

43rd Annual NJ HFMA Institute

in conjunction with the Metro Philly Chapter

By: Mike McKeever, President-Elect NJ HFMA

Thanks To Our 2018 Sponsors!

United Healthcare	PriceWaterhouseCoopers	Ernst & Young	Withum
AETNA	Sutherland Healthcare	CBIZ KA Consulting Services LLC	
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Without the generous support of our sponsors the Annual Institute would not have been successful all these years. Please consider them when making business decisions.

Early Bird Pricing for 2019 Sponsorships

All sponsorships for the 2019 Annual Institute, which will be held on Wednesday, October 2 through Friday, October 4, 2019 at the Borgata are currently available at a **15% discount** through **November 30, 2018**. Payment must be received by January 31, 2019. Take this opportunity to lock in your participation at next year's 43rd Annual Institute at a substantial savings!

Exhibitor Booth Registration

All Exhibitor Booth sponsorships include 2 full conference registrations (unless otherwise stated in your agreement).

If you would like to register additional people from your organization beyond your comps, please choose the appropriate registration type. Do not use the Sponsor Vendor Registration type. Anyone incorrectly registered above your allowed comps, will be invoiced.

Exhibitor Booth Kit

Please note all booths include 8' high back drape, 3' high side rails, an identification sign, 1-6' draped table, 2 side chairs, and a waste basket. The exhibit hall is located in the Event Center. The Event Center is carpeted.

We recommend all items be shipped to Vista Convention Services through their Advance Warehouse. If you cannot meet the advance shipping deadline, please review the exhibitor services kit for show site shipping instructions. Materials can be brought in through the hotel by use of a bellman. There will be a hotel charge for this service.



Group Dining

We understand that as Sponsors and Vendors, you will likely want to entertain customers/prospects. We respectfully ask that you do that on Wednesday night after 8pm or on Thursday night from 8pm-10pm to ensure that all attendees can fully participate with all of our Institute events.

If you are interested in setting up a group dining experience at Borgata, contact reservations at 609.317.1000 for reservations up to 12 people. For reservations over 12 people, contact Group Dining 609.317.7294 they will be able to support your reservations and menu planning requirements.

Thank you in advance for your support!

Hope to see you all again (if not sooner)!,

Mike

New Jersey HFMA 43rd Annual Institute
The Borgata Casino and Spa
October 2 - 4, 2019

Sponsorships with Booth in Exhibit Hall

	President's Reception	Wednesday Charity Event	Thursday Late Night Entertainment	Keynote Sponsor	Friday Panel Discussion Sponsor
Price	\$7,000	\$7,000	\$7,000	\$6,000	\$5,000
Complimentary Registrations	3	3	3	3	3
Premium Booth Location	X	X	X	X	X
Mobile App Banner	X	X	X	X	
Mobile App Notification	X	X	X		
Company Logo on Napkins and Plastic Glasses	X	X	X		
Speaker Introduction				X	X

	Mobile App Sponsor	General Session Sponsor	Breakout Session Sponsor	Vendor Booth Sponsor
Price	\$5,000	\$5,000	\$4,500	\$3,750
Complimentary Registrations	3	3	3	2
Mobile App Promotion	Splash Screen			
Mobile App Banner	inc 3 - 60 minute posts			
Mobile App Notification	X			
Speaker Introduction		X		

All Sponsorships Include:

- Pre- and Post-Attendee List
- Company Logo on NJ HFMA Annual Institute Website
- Scrolling Logo on Main Ballroom Screen Before all General Sessions
- Company Advertisement in AI Edition of Garden State Focus
- Promotional Item Supplied by Sponsor Distributed at Registration

**New Jersey HFMA 43rd Annual Institute
The Borgata Casino and Spa
October 2 - 4, 2019**

Sponsorships without Booth in Exhibit Hall

Conference Bag Sponsor	Includes 1 Registration	\$3,500
Conference Badge Sponsor	Includes 1 Registration	\$3,500
Media/Printing Sponsor	Includes 1 Registration	\$3,500
Wednesday Breakfast Sponsor	Includes 1 Registration	\$2,500
Wednesday Lunch Sponsor	Includes 1 Registration	\$2,500
Wednesday Coffee Break (2) Sponsor		\$1,500
Wednesday Snack Sponsor		\$1,000
Thursday Breakfast Sponsor	Includes 1 Registration	\$2,500
Thursday Lunch Sponsor	Includes 1 Registration	\$2,500
Thursday Coffee Break (2) Sponsor		\$1,500
Thursday Snack Sponsor		\$1,000
Friday Breakfast Sponsor	Includes 1 Registration	\$2,500
Friday Coffee Break (1) Sponsor		\$1,000
Lunch & Learn Sponsor	Includes 1 Registration	\$2,500
Wednesday Committee Shirt Sponsor		\$2,000
Thursday Committee Shirt Sponsor		\$2,000
Charging Station Sponsor	Includes 1 Registration	\$2,500

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***Please consider providing a gift for the Wednesday Night Charity Auction.
See the Sponsorship Application for additional information.***

HFMA-NJ SPONSORSHIP REGISTRATION FORM
43rd Annual Institute of the New Jersey Chapter of HFMA
In cooperation with the Metropolitan Philadelphia Chapter

Sponsor Contact Information (Person to whom HFMA should contact regarding this application and for future mailings)

COMPANY NAME: _____
CONTACT NAME: _____ TITLE: _____
MAILING ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE: _____ FAX: _____
EMAIL: _____

Program and Booth Sign Listing Information (all info needed for vendor advertising/please email logo as well):

COMPANY NAME: _____
MAILING ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE: _____ WEBSITE: _____
DESCRIPTION OF PRODUCTS/SERVICE (30 words or less): _____

Do you want your exhibit booth to be near a competitor: Yes No Competitors' Name(s): _____

The undersigned is an officer, agent, or representative of the sponsor authorized to enter into this agreement.

Signature _____
Date _____

Sponsorship Level (please list selected sponsorship level below):

***If your sponsorship includes an Exhibitor Booth, will you be donating a gift (min. value = \$200.00) for the
Charity Raffle? Yes No**

Exhibit Booth Includes: 8' x 10' draped booth space, one booth identification sign, one 6' draped table, two chairs, and a wastebasket.

Payment Method:

Check made payable to HFMA-NJ Chapter in the amount of \$ _____ (HFMA-NJ Tax ID #26-0266857)
 Credit Card* amount to be charged _____ Visa
Credit Card No.: _____ MasterCard
Name on Credit Card: _____ American Express
Signature: _____ Exp. Date: _____
Credit Card Billing Address (if not the same as above): _____

***Please note that credit card payments to HFMA-NJ will appear as a purchase from D. Lawrence Planners, LLC on your credit card statement.**

Cancellation Policy: Cancellations must be in writing. No refunds for cancellations received after July 1, 2019. Please send the completed application, check or credit card information to:

HFMA-NJ Annual Institute
c/o D. Lawrence Planners, L.L.C.
1125 Atlantic Ave., Suite 634
Atlantic City, NJ 08401

Tel: 609-344-1333
Fax: 609-348-4433