

Revision: HCFA-AT-80-38(BPP)
May 22, 1980

State:

Citation
42 CFR 447.201
42 CFR 447.202
AT-78-90

**4.19(g)The Medicaid agency assures appropriate
audit of records when payment is based on
costs of services or on a fee plus
cost of materials.**

TN No.

Supersedes

Approval Date _____

Effective Date

TN No.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number for this information collection is 0938-0193 (Expires: TBD). The time required to complete this information collection is estimated to average 1 hour per response, including the time to review instructions, searching existing data resources, gather the data needed, and complete and review the information collection. If

you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, Attn: PRA Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21224-1850.