



PROVIDER ALERT

Alert # 3-2003-04-08-HCAL/YAB/WBH/MC

Email Distribution Request

In an effort to maximize time and resources, Community Care Behavioral Health Organization has decided to begin using electronic mail in a more consistent fashion. Through this process, we will be able to gather an inclusive list of identified contacts at your organization along with the email addresses for those individuals. More than one email address can be listed if more than one identified contact needs the correspondence.

Facility Name: _____

General Information

Contact Name: _____
Phone Number: _____
Email Address: _____

Billing Information

Contact Name: _____
Phone Number: _____
Email Address: _____

Contract Information

Contact Name: _____
Phone Number: _____
Email Address: _____

Provider Alerts

Contact Name: _____
Phone Number: _____
Email Address: _____

Training Announcements

Contact Name: _____
Phone Number: _____
Email Address: _____

Provider Advisory Committee Notices

Contact Name: _____
Phone Number: _____
Email Address: _____

Provider Newsletters

Contact Name: _____
Phone Number: _____
Email Address: _____

Upon completion of this form, please forward it to the attention of Rebecca Reagan via fax at (412) 454-2177, or information can be emailed to reaganra@ccbh.com in our Network Relations Department. Please contact us at 1-888-251-2224 with any questions or concerns.