The Harvard Pilgrim HMO
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1-888-333-HPHC
www.harvardpilgrim.org

Reason for Submission
(Please check all that apply)

- Enrollmen
- Change
- Termination

Employee Name

Language Codes (Optional)

What language do you speak most often? Please list the appropriate code after each member's name. This information will help us work toward best meeting your needs.

American Sign Language
Caughtese
Cape Verdean
English
French
Hebrew
Hmong
Italian
Japanese
Khmer
Laotian
Mandarin
Portuguese
Russian
Spanish
Vietnamese

* If you have listed a full-time student(s) age 19 and over, but under the maximum student age, please supply the following information:

Student(s) Name

Language
code

Select a primary care physician and town for each member

Are you a regular patient of this doctor?

PCP#