

homecareinfo.org Advertising

HCP Home Care Consumer Information Web Source

HCP's exclusive consumer section contains information for consumers about home care, how to select an agency, how to pay for home care, links to numerous consumer resources and more. The HCP Provider Search Engine, where consumers can locate a home care agency in their area, receives over 1,000 hits per month.

Special Opportunities Exclusively for <u>HCP Provider Members</u>

<u>Featured Provider</u> — consumers who visit the HCP Web site or the consumer website, homecareinfo.org, can use the "Find a Provider" search engine to locate a provider in their area from among hundreds of HCP member agencies. HCP Provider members automatically receive a free listing with a link to their website as one of the many benefits of membership.

- Members can increase exposure and business by investing in Featured Provider promoted listing which puts your company's name and website link at the top of the search results listing.
- Members who purchase a promoted listing will also have their name and website link featured on the HCP website home page on a rotating bases as a Featured Provider.

HCP Members Only - Featured Provider listing* Annual commitment required.

Featured Provider in Provider Search Engine	Up to 5 branches 6+ branches	\$375/year \$425/year
*INCLUDES ROTATION AS A FEATURED PROVIDER	ON HCP'S HOME PAGE.	
Please select one: Featured Provider (up to 5 brack)	anches) 🛛 🗇 Featured Provider (6 or mo	ore branches)
Contract start date (month/year): Contract end	date (month/year) :	
Please list the website LIPL or an email address for your Featured	Up to 5 branches - \$375/year	\$

Please list the website URL or an email address for your Featured Provider listing Links. Data on services offered and counties served will be taken from your membership application. (Print clearly)

Up to 5 branches - \$375/yea	r \$
6+ branches - \$425/year	\$
Total	\$

Please complete ALL of the information below and submit with your payment. <u>Only FULLY COMPLETED</u>, <u>signed</u> <u>contracts received with payment will be binding</u>.

Company Information

Organization Name:					
Contact Name:	Title:				
Address:					
City:	State:	Zip:	Phone:		
Email:		Website:			
Check (payable to HCP) OF	n full is required. Advertising is Credit Card Payment: D Visa Ex	□ MasterCard	Discover		
Cardholder Name: (print)					
Cardholder Signature:					
	3 ways to submit - <i>I</i> or mail your contract and payme	em	ail your compl	edit card payment to 518.463.160 leted contract to hcp@nyshcp.ol Blvd., 2nd Floor, Albany, NY 122	

Questions? Call 518.463.1118, ext. 824.