Other formats and languages

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Cost Growth Target Program at HealthCare.CostTarget@oha.oregon.gov.

Cost Growth Target Data Submission Waiver/Extension Request (CGT-3)

Entities may complete and submit the request form below to the Oregon Health Authority (OHA) to request a waiver or extension to the cost growth target reporting requirements as authorized under Oregon Revised Statutes (ORS) 442.385 and 442.386 and detailed by Oregon Administrative Rule 409-065 (see OAR 409-065-0020, OAR 409-065-0028, and OAR 409-065-0040 for request deadlines). If applicable, additional documents may be required to support the request. OHA staff will review the request and notify the requester of the decision via email. For more information for payer reporting, see the Data Specification Manual (CGT-2).

Completed forms should be signed and emailed to HealthCare.CostTarget@oha.oregon.gov

Entity name (name of organization):	
Doing business as (if applicable):	
Contact/Requester Name:	Reporting requirement: ☐ CGT-1 ☐ CGT-4 ☐ CGT-5
Contact Email:	Contact Phone:

Date of Request:	Request type: ☐ Extension ☐ Waiver
Original reporting deadline:	Requested extension deadline:
Reason for request:	
Contact / Requester Signature: **Date:**	

OFFICIAL OHA USE ONLY – DECISION ON REQUEST

Request is: ☐ Approved ☐ Denied	If approved, end date: *End date is when OHA would need another reporting waiver or, if an extension, when data/or files are due*
Date request received:	Date of decision:
Signature: Printed name:	