



Mass Advantage requires the information below to fully evaluate your request to join our network

Please submit completed form to Mass Advantage Provider Relations via email at

Provider.Relations@massadvantage.com.

Date	Medicare Participating?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Provider Name/Group Name			
Specialty			
PCP?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Practice Demographics			
Address:	Phone/Fax:	Website:	
Primary contact name, telephone number, and email address			
Tax ID:		NPI:	

Hospital affiliation(s):

Vision and Dental Providers:

Mass Advantage collaborates with the following vendor partners for routine vision services and dental. Please reach out to the below vendors directly to express interest in joining the network. For vision providers already enrolled with EyeMed who wish to bill for non-routine medical services, please complete this form.

EyeMed Call 888-581-3648	Dominion Call 888-471-3631 or email providerapps@dominionnational.com
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Please include list of provider names and their NPIs on the following page if applicable.


