



## SNF CONTACT FORM – UPDATES

**MPN#:** \_\_\_\_\_  
**Facility Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City, State, Zip:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_

**Address Change:** \_\_\_\_\_

**Phone Change:** \_\_\_\_\_

Please print clearly and **COMPLETE** all fields to ensure accuracy.

Please include mailing address for each contact if it is different from the facility address above.

<b>CEO/ADMINISTRATOR:</b> Mr/Mrs/Ms _____ Title: _____ Phone: _____ FAX: _____ E-mail: _____	<b>MDS/DATA COORDINATOR:</b> Mr/Mrs/Ms _____ Title: _____ Phone: _____ FAX: _____ E-mail: _____
<b>QUALITY IMPROVEMENT/HCQIP CONTACT:</b> Mr/Mrs/Ms _____ Title: _____ Phone: _____ FAX: _____ E-mail: _____	<b>MPRO LIAISON:</b> Mr/Mrs/Ms _____ Title: _____ Phone: _____ FAX: _____ E-mail: _____
<b>DIRECTOR OF NURSING:</b> Mr/Mrs/Ms _____ Title: _____ Phone: _____ FAX: _____ E-mail: _____	<b>FAST-TRACK APPEALS CONTACT:</b> Mr/Mrs/Ms _____ Title: _____ Phone: _____ FAX: _____ E-mail: _____

**Quality Improvement/HCQIP Contact:** The person in your facility who will work closely with the Health Care Quality Improvement Project Manager at MPRO.

**MPRO liaison:** Person in your facility who will be the contact with MPRO staff. This person will receive all correspondence related to your facility. This correspondence includes: adverse determinations, approvals, administrative memoranda, and policy changes.

**MDS/Data Coordinator:** MDS Coordinator

**Fast Track Appeals Contact:** Primary contact for concurrent reviews or Fast Track Appeals

\_\_\_\_\_  
**CEO/Administrator Signature**

\_\_\_\_\_  
**Date**

FAX to: (248) 465-7428 Please return within 15 days ATTN: Lynn Samsel  
 Mail to: MPRO, ATTN: Lynn Samsel 22670 Haggerty Rd., Ste. 100, Farmington Hills, MI 48335

This material was prepared by MPRO, the Medicare Quality Improvement Organization for Michigan, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 9SOW-MI-6.1-10-50