



D-SNP Training Attestation Form

Please attest that you have completed D-SNP training by completing and returning this page to providersupport@healthplan.org or fax to 740-699-6169 .

One attestation form may be completed for a group of providers employed under the same Tax ID number when accompanied by a list of each provider, along with their individual NPI number, that completed the training on the same date. Please note that office staff may not attest on behalf of the physician(s).

Provider Name:

Provider Signature:

Date:

Individual Provider NPI #:

Tax ID#:

Address:

City:

State:

Zip:

Phone #:

Email Address:

For more information about The Health Plan's D-SNP Model of Care, see the "For Providers" section on The Health Plan's public website (healthplan.org) or contact The Health Plan's Medical Department – D-SNP Unit at 1.877.847.7907.