



## **Speaker Profile for Consideration**

The New York MGMA Program Committee is responsible for the selection of appropriate speakers and topics to ensure both are relevant to the target audience. The topic and complete presentation must have importance to medical practice management staff and should be delivered within a specified timeframe. If you wish to be considered, we ask that you submit the Speaker Profile for Consideration. You can return your profile via email to our committee at [info@newyorkmgma.com](mailto:info@newyorkmgma.com).

### **Presenter Information**

Speaker Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Email: \_\_\_\_\_  
Business Number: \_\_\_\_\_  
Cell Number: \_\_\_\_\_  
Speaker Bio: \_\_\_\_\_

Please provide us with two references or evaluations from previous speaking engagements:

Speaking Reference 1: \_\_\_\_\_  
Speaking Reference 2: \_\_\_\_\_

Please list three previous speaking engagements including the topic, year of the presentation and the number of individuals in attendance:

Engagement 1: \_\_\_\_\_  
Engagement 2: \_\_\_\_\_  
Engagement 3: \_\_\_\_\_

**Presentation Information**

Type of speaking engagement you are interested in:   \_\_\_ Webinar  
  \_\_\_ Quarterly Seminar  
  \_\_\_ Annual Conference Break Out Session  
  \_\_\_ Annual Conference Keynote

Presentation Title: \_\_\_\_\_

Length of presentation: \_\_\_\_\_

Presentation Domain:                                   \_\_\_ Financial Management  
  \_\_\_ Human Resource Management  
  \_\_\_ Business Operations  
  \_\_\_ Information Management  
  \_\_\_ Risk Management  
  \_\_\_ Organizational Governance  
  \_\_\_ Quality Management  
  \_\_\_ Patient Care Systems

Target audience:       \_\_\_ Level I – Operations, billing, coding, and reimbursement staff  
                                  \_\_\_ Level II – Supervisors and managers  
                                  \_\_\_ Level III – Executive staff and physicians

Session Description:

Session Objectives:

Are there any fees associated with the presentation:   \_\_\_ Yes       \_\_\_ No

The fee for this presentation is: \$ \_\_\_\_\_

Note: If approved, New York MGMA will submit a Speaker Agreement for signature which will contain all the Terms associated with the speaking engagement.

\*This form should be completed for consideration to speak with New York MGMA. This is not a guarantee of a speaking engagement. All submissions are reviewed by the Program Committee and acceptance is determined according to subject matter, event need and date of submission.