

Association

3. Describe or provide a copy of your dues formula for each type of membership. Please note which materials you are providing by mail or fax. *If formula is the same for hospitals regardless of service or ownership, please complete for General Medical/Surgical and mark others "same."*

Membership Type - Hospitals	Dues Formula
General Medical/Surgical	Millage rate tied to Net Patient Revenue
Children's	Predetermined amount and millage rate
Psychiatric/Behavioral Health	Predetermined amount
Rehabilitation	Predetermined amount and millage rate
Long-Term Acute Care	
Other Specialty/Limited Services	Predetermined amount
Membership Type - Others	
Federal – VA; DOD (Army, Navy, etc); US Public Health Service	Predetermined amount
Headquarters/Multi-hospital systems	Individual Facility Dues
Ambulatory/Outpatient/Free-standing Surgical Centers	n/a
Other Patient Care Provider Organizations	n/a
Associate or Commercial Members/Sponsors	3 levels: \$4,000 (gold) \$2,000 (silver) \$750 (bronze)
Individual/Personal Members	No longer offered
Other	