

Alberta Health
Professional and Facility Management Unit
PO Box 1360 Station Main
Edmonton AB T5J 2N3

For AHW office use only

A business arrangement (BA) is an agreement with Alberta Health to establish the arrangement for payment of health services provided. All practitioners registered with Alberta Health must have or be part of a BA in order to claim for services. A contract holder is a person, organization or professional corporation (PC) entering into a business arrangement with Alberta Health.

Section A - Identification, type and date of change

The business arrangement contract holder is:

Practitioner identifier [grid]

or PC or clinic ULI [grid]

Name _____

Effective [grid] Year Month Day

- Assign a new BA Change information on an existing BA End a BA

Business arrangement number to change or end [grid]

Section B - Business arrangement information

- Business arrangement type Fee for service Locum - medical only Alternate Relationship Plan (ARP) Family Care Clinics (FCC)

- Direct deposit to Chequing - attach a void cheque Savings - attach documentation from financial institution indicating bank, branch transit, and account number

Make payment to Me or My PC/clinic or name

Identifier [grid]

Send Statement of Assessment and Statement of Account to Me or My PC/clinic or name

Identifier [grid]

An Accredited Submitter is an organization or individual accredited by Alberta Health to transmit electronic claims and retrieve results of transactions for practitioners.

The Accredited Submitter for this BA is (name and submitter prefix)

Suppress Statement of Assessment production Yes No

(If your accredited submitter provides this information, it may not be necessary to receive it from Alberta Health.)

Indicate the skill that will be used on most claims

Section C - Authorization (This section must be completed before this form is considered valid.)

Practitioner's signature Phone number

BA contract holder signature/ARP authorized representative signature Phone number

BA contract holder name and position/title/ARP authorized representative name Date

Return completed forms to the Professional and Facility Management Unit at the address above, or fax to 780-422-3552. If you need assistance completing this form, please refer to your Resource Guide. If you need further assistance, call 780-422-1522 in Edmonton, or toll-free within Alberta at 310-0000, then 780-422-1522.

Information collected is used to enrol you for programs or benefits funded by Alberta Health. It is collected under the authority of sections 20(b) and 27 of the Health Information Act. The confidentiality of this information and your privacy are protected by the provisions of the Health Information Act and the Alberta Health Care Insurance Act. If you have questions regarding the collection of this information, please contact the Professional and Facility Management Unit at the address, telephone or fax number provided above.