



Join as a Team!

Group Pricing Opportunities

Idaho MGMA will provide your organization a discounted price to sign up multiple members of your staff, complete with all the benefits of Idaho MGMA membership – local education, incentives toward professional certification, networking, career resources and more – at a reduced cost for you!

Idaho MGMA supplements your professional and organizational development efforts by providing up to date news and information, education and skill-building opportunities for your medical managers and administrators— Idaho-based, free or at reduced cost with membership.

Discounted Organizational Membership

- This is a great opportunity to save money for your organization if you have multiple individuals that want to join Idaho MGMA
- The discount model is based on two tiers of member increments with a maximum discount of \$20 off the cost of membership per staff person.

If your medical group is interested in this reduced pricing plan, please contact idahomgma@gmail.com or visit our website at www.imgma.com for more information.

Group Pricing for Membership



Thank you for your interest in participating in the Group Pricing Membership Plan with Idaho MGMA. We are delighted to welcome your organization to the premier professional association for medical practice leaders. Please note the following guidelines which apply to your Group Pricing Membership Plan.

Discount – The Discount model is based on two tiers of member increments and a maximum discount of \$20 off the cost of membership. Any member the organization wishes to sign up after payment for the original organizational membership has been processed can receive the current tier of discount applied at the time of the group pricing membership sign-up. Additional members will not increase the discount tier the organization originally signed up under. The additional member will be subject to the End Date of the original Group Pricing membership. If the remaining months are between 4 – 12 months, the original discounted price will apply. Any additional member joining within 3 months prior to the End Date of the original organizational membership will not be charged until the renewal period for the entire Group Pricing membership.

Price – Your organization will pay only up to that number of employees you are designating for membership. **The organization must pay for all members [existing and new] at the annual membership fee at the same time in order to qualify for this rate reduction.**

1 – 2	No Discount
3 – 7	\$15 off each membership
8 and above	\$20 off each membership

Transferability – If a member leaves the organization within the established membership year, the membership expires at the membership expiration date. It cannot be transferred to another Organizational membership; nor will any dues amount be prorated and refunded.

Educational Benefits – Organizational members can attend educational programs, webinars and the Annual Conference at the established member registration rate.

To complete your membership, please include the following information in an email to idahomgma@gmail.com:

1. A signed copy of this Group Pricing membership agreement.
2. The organization name and address, as well as first name, last name, title, email address and phone number of the main point of contact for this membership.
3. The first name, last name, title, email address and phone number of all members – both existing and new members to be included in the Group Pricing Membership.
4. Payment is accepted via check or CC by phone only. Please send payment to: Idaho MGMA | PO Box 7674 | Boise, Idaho 83707. Please make checks payable to "Idaho Medical Group Management Association" and include your organization's name in the check description. You may also call to make payment via credit card to the Idaho MGMA Executive Director at 208-344-7888. Memberships will not be active until payment has been received by Idaho MGMA.

Date: _____

Organization Name: _____

Organization Address: _____

Printed Name: _____

Signature: _____

Phone: _____

Email: _____

Organizational Member List

List the members to be included in your organizational membership.

	<u>Name/Title</u>	<u>Phone Number</u>	<u>Email</u>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			