Population Health Management Summit

DECEMBER 6-7, 2021 • JW Marriott Washington, DC

ahcancal.org/PHMSummit



REGISTER

Online⁻ www.ahcancal.org/PHMSummit Mail*: AHCA/NCAL Registration Office

> 2021 Population Health Management Summit 1201 L Street, NW, Washington, DC 20005

202-898-6302 eFax:

* Only check payment will be accepted via mail.

REGISTRATION

ONLINE REGISTRATION ENDS NOVEMBER 29, 2021

ATTENDEE ELIGIBILITY

Participation in this conference is intended for long term care (LTC) member and nonmember providers, AHCA/NCAL state affiliate staff members, nonmembers other than providers (e.g. health plan staff, consultants, and attorneys), and nonmember association and not for profit community organizations. AHCA / NCAL reserves the right to grant final approval to all registrants. Please note CE accreditation is available via this conference's education sessions. Registration and attendance for companies and individuals who sell or market products and/or services to provider organizations are limited to sponsors only. Any attendee eligibility questions can be directed to meetings@ahca.org.

PAYMENT

Payment can be made by U.S. Check, American Express, Visa, or MasterCard. AHCA/NCAL will not process your registration without full payment. To avoid duplicate charges to your credit card, DO NOT mail a copy of your registration form once it has been faxed or posted online.

CONFIRMATIONS

Registration confirmations will be e-mailed to you within 15 days of receipt.

SUBSTITUTIONS

Registration substitutions will be allowed up to two days prior to the conference. Changes and/or substitutions must be made in writing via fax to (202) 898-6302, or e-mail to meetings@ahca.org.

CANCELLATIONS/REFUNDS

Registration cancellations received on or before Friday, November 5, 2021 will be refunded minus a \$55.00 administrative fee. Any change or cancellation must be made in writing and faxed to (202) 898-6302 or sent via e-mail to meetings@ahca.org. Refunds will be processed within 15 days following the end of the conference.

Registration refunds will not be issued after Friday, November 5, 2021. Refunds or credits will NOT be granted to no-shows.

CONFERENCE ATTIRE

The average December temperature in DC is 48° F High and 30° F Low. Business attire is suitable for all meetings, sessions, and receptions, but please remember to bring a sweater or jacket for air-conditioned rooms and cool temperatures.

QUESTIONS

Registration questions should be directed to meetings@ahca.org, or call 202-842-4444.

HOTEL & RESERVATIONS

JW Marriott Washington, DC 1331 Pennsylvania Ave NW, Washington, DC 20004 (202) 393-2000

MAKE YOUR RESERVATIONS EARLY— **SPACE IS LIMITED**

To make your guest room reservations, call 800.393.2503 and ask for the AHCA/NCAL Population Health Management Summit and ASHCAE Technical Session rate. Reservations must be made by Friday, November 5, 2021 within the group block to receive the discounted rate. You can also visit our exclusive group reservations web page at https://book.passkey.com/event/50215403/ owner/559/home.

ROOM RATES/TAXES

Take advantage of the special Group rate of \$279.00 per night single or double occupancy, plus a 14.95% occupancy tax.

Early reservations are encouraged as there are a limited number of rooms available. AHCA/NCAL will not hold the room block beyond the hotel deadline, Friday, November 5, 2021. Reservation requests made after this hotel deadline will be based on availability at the prevailing rate determined by the hotel.

HOTEL RESERVATION CANCELLATIONS

At the time a hotel reservation is made, one (1) night's room advance deposit will be charged to the credit card provided. Hotel will not hold any reservations unless secured by this deposit. Cancellations made within 72 hours of arrival will forfeit one night's room and tax. Any changes to the reservation arrival and departure dates past the Friday, November 5, 2021 deadline are contingent upon availability and at the prevailing rate. Should you have any questions about the reservations process, please contact AHCA/ NCAL at meetings@ahca.org

HEALTH & SAFETY

All those attending in person will be required to:

- Be fully vaccinated against COVID-19. To be considered fully vaccinated, you must be two weeks past your second dose in a 2-dose series (Pfizer or Moderna) or two weeks past a single-dose vaccine (J&J/ Janssen).
- Wear a mask while in a public, indoor setting during any committee meeting or conference event including all common areas, meeting rooms, and event spaces.

Additional information regarding how to provide proof of vaccination is forthcoming. In the meantime, should you have any questions about this policy update, please direct your inquiries to meetings@ahca.org

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REGISTRATION FORM

REGISTRANT INFORMATION

Please type or print legibly. Use one form for each registrant. Keep a copy for your records.

Full Name				
Nickname for	Badge			
Title				
Organization N				
Organization <i>F</i>	Address			
City	State		Zip Code	
 Telephone		Fax		
E-mail				
Contact Name	(If different f	rom Regi	strant)	
Contact Telepl	hone/ E-mail			

SPECIAL ACCOMMODATIONS AND DIETARY NEEDS

If you require special accommodations or have special dietary needs, please contact AHCA/NCAL at meetings@ahca.org before Monday, November 29, 2021.





REGISTRATION SELECTION & FEES

Please select your registration category, based on your eligibility (information available on previous page and online).

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□ Other \$1025 (Non-members other than Providers, e.g. Health Plan staff, Consultants, and Attorneys)

☐ AHCA/NCAL State Affiliate Staff \$325

*This registration category is exclusively for executives and staff of AHCA/NCAL affiliate state health organizations. Provider members and non members must register under their respective categories and rates listed above.

Non-member Association or
NAME OF COLOR OF CO.

Not For Profit Community Organization \$650

☐ **Student** \$325

□ AHCA Elected Board Members, NCAL Executive Committee, and Past Chairs Complimentary

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PAYMENT INSTRUCTIONS

Registrations without payment will NOT be processed.

☐ Check enclosed (Payable in U.S. dollars to AHCA via mail only)

Please charge my: \square American Express \square Visa \square MasterCard (Only if registering via eFax)

Security Code

Card Number

Expiration Date

Name as it appears on card

Organization Name

Billing Address (If different from organization address)

Signature of Cardholder

RETURN COMPLETED FORM

eFax to: 202-898-6302

Mail* to: AHCA/NCAL Registration Office Population Health Management Summit

1201 L Street, NW • Washington, DC 20005

*Only check payment will be accepted via mail. Due to PCI DSS compliance, we cannot accept credit card payment via mail.

REGISTRATION DEADLINE: MONDAY, NOVEMBER 29, 2021

QUESTIONS? Call 202-842-4444, or email meetings@ahca.org.