Cost Proposal Form - Electronic Health Records Medicaid Incentive Payment Administration Tool
(NOTE: This Cost Proposal Form may not be marked confidential in any way)

	11/1/2011 - 4/1/2012	4/2/2012 - 4/1/2013	4/2/2013 - 4/1/2014	4/2/2014 - 4/1/2015	4/2/2015 - 4/1/2016	4/2/2016 - 4/1/2017	4/2/2017 - 4/1/2018	4/2/2018 - 4/1/2019	4/2/2019 - 4/1/2020	4/2/2020 - 4/1/2021	4/2/2021 - 10/30/2021
Projected Utilization (providers using the system)	x	x	x	x	x	x	x	x	x	x	x
Implementation											
Software (purchase or initial license fee)	$ -										
Services Costs: (detail below)											
	$ -										
	$ -										
	$ -										
	$ -										
Misc. (detail any other charges during Implementation below)											
	$ -										
	$ -										
	$ -										
	$ -										
	$ -										
Operations											
Licensing fees		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Service Contract		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Maintenance fees		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Misc. (detail any other charges during Operations below)											
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -