

**Alabama Department of Public Health, Bureau of Health Provider Standards
201 Monroe Street, Suite 600
Montgomery, AL 36104
334/206-5366 (phone)**

**Non-URAC Agents
Annual Policy Attestation Statement**

I do solemnly swear or affirm that the policy and procedure documents approved during the previous year's annual renewal process remain in force and unchanged. There have be no modifications to these policy and procedure documents, nor have new policy and procedure documents been added. I further affirm that any changes or additions to previously approved policies were timely submitted (within 30 days) for review to the Alabama Department of Public Health.

Policy and Procedure Documents Still In Use are Listed Below (by form number)

Authorized Signature _____

(Must be senior official of the organization)

Name of Signatory _____

Sworn to and Subscribed Before me this _____ Day of _____ 20 _____

Signature and Seal of Notary _____