

## SERVICE LOCATION CLOSURE

---

To submit this form, download it to your computer, complete and save, and attach it to an **email to:** [ProviderNetworkServices@coaccess.com](mailto:ProviderNetworkServices@coaccess.com). You may also **fax:** 303-755-2368, or **mail:** Colorado Access, Attn: Provider Network Services, PO Box 17580, Denver, CO 80217-0580.

Service Location Name:
Service Location Address:
Service Location NPI:
Service Location Tax ID:
We will term all providers affiliated with this service location NPI. Are they moving to a new service location? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please attach a list of provider names, their NPIs, the new service location's name, the new service location's NPI, and the effective date. You can use the table below or send us a spreadsheet with this information. Note: providers must be moving to a service location with the same Tax ID number. If providers are moving to a new service location under a different Tax ID number, please reach out to contracting at <a href="mailto:provider.contracting@coaccess.com">provider.contracting@coaccess.com</a> to determine if a new contract needs to be created.

New Service Location Name:		New Service Location NPI:
Provider Name:	Provider NPI:	Provider Effective Date:

If this is a full Tax ID term (you are closing all your doors), please contact contracting at [provider.contracting@coaccess.com](mailto:provider.contracting@coaccess.com) instead of filling out this form.