



State Managed Care Network
CLINICAL STAFF UPDATE FORM

Please complete and submit this form to add or terminate a provider from your practice or organization. Return by mail to:

Child Health Plan Plus
State Managed Care Network
Provider Contracting Department
PO Box 17580
Denver, CO 80217-0580
or
Return by Fax: 303.755.2368
Attention: Provider Contracting Department
CHP+ State Managed Care Network

Please contact CHP+ Provider Network Services for the State Managed Care Network at 720.744.5211 or send an email to pns@coaccess.com if you have questions regarding this form.

Step 1: Please provide the following information for your practice or organization:

Legal Name:
Tax Identification Number:
Contact Name and Phone Number:

Step 2: Please provide the following information for clinical staff that are joining or leaving your practice or organization:

Add: Terminate: Effective Date: National Provider Identification #:

Name (first, last, mi): Degree Type: Gender:

DOB: Languages Spoken: Specialty:

Medical License Number: Expiration Date:

DEA License Number: Expiration Date:

Board Certified Provide Pre-Natal Care Provide OB Care

Malpractice Insurance: Coverage Span:

List all hospitals where the new provider has admitting privileges:

Insurance Carriers Accepted: CO Access Denver Health Kaiser Rocky Mtn HMO

Age Groups Accepted: Child Teen Adult

Patient Choice: New Existing Patients

Service Locations:

Phone Number: Fax Number:

Step 3:

If you currently participate with CAQH, please ensure that your CAQH record and supporting documentation are up to date. If you are not currently participating with the CAQH, please contact the Colorado Access credentialing staff at 720.744.5100 or toll free at 800.511.5010 and they will assist you.

Clinical Staff Update Form Completed by: Date: