



MultiCare Health System

820 A Street, Tacoma, WA 98402

PO Box 5299, Tacoma, WA 98415-0299 ~ multicare.org

July 25, 2025

Samantha Miller, MPH.
HRSA Information Collection Clearance Officer
Room 14NSH04
5600 Fishers Lane
Rockville, MD 20857

Re: *Initial and Reconciliation Application Forms to Report Graduate Medical Education Data and FTE Residents Trained by Hospitals Participating in the CHGME Payment Program; and FTE Resident Assessment Forms to Report FTE Residents Trained by Organizations Participating in the CHGME Payment Program and the THCGME Program, OMB No. 0915-0247—Revision.*

Dear Ms. Miller:

I am writing on behalf of MultiCare Health System to respond to the request for information from the Health Resources and Services Administration (HRSA) regarding revisions to the Children's Hospital Graduate Medical Education (CHGME) program applications and resident full-time equivalent (FTE) assessment forms.

MultiCare was pleased to see HRSA updated its methodology for determining the weighted FTE count for facilities participating in the CHGME program. To further strengthen the program, we feel opportunities exist to minimize the burden associated with information-collecting activities. Below, please find our comments on the requested topic areas.

The necessity and utility of information that is currently collected

The amount of ancillary information HRSA requires on these forms and applications is burdensome. Gathering this data requires MultiCare coordinators and administrators to devote significant resources, directing time and attention away from other critical tasks. This process is also burdensome for our GME learners themselves — a common perception among them is that the level of detail requested is intrusive. We encourage HRSA to reevaluate the amount and type of information requested to reduce unnecessary strain on both GME learners and institutions.

The current estimated burden on hospitals to complete these forms (e.g., time expended to provide the information, including time to install and use technology and train personnel)

Each report and any associated data gathering typically require the dedicated time of 1.0 FTE personnel at MultiCare for at least two weeks every year — and this is just to manage a single hospital's annual report. When a health care system has multiple facilities, this time expenditure is multiplied many times over.

Additionally, dedicated software is required to track residents and fellows within our organization. This software has annual subscription fees that cost thousands of dollars, and our employees must then spend several hours training to use the software.

Ways to enhance the quality, utility and clarify of the information collected

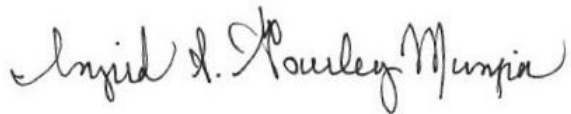
See the answer below.

The potential use of automation or information technology to minimize the information collection burden

To help alleviate administrative burden, MultiCare recommends that HRSA automate the information-gathering process using Centers for Medicare & Medicaid Services (CMS) CR data. An automated approach would be much less labor intensive, lessening the burden on GME learners and health care institutions. Streamlining administrative processes allows learners and staff to spend precious resources on direct patient care or tasks that support the delivery of that care.

Thank you for the opportunity to provide feedback about revisions to the CHGME applications and FTE resident assessment forms. Please let us know if there is any additional information we can provide.

Sincerely,

A handwritten signature in cursive script, reading "Ingrid S. Gourley Mungia".

Ingrid S. Gourley Mungia, JD
VP, Public Policy and Advocacy