

Exhibit C | CHGMEFIA | HRSA | Create New Password

https://grants4.hrsa.gov/2010/WebBHP2Assessment/Interface/V01/ExhibitC.aspx?&PROleid=174

**HRSA Electronic Handbooks** | iwilliams@integritym... | Support | Logout

Tuesday 10<sup>th</sup> December 2019 01:30:07 P.M.

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**ALL FUNCTIONS** <<

FTE Assessment

Information

Overview

Status

CHGME PP Forms

HRSA 99

- HRSA 99-1(1)
- HRSA 99-1(2)
- HRSA 99-1(2a)
- HRSA 99-1(3)
- HRSA 99-1(4)

Exhibits

- Exhibit C
- Exhibit N
- Exhibit O(1)
- Exhibit S
- Exhibit P

Other Information

- Additional Documentation

**Exhibit C: FI Summary of Audit Issues**

Fill in the form below to document the audit issues. If there are no audit issues to record, click the 'Save and Continue' button to proceed to the next section. To add (+ View More)

Section Status: Not Started

View

FTE Assessment | Guidance | **Public Burden Statement** | Instructions | FAQs | User Guide | CHGME Payment Website | Application PDF | Reconciliation Application

Public Burden Statement | CHGMEFIA | HRSA EHBs - Mozilla Firefox

https://grants4.hrsa.gov/2010/WebBHP2Assessment/Interface/V01/PublicBurdenStatement.aspx?Packageld=833a18a1-f5fe-4a1f-b39a-22af...

**Public Burden Statement**

Department of Health and Human Services  
Health Resources and Services Administration

OMB Number: 0999-0247  
Expiration Date: 2/29/2020

**Public Burden Statement**

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0999-0247. Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857.

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Tuesday 10<sup>th</sup> December 2019 01:23:54 P.M.

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**CHILDREN'S HOSPITAL OF ALABAMA, THE (Medicare Provider #: 01-3300)** Section Status: Not Started

Resources

View

FTE Assessment | Guidance | **Public Burden Statement** | Instructions | FAQs | User Guide | CHGME Payment Website | Application PDF | Reconciliation Application

Fields with \* are required

Current MCR Period: 01/01/2018 - 12/31/2018

**Add Audit Issue**

\* Reference

\* Description

\* FTE Residents

javascript:OpenPopupWithMenuBar('PublicBurdenStatement.aspx?Packageld=833a18a1-f5fe-4a1f-b39a-22af79ec46c6;600,980,' Public Burden Statement')

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