

## Local Chapter Application for CHRI CEU Approval

Please return this to:

HCPro
Nicole Votta
NAHRI
233 N. Michigan Ave., 21st Floor, Chicago, IL 60601
nicole.votta@hcpro.com

This application must be submitted at least 30 days prior to the date of the program for which you seek CEUs.

Type or print neatly.

| туре от рин пеацу.                       |                                       |   |
|--|---------------------------------------|---|
| 1. Program sponsor information           |                                       |   |
| Local Chapter Name:                      |                                       | Website:                                |
| Event Location:                          |                                       |   |
| Address:                                 |                                       |   |
| City/State/Zip:                          |                                       |   |
| Contact Person (name and title):         |                                       |   |
| Work Phone:                              | Fax:                                  | E-mail:                                 |
| 2. Program overview                      |                                       |   |
| Program title:                           |                                       |   |
| Total number of CEUs requested:          | Program length                        | (hours and/or minutes):                 |
| (Note: One CEU is provided per hour o    | f instruction, excluding breaks/lunch | es)                                     |
| Please indicate how the number of CE     | Js was calculated:                    |   |
| Teaching methodology (check all that a   | apply):                               |   |
| Face-to-face seminar or workshop         | Face-to-face lecture_                 | Virtual (Web-based) seminar or workshop |
| Audio conference/seminar                 | E-Learning (Web-based) course         | Other (please specify):                 |
| Event Date                               | Program Time (e.g. 1-3 pm)            |   |
| Speaker(s)/faculty/developer(s) of activ | ity (please include credentials and s | ubmit a bio, description or résumé)     |
|  |                                       |   |
| Learning objectives— Please describe     | knowledge or skills gained after co   | mpletion of activity                    |
|  |                                       |   |
| Describe the benefit for revenue integr  | ity professionals                     |   |
|  |                                       |   |



## 3. Additional documents required:

- Timed program agenda
- Marketing materials (if applicable)

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NAHRI will award Continuing Education Units (CEUs) for education and training programs, lectures, and workshops, including audio and telephone conferences, on topics of interest and importance to the revenue integrity profession. We particularly encourage presentations about best practices, strengthening revenue integrity procedures and policies, and regulatory changes. One hour of appropriate training and education equals one CEU. CEUs will not be awarded for introductory or welcome sessions, routine chapter business and discussions, election of officers, or for time alloted for breaks or meals.

## 4. Contract for prior approval

As the representative for the sponsoring chapter, I have reviewed NAHRI's requirements for prior approval of a continuing education program and agree to abide by them. I understand that failure to follow the requirements for prior approval may result in revocation of prior approval and prohibit future approval by NAHRI.

| Name  | _Signature |
|-------|------------|
| Title | Date       |