

## Fraud & Abuse Update: Recent Healthcare Investigation Trends

Wednesday, October 25, 2017 | 9:00 a.m. to 12:00 p.m. MHA Conference Center, Burlington, MA

## **Registration Form**

	•	☐ MHA Member Rate ☐ Non-Member Rate
Registrant Name:Badge Nickname		
Organization: _		
Street Address:		
City/Town:		State: Zip:
Phone: () _		Fax: ()
E-mail:		
		Payment Options – Please choose ONE
Пог		
☐ Check enclosed (Made payable to MHA) ☐ Please send invoice		
☐ I'd like to pay by credit card over the phone (MHA will contact you directly)*		
contact if di	fferent	from registrant: phone:
You can also register directly online with a credit card through our secure website by visiting: www.mhalink.org/education		
MAIL	M	1HA Education Department, 500 District Ave (formerly 5 N.E. Executive Park), Burlington, MA 01803-5096
FAX	(7	781) 262-6136
ONLINE	h	ttp://www.mhalink.org/education
QUESTIONS?	(7	781) 262-6059 or abarricklow@mhalink.org
CEUs		wo and a half (2.5) hours of Qualified Education credits will be granted for this program toward dvancement or recertification in the American College of Healthcare Executives.
CANCELLATIO	NS re	Vritten cancellations received by October 18, 2017 will be charged a \$50 administrative fee. If ayment has been received, your registration fee will be refunded minus the \$50. Cancellations eceived after October 18, 2017 will still be charged the full registration fee and if payment has been eceived, no refunds will be given. To avoid this penalty, you may send a substitute to the program.

<sup>\*</sup> For security purposes we are now only accepting credit card information over the phone and through our secure website