

2021 CHIA Virtual Convention Registration Form

AHIMA Number: _____

CHIA Member: Yes No

Address Type: Work Home

First Name _____

Last Name _____

Credentials _____

Address _____

City / State / Zip _____

Phone Number _____

Primary Email _____

Employer _____

Job Title _____

Please visit CaliforniaHIA.org/CHIACON for current information. All Convention packages include access to the Live Exhibit Hall and social events including the Member Engagement Meeting (formerly House of Delegates). All programs will be presented live June 14 – 16 and offered on-demand until 9/30/2021. CEUs must be downloaded prior to 9/30/2021.

Please choose your package, then **select** applicable package details

		Regular (by May 22)	Late (after May 22)
Popular Package (17 CEUs)	CHIA Member*	<input type="checkbox"/> \$259	<input type="checkbox"/> \$359
Package Includes:	AHIMA Member in CA**	<input type="checkbox"/> \$309	<input type="checkbox"/> \$409
All General Sessions	Non Member	<input type="checkbox"/> \$359	<input type="checkbox"/> \$459
Select Four Tracks	CHIA Student Member	<input type="checkbox"/> \$89	<input type="checkbox"/> \$129
All Access Package (45 CEUs)	CHIA Member*	<input type="checkbox"/> \$449	<input type="checkbox"/> \$549
Package Includes:	AHIMA Member in CA**	<input type="checkbox"/> \$499	<input type="checkbox"/> \$599
All General Sessions	Non Member	<input type="checkbox"/> \$599	<input type="checkbox"/> \$699
All Tracks			
Two Day Package (11 CEUs)	CHIA Member*	<input type="checkbox"/> \$199	<input type="checkbox"/> \$249
Package Includes:	AHIMA Member in CA**	<input type="checkbox"/> \$249	<input type="checkbox"/> \$299
All General Sessions	Non Member	<input type="checkbox"/> \$269	<input type="checkbox"/> \$319
Select Two Tracks	CHIA Student Member	<input type="checkbox"/> \$69	<input type="checkbox"/> \$99
One Day Package (6 CEUs)	CHIA Member*	<input type="checkbox"/> \$129	<input type="checkbox"/> \$179
Package Includes:	AHIMA Member in CA**	<input type="checkbox"/> \$179	<input type="checkbox"/> \$229
Wednesday General Session	Non Member	<input type="checkbox"/> \$199	<input type="checkbox"/> \$249
Select Monday or Tuesday	CHIA Student Member	<input type="checkbox"/> \$49	<input type="checkbox"/> \$79
General Sessions			
Select One Track			
One Track Only (3 CEUs)	CHIA Member*	<input type="checkbox"/> \$99	<input type="checkbox"/> \$129
Package Includes:	AHIMA Member in CA**	<input type="checkbox"/> \$149	<input type="checkbox"/> \$179
Select One Track	Non Member	<input type="checkbox"/> \$149	<input type="checkbox"/> \$179
	CHIA Student Member	<input type="checkbox"/> \$39	<input type="checkbox"/> \$69

Total Fee Enclosed \$ _____

Primary Work Setting _____

Job Level Category _____

CEUs are earned based on actual viewed sessions.
CEUs may be adjusted based on actual time of event.
 Tracks 1 – 8 offer 3 CEUs each.
 Tracks 9- 12 offer 4 CEUs each.

* Discounted fees are applicable only to CHIA Members.

** Includes annual dues to join CHIA.

Payment must accompany registration form. A copy of an approved check-request is acceptable when submitted with the registration form.

Select your Package details:

Live General Sessions:

Monday, June 14 Tuesday, June 15

Monday Tracks

- Track 1: Clinical Documentation Improvement
- Track 2: Health Information Integrity
- Track 3: Compliance and Auditing
- Track 4: Health Information Fundamentals

Tuesday Tracks

- Track 5: Revenue Cycle Integrity
- Track 6: Organizational Management and Leadership
- Track 7: Information Protection: Privacy & Security
- Track 8: Alternative Care Settings

Wednesday Tracks

- Track 9: Information Governance: Health Informatics, Analytics and Data
- Track 10: Health Information Access (patient portals, patient engagement, release of information)
- Track 11: Clinical Coding
- Track 12: Artificial Intelligence & Emerging Technologies



Online: CaliforniaHIA.org

Email: Register@CaliforniaHIA.org

Mail: CHIA, 5055 E. McKinley Ave.
Fresno, CA 93727-1964

Questions Call 559.251.5038 No phone reservations, please.

Method of Payment

Please make check payable to CHIA or pay by credit card.

We accept:

Card No.: _____ Exp. Date: _____

Cardholder Signature: _____

Print Cardholder Name: _____

Cardholder Address/Zip: _____