

# Request for On-Site Orientation

The Kaiser Permanente Participating Provider Network Orientation is available online at [www.providers.kaiserpermanente.org/mas](http://www.providers.kaiserpermanente.org/mas) but if you would like to have an on-site orientation please complete this form. A Representative will contact you to schedule a time convenient for your practice.

Provider Name: \_\_\_\_\_

Group Name: \_\_\_\_\_

Number of Providers in group: \_\_\_\_\_

Tax ID: \_\_\_\_\_

Provider/Group Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Please fax this request to Kaiser Permanente Provider Relations Department at 855-414-2620 or mail to:

Kaiser Permanente – Provider Relations  
2101 East Jefferson Street  
Rockville, Maryland 20849