

COLORADO RURAL

Credentialing Network

As the State Office of Rural Health, the Colorado Rural Health Center (CRHC) identified an increasing need to assist hospitals and clinics with credentialing issues specific to accreditation requirements, significant legislation, and civil litigation. Credentialing of physicians and other healthcare practitioners has become a key risk management function for facilities, both large and small. Further, it has become a complex and seldom understood process.

CRHC's Colorado Rural Credentialing Network provides rural hospitals and clinics with information, education, and resources pertaining to this important task.

For an annual fee of \$250 (CRHC members)/\$375 (CRHC non-members), participants will have:

- **Access** to participate in quarterly interactive Educational Credentialing Webinars facilitated by an expert credentialing specialist
- **Up-to-Date Tools, Resources, Templates, and Materials, Archived Network Webinars and Information** (through a member-only website)
- **Peer Networking** opportunities
- **No-Cost Access** to a certified credentialing specialist for general credentialing questions
- **Access** to personalized credentialing consultations at a group discount rate

To join the 2012 Colorado Rural Credentialing Network, complete the registration form on the following page and return to CRHC, Attn: Jen Dunn by fax at 303-832-7496, email jd@coruralhealth.org or mail at the address below. Quarterly webinars will begin in early 2012. If you have any questions, please contact Jen Dunn at 303-832-7492.

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3033 S Parker Rd., Ste. 606
Aurora, CO 80014
(303) 832-7493 • (800) 851-6782
info@coruralhealth.org • www.coruralhealth.org

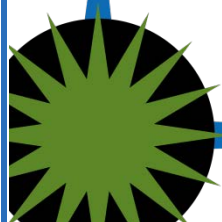
**COLORADO
RURAL HEALTH
CENTER**

The State Office of Rural Health

2012 Colorado Rural Credentialing Network Registration Form

Credentialing Network Participant Information	
Name	
Title	
Email Address	
Phone #	
Hospital/Clinic Name	
Please tell us one of the most important questions or concerns you have about credentialing.	
Payment Information	
Pay by Check	Make check out to Colorado Rural Health Center and mail to: CRHC, Attn: Jen Dunn, 3033 S. Parker Rd., Ste. 606, Aurora, CO 80014
or	
Pay by Credit Card	
Cardholder's Name	
Amount to be charged	\$
Billing Address	
Credit Card Type and # (Visa/ MasterCard only)	<input type="checkbox"/> Visa <input type="checkbox"/> MC CC#:
3-Digit V Code (from back of card), and Credit Card Expiration Date	V Code: ___ ___ ___ Exp Date: ___/___/___
Signature	

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