

THE FOLLOWING REGISTRATION TERMS AND CONDITIONS APPLY

REGARDING WEBCAST REGISTRATIONS

1. Individuals or groups may register for Webcast access. Organizations may register for group access without presenting specific registrant names. In such instances the registering organization will be presented a series of user names and passwords to distribute to participants.
2. Each registrant will receive a user name and password for access. Registrants will be able to change their user names and passwords and manage their accounts.
3. Webcast registrants will enjoy six (6) months access from date of issuance of user name and password.
4. Only one user (per user name and password) may view or access archived conference. It is not permissible to share user name and password with third parties. Should Webcast registrants choose to access post conference content via Flash Drive, this individual use limitation applies. It is not permissible to share alternative media with third parties.
5. User name and password use will be monitored to assure compliance.
6. Each Webcast registration is subject to a "bandwidth" or capacity use cap of 5 gb per user per month. When this capacity use cap is hit, the registration lapses. Said registration will be again made available at the start of the next month so long as the registration period has not lapsed and is subject to the same capacity cap.
7. For Webcast registrants there will be no refunds for cancellations. Please call the Conference Office at 800-503-3597 or 206-452-5530 for further information.

REGARDING ONSITE REGISTRATION, CANCELLATIONS AND SUBSTITUTIONS

1. For onsite group registrations, full registration and credit card information is required for each registrant. List all members of groups registering concurrently on fax or scanned cover sheet.
2. For onsite registrants there will be no refunds for "no-shows" or for cancellations. You may send a substitute or switch to the online option. Please call the Conference Office at 800-503-3597 or 206-452-5530 for further information.

METHOD OF PAYMENT FOR TUITION

Make payment to Health Care Conference Administrators LLC by check, MasterCard, Visa or American Express. Credit card charges will be listed on your statement as payment to HealthCare (HC) Conf LLC. Checks or money orders should be made payable to Health Care Conference Administrators LLC. A \$30 fee will be charged on any returned checks.

REGISTRATION OPTIONS

Registration may be made online or via mail, fax or scan.

You may register through either of the following:

- Online at www.ACOSummit.com.
- Fax/Mail/Email using this printed registration form. Mail the completed form with payment to the Conference registrar at 12330 NE 8th Street, Suite 101, Bellevue, WA 98005-3187, or fax the completed form to 206-319-5303, or scan and email the completed form to registration@hconferences.com. Checks or money orders should be made payable to Health Care Conference Administrators LLC.

The following credit cards are accepted: American Express, Visa or MasterCard. Credit card charges will be listed on your statement as payment to HealthCare (HC) Conf LLC.

For registrants awaiting company check or money order, a credit card number must be given to hold registration. If payment is not received by seven days prior to the Summit, credit card payment will be processed.

TAX DEDUCTIBILITY

Expenses of training including tuition, travel, lodging and meals, incurred to maintain or improve skills in your profession may be tax deductible. Consult your tax advisor. Federal Tax ID: 91-1892021.

CANCELLATIONS/SUBSTITUTIONS

No refunds will be given for "no-shows" or for cancellations of either online or onsite registrations. You may send a substitute or transfer your onsite registration to an online registration. For more information, please call the Conference Office at 800-503-3597 or 206-452-5530.

INTELLECTUAL PROPERTY POLICY

Unauthorized sharing of Summit content via Webcast access through the sharing of user names and passwords or via alternative media (Flash Drive) through the sharing of said media is restricted by law and may subject the copyright infringer to substantial civil damages. The Summit aggressively pursues copyright infringers. If a registrant needs the ability to share Summit content within his or her organization, multiple Summit registrations are available at discounted rates. The Summit will pay a reward for information regarding unauthorized sharing of Summit content. The reward will be one quarter (25%) of any recovery resulting from a copyright infringement (less legal fees and other expenses related to the recovery) up to a maximum reward payment of \$25,000. The payment will be made to the individual or individuals who in the opinion of our legal counsel first provided the factual information, which was necessary for the recovery. If you have knowledge regarding the unauthorized Summit content sharing, contact the Summit registration office.

REGISTRATION BINDING AGREEMENT

Registration (whether online or by this form) constitutes a contract and all of these terms and conditions are binding on the parties. In particular, these terms and conditions shall apply in the case of any credit/debit card dispute.

GENERAL TERMS AND CONDITIONS

Program subject to cancellation or change. If the program is cancelled the only liability of the Summit will be to refund the registration fee paid. The Summit shall have no liability regarding travel or other costs. Registration form submitted via fax, mail, email or online constitutes binding agreement between the parties.

FOR FURTHER INFORMATION

Call 800-503-3597 (Continental US, Alaska and Hawaii only) or 206-452-5530, send e-mail to registration@hconferences.com, or visit our website at www.ACOSummit.com.

HOW TO REGISTER: Fully complete the form on page 2 (one form per registrant, photocopies acceptable). Payment must accompany each registration (U.S. funds, payable to Health Care Conference Administrators, LLC).

ONLINE: Secure online registration at www.ACOSummit.com.

FAX: 206-319-5303 (include credit card information with registration)

MAIL: Conference Office, 12330 NE 8th Street, Suite 101, Bellevue, WA 98005-3187

FOR REGISTRATION QUESTIONS:

PHONE: 800-503-3597 (Continental US, Alaska and Hawaii only) or 206-452-5530, Monday-Friday, 7 AM - 5 PM PST

E-MAIL: registration@hconferences.com

ACCOUNTABLE CARE ORGANIZATION SUMMIT

COMPLETE THE FOLLOWING. PLEASE PRINT CLEARLY:

NAME _____
SIGNATURE OF REGISTRANT - REQUIRED _____
JOB TITLE _____
ORGANIZATION _____

ADDRESS _____
CITY/STATE/ZIP _____
TELEPHONE _____
E-MAIL _____
 Special Needs (Dietary or Physical)

ONSITE CONFERENCE ATTENDANCE

Onsite conference registration includes onsite attendance, professional networking, and live interaction with the faculty.

PRECONFERENCE (Optional; not included in conference registration):

Preconference \$ 495

CONFERENCE (Does not include Preconference):

Standard Rate:

Through Friday, April 12, 2019* \$1,095
 Through Friday, May 10, 2019** \$1,495
 After Friday, May 10, 2019 \$1,795

Special Academic/Government Rate*:**

Through Friday, April 12, 2019* \$ 795
 Through Friday, May 10, 2019** \$ 895
 After Friday, May 10, 2019 \$ 995

To Also Attend Sessions of Collocated Bundled Payment Summit and MACRA Summit (Applies to Individual and Group Registrations):

Through Friday, April 12, 2019* \$ 295
 Through Friday, May 10, 2019** \$ 395
 After Friday, May 10, 2019 \$ 495

GROUP REGISTRATION DISCOUNT

(Covers ACO Summit sessions only. Does not include Preconference. Rates per person.)
Three or more registrations submitted from the same organization at the same time receive the following discounted rates for conference registration only. To qualify, all registrations must be submitted simultaneously:

Standard Group Rate (For each registrant):

Through Friday, April 12, 2019* \$ 795
 Through Friday, May 10, 2019** \$1,095
 After Friday, May 10, 2019 \$1,395

CONFERENCE ELECTRONIC MEDIA:

Onsite Attendees — Following the Summit, the video and presentations are made available in the following formats. To take advantage of the discounted prices below, you must reserve media WITH your Summit registration:

Flash Drive (\$129 + \$15 shipping) \$ 144 6 months' access on Web \$ 129

Note that conference electronic media may be used by the individual purchaser only. Terms and Conditions apply (see page 1).

* This price reflects a discount for registration and payment received through Friday, April 12, 2019.

** This price reflects a discount for registration and payment received through Friday, May 10, 2019.

*** For the purpose of qualifying for the academic/government rates, "academic" shall apply to individuals who are full-time teaching staff at an academic institution (i.e. not an adjunct faculty member with a job elsewhere) or a full-time student at an academic institution (i.e. not with a full-time job elsewhere); and "government" shall apply to individuals who are full-time employees of federal, state or local regulatory agencies. This rate does not include the Preconference for onsite attendees.

PAYMENT

The use of a registration discount code cannot be the basis of requesting a partial refund of fees already paid.

TOTAL FOR ALL OPTIONS, ONSITE OR WEBCAST:

Please enclose payment with your registration and return it to the Registrar at Accountable Care Organization Summit, 12330 NE 8th Street, Suite 101, Bellevue, WA 98005-3187, or fax your credit card payment to 206-319-5303.

You may also register online at www.ACOSummit.com.

Check/money order enclosed (payable to Health Care Conference Administrators LLC)
 Payment by credit card: American Express Visa Mastercard

If a credit card number is being given to hold registration only until such time as a check is received it must be so noted. If payment is not received by seven days prior to the Summit, the credit card payment will be processed. Credit card charges will be listed on your statement as payment to HealthCare (HC) Conf LLC.

Discount Code: _____

REGISTRATION BINDING AGREEMENT

Registration (whether online or by this form) constitutes a contract and all of these terms and conditions are binding on the parties. In particular, these terms and conditions shall apply in the case of any credit/debit card dispute. For online and onsite registrants there will be no refunds for "no-shows" or cancellations.

ACCOUNT # _____
EXPIRATION DATE _____ SECURITY CODE _____
NAME OF CARDHOLDER _____
SIGNATURE OF CARDHOLDER _____