

**PRF Audit Compliance Email Template – Audit Report Before June 2021**

Subject: Provider Action Required: Provider Relief Programs Audit Performed Prior to June 2021

Dear Valued Provider,

The Health Resources and Services Administration (HRSA) has reviewed the audit of (Provider Name)'s Provider Relief Fund (PRF) and American Rescue Plan Rural Distribution or Claims Reimbursement to Health Care Providers and Facilities for Testing, Treatment, and Vaccine Administration for the Uninsured Distribution (Uninsured Program or UIP) for the period of availability ending Month XX, Year.

**Action Required:** We have reviewed the audit report and determined the audit was performed prior to June 30, 2021. Please have your audit firm determine if your audit report followed the 2021 Compliance Supplement, as mentioned below:

“Due to delays in the launch of the PRF portal, the Schedule of Expenditures of Federal Awards (SEFA) reporting guidance that appeared in the 2020 Compliance Supplement addendum is superseded by the following:

For Fiscal Year Ends (FYE) on or before June 29, 2021, no PRF expenditures or lost revenues should be reported by recipients on the SEFA until the specified timeframe described in the reporting requirements summarized in the table above.”

Please provide your response to this email by 11:59 PM Eastern on Date. If you have questions regarding this email, please respond to this email.

For your convenience, we are attaching the audit report.

Thank you in advance for your cooperation.

Provider Relief Fund Commercial Audit Resolution and Disputes Team  
Division of Financial Integrity

**Public Burden Statement:** The purpose of this information collection is to follow 45 CFR 75 Subpart F for Provider Relief Program funding. 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 information collection is 0906-XXXX and is valid until MM/DD/20XX. Public reporting burden for this collection of information is estimated to average xx 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 14N136B, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).