

Attestation for OB/GYN Provider Status for Fallon Community Health Plan (FCHP) MassHealth.

FCHP requires that all obstetrician/gynecologists (OB/GYNs) complete this attestation for the **FCHP MassHealth product**. Please note that for all other FCHP products, OB/GYNs are only identified as specialty care providers.

Please complete the appropriate block that reflects your desired participation status with FCHP for the **FCHP MassHealth product**. If requesting a primary care designation, please take time to consider the increased demands of functioning in the primary care role. All OB/GYNs must sign at the bottom of form, regardless of the provider status you choose.

If you wish to change your status in the future, you can request a blank attestation from Provider Relations and resubmit a completed form. FCHP will process any change in practice status within 60 calendar days of receipt of a newly completed form.

Obstetrician/Gynecologist as Specialty Care Provider:

I _____ certify that I will be practicing as a **non**-primary care provider. I will **not** hold a panel of FCHP MassHealth members. I do **not** plan to offer routine primary care in addition to specialty obstetric/gynecologic care. I wish to be listed as a specialist only in all FCHP directories.

Affiliation with Provider Organization (PO): (If applicable)

I certify that I am affiliated with _____ PO.

Obstetrician/Gynecologist as both Specialty and Primary Care Provider:

I _____ certify that I intend to practice **both** as an obstetrician/gynecologist and as a primary care provider. I wish to be listed as **both a primary care and specialty care physician** in the FCHP MassHealth directory. I **will hold** a panel of FCHP MassHealth members. I will be available for all primary care for female members of my panel. My panel status is
open closed limited (please check one.) If limited, please describe
limitation(s).

Affiliation with Provider Organization (PO): (if applicable)

I certify that I am affiliated with _____ PO.

Signature

Date