Exhibit O(2): HRSA 99-1(1) - Determination of Weighted and Unweighted Resident FTE Counts

Are you a new children's hospital that has not completed three full Medicare cost reporting periods?

O Yes

No

Section	Determination of Resident FTE CAP for the Hospital's Most Recent Cost Reporting Period Ending On or Before	To be completed by hospital	For CHGME FI Use Only		
Section	December 31, 1996	Hospital Data	MCR Data	FI Data	
* Section 1 d - Status ar	nd Dates of the Cost Reporting Period				
1.01	Inclusive dates of the subject cost reporting period	From: To: '	From: ' To: '		
1.02	Status of MCR				
1.03	Unweighted resident FTE count for allopathic and osteopathic programs (from the 1996 cap year)				
* Section 2 ☐ - Average	of Unweighted Resident FTE Counts				
2.01	Total unweighted resident FTE count for the hospital's most recently completed cost reporting period				
2.02	Total unweighted resident FTE count for the hospital's prior cost reporting period				
2.03	Total unweighted resident FTE count for the hospital's penultimate cost reporting period				
2.04	Rolling average of unweighted resident FTE count				
2.05	Add On: Unweighted resident FTE count meeting the criteria for an exception				
2.06	Adjusted rolling average of unweighted resident FTE count				
2.07	Add On: Unweighted resident FTE count from MMA §422				
2.08	Grand Total: Unweighted resident FTE Count				
* Section 3 d - Average	of Weighted Resident FTE Counts				
3.01	Total weighted resident FTE count for the hospital's most recently completed cost reporting period				
3.02	Total weighted resident FTE count for the hospital's prior cost reporting period				
3.03	Total weighted resident FTE count for the hospital's penultimate cost reporting period				
3.04	Rolling average of weighted resident FTE count				
3.05	Add On: Weighted resident FTE count meeting the criteria for an exception				
3.06	Adjusted rolling average of weighted resident FTE count				
3.07	Add On: Weighted resident FTE count from MMA §422				
3.08	Grand Total: Weighted resident FTE Count				

Exhibit O(2): HRSA 99-1(2) - Determination of Weighted and Unweighted Resident FTE Counts

★ Section 4 🗗	Determination of FTE Resident Count for the Hospital's Most Recently Completed Cost Reporting Period	Hospital Data		For CHGME FI Use Only		
- Secuon 4 🖫		1996 CAP Year	§422 of the MMA	MCR Data	FI Data	
4.01	Inclusive dates of the subject cost reporting period	From: To:		From: ` To:		
4.02	Status of MCR					
4.03	Unweighted resident FTE count for allopathic and osteopathic programs (from the cap year)					
4.04	Unweighted resident FTE count for allopathic and osteopathic programs which meet the criteria for an add-on (to the cap)					
4.04a	$Addition \ (to the cap) for the unweighted resident FTE count for all opathic and osteopathic programs due to \$5503 \ of ACA$					
4.04b	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to \$5503 of ACA					
4.05	Adjustment (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs for affiliated programs					
4.05a	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §422 of the MMA					
4.06	FTE adjusted cap					
4.07	Unweighted resident FTE count for allopathic and osteopathic programs					
4.08	Enter the lesser of lines 4.06 and 4.07					
4.09	Unweighted resident FTE count for allopathic and osteopathic residents in their initial residency period					
4.10	Unweighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period					
4.11	Weighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period					
4.12	Weighted resident FTE count for allopathic osteopathic programs					
4.13	Weighted resident FTE count for allopathic and osteopathic programs following application of the resident FTE adjusted cap					
4.14	Unweighted resident FTE count for dental and podiatric programs					
4.15	Unweighted resident FTE count for dental and podiatric residents in their initial residency period					
4.16	Unweighted resident FTE count for dental and podiatric residents beyond their initial residency period					
4.17	Weighted resident FTE count for dental and podiatric residents beyond their initial residency period					
4.18	Weighted resident FTE count for dental and podiatric programs					
4.19	Total unweighted resident FTE count					
4.20	Total weighted resident FTE count					

Exhibit O(2): HRSA 99-1(2A) - Determination of Weighted and Unweighted Resident FTE Counts

★ Section 4 (Supplemental) 🗗	Determination of FTE Resident Count for the Hospital's Most Recently Completed Cost Reporting Period	MC	MCR Data		FI Data	
		1996 CAP Year	§422 of the MMA	1996 CAP Year	§422 of the MMA	
4.01	Inclusive dates of the subject cost reporting period	Fron To:		From To:		
4.02	Status of MCR					
4.03	Unweighted resident FTE count for allopathic and osteopathic programs (from the cap year)					
4.04	Unweighted resident FTE count for allopathic and osteopathic programs which meet the criteria for an add-on (to the cap)					
4.04a	Addition (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §5503 of ACA					
4.04b	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §5503 of ACA					
4.05	Adjustment (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs for affiliated programs					
4.05a	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §422 of the MMA					
4.06	FTE adjusted cap					
4.07	Unweighted resident FTE count for allopathic and osteopathic programs					
4.08	Enter the lesser of lines 4.06 and 4.07					
4.09	Unweighted resident FTE count for allopathic and osteopathic residents in their initial residency period					
4.10	Unweighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period					
4.11	Weighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period					
4.12	Weighted resident FTE count for allopathic osteopathic programs					
4.13	Weighted resident FTE count for allopathic and osteopathic programs following application of the resident FTE adjusted cap					
4.14	Unweighted resident FTE count for dental and podiatric programs					
4.15	Unweighted resident FTE count for dental and podiatric residents in their initial residency period					
4.16	Unweighted resident FTE count for dental and podiatric residents beyond their initial residency period					
4.17	Weighted resident FTE count for dental and podiatric residents beyond their initial residency period					
4.18	Weighted resident FTE count for dental and podiatric programs					
4.19	Total unweighted resident FTE count					
4.20	Total weighted resident FTE count					

Exhibit O(2): HRSA 99-1(3) - Determination of Weighted and Unweighted Resident FTE Counts

*	5 Determination of FTE Resident Count for the Hospital's Prior Cost Reporting Period	Hospital Data	For CHGME FI Use Only		
Section 5		1996 CAP Year	MCR Data	FI Data	
5.01	Inclusive dates of the subject cost reporting period	From: To:	From: To:		
5.02	Status of MCR				
5.03	Unweighted resident FTE count for allopathic and osteopathic programs (from the cap year)				
5.04	Unweighted resident FTE count for allopathic and osteopathic programs which meet the criteria for an add-on (to the cap)				
5.04a	Addition (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §5503 of ACA				
5.04b	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to $\$5503$ of ACA				
5.05	Adjustment (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs for affiliated programs				
5.05a	$\label{eq:Reduction} \textit{(to the cap) for the uniweighted resident FTE count for all opathic and osteopathic programs due to \$422 \\ \textit{of the MMA}$				
5.06	FTE adjusted cap				
5.07	Unweighted resident FTE count for allopathic and osteopathic programs				
5.08	Enter the lesser of lines 5.06 and 5.07				
5.09	Unweighted resident FTE count for allopathic and osteopathic residents in their initial residency period				
5.10	Unweighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period				
5.11	Weighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period				
5.12	Weighted resident FTE count for allopathic osteopathic programs				
5.13	Weighted resident FTE count for allopathic and osteopathic programs following application of the resident FTE adjusted cap				
5.14	Unweighted resident FTE count for dental and podiatric programs				
5.15	Unweighted resident FTE count for dental and podiatric residents in their initial residency period				
5.16	Unweighted resident FTE count for dental and podiatric residents beyond their initial residency period				
5.17	Weighted resident FTE count for dental and podiatric residents beyond their initial residency period				
5.18	Weighted resident FTE count for dental and podiatric programs				
5.19	Total unweighted resident FTE count				
5.20	Total weighted resident FTE count				

Exhibit O(2): HRSA 99-1(4) - Determination of Weighted and Unweighted Resident FTE Counts

★ Section 6	Determination of FTE Resident Count for the Hospital's Penultimate Cost Reporting Period	Hospital Data	For CHGME FI Use Only		
		1996 CAP Year	MCR Data	FI Data	
6.01	Inclusive dates of the subject cost reporting period	From: To:	From: To:		
6.02	Status of MCR				
6.03	Unweighted resident FTE count for allopathic and osteopathic programs (from the cap year)				
6.04	Unweighted resident FTE count for allopathic and osteopathic programs which meet the criteria for an add-on (to the cap)				
6.04a	Addition (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §5503 of ACA				
6.04b	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §5503 of ACA				
6.05	Adjustment (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs for affiliated programs				
6.05a	Reduction (to the cap) for the unweighted resident FTE count for allopathic and osteopathic programs due to §422 of the MMA				
6.06	FTE adjusted cap				
6.07	Unweighted resident FTE count for allopathic and osteopathic programs				
6.08	Enter the lesser of lines 6.06 and 6.07				
6.09	Unweighted resident FTE count for allopathic and osteopathic residents in their initial residency period				
6.10	Unweighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period				
6.11	Weighted resident FTE count for allopathic and osteopathic residents beyond their initial residency period				
6.12	Weighted resident FTE count for allopathic osteopathic programs				
6.13	Weighted resident FTE count for allopathic and osteopathic programs following application of the resident FTE adjusted cap				
6.14	Unweighted resident FTE count for dental and podiatric programs				
6.15	Unweighted resident FTE count for dental and podiatric residents in their initial residency period				
6.16	Unweighted resident FTE count for dental and podiatric residents beyond their initial residency period				
6.17	Weighted resident FTE count for dental and podiatric residents beyond their initial residency period				
6.18	Weighted resident FTE count for dental and podiatric programs				
6.19	Total unweighted resident FTE count				
6.20	Total weighted resident FTE count				

Public Burden Statement: The purpose of this information collection is to obtain performance data for the following: HRSA Grantees and cooperative agreement recipients, public health, and applications. In addition, these data will facilitate the ability to demonstrate alignment between BHW programs and CHGME Payment Program's participating children's hospitals. 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 0915-0247 and it is valid until 12/31/2025. Public reporting burden for this collection of information is estimated to average 3.7 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 Information Collection Clearance Officer, 5600 Fishers Lane, Room 14NWH04, Rockville, Maryland, 20857.