



Change of Ownership or Change of Federal Employer Identification Number

A change of ownership or a change of EIN terminates the Colorado Medicaid Provider Participation Agreement. New owners and providers with a new EIN must re-apply and complete a new Medicaid Provider Participation Agreement in order to participate in Colorado Medicaid.

Change of Ownership/Change of EIN Information

Are you purchasing a business or practice from an enrolled Colorado Medicaid Provider? (Change of Ownership) NO YES
Do you have a change of EIN? NO YES

If yes to either of the above, you must complete the Selling Provider Information/Change of EIN Information section below:

Selling Provider Information/Change of EIN Information

Enter the name and Colorado Medicaid provider number of the closing (selling) Provider for the change of ownership.

OR

If you will have a new EIN only, and still own your company enter the name and Colorado Medicaid provider number associated with our old EIN.

Name: _____

Provider ID/NPI #: _____ Future effective date of change of ownership/change of EIN: _____

If this is a change ownership, we must receive a verification statement from the closing (selling) provider including:

- The name of the opening (purchasing) entity
The future effective date of the change of ownership
A forwarding address (for the selling provider)

You will be contacted by the Department regarding the submission method of above mentioned documentation.

Contact Information:

First Name: _____ Last Name: _____ Today's Date: _____

Email: _____ Phone: _____

By selecting the "I Accept" button, you are signing this Agreement electronically. By submitting this form indicating a change of ownership or change of EIN, you acknowledge that you understand that your electronic signature is binding to the same extent as your written signature.

I Accept - I understand that my electronic signature is equivalent to written signature.

Attention: "Save As" completed form & email to Provider.Enrollment@state.co.us
Paper copies of this form will not be accepted.

