

Colorado Center for Hospice & Palliative Care

Discounted Membership for Hospice Compliance Network

Return this completed form to HCN office. **Make checks payable to Summit Business Group, LLC** and mail or fax to Summit Business Group, LLC. Master Card and Visa also accepted.

Name	Telephone
Title	
Hospice	Fax
Address	Email Address
City/State/Zip	Address of Credit Card Holder if Different
Credit Card Number	City/State/Zip

How did your hear about us?
 Web E Mail Mailing State Org. Referral from: _____

1.	Hospice Compliance Network Base Membership* (single provider number)	\$100.00
	1 a. <i>Additional base membership without Guidance Line (\$25.00 per additional provider number)</i>	\$ _____
2.	Optional Hospice Guidance Line (Fraud Hotline) (\$100.00)	\$ _____
	2 a. <i>Additional Guidance Line service (\$75.00 per additional provider number, Includes the additional base membership)**</i>	\$ _____
Total		\$ _____

*This \$50 discount is available to CCHPC members only.

Hospice Compliance Network
A Service of Summit Business Group, LLC
PO Box 130
Penfield, NY 14526
(phone) 866.229.0132 (fax) 585.671.8553