Dear Healthcare Leader:

Welcome to 2024 and a new sponsorship year! Healthcare organizations and healthcare finance continue to be in a unique and challenging time that most of us have never seen over the course of our lives. Specifically, as we enter this new chapter year, we are prepared more than ever to meet the ever-changing needs of our organizations and members by putting our Corporate Sponsors at the forefront of education and innovation.

**The Corporate Sponsorship Program is structured to give you exposure to roughly 350 chapter members.** 2021 - 2023 presented unprecedented challenges to HFMA and our local chapter. **Discounted sponsorship tiers, promotion at virtual events, speaking and education opportunities, virtual education banners, and electronic ads** demonstrated our commitment to make sure you received the exposure and opportunities you have come to expect from Northwest Ohio HFMA. In 2024, we aim to bring you the same commitment, with additional meetings and opportunities to engage with our members.

**Please review the following pages for benefits and important information regarding sponsorship for the 2024 calendar year**. If you would like to take advantage of Corporate Sponsorship, please fill out the application for your commitment **by March 1, 2024**.

Sincerely,

*Chapter President President-Elect & Sponsorship Chair*

Jacob Wethington Chris Lovette

Blue & Co., LLC Wood County Hospital

Office: (614) 222-4770 Office: (419)728-0600 Ext: 8000

jwethington@blueandco.com lovettec@woodcountyhospital.org

|  |  |  |  |
| --- | --- | --- | --- |
| **2024 Calendar of Events** | | | |
| **Event** | **Dates** | | **Location** |
| Healthcare Finance Topics: Rev Cycle, Cost Report, 340b, Managed Care Contracting | January 2024 | Hilton Garden Inn | |
| March Madness & Annual Meeting | Mar 21, 2024 | Maumee Indoor Theatre | |
| Toledo Mud Hens Event | August 2024 | Fifth Third Field | |
| Women in Leadership | TBD | TBD | |

The Northwest Ohio Chapter is proud to offer a quality corporate sponsorship program and looks forward to your participation. All sponsorships are received with great appreciation of their support and of their investment in the future of our industry’s leaders. Thanks so much for your consideration of support for our chapter. If you are a returning sponsor, we sincerely appreciate all you have done and continue to do for the Northwest Ohio Chapter.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2024 Northwest Ohio Sponsorship Levels & Benefits** | | | | |
|  | **Sponsorship Level** | | | |
| **Sponsorship Benefit** | **Bronze** | **Silver** | **Gold** | **Platinum** |
| Recognition of Sponsors at Webinars, Virtual, & Live Meetings (as permitted) | √ | √ | √ | √ |
| Listed in Sponsor Slideshow at Chapter Meetings (Virtual & Live (as permitted)) |  | √ | √ | √ |
| Logo & Site Link on Chapter Website | √ | √ | √ | √ |
| Electronic or Social Media Content to Chapter Members |  | 1/4-page ad | 1/2-page ad  1 email 1 SM | Full ad  1 profile  2 e-emails  1 SM |
| “Banner” or Video Recognition on Chapter Website Homepage |  |  |  | **** |
| Featured Intro, Commercial, or Video at Chapter Meetings (Virtual or Live (as permitted)) |  | 1  (no video) | 2  (no video) | 3 |
| Listing of All Attendees from Chapter Meetings |  | √ | √ | √ |
| Virtual Recognition at Break or During Presentation |  |  |  | √ |
| Promotional Material Distributed Before or After Virtual Meeting |  |  |  | √ |
| Priority Preference of Sponsorship Opportunities |  | Third | Second | First |
| Priority Preference of Speaking and Educational Content Opportunities |  | Third | Second | First |
| Job Postings on Chapter Website | √ | √ | √ | √ |
| **2024 Rate** | **$1,000** | **$1,500** | **$2,000** | **$2,500** |

**2024 Corporate Sponsorship**

**APPLICATION & PAYMENT**

**Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Main Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Alternate Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Alt Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Alt Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sponsorship Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Contribution: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Payment**

Make check payable to the *Northwest Ohio Chapter of HFMA*.

Please send check to:

Rachel Herman

The Bellevue Hospital

PO Box 8004

Bellevue, OH 44811

**Thank you for your continued support and involvement in the Northwest Ohio Chapter of HFMA.**