



PCP Change Form

Call and Fax to:

PHOENIX HEALTH PLAN
Ph: 1-800-747-7997 Fx: 602-674-6613

MERCY CARE
Ph: 1-800-624-3879 Fx: 602-351-2313
Secondary Fax: 602-414-7663

APIPA (Open 24/7 & Holidays)
Ph: 1-800-348-4058

HEALTH CHOICE
Ph: 1-800-322-8670 Fx: 480-760-4708

UNIVERSITY FAMILY CARE
Ph: 1-800-582-8686 Fx: 1-520-874-3434

CARE 1st
Ph: 1-866-560-4042 Fx: 602-778-1814

MARICOPA HEALTH PLAN
Ph: 1-800-582-8686 Fx: 1-520-874-3434

PINAL GILA LTC
Ph: 1-800-831-4213 Fx: 1-520-866-6720

TRICARE WEST
Ph: 1-877-988-9378 Fx: 1-877-890-8203

BRIDGEWAY Health Solutions
Ph: 1-866-475-3129 Fx: 1-928-778-1417

Banner Health
Ph: 480-684-7070

HEALTHNET
Ph: 1-800-289-2818

AARP/PCF/Secure Horizons
Ph: 1-888-866-8297

CMDP
Ph: 602-351-2245

HEALTHNET AHCCCS
Ph: 1-888-788-4408

MERCY MARICOPA INTERGRATED
Ph: 1-800-564-5465

HUMANA
(Look on Card for Number)

OTHER (Look on Card for number):
Ph: _____

_____ I understand that I must contact the listed insurance above within 24hrs, or the next business day, and verbally change my Primary Care Physician (PCP) with today's effective date to the following provider and location.

_____ I hereby authorize and request to change the Primary Care Physician for the below mentioned patient. The new Primary Care Physician will be:

Provider:

Location:

- | | |
|--|--|
| <input type="checkbox"/> Adrian Pinzon, MD | <input type="checkbox"/> Laura Babb, FNP-C |
| <input type="checkbox"/> Monte Jones, MD | <input type="checkbox"/> Diana Curd, FNP-C |
| <input type="checkbox"/> Terry Irons, MD | <input type="checkbox"/> Wendy Rynes, FNP-C |
| <input type="checkbox"/> Rosemarie Kennaley, MD | <input type="checkbox"/> DeLana Gardner, FNP-C |
| <input type="checkbox"/> Janet Pragit, DO | <input type="checkbox"/> Jenny Khan, FNP-C |
| <input type="checkbox"/> Jose Ivan Rago, MD | <input type="checkbox"/> Sandra Long, FNP-C |
| <input type="checkbox"/> Edgar Suter, MD | <input type="checkbox"/> Arlyn Mason, FNP-C |
| <input type="checkbox"/> Floyd Trinidad, MD | <input type="checkbox"/> Addie Roderick, FNP-C |
| <input type="checkbox"/> Imani Williams-Vaughn, MD | <input type="checkbox"/> Wendy Rynes, FNP-C |
| <input type="checkbox"/> Payam Zamani, MD | <input type="checkbox"/> William McGinnis, FNP-C |

- Gilbert:**
428 S. Gilbert Rd. Ste 101
Gilbert, AZ 85296
- San Tan Valley:**
287 E. Hunt Highway Ste 105
San Tan Valley, AZ 85143
- Laveen:**
5045 W. Baseline Rd Ste 110
Laveen, AZ 85339

- Chandler:**
3100 N. Alma School Rd.
Chandler, AZ 85224
- Phoenix:**
2640 W. Baseline Rd Ste 111
Phoenix, AZ 85041
- Mesa:**
1982 W. Main St. Ste 101
Mesa, AZ 85201

This authorization and request is for:

_____ Member ID Number

_____ Member Name (Printed)

_____ Date of Birth

_____ Date of Service

_____ Member Contact Phone Number

_____ Patient/Guardian (Printed)

_____ Date

_____ Patient/Guardian (Signature)

_____ Date

Office Use Only:

Copy Given to Patient: Y N

MDN Associate: _____

Spoke With: _____

Effective Date: _____