



NEWBORN ENROLLMENT NOTIFICATION

**FOR PRIMARY CARE PROVIDER USE
ONLY**

**7231 Parkway Drive Suite 100
Hanover, MD 21076
Fax: 410-424-4991
Phone: 1-888-819-1043
Attention: Newborn Coordinator**

Instructions: Complete this form and submit by mail or fax. You will receive confirmation once processed.

All information is required.

Information:	
Date of Birth:	Name of Newborn Patient:
Mother's Name:	Sex:
Mother's Member # of MA Number:	
Individual PCP Name:	Completed by:
Individual PCP NPI #:	PCP Phone:
Tax ID Number:	Date:
Service Location:	

FOR PRIORITY PARTNERS ENROLLMENT USE ONLY

Priority Partners Member ID #: _____

If you have any questions contact the Priority Partners Newborn line toll free at 888-819-1043 or locally at 410-424-4960.