



Rayant Insurance Company of New York
Rayant Insurance Company of Pennsylvania
Horizon Companies

Send Correspondence to:
Rayant - Dental Programs
3 Penn Plaza East PP-04Q
Newark, NJ 07105-2200
1-888-667-4547
www.rayant.com

Provider Verification Form

Please verify the following information and make sure to include this form when returning all the required documentation and contracts.

Provider Information:

Dentist Name: _____

Practice Name: _____

Practice Address: _____

*** The practice name and dentist name provided above will both appear in our provider directory, unless otherwise directed by you below:**

Payment Information:

Tax Identification Number to appear on checks: _____

Name to appear on checks: _____

Mailing address to appear on checks *if different* than practice address:

Dentist's Signature: _____ Date: _____