



260 N. Sam Houston Parkway E., Suite 220
Houston, Texas 77060

Office: (281) 447-6800
Fax: (281) 447-6802

IntegraNet Health Plan Affiliations

Printed Name: _____

Signature: _____ **Date:** _____

Please indicate below the Health Plan affiliations of your choice and fax back to us at 281-447-6802:

BRAVO! HEALTH OF TEXAS (MEDICARE ADVANTAGE PLANS)

YES ___ NO ___

COMMUNITY HEALTH CHOICE (CHC) STAR (MEDICAID HMO)

YES ___ NO ___

EVERCARE OF TEXAS, L.L.C.

EVERCARE STAR +PLUS (MEDICAID HMO) YES ___ NO ___

EVERCARE DH AND MH (MEDICARE ADVANTAGE PLANS) YES ___ NO ___

UNITED HEALTHCARE- TEXAS CHIP (FORMERLY UTMB CHIP)

YES ___ NO ___

UNITED HEALTHCARE – TEXAS STAR (FORMERLY EVERCARE STAR)

YES ___ NO ___

WELLCARE OF TEXAS, INC.

YES ___ NO ___