**Illinois Department of Human Service**

**Health IT Module Certification**

Pursuant to 720 ILCS 570/220, **[insert organization name here]** hereby certifies that it utilizes DrFirst.com, Inc’s (“DrFirst”) federally certified Health IT module with **Kareo, Inc.** DrFirst’s ONC-ACB Certification ID is: 15.04.04.1375.Rcop.04.00.0.171227 and DrFirst’s CHPL and Product Number is: 15.04.04.1375.Rcop.04.00.0.171227 (available at <https://chpl.healthit.gov/#/listing/9207>).

**[insert organization name here]** further certifies that it has entered into a business associate agreement with **Kareo, Inc.** who has a business associate agreement with **DrFirst** that requires DrFirst to agree to adhere to all applicable requirements imposed on **[insert organization name here]** by the laws of Illinois, including data privacy and security obligations that the Bureau otherwise requires.

By:

Date: