



PO Box 10
Westfield, NY 14787
716.326.4678

PO Box 570
Sherman, NY 14781
716.761.6144

Dear Patient:

Your health plan requires that you select one doctor to be your Primary Care Physician (or PCP). This is the doctor that you should see for your healthcare needs on a regular basis. Your health plan currently has Dr. _____ recorded as your PCP. Our records show that he/she is not the doctor that you regularly see. To correct this we need you to call the phone number located on the back of your health benefit card and give them your permission to change the PCP from _____ to _____.

Sincerely,

WESTFIELD FAMILY PHYSICIANS

If you are unable to locate your card, please call the appropriate member services number below for assistance in making the necessary changes.

Fidelis Care

Child Health Plus 1.888.343.3547
Family Health Plus 1.888.343.3547

BlueCross/BlueShield

Community Blue 1.800.544.2583
Community Care 1.866.231.0847
Child Health Plus 1.866.231.0847
Family Health Plus 1.866.231.0847
Senior Blue 1.800.329.2792

Independent Health 1.800.257.2753

Univera

Child Health Plus 1.877.757.3850
Family Health Plus 1.877.757.3850