

Arizona Health Care Association Membership Application Assisted Living Center

Community Name:	:	
Community website	o:	
Address:		
Phone:	Fax:	
Community General	l Email:	
State License(s) Typ	pe: Supervisory: Personal: Directed:	
Total number of uni	ts:	
Type of Ownership:	For Profit Not for Profit	
Executive Director	·/ Manager / Administrator (Main point of contact):	
Name:		
Address:		
Phone:	Fax:	
E-mail:		
Signature of Manage	er or Representative:	
Title:		
Owners Name:		
Address:		
City/State/Zip:	<u> </u>	
	Fax:	
E-mail:		
Membership Fee:	\$500.00 annually for community with 20 units or less 21 units or more is \$24.85 per unit per year: Number of Units	



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Arizona Health Care Association

David A. Voepel, Chief Executive Director

2023-2024 AHCA Board of Directors **Brett Robertson, President** Kelly Bojorquez, Vice President **Heather Friebus, Past President** Kristopher Woolley, Secretary/Treasurer Nigel Santiago, Region 1 David Starrett, Region 1 Lisa Leveque, Region 1 Amy Malkin, Region 2 Jeremy Bowen, Region 3 Kristen Ott, Region 3 Mason Hunter, Region 3 Doris Page, Business Affiliate Representative

Annual Membership Dues Rates – 2024					
Membership Class Type	Arizona Health Care Association (AHCA)	American Health Care Association (AHCA)	Annual Total		
Skilled Nursing Facility Is a health care facility licensed as a nursing care institution which offers long term, extended care, transitional care and/or sub-acute care services which are subject to a program of inspection or licensure or certification or approval by one or more governmental agencies for which dues and assessments are received by AHCA and whose membership is approved by the board of directors. Facility members in good standing have voting privileges.	\$58.21 per licensed bed	\$21.63 per licensed bed	\$79.84 per licensed bed		
Assisted Living Center (11+ beds) * Is a health care facility which offers long term care and/or assisted living services which are subject to a program of inspection or licensure or certification or approval by one or more governmental agencies for which dues are received by AHCA and whose membership is approved by the board of directors. Assisted living members in good standing have voting privileges.	\$13.82 per licensed bed	\$11.03 per licensed bed	\$24.85 per licensed bed		
Business Affiliate Is any person, company or organization who provides products or services to long term care facilities that is not an operator of any type of long term care facility and who is not currently affiliated with anyone eligible for voting membership or another category of membership. Dues are received by AHCA and membership is approved by the board of directors. A business affiliate member will designate an individual as a representative. Business affiliate members will be represented on the board by the business affiliate representative who will be elected by the business affiliate members in good standing by ballot and will be a voting member of the board.	\$699.00	None	\$699.00		

[* \$ 500 minimum annual dues]

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