

Cost Calculation *(print this document out and enter the fees and sums by hand – pricing valid 1/1/20)*

To compute your estimated fees, please refer to the table below:

	Size	Revenue Amount	Annual Fee	Site Visit Fee/Site/ Day	Multiple Program/ Accreditation
1	Very Small	Under \$3M	\$3,250	\$5,000	\$1,625
2	Small or Outsource	Greater Than \$3 Less Than \$8M	\$4,250	\$5,000	\$2,125
3	Medium	Greater Than \$8 Less Than \$20M	\$8,500	\$8,000	\$4,250
4	Med/Large	Greater Than \$20 Less Than \$50M	\$13,000	\$8,000	\$6,500
5	Large	Greater Than \$50M Less Than \$75M	\$20,000	\$8,000	\$10,000
6	Very Large	Greater Than \$75M	\$26,500	\$8,000	\$13,250

1. Enter the **Annual Fee** amount: find this in the table above based on **your company's annual revenue (Outsource Programs use Small Size)**: \$ _____

2. a) Enter the **Site Visit Fee/Site/Day** rate from the table based on your company's **annual revenue**: \$ _____
 b) Enter the number of sites that will need to be reviewed based on the **Site Visits Page**. Make sure you review the information on that page **carefully**, as all sites must be reviewed where Protected Health Information is created, received, maintained, or transmitted. This includes remote corporate locations and outsourcer sites. It also includes sites where key DTAAP information is handled, such as Personally Identifiable Information and cryptographic keys: # _____
 c) **Site Visit Fee total:** – Enter the Result of **a. × b.**: \$ _____

3. If you are applying for multiple programs, enter the **Multiple Program Accreditation Fee(s)** from the table based on your company's annual revenue: (Total # of Programs, less 1, times the MP Fee): \$ _____

4. One Time discount for CAQH CORE Certification, or Membership in Direct Trust.org. One Time Amount is based upon Revenue size; \$400 under \$75 Million, or \$600 Over \$75 Million (See [Fees Page](#) on [EHNAC.org](#)): \$(_____)

5. **First Year – Accreditation** (includes Annual Fee, Site Visit Fees and Multiple Program Fees) : Calculate your total fee by adding #1, #2, #3 and subtracting #4: \$ _____

6. **Second Year - Annual Fee:** Fee paid every Year – enter amount from #1: \$ _____

7. **Re-Accreditation - every 2 Years from Original Accreditation Date:** (includes Annual Fee, Site Visit Fees and Multiple Program Fees). Calculate your total estimated Re-Accreditation Fee by adding #1, #2 and #3: \$ _____

Important notes: The calculations above do not include the following additional fees:

1. Travel expenses incurred when conducting the site reviews;
2. Late Fees if applicable.