Phoenix Health Plan
An Affiliate of Abrazo Health Care

Phoenix Health Plan
No Show Log

Physician Name: _____ Phone #:_____

Member Name	Member AHCCCS ID#	Date of Service Appt Missed	Type of Appointment (EPSDT, Sick Child Visit, etc)	Follow Up (To be Completed by PHP)

Please complete all columns (except for the last column) of this log and fax to
Attention: Member Services @ 602-674-6613

Please report all PHP members who do not keep their appointments on a monthly basis; logs may be faxed in more frequently if necessary. Thank you for your time.