



BABIES CAN'T WAIT

PROVIDER DEACTIVATION FORM

Complete this form to deactivate a Provider's association to an Agency or a District.

www.BCW-BIBS.com

Deactivate Provider

Select the District where the service was provided.

- | | |
|--|---|
| <input type="checkbox"/> 1-1 Rome (Northwest Health District) | <input type="checkbox"/> 5-1 Dublin (South Central Health District) |
| <input type="checkbox"/> 1-2 Dalton (North Georgia Health District) | <input type="checkbox"/> 5-2 Macon (North Central Health District) |
| <input type="checkbox"/> 2 Gainesville (North Health District) | <input type="checkbox"/> 6 Augusta (East Central Health District) |
| <input type="checkbox"/> 3-1 Cobb/Douglas (Cobb/Douglas Health District) | <input type="checkbox"/> 7 Columbus (West Central Health District) |
| <input type="checkbox"/> 3-2 Fulton (Fulton Health District) | <input type="checkbox"/> 8-1 Valdosta (South Health District) |
| <input type="checkbox"/> 3-3 Clayton (Clayton County Health District) | <input type="checkbox"/> 8-2 Albany (Southwest Health District) |
| <input type="checkbox"/> 3-4 East Metro (East Metro Health District) | <input type="checkbox"/> 9-1 Coastal (Coastal Health District) |
| <input type="checkbox"/> 3-5 DeKalb (DeKalb Health District) | <input type="checkbox"/> 9-2 Waycross (Southeast Health District) |
| <input type="checkbox"/> 4 LaGrange (LaGrange Health District) | <input type="checkbox"/> 10 Athens (Northeast Health District) |

Select the type of provider. Complete a separate form for each provider type.

- ☐ **Agency Provider** ☐ **Independent Provider** ☐ **District Employee**

Agency Name (if applicable) _____

Provider First Name _____ MI _____ Last Name _____

Provider Deactivation Effective Date _____

Requests to remove a provider specialty require a District signature from each District in which the provider is enrolled.

District Signature _____ Date _____

District Contact Name (please print) _____ Phone # (_____) _____

Please complete this Deactivation Form and submit to your District.

Central Finance Office
Phone: 855-708-6612