

# Health professional practice management and web access details



## Contact us

Tel: 0860 44 55 66, PO Box 784262, Sandton 2146, www.discovery.co.za

Please remember to include copies of your identity document and the practice's BHF/PCNS registration form.

Please send the completed form to Provider Administration, Discovery Health on 011 539 1039 or Provider\_Administration@discovery.co.za

## 1. Practice manager details

Practice management details (to be completed for all satellite practices)

Practice number

Practice manager name (title)  Name

Surname

Practice manager ID number

Cell number

Email address

Receptionist name (title)  Name

Receptionist ID number

Cell number

Email address

Practice Contact 2  Name

Name

## 2. Bureau services

Do you make use of a bureau service Yes  No

Bureau name

Bureau contact name

Bureau contact ID number

Bureau telephone number

Bureau email address

## 3. Web access

Who must have access to the web

Practice manager  Bureau  Receptionist

Full name of health professional

Health professional signature

Date

Name  Surname

Contact person if there are problems loading the chosen individuals on the web:

Contact number   Cell number

Email address

Please note that this process has a turnaround time of 48 hours. Please include copies of the individual's identity document.