



777 Woodward Ave., Suite 700  
Detroit, MI 48226

1-888-437-0606  
TTY: 711  
mimeridian.com

### Primary Care Provider (PCP) Reassignment Form

#### Member Information

Member's Full Name:*	
Member's Date of Birth:*	
Meridian Member ID:*	

#### New PCP Information

- No PCP Chosen (Please Auto-Assign PCP)
- New PCP Selected (See Information Below)

PCP Name:	
PCP NPI:	
New PCP Office Address:	
PCP Effective Date:	

\*All fields containing an asterisk must be completed. Failure to provide all required information above will result in this request not being processed.

For questions, please call Member Services at **1-888-437-0606** (TTY: **711**).

**Fax completed Primary Care Provider Reassignment Form to: 833-667-1288.**