



Clinigence, LLC
75 5th St. NW, Suite 216
Atlanta, GA 30308

Practice Information

Practice Name

Address Line 1

Address Line 2

City/ST/Zip

Phone/Ext

By signing this document the provider identified in the signature section below authorizes Clinigence, LLC an authorized EHR Data Submission Vendor, to submit on the provider's behalf patient-specific data on Medicare beneficiaries to CMS for the purpose of 2013 PQRS participation.

Provider TIN

Provider NPI

Provider (printed)

Provider (signature)

Date (mm/dd/yyyy)