



# END STAGE RENAL DISEASE NETWORK OF TEXAS

## 2015 PE LAN Learning Session 5 (LS5) Attestation Form

**FACILITY ADMINISTRATOR/CLINIC MANAGER:** Your facility failed to attend the mandatory Patient Engagement Learning and Action Network (PE LAN) Learning Session 5 (LS5) webinar.

To bring your facility back into compliance, please:

1. Fill out the information below,
2. Check the boxes after completing each requirement, and
3. Return the attestation form to Network 14 by **COB on Wednesday, September 23, 2015.**

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

CCN (6-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 and at least two additional staff members and one patient have:

Viewed the LS5 recording available at: <http://esrdnetwork.org/patients-families/pfcc/>

Fax completed attestation form to Rachelle DuBose Caruthers at

**(972) 503-3219 by Friday, July 31, 2015.**