

Request for National Certification/Recertification Reimbursement

This grant only covers NATIONAL CERTIFICATION EXAMS taken and RENEWALS occurring from January 1, 2012 – December 31, 2012

Guidelines:

1. Must be an employee for at least 90 days and currently have a status of at least 0.5 FTE.
 - National Certification/recertification is not available to PRN employees.
2. National Certification must be appropriate to the employee’s department and pre-approved by Director.
 - The Department Director must approve any questions regarding appropriateness of national certification.
3. Employee may be reimbursed through the Academy for Clinical Excellence Certification Program up to a maximum of \$400 for first time national certification and up to a maximum of \$225 for national recertification.
 - Reimbursement will not exceed the actual cost of the national certification exam or recertification fee.
 - Employee will be reimbursed for one (1) national certification or recertification fee.
4. Reimbursement will not be processed until the national certification exam and/or recertification receipt of payment and proof of successful national certification completion is received at the Institute for Learning.
 - Reimbursement will not occur beyond 60 days after employee receives notification of successful national certification/recertification.
 - Reimbursement payments are administered through the HCA Concur system.
5. Academy for Clinical Excellence Certification Program does not reimburse for prep courses or refresher courses.
6. Prep courses and national certification exam are taken on employee’s non-worked time unless pre-approved by their Director.
7. The employee is ineligible for reimbursement through the Academy for Clinical Excellence Certification Program if their facility or any other grant/scholarship program covers any part of the cost of the national certification exam.

To receive your national certification/recertification reimbursement:

1. Submit the following forms to the Institute For Learning:
 - a. Completed information below
 - b. Copy of national certification certificate and/or verification of recertification
 - c. Copy of national certification exam **receipt of payment** and/or recertification **receipt of payment**
 - d. Mail or fax completed forms to:
 Institute for Learning, Attn. National Certification Program
 7800 Shoal Creek Blvd. Suite 124 S
 Austin, TX 78757
 Office: 512.544.0100; Fax: 512.544.0130
2. Institute for Learning will review forms, verify grant eligibility, and approves (if applicable)
3. Create Concur account:
 - a. Approved National Certification/Recertification Reimbursement form will be returned to you from the Academy for Clinical Excellence
 - b. Set up Concur account with facility/department director’s approval
 - c. Follow Concur process for reimbursement of payment, include this form with your receipt.

Name: _____ Date: _____

Address: _____ City/State/Zip: _____

Email: _____ Daytime phone: _____

Date certification completed: _____ 3/4 ID: _____

Facility/Unit: _____ Cost Center: _____

Manager/Director: _____ Manager/Director phone#: _____
 (Signature approval)

AVP ACE: _____ Date processed by Institute for Learning: _____
 (Signature approval)

Email notification: Employee CNO COO Manager/Director

Check one: First Time certification – Amount of certification: _____ (Receive: up to \$400 reimbursement)
 Recertification – Amount of recertification: _____ (Receive: up to \$225 reimbursement)