



## Healthcare Compliance Solutions

GIFT S 1 CARD Referral Rewards Program

We would like to Thank You for referring your peers to our compliance training program by sending you a \$100 Gift Card when they sign up for our service.

Please notify us or contact us with any questions at: support@hcsiinc.com or 801-947-0183

> www.hcssiinc.com facebook.com/hcsiinc hcsiinc.blogspot.com #hcarecomply

## Compliance Solutions...

## **Referral Order Form**

Healthcare Compliance Solutions 4885 S 900 E #305A Salt Lake City, UT 84117 801-947-0183 www.hcsiinc.com

Referred By	
Name	Phone
Office Name	

Dear Healthcare Professional,

Since 1984, HCSI has provided over 30,000 Healthcare Professionals and Business Associates with hassle-free compliance training. Our cost-effective ONLINE or DVD training is easy to use, and can be completed anytime, anywhere. Our clients enjoy monthly email updates, quarterly employee newsletters, and trained staff to answer difficult compliance questions.

With the HCSI "Compliance Solution", your office can enjoy peace of mind with correct consistent and timely training. Visit our website at <a href="https://www.hcsiinc.com">www.hcsiinc.com</a> for a free demonstration of our services.

Act now! Complete the following form and let HCSI provide your office with the proven "Compliance Solution".

Compliance Training Program						Price	
One Year Online Training & Updates Package: Circle One ONLINE or DVD  Reference Guide Manual – indexed by topic, Compliance Plan Binder, Compliance Certificates Binder, and one-time registration fee.  Package Includes:  Training in HIPAA, OSHA, H/R, & Medicare  Phone and email consulting services for all compliance questions  Monthly email administrative compliance updates  Quarterly employer/employee compliance newsletter  All required federal forms (easily customizable)						\$1189.00	
Number of employees (including doctors) in your office X \$3.00							
4 Ways to Order: Complete form and mail to address above, Fax to 801-943-6658, call us @ 801-947-0183, or sign-up online at www.hcsiinc.com		Shippi	ng & H	landling	\$11.00		
		, 			Total		
Office Information							
Company Name:							
Address:							
City:	State:	State: Zip:					
Phone:		Fax:					
Administrator's Name: Email:							
Check or Credit card (circle one) Visa MasterCard AmEx Discover							
Name on Card:							
Card #:		Card Co	de:				
Expiration Date:	Signature:						