



THE STATE
of **ALASKA**
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing

TBR

FOR DIVISION USE ONLY

Telemedicine Business Registry
PO Box 110806, Juneau, AK 99811-0806
Phone: (907) 465-2550
Email: TelemedicineBusinessRegistry@Alaska.Gov
Website: ProfessionalLicense.Alaska.Gov/TelemedicineBusinessRegistry

REMOVAL: Telemedicine Business Registry

This form must be completed by a business currently on the Telemedicine Business Registry but which has terminated telemedicine services in Alaska. By submitting this form, the business named below will be removed from the registry. If telemedicine services are resumed, a new application (*Form 08-4694*) for placement on the registry must be submitted to the Department before services are provided to a recipient located in this state as required by 12 AAC 02.600(e).

Enter the three-letter program code of the primary health care profession delivered by telemedicine. Enter only one of the codes listed below:

- | | | |
|-----------------------------------|---|--|
| ATH · Athletic Training | DTN · Dietetics and Nutrition | OPT · Optometry |
| AUD · Audiology and Speech | MED · Medical | PCO · Professional Counseling |
| BEV · Behavioral Analysis | MFT · Marital and Family Therapy | PHY · Physical and Occupational Therapy |
| CHI · Chiropractic | MID · Midwifery | PSY · Psychology |
| CSW · Social Work | NAT · Naturopathy | VET · Veterinary |
| DEN · Dental | NUR · Nursing | |

Telemedicine Business Registry Number:

Complete Mailing Address:	Street/PO Box:	City:	State:	Zip Code:
	Representative's Phone #:			

By signing below, the business named above acknowledges that it will be removed from the Alaska's Telemedicine Business Registry and will no longer be providing telemedicine services as defined in AS 44.33.381.

The termination date is the date this request is processed by the Department.

Representative's Name: _____ **Title:** _____

Representative's Signature: _____ **Date:** _____