



# END STAGE RENAL DISEASE NETWORK OF TEXAS

## 2015 AIM 2 Population Health Innovation Pilot Project (PHIPP) Webinar 5 Attestation Form

**FACILITY ADMINISTRATOR/CLINIC MANAGER: Your facility failed to attend the mandatory Population Health Innovation Pilot Project (PHIPP) Webinar 5 on the Data Validation Activity.**

To bring your facility back into compliance, please:

1. Fill out the information below.
2. Check the boxes after completing each requirement.
3. Return the attestation form to Network 14 by **COB on Friday, November 27, 2015.**

Facility Name: \_\_\_\_\_

CCN (six-digit Medicare Provider Number): \_\_\_\_\_

Facility Administrator/Clinic Manager: \_\_\_\_\_

FA/CM's email address: \_\_\_\_\_

FA/CM's signature: \_\_\_\_\_

As the Facility Administrator/Clinic Manager, I attest that I have:

- Viewed the PHIPP Webinar 5 recording available on the Network website at <http://esrdnetwork.org/professionals/inclusive-care/vaccinations/>
- Signed and submitted the Data Validation Tool fax coversheet to confirm receipt

Fax completed attestation form to Rachelle DuBose Caruthers at

**(972) 503-3219 by Friday, November 27, 2015.**