



MISSOURI ASSOCIATION OF RURAL HEALTH CLINICS

2023 MEMBERSHIP APPLICATION

MEMBERSHIP YEAR: JANUARY 1, 2023 - DECEMBER 31, 2023

Please list your parent organizational and main contact information below. If your health system or parent organization represents multiple Rural Health Clinics please list their individual information on page 3.

ORGANIZATIONAL CONTACT INFORMATION

Organization Name: _____

Main Contact & E-mail: _____

Address: _____

City, State, Zip: _____

Business Phone: _____ Fax: _____

Website: _____

If your organization has multiple RHC clinics or locations, please list additional clinics at the end of the application

Please provide a breakdown of the number of providers in all your Missouri Rural Health Clinics:

| Provider Type | Total |
|--|--------------|
| Physician (MD/DO) | |
| Nurse Practitioner (NP) | |
| Physician Assistant (PA) | |
| Psychologist | |
| Master of Social Work (MSW) | |
| Licensed Clinical Social Worker (LCSW) | |
| Midwife | |

MARHC COMMITTEES

MARHC offers a wide variety of ways to get involved within the organization including several committees that you and anyone from your staff may join. To join, please complete the following:

Conference Name: _____ E-mail: _____

Membership Name: _____ E-mail: _____



MARHC MEMBERSHIP FEE CALCULATION

MARHC membership is calculated using two factors:

- A base membership fee of \$250, plus
- A fee of \$65 for each full-time clinician or provider if the clinic has more than two.

The base membership rate includes two clinicians or providers. For the purpose of membership, MARHC regards a clinician or provider as a: Physician, Physician Assistant, Nurse Practitioner, Certified Nurse Midwife or Licensed Clinical Social Worker. If you are a large organization that has more than 50 full-time RHC clinicians cumulatively, than you only pay a flat fee of \$3,500.

Please keep in mind that this structure is based on the number of employees your organization has as a whole. If you are a provider-based clinic, your parent company will need to complete this membership and submit information based upon the clinicians employed at all of their RHC locations. All clinics under that parent company are then considered members. If you are an independent clinic with multiple sites, you will need to base your membership dues off of the clinicians employed at all RHC locations.

To decide how many full-time clinicians you have, consider the number of hours they work at all sites. For example, if you have a clinician who is a full-time employee but divides their time equally between five clinics, that would be one full-time clinician.

MEMBERSHIP CALCULATION SPREADSHEET

| Type | Amount | Quantity | Total |
|--|------------|----------|----------|
| <input type="checkbox"/> Clinic Base Fee (Includes 2 Providers.) | \$250.00 | n/a | \$ _____ |
| <input type="checkbox"/> Additional Providers | \$65 each | _____ | \$ _____ |
| <input type="checkbox"/> Large Organization (50+ full-time providers) | \$3,500.00 | n/a | \$ _____ |
| <input type="checkbox"/> Voluntary contribution to assist clinics with membership and conference registrations | | | \$ _____ |
| Grand Total | | | \$ _____ |

PAYMENT

- Check (make payable to MARHC)

Please forward payment and completed form to: Missouri Association of Rural Health Clinics, PO Box 296, Jefferson City, MO 65102. For questions email info@marhc.org.

Contributions or gifts to MARHC are not tax deductible as charitable contributions for income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses to restrictions imposed as a result of association lobby activities. MARHC estimates the non-deductible portion of your dues-the portion allocated for lobbying-is 25%.

