

ATTESTATION OF PATIENT LOAD

	2016	
	(YEAR)	
•	ling calendar year. By	s Attestation of Patient Load form upon initia y signing this form the Primary Care Physicia alations serviced is less
Provider Signature		
Printed Name		

*PLEASE NOTE: Each Primary Care Physician (PCP) in a group practice must complete this form.

Definition of an active patient: An active patient is one that is seen by the Provider a minimum of three (3) times per year.