

## SECURITY RISK ANALYSIS ATTESTATION (SRA)

Since many SRAs do not produce some key information our auditors need, please include this completed document when you upload your SRA.

**Name of Clinic or Organization** \_\_\_\_\_

**Name of Whomever Conducted the Assessment** \_\_\_\_\_

**Date Span of the Assessment** (must include the Meaningful Use date span)  
\_\_\_\_\_

**The Date the SRA was Completed** (MUST be ran within the calendar year of the Meaningful Use period. Example: If you are attesting to MU in 2018 you must run the SRA by 12/31/2018) \_\_\_\_\_