



To join AQAF as a physician member complete the membership form below and fax it to 205-970-1616, or mail to AQAF, 2 Perimeter Park S., Ste. 200 W, Birmingham, AL 35243, ATTN: Jo Heaton

AQAF Membership Application

AQAF Bylaws, Article III. Section I. "Membership" in the corporation shall be limited to physicians who are doctors of medicine or osteopathic medicine. In order to be eligible for membership, said physicians shall: **A.** Be licensed to practice medicine or osteopathic medicine in the State of Alabama and be engaged in active practice as defined by Section 4620.B., of the QIO Manual, and subsequent revisions thereto; **B.** Practice (on a routine basis) a minimum of 20 hours per week. The "routine basis" requirement is met if a physician provides care and treatment to Medicare beneficiaries on an ongoing basis throughout the year; and ; **C.** Have active staff privileges in a health care facility, on a regular basis, as defined by 42 CFR 476.1."

FAX TO: 205-970-1616 or mail to: 2 Perimeter Park S.
Suite 200 W
Birmingham 35243

By completing this application, I certify that I am eligible to be a member of AQAF:

Name: *(Please print)* _____

Address: _____

Telephone (Office) _____ email: _____ NPI# _____

County where practice/live: _____ AL Lic. # _____

Specialty: _____ Primary hospital/facility: _____

Signature: _____ Date: _____