



Electronic Health Records Incentive Program Flexibility Rule Form

Providers affected by the delay in fully implementing 2014 Certified Electronic Health Record Technology (CEHRT) prior to the beginning of the last full reporting period (10/03/2014) must complete and fax in this form along with all other required documentation.

Check One	Reason for Delay	Explanation (Include date 2014 CEHRT was installed/updated)
<input type="checkbox"/>	Installation of new or updated 2014 CEHRT was not completed*	
<input type="checkbox"/>	Unable to fully implement 2014 CEHRT*	
<input type="checkbox"/>	Unable to appropriately train staff on 2014 CEHRT*	
<input type="checkbox"/>	Unable to test 2014 CEHRT*	
<input type="checkbox"/>	Unable to establish new workflows for 2014 CEHRT*	
<input type="checkbox"/>	Unable to meet the Stage 2 Summary of Care objective due to 2014 CEHRT delay	
<input type="checkbox"/>	Other**	

If the reason specified is found to be unreasonable upon review or audit, the attestation will be denied or the EHR Incentive payment will be recouped.

Provider NPI: _____

Provider Name: _____

Signature of CEHRT Owner: _____
(or authorized representative)

Date: _____

***If 2014 CEHRT was installed/updated prior to 10/3/2014, proof of installation/update date is required.**

****If "other" is selected, the reason must be approved prior to payment and additional documentation may be required.**

For assistance with this form or questions regarding the EHR Incentive Program, please contact the EHR team at 405-522-7347 or okehrincentive@okhca.org.