subprovider II Rehabilitation | 226 | | 0189 | 056 |
| 18 | 306 | 42 | 04200 | Traumatic Brain Injury/Coma | 306 | | 3006 | 306 |



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| 13 | | 43 | | Nursery CMS Only (Comb. Prem. & Newborn) | | | | |
| 13.01 | 039 | 43.01 | 04301 | Nursery - Premature | 227 | | 0024 | 051 |
| 13.02 | 007 | 43.02 | 04302 | Nursery - Newborn | 228 | | 0025 | 052 |
| Variable | 318-371 | Variable | Variable | Any Add'l Inpatient Component Other than SNF/Other Long Term Care | 318-371 | | 3021-3074 | 318-371 |
| 19 | | 44 | | Skilled Nursing Facility (Comb. for CMS 2552-10) | | | | |
| 19.01 | 011 | 44.01 | 04401 | Skilled Nursing Facility 1 (RHCF) | 268 | | 0032 | 053 |
| 19.02 | 307 | 44.02 | 04402 | Skilled Nursing Facility 2 (RHCF) | 307 | | 3007 | 307 |
| 19.03 | 312 | 44.03 | 04403 | SNF Head Injury | 312 | | 3012 | 312 |
| 19.04 | 313 | 44.04 | 04404 | Long Term Ventilator Dependent | 313 | | 3015 | 313 |
| 19.05 | 314 | 44.05 | 04405 | Behavioral Intervention | 314 | | 3016 | 314 |
| 19.06 | 315 | 44.06 | 04406 | Specialty Pediatric SNF | 315 | | 3017 | 315 |
| 19.07 | 316 | 44.07 | 04407 | Aids SNF | 316 | | 3018 | 316 |
| 19.08 | 317 | 44.08 | 04408 | Transitional Care Unit | 317 | | 3019 | 317 |
| Variable | 372-373 | Variable | Variable | Any Additional Skilled Nursing Facility Component | 372-373 | | 3075-3076 | 372-373 |
| 21 | | 46 | | Other Long Term Care (Combined for CMS 2552-10) | | | | |
| 21.01 | 308 | 46.01 | 04601 | Other Long Term Care 1 | 308 | | 3008 | 308 |
| 21.02 | 309 | 46.02 | 04602 | Other Long Term Care 2 | 309 | | 3009 | 309 |
| Variable | 374-376 | Variable | Variable | Any Additional Other Long Term Care Component | 374-376 | | 3077-3079 | 374-376 |
| | | | | Outpatient Service Cost Center Line Assignment (96) (35) Standard 216, 235 - 237, 239-240, 246 - 249, 253-254, 260, 262, 288-291, 404, 414, 416-419, 471-474 (27) Non- Standard 263, 401-403, 405-408, 410-412, 461-470, 475-480 (34) Variable 427 - 460 (Program Capabilities for all Ancillary and Outpatient Cost Centers is 150 possible lines) | | | | |
| | | | | Clinic (Combined for NYS ICR) | | | | |
| | | 90 | 09000 | Clinic | 235 | | 0026 | |
| | | 90.06 | 09006 | Family Clinic | 405 | | 4834 | |
| | | 90.07 | 09007 | Family Planning | 406 | | 4835 | |
| | | 90.08 | 09008 | Head Injury Clinic | 407 | | 4836 | |
| | | 90.09 | 09009 | H. I. V. Clinics | 263 | | 0388 | |
| | | 90.1 | 09010 | Hyperbaric Clinic | 408 | | 4837 | |
| | | 90.12 | 09012 | Pediatric Clinic | 411 | | 4840 | |
| | | 90.13 | 09013 | Rehabilitation Clinic | 412 | | 4841 | |
| | | 90.14 | 09014 | Cardiac Rehabilitation Clinic | 480 | | 4909 | |
| | | 90.15 | 09015 | Dental Clinic | 479 | | 4908 | |
| | | 90.16 | 09016 | Diabetes Clinic | 478 | | 4907 | |



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| | | 90.17 | 09017 | PCAP Clinic | 477 | | 4906 | |
| | | 90.18 | 09018 | Sleep Clinic | 476 | | 4905 | |
| | | 90.19 | 09019 | Wound Care Clinic | 475 | | 4904 | |
| | | | | Chemical Dependency Clinic/Rehabilitation (Combined for NYS ICR) | | | | |
| | | 90.01 | 09001 | Chemical Dependency Clinic/Rehabilitation | 291 | | 0387 | |
| | | 90.02 | 09002 | Alcohol Day Rehab Clinic | 401 | | 4830 | |
| | | | | Cancer Treatment Services (Combined for NYS ICR) | | | | |
| | | 90.42 | 09042 | Cancer Treatment Services | 472 | | 4901 | |
| | | 90.03 | 09003 | Chemotherapy Clinic | 402 | | 4831 | |
| | | 90.11 | 09011 | Oncology Clinic | 410 | | 4839 | |
| | | | | Child Rehabilitation Clinic(Combined for NYS ICR) | | | | |
| | | 90.43 | 09043 | Child Rehabilitation Clinic | 473 | | 4902 | |
| | | 90.04 | 09004 | Day Hospital | 403 | | 4832 | |
| | | 90.05 | 09005 | Early Intervention | 404 | | 4833 | |
| | | 90.20 | 09020 | Mental Health Clinic | 289 | | 0386 | |
| | | 90.21 | 09021 | Blank Line - Not Used | 290 | | 0380 | |
| | | 90.22 | 09022 | Mental Health Continuing Day Treatment | 249 | | 0108 | |
| | | 90.23 | 09023 | Mental Health Day Treatment | 246 | | 0033 | |
| | | 90.24 | 09024 | Mental Health Intensive Psychiatric Rehab. Outpatient | 253 | | 0111 | |
| | | 90.26 | 09026 | All Other OMH Programs O/P | 247 | | 0106 | |
| | | 90.27 | 09027 | All Other OASAS Programs O/P | 248 | | 0107 | |
| | | 90.28 | 09028 | Mental Health Outpatient ACT Programs | 420 | | 4849 | |
| | | 90.29 | 09029 | Mental Health Outpatient ICM Programs | 421 | | 4850 | |
| | | 90.30 | 09030 | Mental Health Outpatient SCM Programs | 422 | | 4851 | |
| | | 90.31 | 09031 | Comprehensive PROS with Clinic | 423 | | 4852 | |
| | | 90.32 | 09032 | Comprehensive PROS | 424 | | 4853 | |
| | | 90.33 | 09033 | Limited License PROS | 425 | | 4854 | |
| | | 90.34 | 09034 | PROS Rehabilitation and Support | 426 | | 4855 | |
| | | 90.35 | 09035 | Adult Day Care 1 | 414 | | 4843 | |
| | | 90.36 | 09036 | Adult Day Care 2 | 419 | | 4848 | |
| | | 90.37 | 09037 | Ambulatory Surgical Service | 239 | | 0034 | |
| | | 90.38 | 09038 | Referred Ambulatory Service | 237 | | 0028 | |
| | | 90.39 | 09039 | Renal Dialysis | 240 | | 0383 | |
| | | 90.40 | 09040 | Methadone Maintenance Treatment Program (up to 2022 ICR) | 262 | | 0119 | |
| | | 102.00 | 10200 | Opioid Treatment Program (2022 and later ICR) | 262 | | 0119 | |
| | | 90.41 | 09041 | Women and Infant Children Program (WIC) | 418 | | 4847 | |
| | | 90.44 | 09044 | OPWDD Clinic | 466 | | 4895 | |
| | | 91.00 | 09100 | Emergency Service | 236 | | 0027 | |



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| | | 91.01 | 09101 | CPEP | 288 | | 0385 | |
| | | 91.02 | 09102 | Poison Control | 416 | | 4845 | |
| 28 | 024 | 92.00 | 09200 | Observation Beds (Non-Distinct Part) | 260 | | 0030 | |
| | | 92.01 | 09201 | Observation Beds (Distinct Part) | 417 | | 4846 | |
| | | 92.02 | 09202 | CPEP Observation Beds (Psychiatric) | 216 | | 0096 | |
| | | 93.00 | See HCRIS List | Other Outpatient Cost Centers | 427-460 | | 4856-4889 | |
| | | 93.99 | 09939 | Mental Health Partial Hosp. | 254 | | 0112 | |
| | | | | Rural Health Clinic (Combined for NYS ICR) | | | | |
| | | 88 | 08800 | Rural Health Clinic | 471 | | 4900 | |
| | | 88.01 | 08801 | Rural Health Clinic II | 470 | | 4899 | |
| | | 88.02 | 08802 | Rural Health Clinic III | 469 | | 4898 | |
| | | 88.03 | 08803 | Rural Health Clinic IV | 468 | | 4897 | |
| | | 88.04 | 08804 | Rural Health Clinic V | 467 | | 4896 | |
| | | 88.05 | 08805 | Rural Health Clinic VI | 465 | | 4894 | |
| | | 88.06 | 08806 | Rural Health Clinic VII | 464 | | 4893 | |
| | | 88.07 | 08807 | Rural Health Clinic VIII | 463 | | 4892 | |
| | | 88.08 | 08808 | Rural Health Clinic IX | 462 | | 4891 | |
| | | 88.09 | 08809 | Rural Health Clinic X | 461 | | 4890 | |
| | | 89.00 | 08900 | Federally Qualified Health Center (FQHC) | 474 | | 4903 | |
| | | | | Other Reimbursable Cost Center Line Assignments (50) | | | | |
| | | | | (12) Standard 234, 243, 250, 257, 259, 280, 501 - 504, 536 | | | | |
| | | | | (30) Variable 505 - 535 | | | | |
| | | | | (Program Capabilities of 98 total lines for Other, Special Purpose and Non-reimbursable) | | | | |
| | | 94.00 | 09400 | Home Program Dialysis | 250 | | 0020 | |
| 29 | 602 | 95.00 | 09500 | Ambulance Services | 234 | | 0031 | |
| | | 96.00 | 09600 | Durable Medical Equip-Rented | 280 | | 0133 | |
| | | 97.00 | 09700 | Durable Medical Equip-Sold | 257 | | 0115 | |
| | | 98.00 | See HCRIS List | Other Reimbursable (specify) | See Below | | See Below | |
| 25 | 501 | 99.00 | 09900 | CMHC | 501 | | 4912 | |
| 25.10 | 015 | 99.10 | 09910 | CORF | 259 | | 0117 | |
| 25.20 | 502 | 99.20 | 09920 | OPT | 502 | | 4913 | |
| 25.30 | 503 | 99.30 | 09930 | OOT | 503 | | 4914 | |
| 25.40 | 504 | 99.40 | 09940 | OSP | 504 | | 4915 | |
| | | 100.00 | 10000 | I&R Services -Non Apprvd Prgm | 243 | | 0103 | |
| 22 | 014 | 101.00 | 10100 | Home Health Agency | 536 | | 3236 | |
| | | Variable | Variable | Additional Other Reimbursable Cost Centers | 505-535 | | 4916-4922, 3212-3235 | |
| | | | | Special Purpose Cost Center Line Assignments (50) | | | | |



2022 Cost Center Setup Cross Reference

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Exhibit 3, 4, 11, 19, 20, 31A, 46, 52 and 53

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| | | | | (13) Standard 241, 244, 245, 275, 285-287, 292, 601-605 (36) Variable 606 to 641 (Program Capabilities - See Other Reimbursable) | | | | |
| | | 105.00 | 10500 | Kidney Acquisition | 241 | | 0101 | |
| | | 106.00 | 10600 | Heart Acquisition | 292 | | 0392 | |
| | | 107.00 | 10700 | Liver Acquisition | 285 | | 0138 | |
| | | 108.00 | 10800 | Lung Acquisition | 602 | | 3302 | |
| | | 109.00 | 10900 | Pancreas Acquisition | 603 | | 3303 | |
| | | 110.00 | 11000 | Intestinal Acquisition | 604 | | 3304 | |
| | | 111.00 | 11100 | Islet Cell Acquisition | 605 | | 3305 | |
| | | 112.00 | 11200 | Other Organ Acquisition (specify) | 286 | | 0390 | |
| | | Variable | Variable | Additional Special Purpose Cost Center - Organ Acquisition | 606 | | 3306 | |
| | | 113.00 | 11300 | Interest Expense | 244 | | | |
| | | 114.00 | 11400 | Utilization Review -RHCF | 245 | | | |
| 23 | | 115.00 | 11500 | Ambulatory Surgical Center (Distinct Part) | 275 | | 0128 | |
| 24 | 017 | 116.00 | 11600 | Hospice Inpatient | 287 | | 0391 | |
| 24.05 | 601 | 117.00 | 06950 | Hospice -Home Care | 601 | | 3301 | |
| | | Variable | Variable | Additional Special Purpose Cost Centers Other than Organ Acquisition | 607-641 | | 3307-3341 | |
| | | | | Non Reimbursable Cost Center Line Assignments (25) (7) Standard 269 - 271, 273, 274, 651, 670 (18) Variable 652 - 669 (Program Capabilities - See Outpatient) | | | | |
| | | 190.00 | 19000 | Gift, Flower, Coffee Shop, Canteen | 269 | | | |
| | | 191.00 | 19100 | Research | 270 | | | |
| | | 192.00 | 19200 | Physicians Private Offices | 273 | | 0126 | |
| | | 193.00 | 19300 | Non - Paid Workers | 274 | | | |
| | | 194.00 | 07950 | Appeal For Funds | 271 | | | |
| | | 194.01 | 07951 | All Other Non- Reimbursable Expenses | 651 | | 3351 | |
| | | 194.99 | 07999 | Maintenance of Personnel | 670 | | 3370 | |
| | | | Variable | Additional Non Reimbursable Cost Centers | 652-669 | | 3352-3369 | |
| | | 200.00 | | TOTAL Expenses Worksheet A-All Services | 960 | | | |