

# Long Island Chapter

51 Maryland Street, Dix Hills, NY 11746



## Provider Application for Chapter Membership November 2022 – October 2023

Board Members	
<b>President</b>	Julian Hagmann, Caring Professionals, Inc., 718 673-8390
<b>Vice President</b>	Kathy McCarthy, Addus SSHH Services, Inc., 631 567-6555
<b>Secretary</b>	Vacant
<b>Treasurer</b>	Leo D'Sa, L. J. D'Sa, 516 991-7594

**Provider members must be members of NYS Association of Health Care Providers at the State level in order to be eligible for this Chapter participation.**

New Member                       Renewing Member

Organization Name \_\_\_\_\_

d/b/a \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Contact Information:

Name \_\_\_\_\_ Title \_\_\_\_\_ Email \_\_\_\_\_

Main \_\_\_\_\_

Add'l \_\_\_\_\_

Add'l \_\_\_\_\_

### Member at Large

Bryan Madden, Bryan Skilled Home Care, 631 608-8523

### Provider Membership Agreement

Provider members are in a voting classification of the membership for Long Island Chapters of the New York State Association of Health Care Providers, Inc. (LIC HCP). All other rights and privileges of membership are in accordance to LIC HCP By-Laws. Provider members consist of Health Care Providers providing services to Patients at their Home (CHHA, LHCSA & FI).

### Chapter Provider Member Dues

Provider member dues are **\$250** per year (new members **\$200**). Chapter dues year runs from November 1st – October 31st Fiscal Year.

Provider members are required to pay their full dues at the start of the year.

### Payment Info

Make check payable to Long Island Chapter of the New York State Association of Health Care Providers, Inc. or LIC - NYSA HCP, Inc. and mail to the above address.

### NOTE

Chapter dues are not deductible as a charitable contribution for federal tax purposes, but may be deductible as a business expense as well as an allowable Medicare expense. However, in accordance with Section 13222 of OBRA 1993 (Denial of the Deduction for Lobbying Expenses), **9% of your membership dues are not tax deductible as ordinary and necessary business expenses.**

Name \_\_\_\_\_ Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Main \_\_\_\_\_

Thank you for joining the Long Island Chapter of New York State Association of Health Care Providers, Inc.

[Please complete the application and email to "info@lichcp.org" and return with payment to](mailto:info@lichcp.org)

HCP Long Island Chapter, 51 Maryland Street, Dix Hills, NY 11746.