

#### **Nursing Facility Product Order Form**

Name	Date:								
Company									
Address	·								
Email									
			Unit Price						
Product Code	Product Description	QTY	Member	Prospective Member	Total				
800213	Appendix PP: Surveyor Guidance for SNFs/NFs (with binder) Revised 11-22-17		\$99.00	\$145.00					
800215	Appendix PP: Surveyor Guidance for SNFs/NFs (no binder) Revised 11-22-17		\$50.00	\$99.00					
800179	Bed System Measurement Device 10-Day Rental		\$150.00	\$250.00					
800214	Federal Survey Forms & Critical Elements Pathways (w/USB)		\$50.00	\$75.00					
800080	Legislative Update Book (updated annually)		\$15.00	\$75.00					
800105	MN Nursing Facility Compensation Report (updated annually)		\$95.00	\$195.00					
800139	MN Vulnerable Adults Act Brochure: Keeping Residents Safe (SNF/NF) (set of 50)		\$27.99	\$34.99					
800194	Model Admission Agreement (w/USB)		\$100.00	\$125.00					
800064	Notice of Medicare/Medicaid Benefits Forms (set of 50)		\$25.00	\$35.00					
800065	Notice of Medicaid & Medicare Benefits Poster		\$25.00	\$40.00					
800211	On-Demand Dementia Training Pass (12-mo access)		\$240.00	Members Only					
800212	Resident Bill of Rights Booklets w/Signature Page (SNF/NF) (set of 50)		\$55.00	\$75.00					
800005	Resident Bill of Rights Poster for Nursing Facilities		\$25.00	\$40.00					
800206	Side Rail Pamphlet for Nursing Facilities (set of 50)		\$15.00	\$20.00					

### **Payment Options**

800207

800209

☐ Bill me (members only)

(set of 50)

☐ Check enclosed (BEFORE writing check, verify correct county/local tax amount here: <a href="http://bit.ly/verify\_tax">http://bit.ly/verify\_tax</a>)

☐ Credit card (Visa, MasterCard, or American Express)

☐ Payment can be made by phone at 952-854-2844

6.875% MN Sales Tax **EXCEPT** 

in Hennepin County (7.525%)

OR appropriate local tax
OR enter tax exempt #

PLEASE VERIFY—Call us if you need help before submitting your

\$25.00

\$25.00

order

Payment from prospective members must be received before the order is shipped.

Side Rail Pamphlet for Nursing Facilities w/Custom Logo

Simplified Guide to Value-Based Reimbursement (VBR)

**TOTAL** 

\$35.00

\$50.00

**SUBTOTAL** 

## Return form & payment via mail:

Care Providers of Minnesota 7851 Metro Parkway, Suite 200 Bloomington, MN 55425 **OR** via fax: 952-854-6214

OR via email: swoods@careproviders.org

**OR** place your order via the online store: www.careproviders.org/products



#### **Assisted Living & Home Care Product Order Form**

		Date:						
Address:								
Email:	Phone:							
		Unit Price						
Product Code	Product Description	QTY	Member	Prospective Member	Total			
800219	Assisted Living License Resource Manual (w/USB) *NEW June 2021		\$250.00	\$500.00				
800220	Assisted Living Training & Competencies Manual (w/USB) *NEW June 2021		\$245.00	\$345.00				
800179	Bed System Measurement Device 10-Day Rental		\$150.00	\$250.00				
800080	Legislative Update Book (updated annually)		\$15.00	\$75.00				
800218	MN Assisted Living Bill of Rights Forms (set of 25) *NEW June 2021		\$25.00	\$40.00				
800105HSG	MN Senior Housing Compensation Report (updated annually)		\$95.00	\$195.00				
800208	MN Vulnerable Adults Act Brochure: Keeping Clients & Tenants Safe (HC/HWS) (set of 50)		\$27.99	\$34.99				
800211	On-Demand Dementia Training Pass (12-mo access)		\$240.00	Members Only				
800204	Side Rail Pamphlet for Assisted Living (set of 50)		\$15.00	\$20.00				
800205	Side Rail Pamphlet for Assisted Living w/Custom Logo (set of 50)		\$25.00	\$35.00				
Payment Opt	tions			SUBTOTAL				
☐ Check	(members only) enclosed (BEFORE writing check, verify et county/local tax amount here:		ennepin Co	Tax <b>EXCEPT</b> unty (7.525%) priate local tax				

http://bit.ly/verify tax)

☐ Credit card (Visa, MasterCard, or American Express) ☐ Payment can be made by phone at 952-854-2844 **OR** enter tax exempt #

PLEASE VERIFY—Call us if you need help before submitting your order

Payment from prospective members must be received before the order is shipped.

**TOTAL** 

# Return form & payment via mail:

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OR via email: swoods@careproviders.org

**OR** place your order via the online store: <a href="www.careproviders.org/products">www.careproviders.org/products</a>