

PROVIDER NAME: _____

ADDRESS: _____

LOCATION NPI#: _____

IF MULTIPLE LOCATIONS, PLEASE COPY THIS PAGE AND SUBMIT ONE PER LOCATION.

PLEASE INDICATE THE COUNTIES IN WHICH EACH FACILITY CAN AND DOES PROVIDE SAME DAY SERVICES.



GEOGRAPHICAL AREAS OF COVERAGE IN VIRGINIA				
<input type="checkbox"/> Accomack	<input type="checkbox"/> Charlotte	<input type="checkbox"/> Greene	<input type="checkbox"/> Mecklenburg	<input type="checkbox"/> Roanoke
<input type="checkbox"/> Albemarle	<input type="checkbox"/> Chesterfield	<input type="checkbox"/> Greensville	<input type="checkbox"/> Middlesex	<input type="checkbox"/> Rockbridge
<input type="checkbox"/> Alleghany	<input type="checkbox"/> Clarke	<input type="checkbox"/> Halifax	<input type="checkbox"/> Montgomery	<input type="checkbox"/> Rockingham
<input type="checkbox"/> Amelia	<input type="checkbox"/> Craig	<input type="checkbox"/> Hanover	<input type="checkbox"/> Nelson	<input type="checkbox"/> Russell
<input type="checkbox"/> Amherst	<input type="checkbox"/> Culpeper	<input type="checkbox"/> Henrico	<input type="checkbox"/> New Kent	<input type="checkbox"/> Scott
<input type="checkbox"/> Appomattox	<input type="checkbox"/> Cumberland	<input type="checkbox"/> Henry	<input type="checkbox"/> Northampton	<input type="checkbox"/> Shenandoah
<input type="checkbox"/> Arlington	<input type="checkbox"/> Dickenson	<input type="checkbox"/> Highland	<input type="checkbox"/> Northumberland	<input type="checkbox"/> Smyth
<input type="checkbox"/> Augusta	<input type="checkbox"/> Dinwiddie	<input type="checkbox"/> Isle Of Wight	<input type="checkbox"/> Nottoway	<input type="checkbox"/> Southampton
<input type="checkbox"/> Bath	<input type="checkbox"/> Essex	<input type="checkbox"/> James City	<input type="checkbox"/> Orange	<input type="checkbox"/> Spotsylvania
<input type="checkbox"/> Bedford	<input type="checkbox"/> Fairfax	<input type="checkbox"/> King And Queen	<input type="checkbox"/> Page	<input type="checkbox"/> Stafford
<input type="checkbox"/> Bland	<input type="checkbox"/> Fauquier	<input type="checkbox"/> King George	<input type="checkbox"/> Patrick	<input type="checkbox"/> Surry
<input type="checkbox"/> Botetourt	<input type="checkbox"/> Floyd	<input type="checkbox"/> King William	<input type="checkbox"/> Pittsylvania	<input type="checkbox"/> Sussex
<input type="checkbox"/> Brunswick	<input type="checkbox"/> Fluvanna	<input type="checkbox"/> Lancaster	<input type="checkbox"/> Powhatan	<input type="checkbox"/> Tazewell
<input type="checkbox"/> Buchanan	<input type="checkbox"/> Franklin	<input type="checkbox"/> Lee	<input type="checkbox"/> Prince Edward	<input type="checkbox"/> Warren
<input type="checkbox"/> Buckingham	<input type="checkbox"/> Frederick	<input type="checkbox"/> Loudoun	<input type="checkbox"/> Prince George	<input type="checkbox"/> Washington
<input type="checkbox"/> Campbell	<input type="checkbox"/> Giles	<input type="checkbox"/> Louisa	<input type="checkbox"/> Prince William	<input type="checkbox"/> Westmoreland
<input type="checkbox"/> Caroline	<input type="checkbox"/> Gloucester	<input type="checkbox"/> Lunenburg	<input type="checkbox"/> Pulaski	<input type="checkbox"/> Wise
<input type="checkbox"/> Carroll	<input type="checkbox"/> Goochland	<input type="checkbox"/> Madison	<input type="checkbox"/> Rappahannock	<input type="checkbox"/> Wythe
<input type="checkbox"/> Charles City	<input type="checkbox"/> Grayson	<input type="checkbox"/> Mathews	<input type="checkbox"/> Richmond	<input type="checkbox"/> York

PLEASE INDICATE ANY LIMITATIONS SPECIFIC TO THE GEOGRAPHICAL AREA IN WHICH YOU PROVIDE SERVICES:
