

Presbyterian Baby Benefits Prenatal Visits Form (Step 2)

Complete at least 10 visits (or 80% of your required visits) to earn rewards!

Member Information		
Name (Print):	Date of Birth:	
Member ID Number:	Phone Number:	
Mailing Address:		
City:	State:	ZIP:
Baby's Date of Birth:		
Date of Visit/Signature*		
/	/	/
/	/	/
/	/	/
/	/	/
/	/	/
/	/	/
/	/	/
<i>*By signing, I attest that the above-named patient has attended each office visit listed above for prenatal care.</i>		
Please fill out this form and send it by:		
Mail: Presbyterian Health Plan, Inc. Attn: Performance Improvement Dept. P.O. Box 27489 Albuquerque, NM 87125-7489		
Email: performanceimp@phs.org		
Fax: <(505) 843-3018>		
We will accept submissions for up to one year after your baby's birth. Please allow 4-8 weeks to receive your gift card[s].		
Presbyterian complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 505-923-5420, 1-855-592-7737 (TTY: 711). Díí baa akó nínizin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, kójjí' hódííłnih 505-923-5420, 1-855-592-7737 (TTY: 711). Such services are funded in part with the State of New Mexico. Presbyterian exists to improve the health of the patients, members, and communities we serve. www.phs.org/centennialcare		