



Corporate Provider Membership Application

New Member Renewal

Member ID (if known): _____

Primary Contact Name _____

Agency / Organization Name _____

Title _____

Address _____

Primary Contact Email Address _____

Listing in the <i>NAHC Agency Locator</i> : _____ _____ Contact Name for Agency Referrals _____ Email Address for Agency Referrals _____
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City State Zip _____

Telephone Number _____

Fax Number _____

Company Web Address _____

Voting Section: Home Health Hospice
Select Only One Private Duty National Provider
 Integrated Health System Provider

Social Media Used: Facebook Twitter
 LinkedIn YouTube

CORPORATE PROVIDER DUES CHART

Net patient service revenues*	2020 NAHC Dues
\$10,000,000 or less	\$11,500
\$10,000,001 – \$35,000,000	\$16,500
\$35,000,001 – \$50,000,000	\$22,100
\$50,000,001 – \$75,000,000	\$27,600
\$75,000,001 – \$100,000,000	\$33,100
\$100,000,001 – \$125,000,000	\$40,700
\$125,000,001 – \$150,000,000	\$44,100
\$150,000,001 – \$175,000,000	\$49,700
\$175,000,001 – \$200,000,000	\$55,100
\$200,000,001 – \$225,000,000	\$60,700
\$225,000,001 – \$250,000,000	\$66,200
\$250,000,001 – \$300,000,000	\$71,700
\$300,000,001 – \$350,000,000	\$77,200
\$350,000,001 – \$400,000,000	\$85,000
\$400,000,001 – \$450,000,000	\$95,000
\$450,000,001 – \$500,000,000	\$105,000
\$500,000,001 – \$550,000,000	\$115,000
\$550,000,001 +	\$125,000

Total Revenue: _____ Initials _____

* Net patient service revenues are reported at net realizable amounts from patients, third party payors and others for services rendered.

Association dues payments, to NAHC or otherwise, are not tax deductible as charitable contributions, Sections 501(c)5 and (c)6. The Internal Revenue Code limits the amount of business expense deductions for dues paid to an association that engages in lobbying activities even if dues are not used for lobbying; the amount excluded for 2020 is 16% based on IRS criteria.

NAHC PROVIDER MEMBERSHIP DUES (see chart for dues):

Payment in Full for 2020 \$ _____

Semi-annual Payments \$ _____
 Two payments due: 1/1/2020 and 7/1/2020

Quarterly Payments \$ _____
 Four payments due: 1/1/2020, 4/1/2020, 7/1/2020 and 10/1/2020

All dues amounts are annual, calendar based and non-refundable

Please see next page to add your staff to NAHC's Newsletters and to participate in NAHC Affiliates

The Home Care and Hospice Financial Managers Association (HHFMA) serves as a crucial resource to help address emerging challenges in home care and hospice and keep members informed of the latest pertinent information relating to finance and management. HHFMA dues are \$100 per individual.

Total Affiliate Fees \$ _____

Total Payment Enclosed \$ _____

Check Enclosed Check Number: _____

Visa Mastercard American Express Discover

Credit Card Number _____ Expiration Date _____

Print name as it appears on card _____ Billing Zip Code _____

Signature of Cardholder _____

OPTIONS TO PAY

Credit Card:

FAX: 202-547-3660 or
 CALL: Membership 202-547-7424

Check Payments:

MAIL: NAHC Bank Lock Box
 PO Box 37558, Baltimore, MD, 21297-3558

NAHC NEWSLETTERS

NAHC Report: Home care and hospice news, delivered daily

NAHC Events: Information on NAHC meetings, education and web events, delivered monthly

Hospice Notes: News and information for hospices, delivered biweekly

NAHC Business Link: Special offers from NAHC members, delivered biweekly

Home Care Technology Update: News round up from the technology side of home care and hospice, delivered weekly

Home Care & Hospice ListServ: Email discussion group for NAHC provider members, available as a digest, or in real time as 10-20 messages per day

NAHC AFFILIATES



Home Care & Hospice Financial Managers Associations: (HHFMA) Join more than 600 financial professionals to share best practices in finance and administration in the home care industry. Membership includes a monthly web conference, discounts to Financial Managers Conference and access to the HHFMA listserv discussion group; available as a digest or you can receive messages in real time. (Membership in HHFMA is \$100 per individual)

Private Duty Home Care Association: (PDHCA) Join a group of private pay specialists and share insights into this growing market. Membership includes a monthly phone conference and an email newsletter. Private Duty only members receive these benefits and more through their NACH dues. To sign up for PDHCA benefits in addition to NAHC, you must be a NACH provider or corporate member. (No additional charge for membership outside of NAHC dues)

Include your staff!

Please add the staff you would like to participate in NAHC membership.

Make additional copies of this form as necessary.

Important!

If renewing your membership – complete and return **ONLY if you are adding **NEW** staff to your account or HHFMA memberships.**

Don't forget!

Check the appropriate options for each person listed. (see above for descriptions).

Please Note: HHFMA membership is \$100 per individual

Name	Title			Email
NAHC Report	NAHC Events	Hospice Notes	NAHC Business Link	Home Care Technology Update
Home Care & Hospice ListServ	Home Care & Hospice Financial Managers Association (+\$100)			Private Duty Home Care Association

Name	Title			Email
NAHC Report	NAHC Events	Hospice Notes	NAHC Business Link	Home Care Technology Update
Home Care & Hospice ListServ	Home Care & Hospice Financial Managers Association (+\$100)			Private Duty Home Care Association

Name	Title			Email
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NAHC staff is committed to providing the highest quality service to its members.

Contact the Membership Department at (202) 547-7424 or membership@nahc.org for assistance.