



INSTITUTIONAL MEMBERSHIP APPLICATION

The Maryland Society of Health System Pharmacy (MSHP) will partner with health-system pharmacy departments to expand the involvement of pharmacists and pharmacy technicians in their state society.

The MSHP Board offers an Institutional Membership with a tiered membership fee schedule. Institutional members include all pharmacists and pharmacy technicians at each institution. The MSHP Board desires to increase active membership and involvement by this program.

Membership Tier Levels	Members numbers	Fee
Tier Level 1	1-5 pharmacists, 1-5 pharmacy technicians	\$500
Tier Level 2	6-10 pharmacists; 6-10 pharmacy technicians	\$1000
Tier Level 3	11-20 pharmacists; 11-20 pharmacy technicians	\$1500
Tier Level 4	21-30 pharmacists; 21-30 pharmacy technicians	\$2000
Tier Level 5	31-40 pharmacists; 31-40 pharmacy technicians	\$2500
Tier Level 6	41-60 pharmacists; 41-60 pharmacy technicians	\$3500
Tier Level 7	61-90 pharmacist; 61-90 pharmacy technicians	\$4500
Tier Level 8	>90 pharmacists; >90 pharmacy technicians	\$7500

Membership Benefits

- Periodic annual MSHP programs provide nationally and regionally recognized speakers to provide key educational opportunities, networking opportunities and a minimum of 20 ACPE CE annually
- Application for continuing education programs ACPE approved CE hours at your facility, up to 5 CE hours/year
- Opportunities to serve as officers, committee chairs or members, student mentorship
- Staff development, including leadership skills/roles
- Professional placement/employer/employee services provides savings to your facility
- Grant application opportunities for practice excellence
- Recognition of practice excellence with awards and/or rewards
- Pharmacy benchmarking data from regional and state healthcare systems
- Benefits of increased numbers in influence of administrators, quality/safety forums, and legislative agendas

- Sharing and dissemination of core measures, best practices, safety initiative, technology initiatives, other practices/processes
- Promotion of health-system pharmacy (members) to the community, healthcare professions and administrators
- Development of MSHP member facilities as leaders in pharmacy practice (dispensing, processing, technology assessment and implementation, clinical practice including drug therapy management, and safe practices)

Becoming an Institutional Member

To become an institutional member of MSHP, please complete the brief form on page 3 and return it to MSHP Headquarters with appropriate payment and a list of all pharmacists and technicians at your hospital including:

- First & Last Name
- Identify membership category: pharmacist, resident, or technician
- Mailing Address
- Daytime phone number
- Evening or cell phone (if available)
- **E-mail address***

*** Unless otherwise instructed Institutional members will receive their issue of the *MSHP Pharmascript* electronically.**

Any questions regarding MSHP Institutional Membership or requests for invoices and current member lists of your pharmacy can be directed to MSHP staff at mshprx@gmail.com.



INSTITUTIONAL MEMBERSHIP APPLICATION HOSPITAL DATA

Institution: _____

Director of Pharmacy: _____

Director's E-mail: _____

Hospital Pharmacy Mailing Address:

Street Address, Department, Box #: _____

City: _____ State: _____ Zip: _____

Main Pharmacy Phone: (_____) _____

HOPITAL TIER LEVEL

Table with 3 columns: Membership Tier Levels, Members numbers, Fee. Rows include Tier Level 1 through 8 with corresponding member counts and fees.

Please forward your application, appropriate payment. A participant information form will be sent for your staff to complete and return to MSHP in bulk. A list (excel file preferred) of all pharmacists and technicians at your hospital must also be submitted. Please include their:

- Prefix (Dr., Mr., Mrs., etc)
• Mailing Address
• First & Last Name
• Daytime phone number
• Pharmacist, resident, or technician
• Evening or cell phone (if available)
• E-mail address

To : Maryland Society of Health System Pharmacy
Phone: (443) 814-9244
E-mail: mshprx@gmail.com