

BEECH STREET-Provider Nomination Form

Client Name: _____

Instructions to Insured/Employees/Medical providers

- If a provider is not a Beech Street participating physician/hospital please complete the lower part of this form. **All Information must be fully completed for consideration.**
- Beech Street does not solicit providers who **do not** have staff privileges at Beech Street PPO hospitals. Please verify with your physician that he/she meets this requirement and have them indicate practicing facilities.
- **Dentists and Pharmacy providers are not** eligible for network participation.
- When nominating clinics or physician groups, you **must** include specific physician names and required info.
- If the provider meets the initial criteria to receive an application, one will be mailed.
- The review and credentialing process for provider membership **may take 90 to 120 days after receipt of all necessary information.** (This is to insure that all parties understand and agree to participation guidelines.)
- Completion of the nomination form does not guarantee inclusion in the Beech Street PPO.
- Beech Street works with affiliated networks in certain states. Therefore, your provider may be contracted by a party other than Beech Street on our behalf.

Employee/Insured Information

(To be completed by the employee/insured)

EMPLOYEE/INSURED
NAME: _____ DATE: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE#-HOME:(_____) _____ WORK:(_____) _____

Nominated Provider/Hospital Information

(To be completed by the medical provider)

NAME: _____ TITLE (eg. MD, DO) _____

STREET ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

PHONE#:(_____) _____ SPECIALTY: _____

The above physician has admitting privileges at the following hospitals: **MANDATORY**

NAME	CITY	STATE
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1) _____

2) _____

3) _____

RETURN THIS FORM TO:

**BEECH STREET CORPORATION
Provider Nomination Department
25500 Commercentre Drive
Lake Forest, CA 92630-8855**

Following receipt of this request form, Beech Street or its designated network will send contracting information to qualified provider(s) and rely on the provider to respond if interested. In order to expedite contracting efforts, requesting party should follow-up with the nominated provider to obtain participation status. Beech Street will advise you once we have approached the provider on your behalf. **Thereafter, please check with your provider for an update on participating status.**