

## CCRS CEU Package

For Certified Cost Report Specialists

For AIHC Members Only - Price: \$35

**GOT CEUs?**

### Earn all 6 required CEUs needed for your next renewal!

The short courses below are bundled at a special price. All courses are now on *one page* for quick and easy access to complete your Continuing Education Units for your next credential renewal.

#### Healthcare Collection & Bad Debt Policies

- Learn more about Medicare rules related to Charity Care, DSH adjustments, Professional Courtesy, Financial Hardship as it relates to compliant cost reporting.

#### COVID-19 HIPAA & Healthcare Ethics

- Safeguarding information, strengthening security of ePHI and developing an ethical culture during the COVID1-9 crisis is what you will learn in this short online course.

#### Embezzlement Detect & Avoid

- This short program helps financial managers gain a better understanding of the various types of embezzlement schemes, ways to deter and what to do when you suspect embezzlement.

### How to Register

**Register Online – Return to the Enrollment Page and Pay via Credit Card!**



We accept online registration payment via credit card.

#### Register Via Mail or Fax:

Scroll down for a hard copy enrollment form. Mail or fax your completed form to the AIHC Office to submit your registration and payment information.

### Refund Policy

View the Refund Policy Posted on the Home Page of our Website [www.aihc-assn.org](http://www.aihc-assn.org)

# CCRS Annual CEU Renewal Package

## HARDCOPY REGISTRATION FORM

<b>Enrollment Date:</b>	<h3 style="margin: 0;">All for \$35 to Earn 6 CEUs</h3> <ul style="list-style-type: none"> <li>✓ Healthcare Collection &amp; Bad Debt Policies</li> <li>✓ COVID-19 HIPAA &amp; Healthcare Ethics</li> <li>✓ Embezzlement – Detect &amp; Avoid</li> </ul>
<b>Name &amp; Credentials:</b>	
<b>Home Address:</b>	
<b>Employer Name &amp; Address:</b>	
<b>Work Phone Number:</b> <b>Alternate or Cell Phone Number:</b>	
<i>(For website administration and registration confirmation)</i> <b>Primary Email Address:</b>  <b>Alternate Email Address:</b>	
<b>Credit Card Payment Information:</b> <div style="display: flex; justify-content: center; align-items: center; gap: 20px; margin: 10px 0;">    </div> <div style="display: flex; justify-content: center; align-items: center; gap: 20px; margin: 0 0 10px 0;"> <input type="checkbox"/> MasterCard             <input type="checkbox"/> VISA             <input type="checkbox"/> Discover         </div> <p>Amount Approved on this Credit Card: <input type="checkbox"/> \$35 AIHC Fax Number: (330) 952-0716</p> <p>Card Number: _____</p> <p>Security Code: _____ Expiration Date: _____</p> <p>Billing Address for this Card: _____</p> <p>Name As It Appears on this Card: _____</p> <p>Authorized Signature &amp; Date: _____</p> <div style="text-align: center; margin-top: 20px;"> <p><b>Paying by corporate check? Pay \$35</b></p> <p><b>Please Make Check Payable to: AIHC</b></p> <p><b>AIHC Mailing Address:</b></p> <p><b>3637 Medina Road – Suite 15, Medina, Ohio 44256</b></p> </div>	