

# MEM Nurse Triage Enrollment Form

*Missouri Employers Mutual's Nurse Triage program helps policyholders manage medical costs by directing their employees to the appropriate level of care in order to ensure a successful recovery.*

**Please provide the following information:**

## Policyholder Information

Policy Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Do you have a drug and alcohol policy in place?  Yes  No

## Agency Information

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

Agency Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Preferred Providers

Identifying treating providers before an injury occurs is crucial to providing the most effective treatment path for your employees. Please list the provider you wish to use. You may attach an additional sheet if you have several locations. If you do not have a preferred provider, contact the Claims Service Center at 1.800.442.0593 or [claims@mem-ins.com](mailto:claims@mem-ins.com) for assistance.

Preferred Treating Physician/Clinic: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Preferred Treating Hospital: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

*Email completed form to [claims@mem-ins.com](mailto:claims@mem-ins.com).*

**For more information:**



[claims@mem-ins.com](mailto:claims@mem-ins.com)



1.800.442.0593

