

Registration Form

HFMA Fall Conference – October 20-22, 2010



To Pay by Credit Card, please register online at the URL below:

www.hfma.org/Kansas-and-Missouri-Chapters-Annual-Fall-Conference/



To pay by check, please complete the registration form below, make the check payable to Show-Me HFMA, and mail with copy of registration form to:

Audrain Medical Center
Attn: Jennifer Ogden
620 E. Monroe
Mexico, MO 65265

Please print information as you would like it printed on your name badge.

(Phone & email required in case there is a problem with payment, or we need to contact you for a program announcement.)

Name _____ Title _____
 Company _____ Phone _____
 Email _____ Address _____
 City, State, Zip _____
 Member Non Member Chapter Affiliation _____ Member ID _____

On or before October 6

After October 6

	<u>HFMA Member</u>	<u>NonMember</u>	<u>HFMA Member</u>	<u>NonMember</u>
Full Conference	_____ \$195	_____ \$220	_____ \$220	_____ \$245
Thursday only	_____ \$125	_____ \$150	_____ \$150	_____ \$175
Student	_____ \$75	_____ \$75	_____ \$100	_____ \$100
Pub Crawl (Only)	_____ \$50 (Extra guest ticket)		_____ \$50 (Extra guest ticket)	

Full Conference – includes all sessions, meals, receptions, and pub crawl.

Pub Crawl – Tickets for extra guests includes reception, dinner & transportation.

Total Amount Enclosed \$ _____ (Reminder – Reserve hotel room by October 6 for HFMA rate.)

Please check the appropriate box above. Each attendee needs to fill out their own form completely pages 1 & 2. However, the payment can be combined. Make a notation as such in the comments below.

Cancellation Policy – Cancellations received before October 8, 2010 – a full refund minus a \$50 processing fee per registrant will be granted. Cancellations made after this date are responsible for the full registration fee. Substitutions are acceptable, but please let us know the name of your replacement by October 15, 2010.

Comments: _____

Program Schedule – Attendance Selections

Please check the appropriate box below. Please check “Yes” or “No” for each and every line. We realize that your selections may change. However, this will help us with planning purposes.

Wednesday

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	11:00 – 12:30	Certification Review
(Concurrent Sessions – next 2 lines)					
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	1:15 – 2:45	Certification Review
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	1:15 – 2:45	Healthcare Reform
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	3:00 – 4:30	Healthcare Reform – Panel Discussion

Thursday

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	7:30 – 8:30	Continental Breakfast
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	8:30 – 9:45	Keys to Effective Leadership in a Diverse Workforce
(Concurrent Sessions – next 2 lines)					
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	10:15 – 11:15	Automating the Supply Chain to Achieve Operational Excellence
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	10:15 – 11:15	Keys to an Effective Denials Management Strategy
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	11:45 – 1:00	Lunch & Creating Loyal Employees and Customers
(Concurrent Sessions – next 2 lines)					
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	1:15 – 2:30	Medicare & Medicaid EHR Incentive Program
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	1:15 – 2:30	Transitioning Supply Chain to a Strategic Asset
(Concurrent Sessions – next 2 lines)					
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	3:00 – 4:30	Stand Alone or Seek A Partner: Assessing Your Hospital's Future
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	3:00 – 4:30	How to Use Probate to Increase Recoveries - Forte
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	6:00	Dinner & Entertainment (Don't miss out on the fun.)

Friday

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	7:30 – 8:30	Breakfast
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	8:30 – 10:00	Health Information Exchange
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	10:15 – 11:45	Health Information Exchange – Panel Discussion

Comments: _____

