

2018 NCHCFA FINANCIAL SUMMIT REGISTRATION FORM - SEPTEMBER 25 - 27, 2018

Return completed form to the Association office on or before Friday, September 21, 2018, by fax (919) 787-8418 or mail to 5109 Bur Oak Circle, Raleigh, NC 27612, or e-mail donnas@nchcfa.org. You can register and pay on-line. Visit www.NCHCFA.org & click on 2018 NCHCFA Financial Summit Registration!

Facility/Corporate Office Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____ **Contact Person:** _____

PACKAGE TWO (Full Package)

Please list first and last names as they should appear on badges.

Package Two registration includes all education sessions & networking/social functions for **ALL 3 DAYS**, September 25 - 27, 2018

| | | | | | | | | | | | | | | | | |
|---|---------------|---------------------|---------------------------|---------------------------------|---|--|----------------------------|--|--------------------------------|------------------------------|--------------------------------|--------------------------------|---|--|---------------------------|---|
| Developing & Launching a Medicare Advantage Plan (I-SNP) 3 Parts – Environmental Context, Medicare Advantage/Special Needs Plans 101, Forming & Operating a Health Plan | Tuesday Lunch | I-SNP Partner Panel | Tuesday Welcome Reception | Wednesday Continental Breakfast | Opening Keynote! Driving the Conversation- A Look at the Future of Health Care in America | Medicaid Managed Care Presentation and Panel | Wednesday Networking Lunch | “Approved”: Understanding What Lenders and Investors Need to Know in LTC Lending | Define Your Value Through Data | Patient-Driven Payment Model | Wednesday Networking Reception | Thursday Continental Breakfast | The Complex World of Medicaid Eligibility and Reimbursement | Provider Audits: Current Issues and Best Practices | Thursday Networking Lunch | Closing Keynote! Disruptive Demographics: Implications for Long Term Care |
|---|---------------|---------------------|---------------------------|---------------------------------|---|--|----------------------------|--|--------------------------------|------------------------------|--------------------------------|--------------------------------|---|--|---------------------------|---|

***Please include attendee position/title:

| | | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q |
|--------|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Name: | Admin#: | | | | | | | | | | | | | | | | | |
| Title: | | | | | | | | | | | | | | | | | | |
| Name: | Admin#: | | | | | | | | | | | | | | | | | |
| Title: | | | | | | | | | | | | | | | | | | |
| Name: | Admin#: | | | | | | | | | | | | | | | | | |
| Title: | | | | | | | | | | | | | | | | | | |

| | | |
|---|---|----|
| Total Number of Package Two Registrations (MEMBER) | Persons @ \$395.00 Each | \$ |
| Total Number of Package Two Registrations (NON Member) | Persons @ \$1,185.00 Each | \$ |
| | Total GUEST Amount (From Reverse Side) | \$ |
| | Total Amount Due for Package Two | \$ |

Package Two (GUEST)

May not be an employee of an attending facility or company. Please list first and last names as they should appear on badges.

Guest registration includes entrance into the Breakfasts, Lunches, and Receptions for

ALL 3 DAYS!

September 25 – 27, 2018

| Tuesday Networking Lunch | Tuesday Welcome Reception | Wednesday Continental Breakfast | Wednesday Networking Lunch | Wednesday Networking Reception | Thursday Continental Breakfast | Thursday Networking Lunch |
|-----------------------------|------------------------------|------------------------------------|-------------------------------|-----------------------------------|-----------------------------------|------------------------------|
| C | F | G | J | N | O | R |
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| | | | | | | |

Name:

Name:

Name:

Name:

Total Number of Package Two **GUEST Registrations**

| | | |
|--|-------------------------|----|
| | Persons @ \$125.00 Each | \$ |
|--|-------------------------|----|

- Member Rate for Package Two includes all education sessions, meals, and networking/social functions for three days.
- Non-Member Rate for Package Two includes all education sessions, meals, and networking/social functions for three days. Non-Members must pay in advance by credit card or by check.
- Guest Rate for Package Two includes networking/social functions only for three days. Guest registration may include spouse, family member, significant other, etc..., but does not apply to colleagues or any others in the long term care industry or a provider of services for the long term care industry.

_____ Please Invoice Me (Members Only)

_____ Check Enclosed